I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
Col. 11310	CASGRAIN	HENRY RAYMOND

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

RESTRICTED
ATIA

Location
Lieu 1562

20-2-19
L.McG

Officers
~~DISCHARGE~~ DOCUMENTS

R. O. No. —

H. Q. No.

Name CASGRAIN, HENRY, Raymond

Regt. No. Rank Col.

Corps C. d. I. m. C. & C. Stat. Hpl.

Demobilization

14310

~~Docs to Pension~~ ~~on M4W 2505~~
~~Ref to~~ 360 of 21-2-19
L.McG

Returned 7-4-19

Docs Desp. to BPC on M4W 2505
Ref. BPC Spec 175 d/ 12-4-19
BV.

Returned 5-5-19

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 21

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids..... 2

Medical History Sheet..... 3

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

Miscell — 2.
Procs Med bd - 1
a.F.a 45 — 1
m.F.W 129 - 1
Dec. F. 210 1
Ref. a.m.s. 4/5-2-19.

M. F. W. 62.
100m.—6-17.
H.Q. 1772—89—935.

Ref 1/3/20

June 16-19 82

a/128-1
Ved

1
4 — 8
11 — 9

403483

Duplicate.

Lt.Col

card mB 5/4/16

UNIT No.3 Stationary Hospital

Regimental No.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

THE DEPUTY MINISTER OF MILITIA & DEFENCE
NOV -1 1915
CANADA

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Henry Raymond Casgrain
2. In what Town, Township or Parish, and in what Country were you born?	Sandwich, Ont. Essex Co.
3. What is the name of your next-of-kin?	Alice F. Casgrain (Wife)
4. What is the address of your next-of-kin?	57, Pitt St. Windsor, Ont.
5. What is the date of your birth?	7th July 1857
6. What is your Trade or Calling?	Physician & Surgeon
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Canadian Militia
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

Sgd. H.R. Casgrain (Signature of Man).

Sgd. E.C. Davis Maj (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Sgd. H.R. Casgrain (Signature of Recruit).

Date 8th April 1915. Sgd. E.F. Davis Maj. (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henry Raymond Casgrain, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Sgd. H.R. Casgrain (Signature of Recruit).

Date 8th April 1915. Sgd. E.C. Davis Major. (Signature of Witness).

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at London this 9th day of April 1915.

Sgd. E.H. Cluttick (Signature of Justice).

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

Sgd. H.R. Casgrain Lt.Col (Approving Officer).
O.C. No.3 Stationary Hospital C.E.F.

L7549 12-7-15 2,500.

Description of Henry Raymond Casgrain on Enlistment.

Apparent Age 57 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement.
- Girth when fully expanded 46 ins.
- Range of expansion 5 ins.

Complexion Fair

Eyes Blue

Hair Gray

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 8th April 1915

Place London Ont.

* Insert here "fit" or "unfit."

Medical Officer.

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

Examinedd by Medical Board

1st Division Order No. 76

CERTIFICATE OF OFFICER COMMANDING UNIT.

Henry Raymond Casgrain having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Sgd. H. R. Casgrain Lt. Co (Signature of Officer).
O.C. No. 3 Stationary Hosp. C.E.F.

Date 10th April 1915.

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				
27-10-17	8 Can Gen Hospital	Taken on strength of H.8 Can Gen Hosp on arrival in France. (assumes Command vice Lt Col E.A LeBel to England.) W.O. 121/Overseas/4909(A.M.D.1) d/9/10/17	St Cloud	15-10-17	B213. file 18412 Pt II 66 d/6-11-17.
25-5-18	London Gazette	To be temp. Colonel	"	24-10-17. 30703 page 6157.	Pt II 31 d/10/6/18
17-8-18	8 Cdn. Genl.	Granted 14. days leave to Ireland		15.8.18	B.213. Pt II 43 d/24-8-18.
21-9-18	"	Rejoined from leave	St Cloud	31-8-18	B213
10-10-18.	London Gazette	"Awarded "Légion d' Honneur" "Croix de Chevalier."			30945./11948. Pt II 89 dy 4-11-18.
4-1-19	8th G Hosp	S.O.S. of H.Q. 8 Can Gen Hosp England and posted to Can Casualty Company Shorncliffe. (auth: A.G.G.H.Q. A.G. 3080/P.S. d/17-12-18.)	England	26-12-18	B213 file K.D.(S) 291/725 Pt II Ord 2 d/23/1/19
8 Feb	1919	Transferred to C.B.D. England			A Brander Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon. B. E.

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

9-C-152

Army Form B. 103.

ORDERLY ROOM 13 JUL 1915 No. 3 STAT. HOSPITAL

CERTIFIED CORRECT 9 - AUG 1917 CANADIAN RECORD OFFICE

Casualty Form—Active Service.

Regiment or Corps No. 3 Stationary Hospital, C. E. F.

Regimental No. — Rank Lt.-Col. Name Gaspraire W. Raymond

Enlisted (*a*) 1885 Terms of Service (*a*) Duration of War 1914 6 mos. after if required Service reckons from (*a*) 17th February 19[illegible]

Date of promotion to present rank 12 Nov. 04. 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				
		No. 3 Stat. Hosp. Sandling		14.5.15.	
22/7/15.	A.D.M.S.	Proceded to France "On Command."	Shorncliffe	22/7/15.	Auth. A.D.M.S. Routine Order. 312. 22/7/15.
27.7.15.	D.M.S.	Returned to his Unit.		27.7.15.	Co 192.
10.11.15.	"	T.O.S. of. Camb. T.S.		31.10.15.	Co 991.
29.1-16.	"	Transf to Kings Can. Red + Conv Hosp.	Bushy Park.	26.1.16.	Co 166.
17.10.17		S.O.S. of the Kings Can. Red Cross Conv. Hosp. Bushy Park on being posted to the C.d.M.C. Depot with effect 27.9.17.			(Auth D.M.S. Corps' Order 239, Para 1343, 15-10-17.)
18.10.17	Camb'd.	T.O.S. from K.C.R.C. Bushy Pk.	Shorncliffe	27.9.17	Ptte D.O. 291 (C.O. 1343)
18.10.17	do	S.O.S. proceeded Overseas for service	do	14.10.17.	Ptte D.O. 291, (C.O. 1343)

Captain, & Adjutant,

CAPT. ASST. ADJUTANT. FOR O.C., O.A.M.C. 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.

0002

Rank and Name: CASGRAIN, Henry Raymond / Qc. — ~~Lieut.~~-Col.

Regimental No.

Unit: 3 S/Hp.

Date of enlistment: 17 ~~April~~ 9, 1915

Place of birth: Ontario

Married (Yes or No): Yes

If in Permanent Force

Promotions or appointments: 6-2-15. D.O. 18-4-15. DQ 29-4-15. RL 9-C-152.

Name and Address of Next-of-kin: Alice F. Casgrain (wife), 57 Pitt St., Windsor, Ont.

