

12131

53090

CARTHCART

JAMES

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Location
Lieu

1577



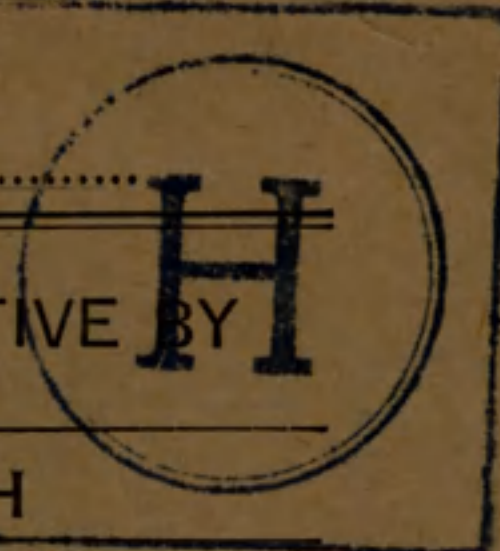
C.E.F. REGIMENTAL DOCUMENTS

NAME CATHCART JAMES

REGT. No. 53090

UNIT 18 BN

H. Q. FILE No. 12131
~~19131~~



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					M.U.
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



Original

53090 ~~20~~ 90

ATTESTATION PAPER.

No. 90

Folio. *A*

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *James bathcart*
2. In what Town, Township or Parish, and in what Country were you born?..... *Bridgeport, N.S. Canada*
3. What is the name of your next-of-kin?..... *William bathcart*
4. What is the address of your next-of-kin?..... *Bridgeport, N.S.*
5. What is the date of your birth?..... *8 Aug. 1892*
6. What is your Trade or Calling?..... *Shoe merchant*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated? *or inoculated against typhoid?*..... *Yes*
9. Do you now belong to the Active Militia?..... *No*
10. Have you ever served in any Military Force?.. *3 yrs U.S. Cavalry 1911-1914*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... *Yes*
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*

James bathcart (Signature of Man).
F. W. Sperry Capt (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *James bathcart*, 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.

James bathcart (Signature of Recruit)

Date *Oct 22* 1914. *F. W. Sperry Capt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James bathcart*, 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.

James bathcart (Signature of Recruit)

Date *22 Oct.* 1914. *F. W. Sperry Capt* (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 *22* day of *Oct.* 1914.

A. Notary Public (Signature of Justice)
F. W. Sperry Capt (Signature of Recruit)

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

[Signature] (Approving Officer)

Description of James Bathcart Enlistment.

Apparent Age... 22 years... 2 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height..... 5 ft. 6 1/2 ins.

Vaccination left arm

Chest measurement. { Girth when fully expanded..... 36 ins.
 Range of expansion..... 3 1/2 ins.

Complexion..... Fair

Eyes..... Blue

Hair..... Blonde

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

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..... 22 Oct. 1914.

Place..... London, Ont.

G.W. C. Hall

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

[Signature]..... (Signature of Officer)

Date..... 28th November 1914.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

COPY ONLY

This is to Certify that No. 53090 (Rank) PRIVATE.

Name (in full) CATHCART, James. enlisted in
the 18th Battalion. C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at LONDON, ONTARIO. on the TWENTY/SECOND.
day of OCTOBER. 19 14.

HE served in FRANCE. (with the 18th Battalion.)

and is now discharged from the service by reason of Being medically unfit for further
general service, R.C. 668 a/ 14.6.18. Cat. C 11.

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

Age 25. Years.

Height 5' 6"

Complexion FAIR.

Eyes BLUE.

Hair LIGHT.

Marks or Scars

SCAR ABOVE LEFT EAR.

G.S.W. LEFT ARM.

Signature of Soldier

Issuing Officer

Date of Discharge SEP 23 1918

Rank LIEUT.
O. C. Discharge Section, No. 1 D. D.
Appointment

Signed at LONDON, ONT. this TWENTY/THIRD. day of SEPTEMBER. 19 18.

in Military District No. (NONE.)

File Reference No. (1.D. 30-C-923)
(1DD 10-C-102.)

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.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. 53090. (Rank) PRIVATE. Name CATHCART. James.

Unit 18th Battalion. C.G.M.F.

Address on Discharge KATTEN LODGE. SYDNEY. NOVA SCOTIA. St Marys Ont

Character and Conduct Fair

Former Occupation STUDENT.

Special Qualifications of Value in Civil Life STUDENT.

Medals and Decorations NIL.

Remarks Wounded (20-7-17) Entitled to wear one gold wound stripe.

Signed at LONDON, ONT. this TWENTY/THIRD. day of SEPTEMBER. 1918.

James M. King
Name of Officer

LIEUT.
Rank

O. C. Discharge Section, No. 1 D. D.
Appointment



James Bathurst
supposed

35

Cathart J 22 ✓

NO 16 CAN. GEN (ONTARIO) HOSPITAL

Ward 22

Plate No. L $\frac{D}{632}$ Lat.

Name	Cathart J. Pte.
Regtl. No.	53090
Unit	18th. Can.
Bgde.	4th.
Div.	2nd.
Part	Left Arm
View	Lateral
Date	3-10-17

REPORT:- Negative.

632
A

Name

Cathcart Emil 22/10/14

Date of Embarkation for England

annulled 29-4-15

Proceeded to France.

14-9-15
10-11-16

Returned to England. 28/5/16 adm
to Hosp while on leave
10/8/17 ended.

Date returned to Canada.

25/5/18

over

P.R. 2855.

left 17-8-22

less sheet 28/5/11 adna ho hosp while

30-6-16 ^{ref} ^{vision} on leave in Eng.
20/7/17 I saw arm ho Eng 10/8/11

CHARGE.

Army Form B. 252.
(See King's Regulations.)

Nº 5 CANADIAN GENERAL HOSPITAL

18th Btn.

**BATTERY
SQUADRON
TROOP or
COMPANY**

CHARGE against No. 53090

Place

(P/L/C) CATHCART J.
Liverpool

Date of Offence 22-5-18

OFFENCE

While a hospital

patient, absent without
leave from 9 30 pm Roll
Call 22-5-18 until report-
ing to Ward Master 3 00
pm 23-5-18

17 hours + 30 minutes

Names of Witnesses:—

Cpl Taylor J. C.A.M.C.

Punishment

Awarded

By whom

Awarded

Forfeits 3 days pay.

Under Royal Warrant
forfeits 2 days pay.

Commanding Battery, Squadron, Troop or Company.



PAID
 PAYMASTER
 NO. 5 GEN. HOSPITAL, A. H. H.
 BIRDAL, F. W. M.
 LAST PAY DEPOSITED

Wm. H. H.

CHARGE.

Army Form B. 252.
(See King's Regulations.)

NO 5 CANADIAN GENERAL HOSPITAL

18th Btn.

**BATTERY
SQUADRON
TROOP or
COMPANY**

CHARGE against No. 53090

Place

(A/L/cpt) CATHCART J.
Liverpool

Date of Offence 22-5-18

OFFENCE

While a hospital
patient, absent without
leave from 9.30 pm Roll
call 22-5-18 until report-
ing to ward Master, 3.00
pm 23-5-18
17 hours & 30 minutes

Names of Witnesses:—

Cpl Topley J. C.A.M.C.

Forfeits 2 days pay.

Punishment
Awarded
By whom
Awarded

Under Royal warrant
forfeits 2 days pay.

[Signature]

Commanding Battery, Squadron, Troop or Company.



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Bottom section of faint, illegible text, possibly a signature or footer.


CHARGE.

Army Form B. 252.
(See King's Regulations)

18th Btn.

**BATTERY
SQUADRON
TROOP or
COMPANY**

CHARGE against No. 3090 L/C. Cathcart, J.

Place	Date of Offence	Offence	Names of Witnesses	Punishment awarded	By whom awarded
EPSOM	Nov. 30th 1917		<p><i>bpt Allan</i></p>	<p><i>Forfeits 1 day pay Reprimanded 3 12-17</i></p>	<p><i>Commandant.</i></p>

*Reprimanded, 1
3-12-17*

J. A. MacArthur
Commanding Battery, Squadron, Troop or Company.
O.C. No. 2 Division.



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

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

Sheet
No. 3.

Casualty Form—Active Service.

Unit, Regiment or Corps 18th Bⁿ C.E.F.

Regimental No. 53090 Rank Pte. Name Cathcart James
C. E. F.

Enlisted (a) 22.10.14 Terms of Service (a) Dur. of War. Service reckons from (a) Enlistment

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) Shoemaker

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				
	<u>No/Dead Rep. Pte/Ord No 148</u>	<u>Sentenced to 7 days Detention forfeit 14 days pay (23 days pay forfeited by RW) for A.W.L. 12 noon 6/8/18 2.30 PM. 28/8/18</u>	<u>London</u>	<u>12/9/18</u>	<u>H. MacLennan Lieut. For O. C. No. 1 District Depot</u>
<u>10-9-18</u>	<u>C.O. IMCH</u>	<u>To Military Hospital from Casualty Coy. (Detention) Seabiew</u>			<u>D.D.O.151 H.S.O.152</u>
<u>19-9-18</u>	<u>C.O.#1DD</u>	<u>Posted to Casualty Coy from Military Hpl. "C"2. Partial loss of function of left arm</u>			<u>D.D.O.155 H.S.O.155</u>

[Signature]
Lieut.
for O.C. No. 1 D.D

(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, Shoing 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				

LONDON, ONT.

SEP 23 1918 DISCHARGED Being medically unfit for further general service

R. O. 668 d/14. 6. 18. Cat. "C" II

Wm. M. Livingston Jr.
O. C. Discharge Section, No. 1 D. I.

July 15 '45

(2 sheets) Sheet No. 1

Casualty Form—Active Service.