Date and place of discharge

Reason for discharge

Character on discharge

A.F.B. 158
1 DEC 1915 Can C.Y.S.
JAN 1 1916 d
FEB 1916 K.R.&O.
MAR 29 1916 do
MAY 1 1916 do
JUN 30 1916 do
AUG 9 1916 do
SE 1916 do
OCT 1916 do
NOV 1916 do
~~A.F.B. 103~~

	Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
			NR 3 S/Hp.	Sandling	14-5-15	
1	23.7.15	D.M.S.	On Command to No. 1 Gen. Hosp.	France	22.7.15	C.O. 168. R.O. 1534.
2	27.7.15	D.M.S.	Returned to his unit		27.7.15	C.O. 192
3	12-10-15.	D.C.S. Hosp Rep.	Admitted Alexandria Hospital.		22-10-15	RL9-C-152 Cas not stated. D.C.L. #182 C.L. 200 (Dysentery)
			Discharged		31-10-15.	
					15/11/15	CL 239.
4	10-11-15	D.M.S.	Taken on Strength of C.A.M.C.J.S.		31-10-15	C.O. 991
			Discharged		2/2/16	CL 315
5	21.12.15	W.O. 29/12/15	Admitted Westcliffe E & E Hosp.	Folkestone	16-12-15	C.L. 2482
2		3 Stat. Hosp.	Invalided to Eng. Hosp. Ship "Egypt" from Egypt		10-10-15	Part II orders 5 Div. O. 421. R.O. 1241
6	29-1-16.	D.M.S.	Admitted and d. to Hinge Cas. Sta. Cross Con: Hosp. Bushey Park to Comm.		26-1-16.	C.O. 166. Pt II Ord. 31. M.R.C. 274
	29-1-16.	M.B. Bx.	Left for Gen Service.		25-1-16.	C.L. 214. Atmoebic Dysentery
	3-2-16.	F.C.P.C. Apl.	Taken on strength & to Command.		26-1-16	Pt II Ord 34.
	2-2-16.	Westcliffe E & E Hp	Cases to be attached on Appt to K.C.R.C. Hp.			Pt II Ord 33. AFB 103 17.10.16
7	15-10-17.	D.M.S.	Posted to C.A.M.C. Depot.		27	A.O. 1545

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				
15-10-17.	D.M.S.	Proceeded O/Seas for Service		14-10-17.	G.O. 1342.
6.11.17	8 C.G.H. No. 1 O.S.	on Arrival in France.	Paris.	6.11.17	A.F.W. 66
13-3-18.	W.O. List.	Brought to the notice of Sec of State for War for valuable Services Rendered in Con. with the War.			
25-5-18.	W.O.	To be Temp. Col. CAMC.		24-10-17.	Lon. Gaz. 30703. G.O. 629 of 29-5-18.
24-8-18.	8. Gen. Hp.	Granted 14 days leave. from.		15-8-18.	P.C. Ord 143.
10-10-18.	W.O.	Awarded Croix de Chevalier. Légion d' Honneur			Lon. Gaz. 30945.
23-1-19	8 Gen Hp	SOS & Estab on posting to Can. Con. Corps		26-12-18	P.C. Ord 2
4-2-19	Can. Con. Corps	TOSO on posting from Can. France		27-12-18	P.C. Ord 29
14-2-19.	D.G.M.S.	SOS. trans to C.E.F. in Canada. Sailed for Canada	(Cessation of hostilities)	8-2-19.	G.O. 32. Sailing List D 2
19	Can. Con. Corps	SOS on transfer to C.E.F.	Canada	8-2-19	P.C. Ord 46
					SOS, 13, 3, 19

12225

A.F.B. 103. 8-NOV. 1917

D. A. G. Personal Services

27-2-19

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps. C.A.M.C.

Regimental No. ..... Rank Lieut. Name (C. E. F.) Casgrain Henry P.

Enlisted (*a*) ..... Terms of Service (*a*) ..... Service reckons from (*a*) .....

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
27-2-19	HQ Ottawa	T.O.S. C.E.F. Canada Sen Demobn	MD	5/2/19	C.E.F. Ro 1729-19
25/3/19	Do Ottawa	T.O.S. C.E.F. Canada. on Gen Demobn.	MD 1	13/3/19	~~HQ~~ C.E.F. Ro ~~Ottawa~~ 1822-19

D. Pensaeaed
Lieut.
for Director Personal Services

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, partic
(*b*) *e.g.* Signaller, Shoeing Smith, etc., etc., also speci qualifications in technical Corps dut

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				

ORDERLY ROOM
No. 3 STAT. HOSPITAL B.E.F.

Lt. Col.

ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Lasgrain *Christian Name* Henry Raymond.

Examined { on 8 day of Apr 191 5
at London Ont.

Approved by
A Medical Board at London

Birthplace { City or Town Windsor
County Essex

Rank London Elect. M.O.

Apparent age 5'7

Trade or occupation Shipper

Height 5 Feet 8 Inches.

Weight 210 Lbs.

Chest measurement { Minimum 44 inches.
Maximum expansion 46 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number 7

When Vaccinated last 1914

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

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

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		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.
3/12/15	Pos	} Maj. Hogg. M.O.
3/25/15	Pos	
		M.O.
		M.O.

Enlisted on 18th day of Feby 191 5 at Windsor Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#3 Stat Hosp.	Lt. Col.	good	2/17/15
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

AUG 3 1915

R. M. Shaw
for D.A.D.M.S.

DUPLICATE

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

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

Entries in Medical History Sheets transferred from Attestation Sheets.

Surname Sargeaunt Christian Name Reginald

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.

9-6-36

1 P.M. 10-Ca-150. Original

LAST PAY CERTIFICATE

Regt.No. Rank Col. Name CASGRAIN H.R.

Corps C.A.M.C. who was Discharged S.O.S.

on Mar. 13th 1919 to

DEPT. MILITIA & DEFENCE
JUN -8 1919
H.Q. CANADA

The following is a statement of the account of the above named from 1-3-19 to 13-3-19

Bal Dr from mon. of Feb. from L.P.C.		21.00	Bal Cr from mon. of from L.P.C.		
ASSIGNED PAY: 1-3-19 to 13-3-19		45.00	Regt.Pay 13 dys. @ $ 8.00		104.00
			F'ld All. 13 dys. @ $ 1.50		19.50
SEPARATION ALLOWANCE: A.R.3 3/4/19		26.00	SEPARATION ALLOWANCE: 1-3-19 to 13-3-19		26.00
OTHER CHARGES:			OTHER CREDITS: Clothing Allowance		35.00
PAYMENTS: A.R.3 3/4/19		83.00	Subsistence @ 80¢ per day A.O.83 Dubs. 27 2/19 to 13 3/19		25.50
Bal.Credit (to be pd.)		175.00	Bal.Dr.(to be deducted) (from soldier $) (from Dependent $)		175.00

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BND
at $60.00 per month has been Paid to 13/3/19 by this Unit & Closed	at $100.00 per month has been Paid to 13/3/19 by this Unit & Closed	Subcribed $ Nil. Pd.by $ other Units $ pd.by this $ Unit

Dependent or Beneficiary : Mrs. Alice F. Casgrain (W.)