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

Regiment or Corps 18th Battalion, C.E.F.
Regimental No. 53090 Rank Pte Name Cathcart, James
Enlisted (22 Oct. 1914) Terms of Service (a) 2nd War and 6 months Service reckons from (a) Enlistment
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) Merchant

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				
18.9.15	18th Bn	Disembarked in France	Havre	14-9-15	Non. Roll
14.5.16 7.6.16	18th Bn.	Granted 8 days leave to England		14-5-16	B. 213. Pt. II order 23, 7 th 6/16.
14.6.16 13.6.16	Off. Rec. of 18 th Bn	Transferred to Can. Cas. Res. Cent., Folkestone, on being admitted to military hospital, Thorncliffe, while on leave in England, & struck off strength of 18th Can Bn.		28-5-16	Letter 14 th 6/16, R.L. 1-X-303 (Can Sect. 1149-97) C.S. (B) 14 th 6/16. Pt. II order 25, 21 st 6/16.

M. G. Cochrane
Lieut.
for Lt. Col.
A.A.G., Canadian Section,
G.H.Q., 3rd Echelon.

(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.

OVER

53090 Pte. Bathurst J.

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				
17.6.16	CCAC	Taken on Strength C.C.A.C. Pt. II D.O. No. 225-17.16.16	Folkestone	28.5.16	Pt 2 20 223
19.8.16	CCAC	39 th Res Bn	Folkestone	19.8.16	Pt 2 20 344
19-8-16	O.B. 39 th	Taken on strength 39 th W. Landing	W. Landing	19-8-16	Pt 2 197 ✓
9-11-16	O.B. 39 th	Drafted 18 th Bn	W. Landing	9-11-16	Pt 2 267
3.7.16	CCAC	Pmb. 1 st L.C.D. for P.I. (4000)	Folkestone	1.7.16	Pt 2 20. 253.
78.11.16	18 th Bn	To.S. from 39 th Res Bn	Field	10.11.16	— " — 54
10-11-16	Can Base Depot	Arrived from 39th Can. Res. Bn, Eng. taken on strength of 18 Can Bn	Can. Base Depot	10-11-16	Non. Roll. Pt. II Order Sit, 28/11/16.
2-12-16	2 Can Bn	Arrived at 2nd. Can. Entrench. Bn.		2-12-16	Non. Roll. Pt. II Order 20, 27/2/17.
17-3-17	do	Apptd. Acting Lance-bpl. with pay, whilst employed with 2nd. Can. Entrench. Bn. (Auth: War office letter 121/6228 (F.2), dated 10/10/16)		14-3-17	B. 213. Pt. II Order 20, 27/2/17.

CERTIFIED CORRECT.
 10 FEB. 1917
 GEN. RECORDS, LONDON.

W. J. [Signature]
 CAPT. & ADJ.
 39th BN. C.E.F.

OVER

CLINICAL CHART.

Army Form D. 102

Corps 1st Cavalry (To be attached to Case Sheet.) Military Hospital _____
 No. 53095 Rank and Name Pt. Pat. Cent Age 20 Service 3
 Disease 95.0 Anem. Date of admission 11-8-17 Date of discharge 12-9-17 Result W. Recovery

Dates of Observation	Days of Disease																													
	11	12	13	14	15	16	17	18	19	20	21	22	23	24																
Temperature Fahrenheit	Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time	
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
107°																														
106°																														
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103°																														
102°																														
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97°																														
Pulse per Minute	88	100	76	80	82	80	87	80	85	80	82	80	82	80	80	80	80	84	76	76	76	76	76	76	76	76	76	76	76	
Respirations per Minute	22	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	
Motions per 24 hours	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 53090 Regimental No. L/C Rank. Cathcart Surname. J. Christian Name.
Year 18th Bn Unit. 21 Age. 3 ⁶/₁₂ Service. 24 ²⁴/₁₂

Station and Date. Disease G.S.W. Lt Arm

PATIENT STATES - Occupation - Shoe merchant
ENLISTED AT London At. 22.10.14
ARRIVED IN ENGLAND May 1915
ARRIVED IN FRANCE July 1915
WOUNDED AT Lens. 19.7.17

Hospitals

18 C.C.S. 21.7.17
5 Gen 23.7.17
2nd S. G. Bristol 11.8.17
C.C.H. Bearwood 12.9.17
Out Mil H. Crompton 1.10.17
C.C.H. Bromby 23.10.17
M.C.H. Epsom 1.11.17

Out Mil H 1.10.17 Scar 5" outer & post part left arm serious discharge
Elbow at rt angles 10° most.
Fingers tightly flexed

3.10.17 Urinalysis Urea, Acid, 1.022 Albumen 0 Sugar 0
X-ray. Left Arm - Negative

M.C.H. Epsom 1.11.17 Fair mov^{ts} of Elbow
Shoulder abduction 90°
Finger mov^{ts} slow & weak but full
All muscles respond to Faradism

5. Gen 17.4.18 Scar on outer side of left arm 4" by 2" wide
in front. Quite healed. Apparently has been compound
fracture of humerus. Alignment not true. Arm
is kept on splint. Fingers & wrist move fairly
well. Flexion of fingers limited

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

MEDICAL CASE SHEET.*

res

No. in Admission and Discharge Book.
0.9817
Year

Regimental No. *58090.* Rank *Pte* Surname *Cathcart* Christian Name *S.*
Unit *18th* Age *20* Service *30/12*

Station and Date.
273 D.

Disease *Sharpnel left arm fleshwd slight lens*
5th Bn. Queen
2nd South Bn. Bristol
Beau Wood
July 19th
July 23rd 1917
May 9th 1917
Sept 12th 1917

P.C. Wound healing. Movement of forearm limited. Hand cyanosed and swollen with loss of movement of fingers and wrist. Dressings 4x fair. Rest.

14/9/17

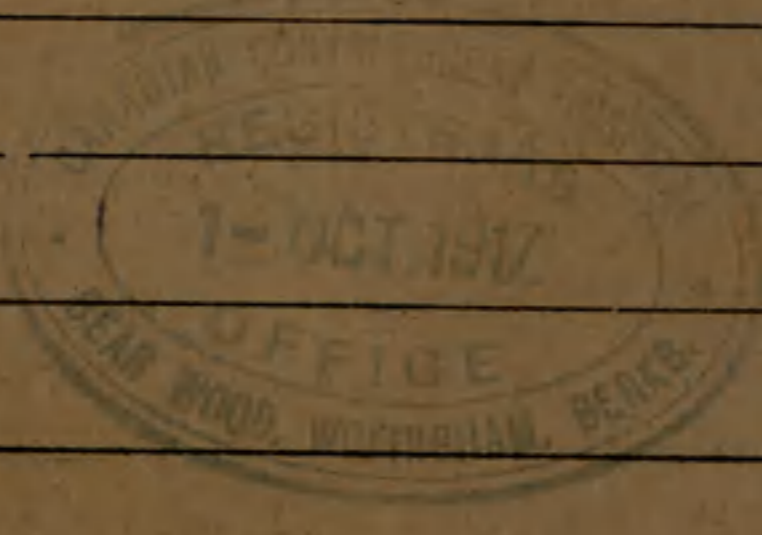
4x Fair Dressing pain in arm worse at night.

20/9/17

4x Fair dressing pain in arm worse at night - to Crispington. Still here.

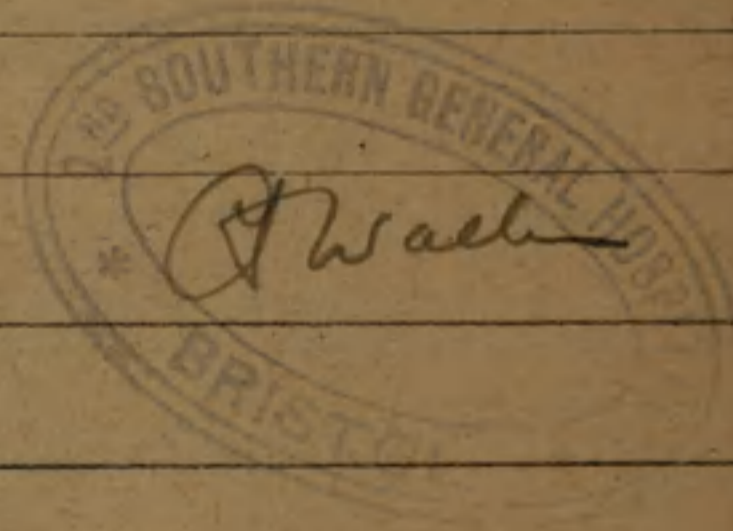
1st Oct. 1917

Transferred to Crispington.



MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
709508	53090	Pt	Catheart	James
Year	Unit.		Age.	Service.
1917	18 Canadians	R Coy	20	3 yrs
Station and Date	Disease			
13.8.17	D.W. Left upper arm - VIII - A 75. 500 No 3. A.M.S.			
20.8.17	July 21 - Jank. wound appears clean - to be strapped. A 75 500 4 A.M.S.			
18.11.17	Back Back Shut			
23.11.17	See			
3.12.17	SR Healed well			
7.9.17	See Worship Mue			
DATE OF DISCHARGE		12-9-17		
DESTINATION		Wokingham		



*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(44502) Wt. W 11203-M 1150. 1,450,000. 6/19/16. C.F. & S. Forms/I. 1237/12. (E233) P.T.O.

27

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book:	Regimental No.	Rank.	Surname.	Christian Name.
	53090	Pte	Cathcart	J.
Year	Unit.	Age.	Service.	
18	Can Bn	21	3 yrs	

Station and Date. 1 OCT 1917

Disease GSW Left Arm J W Severe

Drafted to France. 15th August 1915.

Wounded in action July 21st 1917

Taken to No 6 Canadian P.A. and inoculated on July 21st 1917. Transferred to No 18 C.C.S. same date.

Transferred to No 5 General Hospital 23rd July 1917, and to England August 8th 1917, and admitted to South Mead Hospital Bristol same date.

Transferred to Bearwood Hospital 13.9.17 and admitted to O.M.H. Oct 1st 1917.

General health good.

Exam - deep scar 5" long anti + post surface of left arm. oblique downward + inward. ~~over~~ wound covered over by serous dentings, forearm at right angles stiff - 10° movement in flexion - no extension beyond L, wrist flexed, fingers tightly flexed, distal phalanx of index finger alone being active & moved.

3.10.17 analysis of urine shows: -

colour	amber
reaction	acid
Sg.	1022
albumen	0
Sugar	0

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

Station
and Date.