Address: 57 Pitt St. W. Windsor Ont.

REMARKS: D.C. 87 Discharged on Demobilization. 13-3-19

Date of Enlistment:

If married and if Separation Allowance card submitted. Yes. Yes.

I have carefully examined this statement of account and find it to be a correct extract from the Paylist of this Unit.

Date:: 2-4-19
London, Ontario.

J. D. Patterson Captain.
Paymaster, No.1 District Depot.

.....M. D.....Depot Battalion .....Regiment

Regtl. No.....

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(**Class**.....)

1. Surname.....

2. Christian name.....

3. Present address.....

4. Military Service Act letter and number.....

5. Date of birth.....

6. Place of birth.....
(town, township or county and country)

7. Married, widower or single.....

8. Religion.....

9. Trade or calling.....

10. Name of next-of-kin.....

11. Relationship of next-of-kin.....

12. Address of next-of-kin.....

13. Whether at present a member of the Active Militia.....

14. Particulars of previous military or naval service, if any.....

15. Medical Examination under Military Service Act:—

(a) Place..... (b) Date..... (c) Category.....

DECLARATION OF RECRUIT

I,....., do solemnly declare that the above particulars refer to me, and are true.

.....(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... yrs..... mths.

Height..... ft..... ins.

Chest measurement { fully expanded..... ins. / range of expansion..... ins.

Complexion.....

Eyes.....

Hair.....

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

14-10-17
26-12-18

.....

O. C.....Depot Btln.

.....Regt.

Place..... Date.....

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

(3178)—W't. [redacted] 1,250,000.—2-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT
13 APR 1917
CANADIAN RECORD OFFICE

Casualty Form—Active Service.

Regiment or Corps C. a. m. C. No 3 Stat. Hpl

Regimental No. — ~~First~~ Rank Colonel Name Casgrain

Enlisted (*a*) _____ Terms of Service (*a*) Dur/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*) _____

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				
		N.R. 3 Special Hospital Sandling On Strength No 1 Can. Gen. Hosp Finance Retained for duty		14 & 15 Nov. 7.10 27.7.15	C.O. 168 C.O. 192
30.9.15.	major Rame S.S. Karapara	Embarked H.S. Karapara" Rheumatism & dysentery " to Base.		28.9/15.	a.f. a. 36.
2.10.15	O.C. No 19 Gen Hospl	admitted to Hospital from Sick Convoy	Alexandria	1.10.15	A.F. W. 3034 A12631
12.10.15	O.C. No 19 Gen Hospl	Reported "Dangerously Ill" 7/10/15. dysentery	Alexandria	12.10.15	Reg No A 13634.
10.10.15	H.S. Egypt	Invalided to England per H.S. Egypt"	Alexandria	10.10.15	Invalid Return B. 474
10.11.15	D.M.S	Taken on Strength transferred to Kings Can.	Can. Hosp Bushey Pk	31.10.15	C.O. 991
24.1.16	D.M.S			26.1.16	C.O. 166
3.2.16	K.C.R.C.C. Hos Bushey Park	Taken on Strength and to Command		26.1.16	Rl. Ord 34

(*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.

MAJOR,
FOR D. of C. RECORDS O.F.C.

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

CANADIAN EXPEDITIONARY FORCE

M.F. 1-27.
R.A.P.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank).....Colonel.....

(Name in full).....Henry Raymond CASGRAIN,.....

Enlisted in.....Canadian Army Medical Corps.....

CANADIAN EXPEDITIONARY FORCE, on the.....[redacted]

day of.....[redacted] 191.....AND WAS APPOINTED to COMMISSIONED RANK

in .....Canadian Army Medical Corps.....

CANADIAN EXPEDITIONARY FORCE on the.....Fourteenth.....day

of.....November.....191..4...

He SERVED in CANADA, ...England and France and Lemnos with the No. 3 Stationary Hospital, Kings Canadian Red Cross Hospital Bushey Park, No. 6 Canadian General Hospital, No. 2 Stationary Hospital Sandling, C.A.M.C.T.S., C.A.M.C., Depot, C.A.M.C., Casualty Coy., & D.D., No. 1.
and was STRUCK OFF THE STRENGTH on the.....Thirteenth.....day

of.....March.....191..9...by reason of.....General Demobilisation.....

Dated at Ottawa, this.....Fourteenth.....day

of.....November.....191..9...

Awarded the Legion d'Honneur, L.G. No. 30945.
Brought to the Notice of the Secretary of State for War for valuable services rendered in connection with the War, W.O. Communique 15-3-18

.....Capt.
for Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

L. L. Job 70481—Req. 5220.

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs Alice. F. Casgrain

Address 57. Pitt St. West
Windsor. Ont:

Rate $100. MAY 1 1915

By Whom Assigned Casgrain. H. R.

Regtl. No.

Rank Lieut Col

Corps No 3. Stat'y Hospital. C.E.F.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		M 879	100 —	
June		P.2033	100 —	
July		V7777	100	
Aug.		S3603	100 —	
Sept.		M7180	100 —	
Oct.		M6131	100 —	
Nov.		Q9432	100	
Dec.	R	11607	100 —	
Jan.	1916	U11187	100	
Feb.	W	10386	100	
March		Y11H18	100	

CONSOLIDATED

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

L. L. Job 89002.—Req. 6213.

Sheet No. 2. Mrs. Alice F. Casgrain

PAYMENTS. Name of Soldier Casgrain H R.

Lt. Col #3 Stat'y Hospl.

Month.	Year.	Cheque No.	Amt.	$100- Remarks.
April	1916	H 842	100	
May		O 23350	100	
June		P 67995	100	
July		E 62555	100	
Aug.		G 10487	100	
Sept.		E. 18621	100	
Oct.		E. 19953	100	*2000.00 F.X. 30/12/16 Can.
Nov.		E 25305	100	
Dec.		G 21399	100	
Jan.	1917	H 36505	100	
Feb.		F 42313	100	100 R
March		H 48331	100	100 Ck 48331 Cancelled G.L. 2/3/17
April		H 5567	100	100 L
May		P 7012	100	
June		P. 13632	100	100 M'
July		G 20307	100	B.
Aug.		L 27760	100	L
Sept.		K 34443	100	B
Oct.		G 46222	100	
Nov.		L. 54631	100	
Dec.		P 55367	100	31.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

YB. JB. JER

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.				

L. L. Job 71782—M. & D. 5292.

M. F. W. 71
25m.-12-14.
H. Q. 1772—39-819.

169

#38

45

6-2-15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Alice. F. Casgrain

Address 57 Pitt Street-W.
Windsor
Ontario

Relation to Soldier wife, child or mother: Wife

Name of Soldier: Casgrain. Henry. R.

Regtl. No.

Rank: Lt. Col.