2 10 17 X-ray examination shows - Negative

5. 10. 17. Seen with Capt Patterson who
is preparing splint.

23 10. 17 I transferred to Convalescence

Ht Elliot Lieut
C.M.C.

CANADIAN CONVALESCENT HOSPITAL
BROMLEY, KENT.

1/11/17 Transferred to Epsom for further treatment
& convalescence

Dellison CAPTAIN C.M.C.
CANADIAN CONVALESCENT HOSPITAL

No. 5. Can. Inf. Liverpool. Scar on outer side of left arm 4" long 2" wide.

17. 4. 18. Arm is kept in splint. Fingers & wrist
move fairly well. Flexion of fingers limited.
J. E. Henderson Capt C.M.C.

P

P

CASE HISTORY SHEET.

Military Hospital, M. D. No. 1 Hospital. LONDON, ONT. Station.

No. 53090 Rank. Pte Name. *Bartholomew J.C.* Age. 22

Unit. *S.N.#1* Completed years of service } Where and how long } *C 1/2 E 1 1/2 F 3/4*

Date of admission. *10-9-18* Date of discharge. *18/9/18*

Diagnosis. *Scabies* Place of origin.

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Road m. bullous & group. Long red spot like pustules, containing pus. Very itchy. Has had for 4-5 days

FAMILY HISTORY

No previous history

(Tuberculosis, mental or nervous diseases.)

TREATMENT

Hot Baths Daily. Following Sulph. Ointment By Mag Sulph. oint. am & pm.

CONDITION ON DISCHARGE

Cured.

(and disposal made of case.)

Date. *18/9/18*

J.B. MacLellan Capt
Medical Officer i/c case.

23187

B

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Handwritten text, likely bleed-through from the reverse side of the page.

CASE HISTORY SHEET.

No. 53090

No. #1 District Depot Rank Lance Corporal Name Cathcart James C Age 20

Unit Completed years of service Where and how long } C 3/12. E. 3/12. F. 2 1/2

Date of admission 7-6-15. Date of discharge

Diagnosis P.T.F. left arm 1218A. Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complains of limitation

movements of left arm. no pain. On Exam. - irreg. scar 5" x 1 1/4" over insertion of Deltoid muscle left arm. adherent to bone, tender on pressure. Left upper arm atrophied 1 1/4", forearm 1/4". Shoulder movements forward thru. arc of 90° lim. 90° backwards thru. arc of 80° limited 100°. due to pain in scar. Left Elbow flexion thru. arc of 90° lim. due to pain in scar. Extension normal. Supination & pronation normal. Sensation normal. Movements of wrists & fingers normal. 40% loss of power in arm & hand.

5-9-15 - no change in condition

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

neg.

TREATMENT

(Especially any specific or special form.)

Hand Specialist 1/8/18. Diag. G.S.W. Left Arm - Lewis Col. 6119

CONDITION ON DISCHARGE

(and disposal made of case.)

unchanged.

Date 5-9-15.

L. M. Jones Lieut. Col. Medical Officer i/c case.

A17078

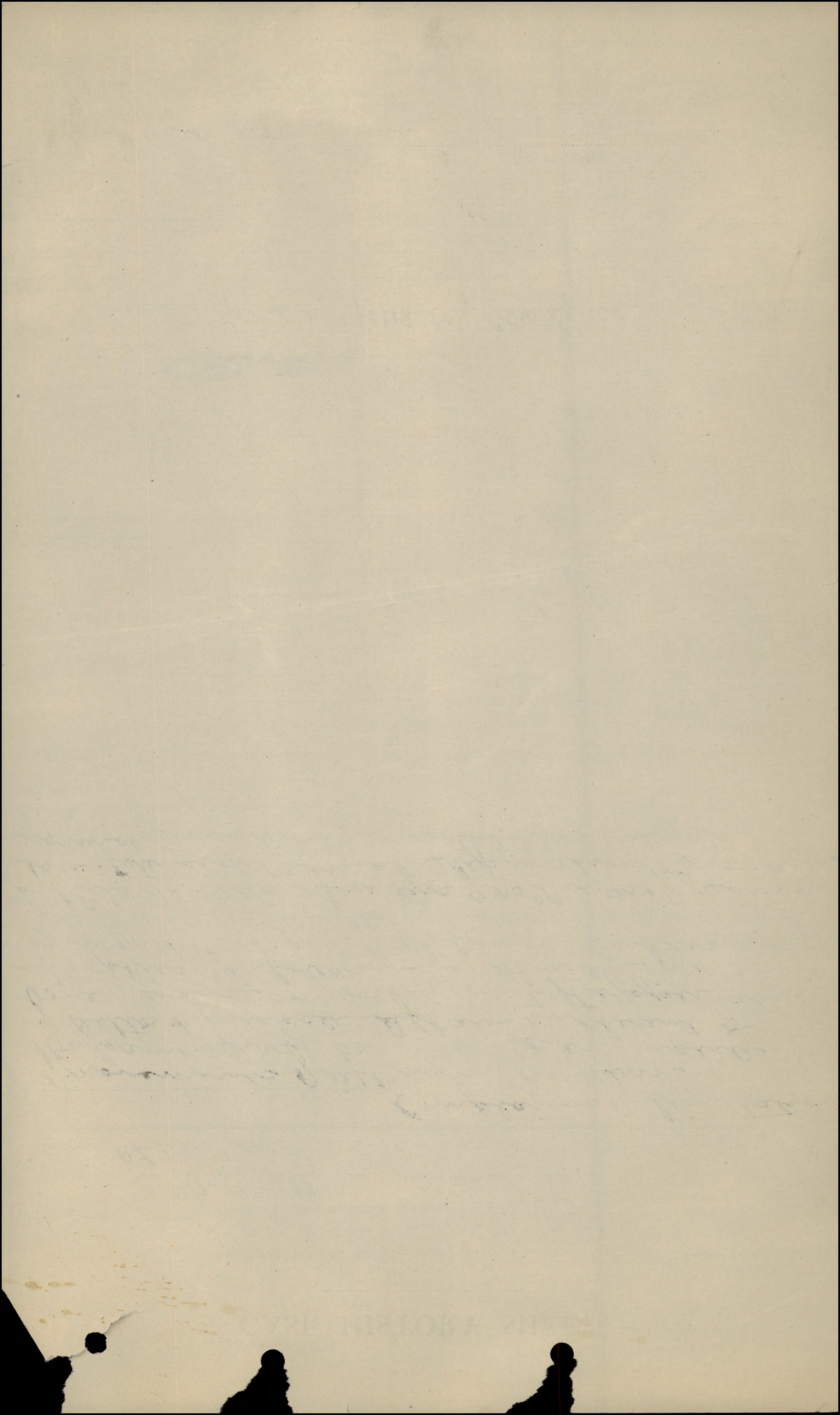


TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

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				
McEgerson.	1	11	17	17	APR	1918	GSW strap left arm	168	Healthy looking man: Scar on outer aspect upper left arm 5" long extending down inward about region of insertion of deltoid. Deep extending to adherent to the bone. Has fair movements of elbow—slightly limited on full extension & flexion. Abduction shoulder can be done to level of shoulder. All movements weak. Finger movements slow but full & ext. very weak. All muscles respond to Faradism. Splint will have to be worn periodically for some time to improve extension. Action of arm is weak & slight resistance hinders any movement—other systems normal.	W. H. ... Major, C.A.M.C., M.O., No. 2 Division.
5 CANADIAN GENERAL HOSPITAL LIVERPOOL	17	APR	1918	25	MAY	1918	G.S.W. Lt Am		Transferred to Canada	W. H. ... Capt. C.A.M.C.
ARAGUAYA.	25	5	18	4	6	-18	Do.		Condition unaltered.	W. H. ... Capt. C.A.M.C.

MEDICAL HISTORY SHEET.

2495
53090

Surname Cathcart Christian Name James

Examined { on 22 day of October 1914
at London Ont.
Birthplace { City or Town Buadepoit.
County Novia Scotia Canada

Approved by O. J. J. 15455
D. W. H. G. G. G. G. G.
Rank Adj. S. & Div. M.O.

Apparent age 22 years
Trade or occupation Shoe Merchant.
Height 5 Feet 6 1/2 Inches.
Weight ✓ Lbs.
Chest measurement { Minimum 32 1/2 inches.
Maximum expansion 06 inches.
Physical development Good
Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
Number ✓
When Vaccinated last ✓

Date	Result	VACCINATIONS.
<u>19¹²/₁₄</u>	<u>good</u>	<u>Done</u>
		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9¹¹/₁₄</u>	<u>good</u>	<u>Done</u>
<u>14¹¹/₁₄</u>	<u>good</u>	<u>Done</u>
		M.O.
		M.O.
		M.O.

Enlisted on day of 191 at

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>18th Bn</u>	<u>53090</u>		
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Epsom</u>	<u>18-3-18</u>	<u>gsw St Arm</u>	<u>1 to C. M. G. Smith</u>
<u>London Ont</u>	<u>29-8-18</u>	<u>Patrol on fender</u>	<u>category CII</u>
		<u>left arm</u>	<u>Brum Capt</u>

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.

23 SEP 1960

Christian Name

Surname

Military Hospital, M. D. No. 1
Wolseley Barracks
LONDON, ONT.

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
MILITARY HOSPITAL, SHORNCLIFFE.		28	5	6	11	6	16	Defective Eyes	14	Transferred	<i>M. Maclean</i>
Manor House		11	6	16	30	6	16	do	19	To C.C.C.	
Military Hospital, M. D. No. 1 Wolseley Barracks LONDON, ONT.		10	9	18	17	9	18	Scabies	8	Rash on body. Itchy at night. Rash on cuticles. Recurred Dis. from hospital. Recurred. Pen. cuts		S. D. G. Barlow Capt. C.M.D.