Corps: #3. Stat. Hosp'l) C.E.F

To what Corps belonging when called out

PAYMENTS

Month	Year	Cheque No.	Amount		REMARKS
Aug.	1914				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1915				
Feb.					
March		£77	110-	110	
Apl.		£7325	60	60	
May		76520	60 —	60	
June		A1689	60	60	
July		W8304	60	60	
Aug.		£7832 W-8305	60 —	60	
Sept.		10000	60	60	
Oct.		£4727	60	60	
Nov.		£20862	60 —	60	
Dec.		J 17850	60	60	
Jan.	1916	M17053	60	60	
Feb.		O 20373	60	60	
March		E 30595	60	60	

17053

CONSOLIDATED ACCOUNT 5

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a. 38
60m.—12-15.
1772—39—818.

Sheet No. 2. Alice, F. Casgrain wife

Name of Soldier Casgrain Henry R. Lt. Col.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
			830	
April	1916	2[illegible]739	60	60
May		J5261	60	60
June		J8646	60 —	60
July		E7231	60	60
Aug.		J17266	60 -	60
Sept.		Z15053	60	60
Oct.		F18766	60	60
Nov.		V21824	60	60
Dec.		24733	60	60
Jan.	1917	U27707	60	60
Feb.		U30821	60	60
March		U33906	60	60
April		V 378	60	60
May		U J642	60	60
June		W 6784	60	60
July		[illegible]10157	60	60
Aug.		[illegible]14278	60	R
Sept.		[illegible] 17233	60	R
Oct.		[illegible] [illegible]	60	R
Nov.		T 25139	60	R
Dec.		F27070	60	F
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

R23095

7 73200 Cancd. RE-WRITE

20,90

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

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

Surname | Christian Name | Reg. No.

CASGRAIN. | H.R.

Rank | Unit

Lt.Colonel. | C.A.M.C.

MEDICAL BOARD held at | Date | Serial No.

(1) Shorncliffe. | 26-1-16.

Other Medical Boards at | Date | Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Dysentery Amoebic.

Disposition Recommended

(1) Fit for General Service.

(2)

(3)

(4)

(5)

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

Disposition

Remarks

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

H. W. & V., Ld.—3594-15.

Casgrain. H. R.

Lt-Col. C.A.M.C.

Alexandria Hosp.
Queen Alex. Mil. Hosp. Millbank. 30-10-15.
Westcliffe Eye & Ear. Folkestone. 16-12-15.

Amoebic Dysentery.

Discharged 15-11-15.
do. 2-2-16.
do. 25-1-16.

C.L. 12-10-15. 182.
2-11-15. 200.
17-12-15. 239.
21-12-15. 242.
29-1-16. 274-2.
17-3-16. 315.

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

CASGRAIN, Henry Raymond

Colonel CAMC, 9728-1

medals desp.

cross widow:- Mrs Alice Casgrain
141 Pitt St.,
Windsor, Ont.

mother dead

Death attributable to Military Service.

DESP. SEP 21 1932
REGN. NO. 1344

Number _____ Rank Lieut.

Surname CASGRAIN

Christian Name Henry, Raymond

Units _____ Theatre of War France

Date of Service 13-5-15

Remarks 24 London St East.

Latest Address ~~57 Pitt St.~~
Windsor
Ont.

Roll No. C.A.M.C.

200m.-6-21.... B. Page 20930.

(This form to be filled in by all ranks on voyage to Canada.)

.....

R RANK SURNAME INITIALS UNIT

....

l address..... (Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

l, is your wife on board..... Number of children on board.....

tination.....

(Sgd.).....

Name Casgrain H.R. *Rank* Lt.Col. *Reg. No.*

Unit C.A.M.C.

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O. M	W.O. List
	19th Gen. Hosp.					
Lr.DMS II/IO		Alexandria ~~Hosp~~.	Seriously Ill. ✓	182	1364	
31.IO.15.	Q.A.M.Hosp.Millbank S.W. from H.S."Egypt".		Dysentery ✓	200		
15 11	do.	Desch	~	239		
18 12	West Cliff Can. Eye & Ear Hosp.	Folkestone	N.Y.D	242		
25 1	Med Bd. Fit Gen. Serv.		Amoebic Dysentery	274		
2- 2-	—	Discharged	—	3/5		

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

Date of Apptt. 18-4-15. Auth O.B.L. Nov 1st. 1915.

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Physician & Surgeon RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 57 YEARS 9 MONTHS

HEIGHT 5 FEET 8 INCHES

CHEST MEASUREMENT 46 INCHES EXPANSION 5 INCHES

COMPLEXION Fair EYES Blue HAIR Grey

DISTINGUISHING MARKS nil

MEDICAL EXAMINATION. PLACE London, Ont- DATE April 8th 1915

SURNAME. Casgrain L d'H. C. de C.
R.G. #30948-10-10-18

CHRISTIAN NAMES Henry Raymond

REGL. NO. RANK Lt. Col.

UNIT No 3

FORMER CORPS Can. Mil Major 21st. Regt. 12-2-86 Auth. O.S.H. Nov 14 1915

CARD NO. 1

SOR-13-3-19 Demob
LOC. 87 28-3-19 Cd
FOLL. 1920.

Stat Hosp.

NEXT OF KIN.

NAMES IN FULL Casgrain, Mrs Alice T.

RELATIONSHIP TO SOLDIER wife.

ADDRESS 57 Pitt St, Windsor, Ont

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Sandwich

PLACE OF ATTESTATION London, Ont.

DATE July 7th 1857

DATE April 9, 1915

D Q 18-4-15 5-8/1

R/C 17-2-19 68/1 Col.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
182	Alex. (Lr. 2.M.S. 11/10)		Seriously Ill.
200 (1)	Queen Alexandra's Mil. Millbank S.W (H.2 I/11) from H.S. Egypt.	31-10-15	Dysentery
239	Queen Alexandra's Mil. Millbank S.W.	15-11-15	Discharged
242	West Cliff Can. Ear & Eye Folkestone	16-12-15	N.Y.D.
274 (2)	Medical Boards (Cl.	25-1-16	Amoebic Dysentery Fit for gen. service
315. (2	Discharged	2-2-16	Amoebic dysentery

H. Q. FILE No. 649-

NAME Casgrain, H. R.

REGT'L. NO.

RANK AND CORPS Lieut-Col. C.A.M.C.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M 1364	12-10-15	Ser-ill. Alexandria Hosp. nature of disease not stated.

NO. 613

FOLL.

L. L. Job 83225 —M. & D. 5812.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

No. Rank Lt. Col. Name Casgrain H. R.

T. O. S. Unit #3 Stationary Hospital C. M. C.

M. D. /

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Feb 6	Feb 28	—		
Mar 1	Mar 31	—		
apr		✓		

UNIT SAILED

APR 18 1915

No. | Rank Lieut Col: | Name Casgrain, H. R.

T. O. S. | Unit 33rd Bn, (3rd Contingent)

M. D. 1

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1914-15- Jan 11th	1914-15 Jan 30th	✓	Recruiting for 3rd Contingent at Windsor.	Jan: Paylist.

UNIT SAILED
MAR 13 1916

Date of Enlistment

6/2/15

RATE OF SEPARATION ALLOWANCE

60			

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C 3232

Date of Assignment

May 1st/15.

RATE OF ASSIGNMENT

100			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Lieut-Col. Promoted Temp Col. 24/10/17 Reverted Discharge

Soldier's Name H. R. Casgrain.

Battalion No 3 Stat Hospital C.E.F.

Beneficiary Alice F. Casgrain

Relationship wife M 7w 2554 29 7/18

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Alice F. Casgrain.

Address 57 Pitt St West. Windsor Ont.

Change of Address

1

2

3

4

	Date		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
							2895-H-1	
	Dec 31.17			2090	3200	5290		
	Jan 1918	F	61546	60	100	160	S	
	Feb	D	92081	60	100	160		
	Mar	A	110258	60	100	160	✓	
	Apr	L	7545	60	100	160	✓	
	May	J	19213	60	100	160	✓	
	June	G	20277	60	100	160	✓	
	July	T	30231	60	100	160	✓	
	Aug	E	33721	60	100	160	✓	
	Sept	H	48223	60	100	160	✓	
	Oct	J	50679	60	100	160	✓	
	Nov	D	50711	60	100	160	✓	
	Dec	M	66249	60	100	160	✓	
	Jan/19	M	71177	60	100	160	✓	
	FEB MAR	D	81264	60	100	160	✓	
				2930	4600	7530		

A/c Closed 28 2/19

Ret'd per Metagama

Date 16/2/19 M.F.W.187 24 2/19 Mtl

Clerk G A Holbrook

M R O 70483

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 1883.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 1483.

Extracts from Proceedings of Medical Board.

CENTRAL REGISTRY
LONDON.
22 1915
CANADIAN CONTINGENTS

The A.A.G,

3rd.Echelon.

The following extract from proceedings of a Medical Board held for the purpose of reporting on:-

Rank.	Lt.Colonel,
Name,	Casgrain H.R.,
Regt.or Corps	C.O. No.3 Canadian Stationary Hospital.

is forwarded for your information, please.

Disability	Dysentery,
Period for which probably incapacitated for Military duty.	Indefinite,

This officer has been transferred for an indefinite period, for further treatment, from the 22-10-15, instant on which date he embarked for England.

(sgd) E.C.Lambkin,
Capt.R.A.M.C.,
for O.C. 19 Gen. Hospital.

Certified true copy.

ACTED ON
BY E.J.S. R.T.

J. Casgrain
Major,
i/c R.A.M.C.Records Subsection,
3rd.Echelon, G.H.Q., M.E.F..

9/11/15.

3/3

CONFIDENTIAL.

Army Form A. 45.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Shorncliffe on Jan. 25/16

by order of A. D. M. S. Canadians

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

(Rank and Name) Lt. Col. H. R. Casgrain (Corps) C. A. M. C.

Age 58 Service 12/12 Disability Dysentery Amoebic.

Date of commencement of leave granted for present disability Jan. 25/16

Date on which placed on half-pay for present disability Not applicable

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This officer who was infected with Amoebic Dysentery at Lemnos in Sept: 1915 has now recovered.

Lemnos

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

26. 1. 16.

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

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

(1.) *a.* Is the officer fit for "General Service"? yes

b. If not so fit, how long is he likely to be unfit? Not applicable

(2.) *a. If unfit for General Service, is he fit for service at home?* Not applicable

b. If not so fit, how long is he likely to be unfit for service at home? Not applicable

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

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

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

(6.) If caused by military service, to what specific conditions is it attributed? Infection

Signatures

Wm Wilson Hale — President.

Members.

(8 27 21) W 12286—2164 150,000 2/15 H W V(P) 2234—1430 55,000 5/15

Forms A. 45 24

[P.T.O.

Instructions.

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

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

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

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

OPINION OF THE MEDICAL BOARD

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

The board agrees that the disability is as per Specialists Report.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

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

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

Placed in Category C.11.

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

C.E. McMahen Major C.A.M.C. *President.*

PLACE London Ont. F.C. Eakins, Capt. C.A.M.C. } Members

DATE 1-3-1919.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

..... *President.*

PLACE ..... } Members

DATE .....

APPROVED BY

C.C. Brink Capt. C.A.M.C.
For *Assistant Director of Medical Services.*

DATE 1-3-1919.

APPROVED BY

Jas W Mackie C.A.M.C.
Director-General of Medical Services.

DATE 18/3/19

CERTIFIED TRUE COPY.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

ID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION London Ont. DATE 28-2-1919.

1. 1 (*a*) Unit I.D.D. (*b*) Regimental No. ..... (*c*) Rank Colonel.

(*d*) Surname Casgrain (*e*) Christian name Henry Raymond.

(*f*) Home address 57 Pitt St. West Windsor Ont.

(*g*) Next of Kin Alice F. Casgrain (*h*) Relationship Wife.

(*i*) Address of Next of Kin 57 Pitt St. West Windsor Ont.

2. Age last birthday 61 Date of birth 7-7-57.

3. Enlistment, or Appointment (if an Officer) (*a*) Place Windsor (*b*) Date 14-11-14.

4. Personal description:

(*a*) Height 5' 8" (*b*) Weight 186 (stripped) (*c*) Complexion Fair.

(*d*) Colour of hair Grey (*e*) Colour of eyes Blue (*f*) Identification marks, Scars, etc. Slightly deformed nail middle finger left hand.

5. Former trade or occupation Physician.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4 3/12	15

	Periods From	Periods To
Canada	14-11-14. 17-2-19.	15-4-15. 28-2-19.
England	27-4-15. 1-11-18. 27-12-18.	1-8-15. 12-10-17. 8-2-17.
France or other theatres of War Lemnos France	17-8-15. 12-10-17.	28-9-15. 26-12-18.

7. Original disease, or injury Amoebic Dysentary.

(*a*) Date of origin August 1915. (*b*) Place of origin Isle of Lemnos.

(*c*) Cause Exposure to infection.

M. F. B. 227.

300M.—8-18.
1772-39-117.

E.F.C. FILM
FALSE DOCKET
3

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

Moderate discomfort due to attacks of diarrhoea alternating with constipatic due to stricture of anal canal following healing of ulcer occurring in course of amoebic dysentery orgination on Active Service.

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

EXAM. See Specialists Report. 28-2-1919.
Officer Complains of attacks of diarrhoea lasting 24to 48 hours, occuring about every two months, alternating with periods of constipation during which the stools are frequently segmented and moulded into smal masses about ½" diameter. Attacks of diarrhoea are accompanied by ~~exx~~ colicky pains throughout lower abdomen but there is no evidence of blood or mucous in stools. SPECILLIST'S REPORT.
I have this date made a digital exam of Col. H. Casgrain's rectum as far as one can judge without the aid of a speculun there is a slight stricture of the lower rectum for about 1½" from the anal onifice which admits the index finger with some difficulty and pain. Above this part the rectum is normal as high as can be felt. The condition might be improved with ~~xxxxxxxx~~ an anaesthetic and dilatation. Sgd. C.C. Hale. Major C.A.M.C.