C86

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

12440 / 247

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names *James B* 2. Surname *Cathcart*
3. Rank *Private* 4. Original Unit *18 Batt.* 5. Reg. No. *53090*
6. Address, in full, to which future payments of gratuity are to be forwarded
Mr James B Cathcart
R.R.# 7 St. Marys Ontario
7. Date of enlistment in the C.E.F. *Oct. 22nd. 1914*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *not applicable*
9. Relationship of such dependent *not applicable*
10. Address, in full, of such dependent *not applicable*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *not applicable*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
not applicable
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *not applicable*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *not applicable*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *Served with 18 Batt. until wounded April 19-1917 from enlistment*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *not applicable*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *not applicable*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *not applicable*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid

Post discharge pay \$110.00 paid by D.P. No 1

20. Have you been issued with a War Service Badge? If so, what class?

not applicable

21. Have you, during the present war, served in the Imperial Forces?

not applicable

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled

not applicable

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

not applicable

(b) If so, was such reversion in consequence of misconduct or inefficiency?

not applicable

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge

September 23rd 1918 (b) Reason for discharge ... disabled being wounded in left arm

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

not applicable

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit

18 Battalion served in France from Sept. 20 - 1915 till April 19 - 1917

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

not applicable

(b) If so, are you in receipt of full pay and allowances from that Department?

not applicable

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant:

James L. Cathcart

Place of Residence:

Declared before me at:

St Marys

This

20th day of *January* 191*9*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

B. Hancock J.P.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Oct. 23 1918</i>	<i>\$33.00</i>			
<i>Nov. 23</i>	<i>34.10</i>			
<i>Debit Balance recovered</i>	<i>33.00</i>			
	<i>100.10</i>			

Certified Correct.

District Paymaster.

for J. L. Sanderson Capt. District Paymaster, M. D. L.

No Overpayment

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

TRIPPLICATE

IDD 10-C-102 EN.

ID 30-9-923

A-G 12-7 Sept.

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

Regimental No. 53090 Rank PTE. Name CATHCART James
 Corps 18th Bn. who was* Discharged R.O. 668 14-6-18
 On 23-9-18 191 , to 191 ,
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 191 ,
 to 23-9-18 191 , the inclusive date of transfer or discharge. 1-9-18

		\$	c.			\$	c.
Bal. Dr. from prev. month.....				Bal. Cr. from prev. month.....		9.	54
Advances } No.....				Regt'l Pay..... days at \$..... c.			
by } No.....				<u>23</u> <u>1.</u>		23.	
Cheques } No.....				Field Allow. days at \$..... c.			
Assigned Pay and Sep'n Allee. No.....				<u>23</u> <u>.10</u>		2.	30
Other charges.....	<u>4706</u>	<u>11.50</u>		Separation Allowances* (Monthly).....			
<u>7 days detent. and 14 d. Per.</u>		<u>23.10</u>		Other Allowances*.....			
Payment on transfer or discharge No.....				Other Credits*..... <u>Clothing</u>		35.	
Balance Cr. (to be paid by the new unit).....	<u>4707</u>	<u>68.24</u>		Bal. Dr. (to be deducted by new unit)..... <u>P.D.P.</u>		33.	
Total.....		<u>102.84</u>		Total.....		<u>102.84</u>	

*Give particulars.

OVERSEAS SERVICE.

A monthly stoppage of \$ 15. (†) has..... (‡) been paid on account of Assigned
 Pay for the month of..... 191
 and Sep'n Allee. for month of pd. to 23-9-18 191 } (to) Assignee..... MISS IDA PEARCE
 (Address) nil ST. MARY'S ONT.

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

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment 22-10-14
 (2) if married and if a Separation Allowance Card has been submitted..... no no
 (3) cause of discharge..... authority..... Med. unfit for further D.O. 156, 23-9-18
 (4) authority for transfer..... general service, Cate. C11

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.

PAYMASTER
District Depot No. 1
 Date.....
 Place..... SEP 21 1918

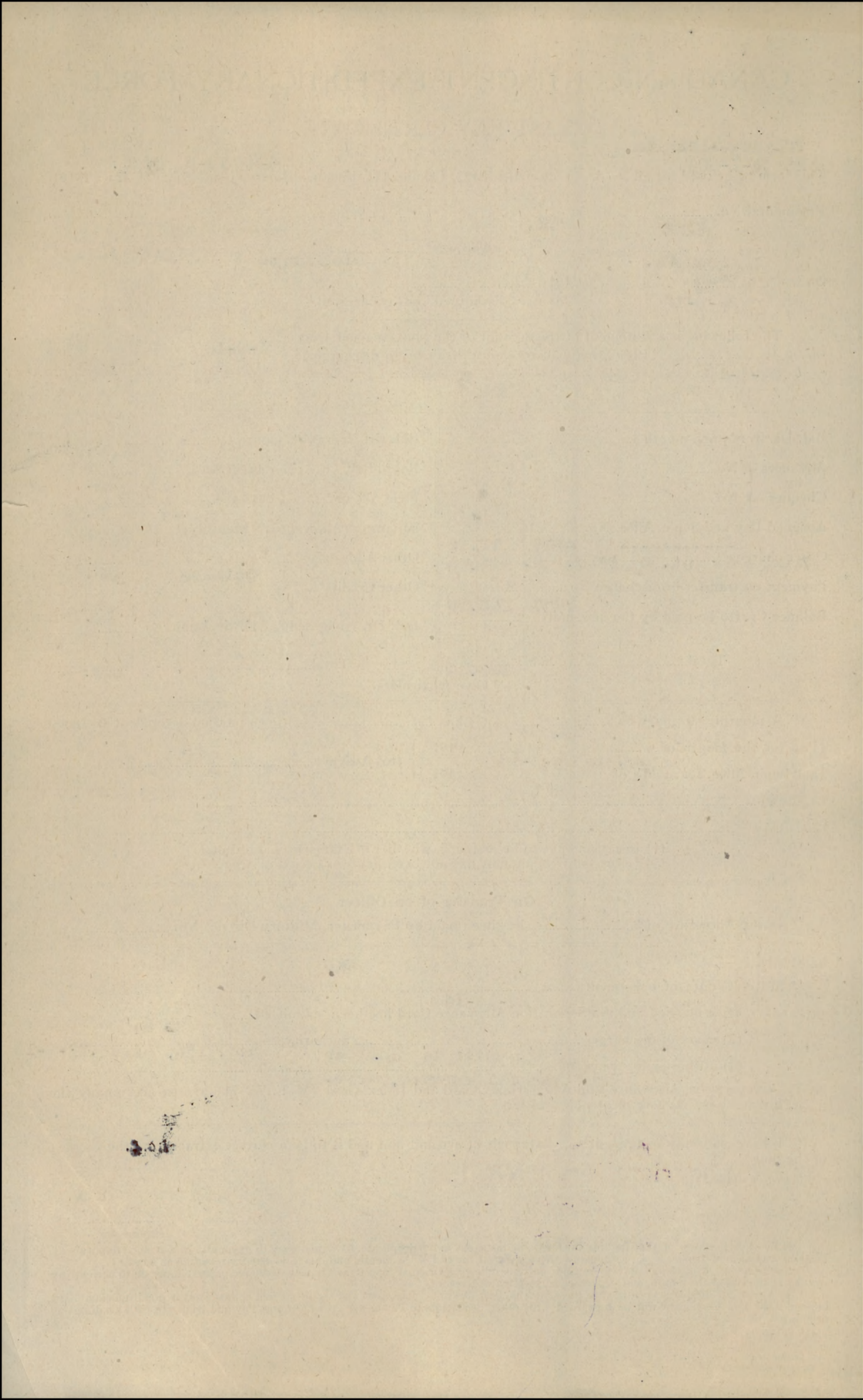
[Signature]
 Paymaster.

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.



△

x

x

x

Jan 1891

CLINICAL CHART.

Corps Det S.S. #11 Hospital Station LONDON, ONT.
 No. 53090 Rank and Name Pte. Carhart J.C. Age 22 Service C 6 1/2 E 11 1/2 F 2 1/2
 Disease Scarlet Date of Admission 10-9-18 Date of Discharge 18/9/18 Result Cured Serial No. A. & D. Book

Dates of Observation																													
Days of Disease																													
Temperature Fahrenheit	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		
	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.
107°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
106°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
105°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
104°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
103°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
102°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
101°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
100°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
99°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
98°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
97°	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.4	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.8	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
	.6	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Pulse per Minute	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Respirations per Minute	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Motions	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.

A.17078

M. F. B. 288.
 50M-4-18.
 H. Q. 1772-39-513.

Signature [Handwritten Signature] In charge of case.

CLINICAL CHART

NO. 210

Date	Patient's Name	Room	Physician	Nurse	Disease
1910					
1911					
1912					
1913					
1914					
1915					
1916					
1917					
1918					
1919					
1920					
1921					
1922					
1923					
1924					
1925					
1926					
1927					
1928					
1929					
1930					

No.

90
53090

RANK

Pte

NAME

Cathcart, Jas

T. O. S.

UNIT

18th Battalion

M. D. /

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID
FROMPAID
TOSIG.
OR
REC'T

PARTICULARS

AUTHORITY

1914

1914

Oct-22

Nov 30

✓

Dec

1915

1915

✓

Jan 1 Jan. 12

✓

Jan 13 Jan 31

OS.

Feb

✓

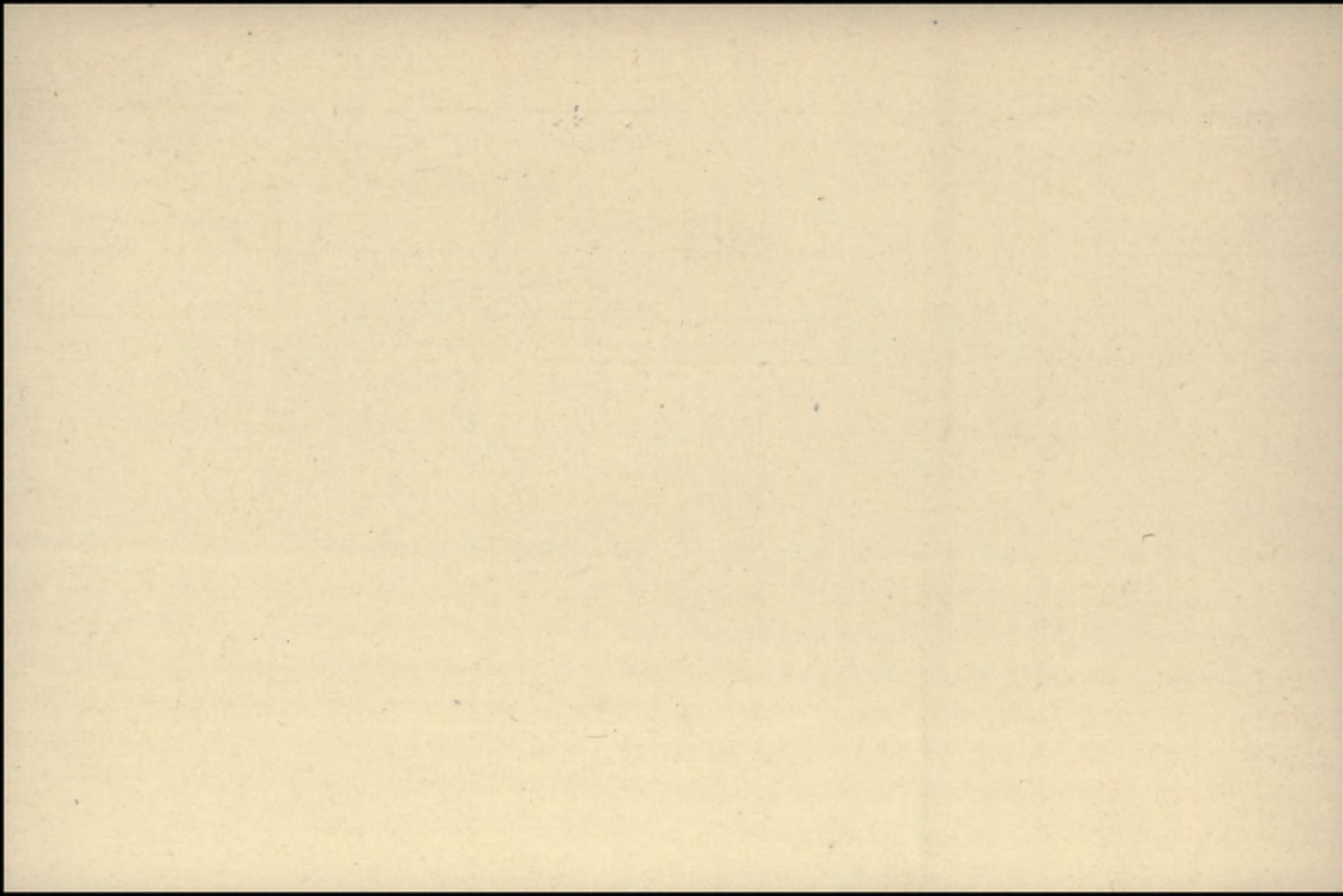
Mar

✓

Apr

✓

UNIT SAILED
APR 18 1915



Number

53090

Rank

A/2/1/1/1/1

Surname

CATHCART

Christian Names

James

Unit

18th - Bn. Can. Inf.

Theatre of War

France

Date of Service

14.9.15

Remarks

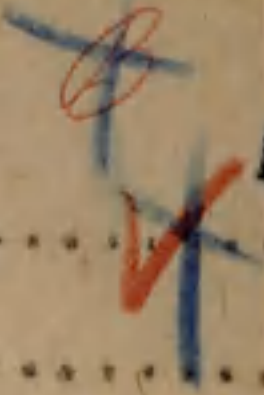
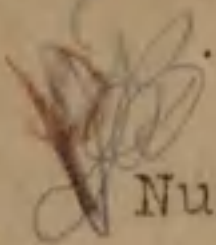
Box 450
New Waterford

Latest Address

~~Waterford Lodge Sydney~~

Roll No.

Page 2380

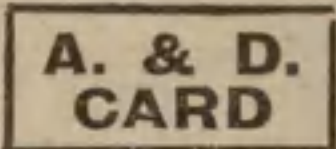


63
G N 36931 Dup

SEP 8 1921

Depington

Registrar, Canadian Convalescent Hospital,
HOSPITAL.
Bear Wood, Wokingham, Berks.



AT _____

A. & D. No. *9817* PL. OF ACTION *53090*

RANK *Pte* UNIT *18th BATT* SICK OR WOUNDED

NAME *Catchart, J.* AGE *20* RELIGION *P.*

PLACE IN HOSPITAL *223 D*

DIAGNOSIS *Shrap hit arm. J. W. Severe*

ADMITTED *12 SEP 1917* FROM *2nd S. G. Bristol*

DISCHARGED _____ TO *Out Mil Depington*

TRANSFERRED _____ ~~*Low Rd + Depington*~~

SERVICE AT HOME *1/2* IN FIELD *1/2*

RESULTS *J.C. fair dressing, pain in*

arm. worse at night. News to

Depington

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

Student

Form DMS 1401

R289 100M 9/3/17.

CANADIAN CONVALESCENT HOSPITAL HOSPITAL.

A. & D.
CARD

AT

A. & D. No. T 3695 PL. OF ACTION _____

RANK Lt Col. 53090 UNIT 18th Battr "A to" SICK OR WOUNDED

NAME Bathcart J AGE 21. RELIGION Presby.

PLACE IN HOSPITAL _____

DIAGNOSIS S.W. Left Arm.

ADMITTED 23-10-17. FROM Oxfordton

DISCHARGED 1/11/17 TO Epsom

TRANSFERRED _____

SERVICE AT HOME 12 months IN FIELD 24 months

RESULTS _____

(See Document Card for M.H. Sheet and other Documents.)

8-8

(P.T.O.)

Name

Cutchcart James. Pte

Rank

Pte

Reg. No.

53090

Unit

18th Bn.

Next of Kin

Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
22-7	to 5th Bn. Royal Fusiliers	G.S.W. 2nd Lt.	D.O.	A5674		5812
11-8	2nd S.F.	Bristol G.S.W. Lt. Col.	D.O.	B425		3/4
13-9	to 6th Bn. Buffs	G.S.W. Lt. Col.	D.O.	B12		2032
2-10	to 1st Bn. M.H. Dragoon	G.S.W. Lt. Col.	D.O.	B28		3026
24-10	to 6th Bn. Buffs	G.S.W. Lt. Col.	D.O.	B47		4342
2-11	to 6th Bn. Buffs	G.S.W. Lt. Col.	D.O.	B54		4906
18-4	to 5th Bn. King's	G.S.W. Lt. Col.	D.O.	B194		16627
25-5	INVALIDED - TO CANADA			B523		9256
				Stub		

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2535.
75M.—9-19.
1772-39-1332.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
B.85.	Mil Shorne.	28-5-16	Defective Vision Adm. whilst on leave from France.
B.107.	Mil, Shorncliffe	30-6-16.	Defective Vision
A 567.	#5. Gen. Romen -	22-7-17	gen. upper L. Extms. Ser.
B425.	2 nd Southen Gen Bristol	11. 8. 17	1 st Lt. Lt Arm Ser.
B12. (2)	24 th Can. Comr. Bear's Wokingham,	3-9-17	" " " L. Arm (20. Dist Regt)
B.28. (1)	20. dit. Mil. Orington Kent	2-10-17	" " " " 20-10-17.
B 47.	Can Comr. Bromley.	24.10.17	" " " "
B 54.	Can Comr. Epsom	2. 11. 17	" " " "
B 944	5 th Can Gen H. Kirkdale Liverpool	18 4/18	1 st Lt L. Arm.
B 2230	Invalided Canada	25 5/18	" " " "

REGT'L NO 53090

H. Q. FILE NO. 649-

NAME Cathcart James

RANK AND CORPS Pte. 18th Bu (Form. 18th Bn.)

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

"lo"

NATURE OF CASUALTY

05948

8-12-16

According to records with unit
no record of casualty.

M. 5812-401

2-8-17

Adm. 5 Gen. Hosp. Rouen July 22nd 1917 GSW. L. arm. ✓

Surname

Christian Name or Names

Reg. No.

Cathcart J.

53090

Rank

Unit

Co.

Troop

Batty

Pte. W.O (8th Batt) 8

Hospital

Date of Admission

(while on leave) Shorncliffe mili.

28. 5. 16.

Transferred

5th Gen Rouen.

Hosp.

22-7-17

2. S. G. H. Bristol

Hosp.

11-8-17

Can. Conv. Bear Wood.

Hosp.

13-9-17

out. mil. Orpingdon.

Hosp.

2-10-17

Diagnosis

Defective Vision

(1) Later Diagnosis (if changed)

G.S.W. upper L. Eytns sev. R.

(2)

" L. Arm. sev. R. add

(3)

Additional Diagnosis: if more than one state present

A.M.D. 2 Dept.

Beh. of D.G.M.S. G.M.F.O. London

DISPOSITION

Date

Dis 30 6 16

REMARKS

C. 6. 13. 6. 16 B 85.

8-7-16 B 107

31-7-17 B 667⁽¹⁾

16-8-17 B 425

17-9-17 B 12(2)

" 5-10-17 B 284

27-10-17 B 47(2)

5-11-17 B 24-2

23-4-18 B 194

29-5-18 B 223

Inv to Canada. 25. 5. 18

10/2

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.	San. Conv. Bromley Kent.	24-10-17
	" " Woodcote PK.	2-11-17
2.	5 C.G. Kirkdale	18-4-18
3.		
4.		
5.		
6.		
7.		

*Name CATHCART, James Rank Pte. Regtl. No. 53090

Original unit 18th Bn Present unit XXX S Age 23 Religion R.C. Fyle Depot 1DD. 10-C-102 Ref. H.Q. ID. 30-C-923

Port, ship, and date of arrival Halifax, Araguay, 4-6-18

Next of kin Father, Wm. Cathcart, Bridgeport, NS.

Address on leave St. Marys, Ontario

Address on discharge St. Marys, Ont

Transportation issued Yes No Date Character on discharge Fair

Previous occupation Shoe merchant, Date and place of enlistment London, Ontario, 22nd October, 1914

Diagnosis P.L.F. Left Arm Date of Medical Boards London, Ont.: 28-8-18

Date.	Remarks	Pt. 2 Order No.
<u>T.O.S.</u>		
<u>25-5-18</u>	<u>No. 1 D. D. from Clearing Depot, and</u>	
<u>7-6-18</u>	<u>Posted to Hpl. Section, and granted furlough to 21-6-18</u>	<u>56</u>
<u>14.6.18.</u>	<u>Granted Subsistance from 7.6.18. to 21.6.18.</u>	<u>58</u>
<u>17-6-18</u>	<u>To London C.M.C.H.</u>	<u>H.S.O. 57</u>

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

Date.