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

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

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

10. (*a*) History (of the condition referred to in Section 9 (*a*).) Contracted amoebic dysentary while on Active Service.at Isle of Lemnos August 1915 Hosp. till 15-11-15, severe diarrhoea for one year. Passed blood and mucous for 2 weeks, culminating in a severe haemorrhage necessitating intravenous saline infusion. Invalided to England 28-9-15 via Alexandria. To Alexandra Hospital England 1-11-15. to Helen Hosp. Shorncliffe 13-11-15. To Westcliffe 8-12-15 on duty but still suffering from constant diarrhoea. Constant Diarrhoea replased by attacks of diarrhoea about I 1916 December , attacks occuring about every two weeks, but frequency gradually lessened to present condition. Condition constantly improving now.

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

Nil

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

See sect. 4 (f)

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

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

N/A

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? a and b 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? Indefinite.

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

Hospital 2 months. rectal injection pf 4 oz. ichthyol in hot olive oil (gr.1tol oz) daily for 3 weeks then alternating with Silver Nitrate solution injections Saline infusion for excess haemorrhage, thirty-two subcutaneous injections emetine.

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)

Not at present may possibly require dilatation under anaesthetic at later date.

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why)

17. Recommendations Category C.11.

H.C. Morrison Lieut. C.A.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned Henry R. Casgrain 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

B. P. C. FOLIO
FALSE DOCKET
2

Henry Raymond Casgrain Colonel Rank.
Signature of invalid examined.

Name:- Casgrain, Henry Raymond.
=#
Col.

Unit:- C.A.M.C.

Awarded:- Légion d'Honneur.
Croix de Chevalier.

Auth:- L.G. # 30945: 10-10-18.

Auth Major Woodburn Phone [illegible]

29. 1. 19

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Col. Name HENRY RAYMOND Surname CASGRAIN

Unit or Corps C.A.M.C (If a soldier) Regtl. No. —

Born at Sandwich Ont on, date July 4. 1854

Signature (for identification) H. R. Casgrain Col.

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. No.

Weight 200 lbs.

Height 5 ft. 8 ins.

2. NUTRITION AND DIATHESIS? normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? none

4. RESPIRATORY SYSTEM. normal

5. HEART?

Abnormal Sounds? none

Abnormal Size? normal

Pulse Rate? 68 Intermittence or irregularity? none

6. ARTERIES.—Any hardening? very slight (normal to age).

7. DIGESTIVE SYSTEM? normal

8. GENITO-URINARY SYSTEM? none

Urinalysis—S.G.? 1012 Reaction? Ac Albumen? 0 Sugar? 0

9. SKIN, MIDDLE EAR, EYE or any other part? normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. None

11. Opinion as to the health and physical condition of the one examined? Fit

Examined at 13 Bernes St

Date 29 Jan 1919

Signed J. Irving major C.A.M.C. M.O.

Signed [illegible] M.O.

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, &c; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, &c.

Date	Brief details, and signature
12/3/15	Vaccination. Pos.)
25/3/15	Inoculation. Pos.) Maj. Hogg.

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

OC

Lt.Col.

Army Form B. 178.

DUPLICATE

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

MEDICAL HISTORY of

Surname CASGRAIN *Christian Name* Henry Raymond

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Windsor County Essex

Examined ... ... on 8th day of April 1915.
at London, Ont.

Declared Age ... ... 57 years days.

Trade or Occupation ... Physician

Height ... ... 5 feet, 8 inches.

Weight ... ... 210 lbs.

Chest Measurement — Girth when fully Expanded. 41 inches.
Range of Expansion 46 inches.

Physical Development ... Good

Vaccination Marks — Arm .. Right Left
Number 7

When Vaccinated 1914

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*) A Medical Board 1st Div.
(*Rank*) London, Ont.
Medical Officer.

Enlisted ... ... at Windsor, Ont.
on 17th day of February 1915.

Joined on Enlistment ...	Corps	Regtl. No.
	3rd Stationary Hospital	Lt.Col.
Transferred to		

Became non-effective by

on day of 191

(*Signature*)
(*Rank*)

I certify the foregoing to be a true copy of an original entry in Medical History Sheet of this man.
for the Officer in Charge of Records
Canadian Contingents.

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

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

(8 82 62) W 2869—1662 200,000 5/15 H W V(R) Forms/B. 178

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 Hospita	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				
West Cliffe Canadian Eye and Ear Hosp. Folkestone	16	12	15	2	2	16	Dysentery		Entered Hospital convalescent discharged to duty.	H.D.Courtenay Capt. C.A.M.C.

NAME Casgrain H. R. Lt. Col.

DATE OF APPOINTMENT London, Ont. 6th April 1915

MARRIED (YES OR NO)

NEXT OF KIN:— NAME Alice F. Casgrain (Wife)

ADDRESS 57 Pitt St., Windsor, Ont.

DATE NON-EFFECTIVE AND CAUSE

UNIT 3 Military Dist. C.A.M.C. D.S. 31/10/15 (D.M.S. 63 991 10-11-15)

Kings Can Red + Col. Hosp. Bushey Park + to Command. DO 421 6 XII 28/10 + D.M.S.Co 166 29/10

ASSIGNED PAY:—

MONTHLY AMOUNT 100 00

TO WHOM PAYABLE Mrs. A. F. Casgrain 57 Pitt St. Windsor Ont.

1915-16

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal 9 Waterloo Place, S.W.