Remarks.

Pt. 2 Order No.

9-8-18.	A.W.L. from 12 Noon. 6-8-18.	114.	114.
11-7-18.	Service Chevrons 4 BLUE Appendix D.D.O.	#	85.
31-8-18.	Returned to L.M.C.H. FROM ABSENCE AT 2.30.p.m. 28-8-18.	136	136
5-9-18.	Posted to Cas Coy from L.M.C.H. Cat. C. 11.	142	142.
13-9-18	Sentenced to 7 days detention and to forfeit 14 days pay for "AWL" from 12 noon 6-8-18 till 2.30 PM 28-8-18.		
	Forfeits 23 days pay under R.W.	148	126
16 9 18	Posted to Hospital Section	151	128
18-9-18.	T.O.S. FROM CAS COY AND ADMITTED TO MIL HOSP 10-9-18.		
	Scabies.	152	154.
19-9-18.	Posted to R.M. Cas Coy from MIL HOSP. Cat C11.	155	155.
23-9-18	Discharged from H.M.S. Medically unfit for further general service. R.O. 668, d/14-6-18, Cat "C2" (PDP)	156	CC 133

MALE

NAME *John Bathcart* *supposed name*

F. P. No. _____ BER. No. _____

CLASSIFICATION _____

PRISON *Mason*

REF. _____

RIGHT HAND

- 1. RIGHT THUMB
- 2. R. FORE FINGER
- 3. R. MIDDLE FINGER
- 4. R. RING FINGER
- 5. R. LITTLE FINGER



LEFT HAND

- 6. LEFT THUMB
- 7. L. FORE FINGER
- 8. L. MIDDLE FINGER
- 9. L. RING FINGER
- 10. L. LITTLE FINGER



LEFT HAND

PLAIN IMPRESSIONS OF THE FOUR FINGERS TAKEN SIMULTANEOUSLY



RIGHT HAND

PLAIN IMPRESSIONS OF THE FOUR FINGERS TAKEN SIMULTANEOUSLY



Bureau of Identification

DEPARTMENT OF POLICE
INDIANAPOLIS, INDIANA

IMPRESSIONS TAKEN BY	AT	PRISON	19
CLASSIFIED AT CENTRAL BUREAU BY		DATE	19
TESTED AT CENTRAL BUREAU BY		DATE	19

NAME _____

REMARKS _____

BERTILLION MEASUREMENTS

HEIGHT	1M	HEAD LENGTH		L. FOOT		COLOR OF LEFT EYE	CIRCLE	about
ENG. HGHT.	5'6 1/2"	" WIDTH		L. MID. F.			PERIPH. Z.	AGE 23 YEARS
OUTS. A.	1M	CHEEK,		L. LIT. F.				U:0
TRUNK		RIGHT EAR } LENGTH		L. FOR. A.			PECUL.	BORN IN
CURV.			WIDTH					

SPACE FOR PHOTOGRAPH

1. m blonde hair Weight 130 Complex fair
2. Large scar above elbow left arm
- 3.

MEASURED AT
PRISONER'S SIGNATURE

DATE

Rank _____ Name **CATHCART James** Reg'l No. **53090**
 Unit **18th Battn.** If in perm. Corps, What Unit? _____ Married or Single **Single**
 Place and Date of Enlistment **London Ont. 22nd October 1914** Place of Birth **Bridgeport, N.S.**
 Name and Address, Next-of-Kin **William Cathcart, Bridgeport, N. S.**

Relationship **Father.**

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship _____

N/E. R.B. No. **4125**
 File R.L. _____
 Category **ban m.v.**

Discharge, Date and Place _____ Reason _____ Character _____

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				
29-4-15	O.C. 18	Arrived per S. Gampson England		29-4-15	Infm Form
18-9-15	" "	Embarked Overseas	Folkestone	14-9-15	" " ✓
7-6-16	" "	Granted 8 days leave from		14-5-16	Part II 23 ✓
13-6-16	18 th	military hospital	Shorncliffe	28-5-16	Cas. List B. 85. { Defective Vision
21-6-16	O.C. 18 th	Transf'd to CCAC on being admitted to military Hosp. Shorncliffe while on leave in England and struck off strength from		28-5-16	Part II 25. ✓
17-6-16	b.c.a.b	Taken on strength	Folkestone	28-5-16	Part # 223 ✓
1-7-16	c.c.a.b	Rep. CCAC ex Shorncliffe	do	30-6-16	PT # 0249
3-7-16	do	P.m.b 1 st C.C.O for P.Y. 4 weeks		1-7-16	PT # 0253 ✓
8-7-16	18 th Bn	Dischgd from Mil Hosp. Shorncliffe		30-6-16	C.L B107

W

Cathcart, J. 53090

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				
19-8-16	bba b	S.P.S on Trans 39 th RB	H	19-8-16	PT# 0344
19-8-16	oc. 39 th Bu.	T.O.S. from b.b.a. b.	West Sandling	19-8-16	Part II 1917
9-11-16	oc. 39 th Bu.	S.O. to 18 th Bu. (oc. 39 th)	W. Sandling	9-11-16	" " 264 J.O.C.
28-11-16	18 th	T.O.S. from 39 th	Field	10-11-16	Part I 54
24-3-17	"	Appt a/l. repl. with pay whilst emp. with 2nd Gen. Entch. Pm.	"	14-3-17	20. (2nd Ent Pm.)
24-3-17	"	Att to 2nd Gen Ent Pm	"	2-12-16	20. (12 of 21, 17)
14-4-17	"	Relinquishes rank on return to 18 th Bn	"	27-3-17	25
31-7-17	"	No 5 General Hoop	Rouen	22-7-17	Ch A567. G.W. Upper L. Examine Lev
16-8-17	"	Adm 2 nd South ^{ern} Gen Hoop	Bristol	11-8-17	C.L.B. 425. GSW Lt arm sev
18-8-17	WORB	T.O.S. from 18 th Bn	B. Shott	11-8-17	PT# 0.140 18 th Pto 58 of 1-5-17
15-9-17	WORB	Ex to b.b.H. Bearwood Wokingham	"	13-9-17	CCB12 GSW Lt arm
4-10-17	WORB	Ex to Ent Mil Hospl.	Osington	2-10-17	CCB28 " "
26-10-17	"	Ex to Gen. Con Hoop.	Bromley	24-10-17	" 44
3-11-17	"	" " " " "	Essex	2-11-17	" 54
29-5-18	"	Invalided to Canada Kirkdale	"	25-5-18	C.L. P. 223 + WORB Pto 129 of 13 6/18

A.F.B. T.O.S. CHECKED
8 FEB 1918
A.F.B. T.O.S. CHECKED

15 NOV 1916

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

AW 12440/247

Name **Cathcart, James**

Surname Christian Name

Regimental Number **53090** Rank **Pte**

Address (in full) **St Marys., Ont.**

Unit **18th Bn**

Original Unit

District where paid **M.D. 1**

Date of Discharge

P. D. P. Filing Number **18-150-1**

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

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments 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		
100 10	2832	19-10-18	33 00	2742	19-11-18	34 10				33 00	67 10
	<i>18th Q 12277 22-2-19 70 -</i>										
	<i>819d 2nd Q 39701 14-3-19 70 00</i>										

Remarks:

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Dec'n No 12440/247 W. S. G. File No 2946-J-5
 Award days at \$.70 per day \$ 420.00
 S. A. months at \$ per mo. \$ \$
 Less P, D. P. Credited \$ 100.10
 \$ 319.90
 Less further debit balance \$
 Net due paid as below 319.90

TO SOLDIER TO DEPENDENT

	0	1	2	3	4	5	6	7	8	9	cu	No	Ch No	Amount
22-2-19		855	12377								70.00			
14-3-19		819	39701								70.00			
8-4-19		948	421426								70.00			
12-5-19		841	4457714								70.00			
			420510								39.90			

R. R. #7,
 St. Mary's, Ont.

[Handwritten scribble]

GEN'L AUDITOR
 Posting checked by
W. A. Mordant
 Date 7-17-17

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Miss Ida Pearn

Name of Soldier

J. Lathcott

L. L. Job 310.—Req. 6574.

PAYMENTS.

530 90 -

180
45
225

pk

Month.	Year.	Cheque No.	Amt.	Remarks.
				15 ⁰⁰ Oct 1-16.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		023877	15	
Nov.		028886	15	
Dec.		K36107	15	
Jan.	1917	545266 A16640	15	
Feb.		F42503	15	15 F42503, came orb.
March		H48524	15	15 ch
April		U807	15	15 L
May		D7212	15	
June		P13832	15	15 "M" P13832 came,
July		G20530	15	B
Aug.		L27976	15	6
Sept.		K34650	15	00
Oct.		Q46436	15	
Nov.		S54829	15	
Dec.		P55565	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

JB

ce

J&P

150

225

225.00

CANADIAN
 ASSIGNED PAY AUDITED
W. Brinks
 AUDIT CLERK
 DATE *15/5/19*

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Miss Ida Pearn*
Address *St. Marys Ont*

By Whom Assigned *Lathcarb J*
Regtl. No. *53090-*
Rank *Pte*
Corps *18th Bn*

Rate *15⁰⁰ Oct 1-16*

2227 2/16 R 2740 PAYMENTS

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



2. 1. 30

OKAY

100

Rank *Pte.* Name *CATHCART James* Reg'l No. *53090*
 Unit *18th Battn.* If in perm. Corps, *l* Married or Single *Single*
 What Unit? *l*
 Place and Date of Enlistment *London Ont. 22nd October 1914* Place of Birth *Bridgeport, N.S.*
 Name and Address, Next-of-Kin *William Cathcart, Bridgeport, N. S.*
 Relationship *Father.*

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

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
1/4	30/4	30	1	30	30	10	30			33			33		
1/5	31/5	31	1	31	31	10	310			3250			3250	160	
1/6	30/6	30		30	30		30			3250			3250	210	
1/7	31/7	31		31	31		310			3250			3250	370	
								<i>260</i>						<i>630</i>	<i>Cy. Exchange</i>
1/8	31/8	31	1	31	31	10	310		320	3404			3404	633	
1/9	30/9	30		30	30		30		364	267			267	5666	
1/10	31/10	31		31	31		310		411 452	523			523	6553	
1/11	30/11	30		30	30		30		497	264			264	9586	
1/12	31/12	31		31	31		310		527 596 645	268 1134			1664	11332	
1-16	31-1-16	31		31	31		310		689 734	262 261			523	14219	
1-2	29-2	29		29	29		290		828 784	261 261			523	16887	
March		31		31	31		310		872 920	262 261			523	19774	
				<i>336</i>				<i>3360</i>	<i>260</i>	<i>37220</i>			<i>17946</i>		<i>Checked</i>

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						

CANADIAN
 ASSIGNED PAY AUDITED
E. M. Bradley
 AUDIT CLERK
 DATE 12/27/19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Oct 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15-</i>			
------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *S-3090*
 Rank *plc* Promoted Reverted Discharge
 Soldier's Name *J. Leathcart*
 Battalion *18th BATTN.*
 Beneficiary
 Relationship
 Address

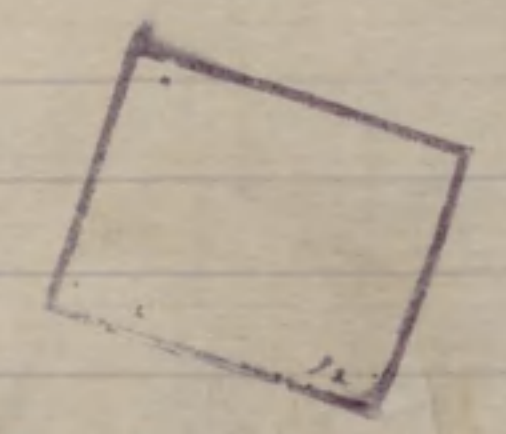
PARTICULARS OF ASSIGNMENT

Name *Miss Ida Pearson*
 Address *St Marys Ont.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec. 31/17</i>			<i>225</i>	<i>225</i>	<i>A/c Closed 30/6/18</i>
<i>Jan 1918 F</i>	<i>62151</i>		<i>15</i>	<i>15</i>	<i>Ret'd per. Araguaya</i>
<i>Feb.</i>	<i>92288</i>	<i>D</i>	<i>15</i>	<i>15</i>	<i>Date 7/6/18 m 7/6/18 10/6/18</i>
<i>Mar</i>	<i>110468</i>	<i>A</i>	<i>15</i>	<i>15</i>	<i>Clerk. G. H. Lubbrook</i>
<i>Apr</i>	<i>7758</i>	<i>L</i>	<i>15</i>	<i>15</i>	<i>MPO 2B issued 10/6/18</i>
<i>May</i>	<i>19430</i>	<i>J</i>	<i>15</i>	<i>15</i>	
			<i>300</i>	<i>300</i>	
<i>June</i>	<i>20489</i>	<i>E</i>	<i>15</i>	<i>15</i>	

M. F. W. 128
 400M.-6-17-1772-39-1141
 L. L. 23320-M. & D. 7888.

CANADIAN
 ASSIGNED PAY AUDITED
W. Binks.
 AUDIT CLERK
 DATE *15/5/19*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

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

M. F. W. 128
400M-6-17-1772-89-1141
L. L. 22320-M. & D. 7483.

11022

CHARGE.

Army Form B. 252.
(See King's Regulations.)

NO 5 CANADIAN GENERAL HOSPITAL

18th Btn.

**BATTERY
SQUADRON
TROOP or
COMPANY**

CHARGE against No. 53090

Place Pte (A/L/cpl) CATHCART J.
Liverpool

Date of Offence 22-5-18

OFFENCE While a hospital
patient, absent without
leave from 9.30 pm Roll
call 22-5-18 until report-
ing to ward Master, 3.00
pm 23-5-18
17 hours & 30 minutes

Names of Witnesses:—

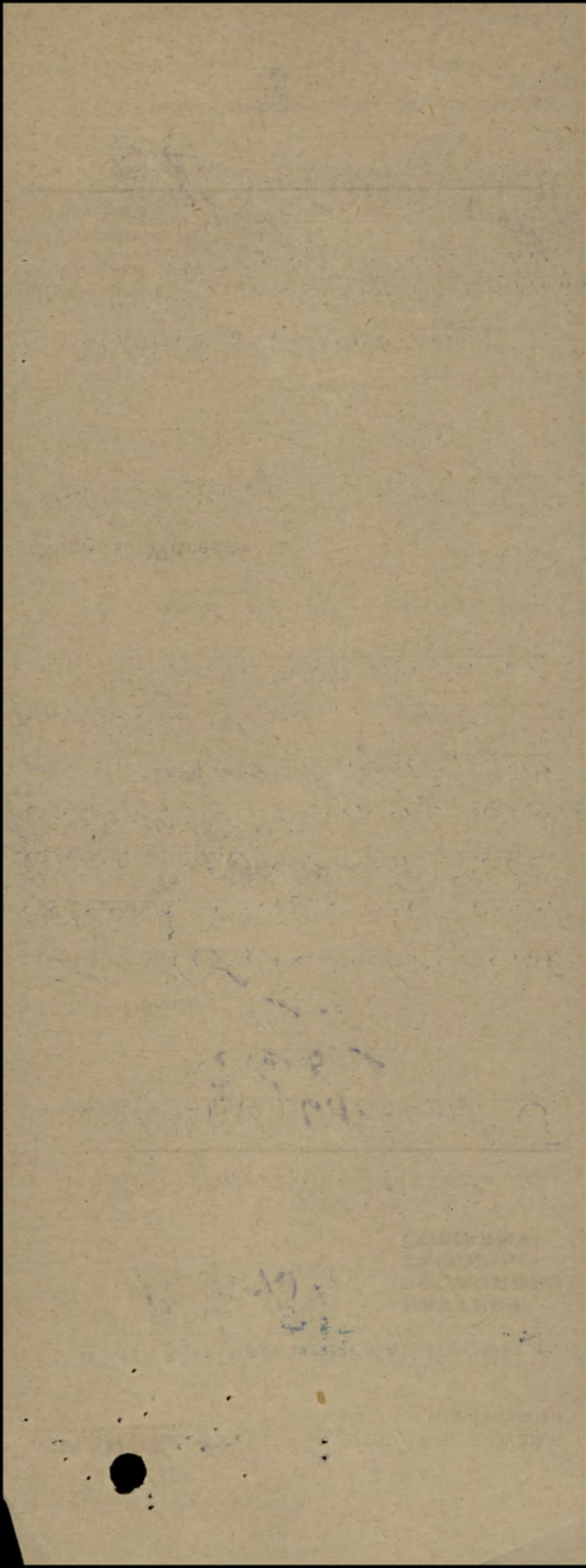
Cpl Topley J C.A.M.C

Forfeits 2 days pay

Punishment } Under Royal Warrant
Awarded } forfeits 2 days pay

By whom }
Awarded } [Signature]

Commanding Battery, Squadron, Troop or Company.



Casualty Form—Active Service.

Regiment or Corps **18th Battalion, C.E.F.**
 Rank **Pte.** Surname : **CATHCART** Christian Name **James**
 Religion Age on Enlistment..... years months
 Enlisted (a) **22 Oct 1914** Terms of Service (a) **Dur. of War** Service reckons from (a) **Enlistment**
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)..... **Shoemachor**
 or Corps Trade and Rate.....
 Occupation **(2 sheets) Sheet No. 2** Signature of Officer.....

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
			Embarked ...		
			Disembarked..		
27-3-17	2nd Can Bn	Re-linquinishes acting rank of Lance-Corporal, with pay, whilst employed with 2nd Can. Entrench. Bn. on proceeding to 18th Can. Bn.	In the Fld.	27-3-17	Nav. Roll. Pt. II Order 25, 14/4/17.
31-3-17	18th Bn.	Rejoined unit	In the Fld.	27-3-17	B.213. DES. 281, 9/4/17.
21-7-17	18th Bn.	Wounded	In the Fld.	20-7-17	Letter 21/7/17. DES. 304
23-7-17	No. 5 Gen	G.W. VIII. 1. L.	Adm. No. 5 Gen	23-7-17	W. 3034.
10-8-17	A.T. Aberdonian	G.W. am L. (Posted to West. Ont. Regtl. Depot, Bramshott)	Adm. A.T. Aberdonian	10-8-17	W. 3083 (Can. Sect. No. 3654) Pt. II Ord. 58, 21/8/17.

(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) Signaller, Shoeing-Smith, &c.
 W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c. 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
18.8.17	WORLD	T.O.S from 18 th Bn	Beckett.	26 11 8-17	PH DO. 140
		<p style="text-align: right;"><i>W. P. Charters</i> LIEUT: FOR LT: COL: I/O RECORDS, C.O.M.F.</p>			
25/5/18	Taken on strength No. 1 District Depot <i>London D.O. 56</i>				
		<p style="text-align: center;"><i>F. A. Verman</i> J. O. C. NO. 1 DISTRICT DEPOT</p>			
7-6-18	C.O.#1 D.D.	Posted to Hospital Section and granted furlough from 7 7-6-18 to 21 st 6/18			D.D.O.56
14-6-18	C.O.#1DD	Granted subs. from 7-6-18 to 21-6-18			D.D.O.58
17-6-18	C.O.#1DD	Admitted to London C.M.C.M.			H.S.O.57
11-7-18	C.O.#1 DD	Service chevrons 4 blue	Appendix		D.D.O.85
		<p style="text-align: center;"><i>[Signature]</i> Lieut. for Lt.-Colonel Commanding No.1 District Depot</p>			

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.	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.)
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."

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

Proceedings on Discharge.