PERIOD From	PERIOD To	No. of Days	Regtl. Rate	PAY: Amount of Regimental	PAY: Command	PAY: Adjutant	PAY: Cr. from Prev. Account	PAY: TOTAL PAY	Rate of Field Allowance	ALLOWANCES: Amount of Field Allowance	ALLOWANCES: P. F. Allowance	ALLOWANCES: Messing	ALLOWANCES: Subsistence	ALLOWANCES: TOTAL	TOTAL PAY AND ALLOWANCES	Assigned Pay	Sundry Deductions	Net P. A.	Paid in Cash (Balance)	Deposited in Bank	Carried Forward	REMARKS
1/5	31/5	31	5	155				155	125	38 75		33		71 75	226 75	100		226 75		126 75		
1/6	30/6	30		150				150		37 50		30		67 50	217 50	100		117 50		117 50		
1/7	31/7	31		155				155		38 75		31		69 75	224 75	100		124 75		124 75		
1/8	31/8	31		155				155		38 75		31		69 75	224 75	100		124 75		124 75	117 50	
1/9	30/9	30		150				150		37 50		30		67 50	217 50	100		100	147 50	25 SEP 1915		
1/10	31/10	31		155				155		38 75		31		69 75	224 75	100		100	124 75	124 75		
1/11	30/11	30		150				150		37 50		30		67 50	217 50	100		100		117 50		
																	13 ..					(Advance Pd) Subs. aboard S.S. Asturias. 13 days @ 1/- p.d. Y.O. 1428 and C.R.M.C.
																	3 04				16 04	On Adv. Pay. Casgrain marked OHMS but referring to Mrs. Casgrain's affairs. V. 1604
1/12	31/12	31	✓	155 ..				155 ..	✓ ✓	38 75		31 ..		69 75	224 75	100 ..	16 04			108 71		Cr. Bal. Ford from Ledger
27/7/15	12/10/15	86	1 ..		86 ..			86 ..							86 ..							V 2131. Comm. pay. File 9 C-152
1/1/16	31/1/16	31	5 ..	155 ..				155 ..	✓ ✓	38 75		31 ..		69 75	224 75	100 ..				210 75		
1/2/16	29/2/16	29	✓	145 ..				145 ..	✓ ✓	36 25		29 ..		65 25	210 25	100 ..				110 25		
1/3/16	31/3/16	31	✓	155 ..				155 ..	✓ ✓	38 75		31 ..		69 75	224 75	100 ..				194 75		
																				1407 96		

SUNDRY PAYMENTS

DATE 1915	CHEQUE No.	PARTICULARS	AMOUNT $	AMOUNT c.	AMOUNT £	AMOUNT s.	AMOUNT d.	REMARKS
May 31	1537	Outfit all.	100		20	10	11	
Aug. 7	4013	Tropical Clothing Allce.	26	76	5	10	0	

P—15.

ASSIGNED PAY.

Beneficiary Mrs A.F. Casgrain
Address 57 Pitt St. Windsor Ont.

Amount. $100.00

Separation Allowance issued. Yes or No.

UNIT.

NAME OF: Kings Can. Red Cross Hosp. Buskey Park.
DATE:
AUTHORITY: D.O. 421 6 2 D 28/10 D.M.S.Co 166 29/10

RANK.

Lt. Col.
DATE:
AUTHORITY:

NAME.

C

Name Casgrain
Initials A. R.
Bank ~~of Montreal.~~
London & Provincial Bank, Twickenham.

1916-17

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
Apl 24.	A.P. Can				100			
" 26	Pay. April (R)		217 50			117 50		
" 27	Bank	1083		117 50				✓
May 22	Pay May R		224 75					
" 25	A.P. Can				100			
" 26	Bank			124 75				
June 17.	Pay. June R		217 50					
" 20	A.P. Can				100			
" 26	Bank			117 50				
July 19	A.P. Can.				100			
20	Pay July (R)		224 75					
27	Bank	5513		124 75				
Aug 18	Pay Aug (R)		224 75.					
21	A.P. Can				100			
26	Bank			124 75				
Sept 20	Pay Sept R.		217 50					
21	A.P. Can				100			
23	Bank			117 50				
Oct 19	Pay Oct R.		224 75					
20	A.P. Can				100			
23	Bank			124 75				
Nov 16	A.P. Canada				100			
" 20	Pay. Nov R		217 50					
" 24	Bank			117 50				
Dec 11	A.P. C				100			
" 14	Pay Dec R		224 75					
" 15	Bank	1977		124 75				

FORM P.15
2227—1M—9/12/16

ASSIGNED PAY.

UNIT. NAME OF — DATE — AUTHORITY

RANK. Continued — DATE — AUTHORITY

II
NAME.

Beneficiary — Kings Own Red X. Hosp. Bushey Park

Address

Amount. $ 100.00

Separation Allowance issued. Yes or No.....

Lt. Colonel

Name Cosgrave
Initials A.R.
Bank of Montreal
London Provincial Bk
Twickenham

1916-17

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Dec 31	Bal. fwd					0		
1917 Jany. 16	A.P. Canada,				100-			
" 20	Ozy. Jan R.		124 75					
" 21	Bank	19225		124 75		0		
Feby 15	Pay Feby. R.		203-					
" 19	A.P. Canada,				100-			
" 21	Bank	21892		103-		0		
Mch 15	Pay Mch. R.		124 75					
" "	A.P. Canada,				100-			
" 23	Bank	24687		124 75		0		
" 26	1							

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.

1917-18

UNIT.

NAME OF UNIT: Kings Red X Hosp. Winnipeg, Canada, Bushey Park S.C.G.H.

DATE:

AUTHORITY:

RANK.

Lt. Col.

DATE:

AUTHORITY:

NAME.

Beneficiary

Address

Amount. $ 100.00

Separation Allowance issued. Yes or No.....

Name Casgrain

Initials H.R.

Bank of Montreal

~~London, Ontario~~

28/9/17 ~~Dividend~~

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Apl 20	Apl Pay R.		217 50					
" "	A.P. Canada				100 -			
" 24	Bank	2855		117 50		0		
May 15	May Pay R.		224 75					
" "	A.P. Canada				100 -			
" 21	Bank	4443		124 75		0		
June 14	A.P. Canada				100 -			
" 18	June Pay. R		217 50					
" 19	R Bank	4823		117 50		0		
July 15	July Pay. R.		224 75					
" 17	A.P. Canada				100 -			
" 23	Bank	12789		124 75		0		
Aug 13	A.P. Canada				100 -			
" 16	Aug Pay R		224 75					
" 20	Bank,	16839		124 75		0		
Sep 14	ap ban				100			
18	Sep Pay R.		217 50					
20	Bank	24477		117 50		0		
Oct 11	a p ban				100			
15	Oct Pay R.		224 75					
19	Bank	31282		124 75		0		
Nov 16	ap ban				100			
19	Nov Pay R.		217 50					
21	Bank	30733		117 50		0		
Dec 7	AP ban				100			
	Forward.					Dr. 100		

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.

Beneficiary
Address
Canada.
Amount. $ 100.00
Separation Allowance issued. Yes or No.....

UNIT.

NAME OF	DATE	AUTHORITY
Kings Red +		Pay 5
Hosp. B. Park.		Ha 1 25
B C G H.		mess 1
		comm.d 1

RANK.

	DATE	AUTHORITY
Lt Col. DL	24 10 17.	P.C. Orders No 66. of 6 11 17.

NAME.

Name Lasgrain.
Initials H. R.
Bank of Montreal.

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	Brot forward.					Dr. 100		
Dec 14	Decr Pay. R.		224 75					
	Bank	35096		124 75		0		
1918 Jan 14	at ban				100			
19	Jan Pay R		255 75					
	Command Pay fr 24 10 17 - 31 12 17 @ $1 pd.	19665	69					
	Do Cash	38823		69				
	Bank	39459.		155 75				
Feb 11.	A. P. Can.				100 -			
15	Pay Feb. R.		231 -					
~~Mar~~	~~A P Can~~							
	Bank	41013		131 -				
Mar 13.	A. P. Can.	~~41013~~			100 -			
" 18	Pay Mar. R.		255 75					
	Bank	42637		155 75				

FORM P.15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT. NAME OF

Rates

	DATE	AUTHORITY
R.R.C.H.	Pay	$ 8.00 Pd
Bwood Pk.	F.A.	x 1.50
S C G.H.	Mess	x 1
	O.C	x 1
		9.50

RANK.

	DATE	AUTHORITY
~~Lieut Col~~ ~~A.D.~~	24/10/17	Pt II Orders #66. 4/6/17.
Colonel. + D.S.	24/10/17	F.D.M. 223. 15 5/18.

NAME.

Beneficiary
Address

Amount. $ 100.00 Canada
Separation Allowance issued. Yes or No..... Addit outfit allce 1-6-18.

Name Casgrain
Initials H. R.
Bank of Montreal
Drafegar Square
16/9/18 Eff 18/9/18

1918-19

1919-20

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1918								
Apr 15	R. P. Canada				100 –			
18	Pay Apr R.		247 50					
27		Bank 11.7.3	294 50	147 50				
May 13	Pay May R.		~~255 75~~					
14	A.P. loan.				100			
21	Adj. from Lt. Col + O.C. to Col + O.C. rates from 24 10/17 - 30 4/18	3422	236 25					
		Bank. 2235		236 25				
23		Bank. 2645		194 50		0		
June 10	Pay June R.		285					
13	A.P. loan.				100			
27		Bank. 4144		185		0		
July 8	Pay July R.		294 50					
16	A.P. loan.				100			
25		Bank. 5625		194 50		0		
Aug. 8.	Adj. of Pay from 1/4/18 - 31/7/18.	7449	122					
"		Bank 6180		122				
14	A.P. loan.				100			
22	Pay Aug R.		356 50					
26		Bank. 7235		256 50				
Sept. 9	Pay Sept. R.		345					
17	A P loan.				100			
21		Bank 8930		245				
Oct 8	Pay Oct. R.		356 50					
14	A. P. loan.				100			
18	Billeting Allce France 1-30 9/18	2306						Fr. 90
23		Bank 10667		256 50		0		

FORM P.15
5986--25M--19/1/17

ASSIGNED PAY. | **UNIT.** NAME OF | DATE | AUTHORITY | **RANK.** | DATE | AUTHORITY | **NAME.**

Beneficiary — C.G.H. — Pay $ 100 — Colonel O.C. — 24 10/17
Address — T.A. 1.50 — Ceases to command #8 C.G.H. — 13 11/18 — Obs & N.R. Vol 26117 — Name Cosgrain
Dressing 1 00 — Initials H. R.
Amount. $100 Canada. — O.C. 1 — Bank of Montreal
Separation Allowance issued. Yes or No..... — Trafalgar Square

Add outfit allce 1/8/18.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1918.								
Oct 28.	addl outfit allce. 1-8-18.		100.					
	Cash	16997		100.				
Nov. 19.	A.P. Can:				100			
" 21	Nov. Pay		345	345		0		
	Bank			245				
Dec. 6.	Dec Pay.		356 50					
" 9	A.P. Can				100			
" 13	Bank.	13485		256 50		0		
Jan 20	A.P. Can				100.			
22	Jan Pay		356 50					
23	Bank	15442		256 50		0		
Feb 1	Subs 1.26 17/18	17077					£10-13-8 $ 51.80	
1	Travelling 26.27 17/18	17197					£1-9-0 4.87	
" 3.	adv. Feb. P.A.	15837		194.			Retd to Can.	
" 11	Feb. Pay.		322.				L/C to 28/2/19	
" 12	A.P. Can.				100.	28	Trfer to N.C. Ledger	
16	Retn & Bltg Allce 1-31 10/18 France	2803					Fcs 93.	
Mar. 20	Bltg & Subs. allce France 1-30 4/18	3608					Fcs. 32.65	
							Transf'd to Ledger to 12 March/19.	
	246 pd Comm Pay 13 11/18 - 28 2/19, auth N.R. & audit Obs. 58, PE 2	Vo. 18446		108.		80	Referred to A.2	
Apr 30	Trav allce 27.7/18. 8/1/19 to Can 2.5.19	1255					£1-3-6	
July	Command Pay. 13 11/18 - 28 2/18 Ltr Mtr fr A.G. 7/7/19. 1.8418		108.00			Cr. 28.00	7/8/19 a/c L/C to Can	
Aug 31	Trfrd to Can	Vo. 1408		28.		0	ler Bal $28.00 ?	

10. Ga 150 — 2

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. — RANK Col — NAME (IN FULL) Lasgrain N. P.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? 60xx — DATE EFFECTIVE 8/10/19

TO WHOM PAID — RELATIONSHIP

ADDRESS Sawers A.P.

8 — 150

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT? Can. Bk. Commerce, Windsor Ont

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 14-11-14 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 100xx — DATE EFFECTIVE 8/10/19

PAYABLE TO Mrs. Alice F. Lasgrain N. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 57 Pitt St. W. Windsor, Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED SOC — PLACE London — DATE 13-3-19 — REASON — AUTHORITY D081 — 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																															21		21		21		Over to Messing
28/2/19																																					
1 13 13 13	13	9 50	123	50	25	50			149	00					G.R. 3 3/4/19						83		45								21		149					Mess	AR 5/19 D063
					26				26														26								26						Sub 5/3/19 D083

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
3.12.15	Inoc. Pos. Maj. Hogg.
3.25.15	" " "

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

ORIGINAL.

LIEUT: COL:

6-7-32

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 CASGRAIN *Christian Name* Henry Raymond.

15.2.16.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Sandwich County Ont.

Examined ... ... on 8th day of April 1915, at London, Ont.

Declared Age ... ... 57 years 9 mos. days.

Trade or Occupation ... Physician & Surgeon

Height ... ... 5 feet 8 inches.

Weight ... ... lbs.

Chest Measurement — Girth when fully Expanded 46 inches.

Chest Measurement — Range of Expansion 5 inches.

Physical Development ... Fit

Vaccination Marks — Arm ... Right / Left

Vaccination Marks — 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 (*Signature*) Examined by Medical Board - 1st

(*Rank*) Divisional Order II 76.

Medical Officer.

Enlisted ... ... at London on 9th day of April 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
	C. A. M. C.	LIEUT:COL:
Transferred to		

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.

(*Signature*)

W.R.WARD (*Rank*)

Colonel in Charge of Records,
Canadian Contingents.

day of 191 .

K.C. 2/3/20.

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

J. Kearney Kelly Lieut.-Col. In Charge of Records, Canadian Contingent.

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

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

DIRECTOR of PERSONAL SERVICES RECEIVED FEB 24 1919

(4887.) W. 9597/1588. 500M. 9/15. C. P., 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				
WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.	16	12	16	2	2	16	Dyspepsia		Retained hospital Convalescent discharged to duty	H.D. Courtenay Capt. RAMC for REGISTRAR. WEST CLIFF CANADIAN EYE AND EAR HOSPITAL.