12-9-33

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

No.	53090.
Rank	PRIVATE.
Surname	CATHCART.
Christian Name	James.
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	18th Battalion. C.O.M.F.
Date of Discharge	SEP 23 1918 D.O. #156 d/20.9.18
Place of Discharge	LONDON, ONT.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	25. years months.
Height	5 feet 6 inches.
Complexion	FAIR.
Eyes	BLUE.
Hair	LIGHT.
Trade	STUDENT.
Intended place of residence	KATTEN LODGE.
(To be given as fully as practicable.)	SYDNEY NOVA SCOTIA.
2. The above-named man is discharged in consequence of Being medically unfit for further general service R. O. 668 d/14. 6. 18. Cat. "C" II	
<small>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.</small>	
3. Conduct and character while in the service have been, according to the records, etc.	
Fair	
<small>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.</small>	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	
STUDENT.	

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

W.P. Comp
7/2/19
[Signature]

K.C. Comp
2/11/19
16/3/19

E. R. J.

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

nil

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

6. Medals and Decorations.....

nil

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)..... LONDON, ONT.

SEP 23 1918

(Date).....

Wm. M. Livingston

O. C. Discharge Section, No. 1 D. D.
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)..... LONDON, ONT. *James Cackey* (Signature of Soldier.)

SEP 23 1918

(Date)..... *G. Reddon* (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.

..... *James Cackey* (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed)..... 3 years 335 days.

Total 3 years 335 days.

11. Confirmation of Discharge.

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

(Place)..... LONDON, ONT.

SEP 23 1918

(Date).....

Wm. M. Livingston
O. C. Discharge Section, No. 1 D. D.
(Signature)

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.)

None
James Cackey

DUPLICATE

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

MEDICAL HISTORY of

Surname CATHCART Christian Name James.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Budgeport County Nova Scotia, Canada.
Examined ... (on 22nd day of October 1914.
at London, Ont.)
Declared Age ... 22 years ... days.
Trade or Occupation ... Shoe Merchant.
Height ... 5 feet, 6½ inches.
Weight ... lbs.
Chest Measurement { Girth when fully Expanded. 36 inches.
Range of Expansion 4½ inches.
Physical Development ... Good
Vaccination Marks { Arm ... Right Left
Number
When Vaccinated ...
Vision ... { R.E.—V=
L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease ... { None
(b) Slight defects but not sufficient to cause rejection ... { None

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

Enlisted ... (at _____ on _____ day of _____ 1914.)

Joined on Enlistment ...	Corps.	Regtl. No.
	<u>18th Battalion</u>	<u>53090</u>
Transferred to ...	<u>C.C.A.C.</u>	
	<u>18th Bn.</u>	

Became non-effective by _____
on _____ day of _____ 1914.

(Signature) _____
(Rank) _____

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

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

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
19. 12. 14	Vaccinations. D. H. Hogg.
9. 11. 14	Inoculations "
19. 11. 14	" "
30-6-16	One months Training W. McKeown. LT.Col.
16-8-16	Monks Horton. Fit. Jas. Puller. Capt. EP
<i>June 1917</i>	<i>J.P.B. R.L. 6. 4. 18</i>

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

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				
Mil. Hos. Shorncliffe	28	5	16	11	6	16	Defective Eyes	14	Transferred	
Manar House	11	6	16	30	6	16	"	19	To C.C.A.C.	D. McLauncheon Major

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

Reserved for M.H.C.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at _____ on the _____ day of _____ 191_____

Members of the Board:—

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

Dated at _____ this _____ day of _____ 191_____

Signatures of the Board

President.

Regt. No. **53090** Rank **L/C** Surname **CATHCART** Christian Name **JAMES.**
 Unit or Corps—(a) Overseas from United Kingdom **18th Battalion** (b) In United Kingdom **4th Reserve.**
 Born at—Town **LONDON** County or Province **ONTARIO** Country **CANADA**
 Date of Birth—Day **8th** Month **AUGUST** Year **1893** Age **24** yrs. **5** months.

Joined at **LONDON ONTARIO CANADA** Date **22nd OCTOBER 1914.**

Former Trade or Occupation **STUDENT.**

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

Scar 1½" long 2" above left ear.

Height—feet **5** inches **8** Colour of eyes **BLUE.**

Signature of Soldier (for identification purposes) *James Cathcart*

Medical Report.

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

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

Group the disabilities, placing those resulting from separate causes in separate groups.	Disabilities Group (a).	PARTIAL LOSS FUNCTION LEFT ARM.
	Disabilities Group (b).	N.A.
	Disabilities Group (c).	N.A.

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i) As to Group (a) above.	G.S.W. LEFT UPPER ARM. FLESH SEVERE NO FRACTURE.	LENS	July 19th 1917.
(ii) As to Group (b) above.	N.A.	N.A.	N.A.
(iii) As to Group (c) above.	N.A.	N.A.	N.A.

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

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

(i) As to Group (a) above?	No yes.	If yes, has Active Service aggravated it?	N.A.
(ii) As to Group (b) above?	N.A.	If yes, has Active Service aggravated it?	N.A.
(iii) As to Group (c) above?	N.A.	If yes, has Active Service aggravated it?	N.A.

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

(i) As to Group (a) above?	Yes
(ii) As to Group (b) above?	N.A.
(iii) As to Group (c) above?	N.A.

5. If a cause of disability was an injury received on Active Service, was it received—

(i) While on duty? **Yes**(ii) While off duty? **No**(iii) Was a Court of Inquiry held? **No**(iv) Where? **N.A.**(v) When? **N.A.**(vi) Opinion of the Court? **N.A.**

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

Shrapnel wound left upper arm. Sent through usual channels and finally arrived at Epsom 1-11-17. Arm healed up in two months time. M.H.S. shows 1-8-17 - 10% flexion of elbow and fingers contracted and in fact but little movement of arm. Has steadily improved. X-Ray Report - negative. Complains that he has pain on trying to fully extend and flex elbow. The scar is painful and very tender to touch. Has had extension splint on arm for about two months. Some improvement. Massage for four months.

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

Healthy looking man. Scar on outer aspect upper left arm "5 long, extending down and ~~inward~~ inward about region of insertion of deltoid. Deep extending to and adherent to the bone. Has fair movements of elbow - slightly limited on full extension and flexion. Abduction shoulder can be done to level of shoulder. All movements weak. Finger movements slow but full and yet very weak. All muscles respond to Faradism. Splint will have to be worn periodically for some time to improve extension. Action of arm is weak and slight resistance hinders any movement. Other systems normal.

8. OPERATION. (i) Was one performed? **Yes.**(ii) If so, state what. **Two. Drainage for sepsis.**(iii) Was one advised and declined? **No.**

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

9. (i) Is there loss or decay of teeth attributable to Active Service? **Yes.**(ii) If so, describe. **Decayed, 1 root putrescent.**

10. DO YOU RECOMMEND:—

(a) Fit for duty? **No.**(b) Fit for base duty? **No.**(c) Invalid to Canada? **Yes.**(d) Discharge from the Service as permanently unfit? **No.**Date of Report **February 24th** 191 **8**Signed **L.M. Rice Major CAMC**

Officer in medical charge of case.

Station **M.C.H., Epsom.**

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

S.R. JOHNSTON**Capt. CAMC for**Dated at **Military Convalescent Hospital, Epsom**, Station, on **1 MAR 1918** 191

* Delete if inapplicable.

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

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

11. Is the disability fully indicated in Part I (1)? **Yes.**
If not, indicate it.12. Is the cause of the disability fully indicated in Part I (2)? **Yes.**
If not, indicate it.13. Was the disability caused or aggravated by—
(a) Negligence of the Soldier { Caused? **No.**
Aggravated? **No.**
(b) Misconduct of the Soldier { Caused? **No.**
Aggravated? **No.**14. THE ENTIRE DISABILITY. Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%).
One hundred per cent.15. THE PENSIONABLE DISABILITY—(see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, $\frac{1}{2}$, $\frac{2}{3}$, $\frac{3}{4}$, or all).
All.16. Permanency of the Pensionable Disability estimated next above in (15). **No.**
(i) Is it permanent? **No.**(ii) If not permanent, what is its probable minimum duration (in months)? **Six months.**17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? **Not applicable.**

18. Remarks.

Due to the pain in the scar and loss of function of the left arm the soldier is unfit for any kind of duty.

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

Classification for the Military Hospitals Commission.

G.Date of Board **18-3-18**

Signatures of the Board

A.H. Cameron-Smith Major.

President.

H.C. Wallace, Capt.Station **M.C.H., Epsom.**Approved **[Signature]** Major, G.A.W.O. A.D.M.S.Dated at **for A.D.M.S., Canadians, London Area** Station **26 MAR 1918** 191

OPINION OF MEDICAL BOARD

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

~~Disagree in Section 9. Forward elevation of arm at shoulder joint thro arc of 450 limited 1350 backward elevation through arc of 300 limited 100 would add in 9. Power of left hand grip diminished 300~~

~~Disagree in section 17 - Cat. C-11.~~

24. A. State specifically whether treatment is required or not.
(Any further recommendations as to disposal e.g. Employment or Vocational Training, may then be made but the method of disposal must be carefully explained to the man.)

B. It is certified that the man:

(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.)

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

Placed in Category C-11

Before signing the Senior Medical Representative of the Medical Board will read the statement signed by the man and differing opinions regarding Sections 9, 10, 11 and 12, as recorded in Section 23, to the man and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 9, 10, 11 and 12 only, recorded in Section 22, the man is dissatisfied with the statement previously made, the remarks of the Medical Board will be added here.

Place London, Ont.

G. C. BRINK, Capt. C.A.M.C.

Senior Medical Representative.

Date 29-8-1918

C. W. SINCLAIR, Capt. C.A.M.C.

Member.

26. 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. I have had read and explained to me the consequences of such refusal as provided for in Order in Council, P.C. 1366, Clause 20.

Witness Signed

(Should the refusal of the man to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of Medical Officers should so state.)
(Cont'd. from page 2)

~~Sensation throughout arm, forearm and hand, is normal. Movement of wrist, fingers and thumbs normal. About 40% general loss of power. Advise C-111~~

Hadley Williams. Lt. Col. C. A. M. C.

Place Senior Medical Representative.

Date Member.

APPROVED BY

APPROVED BY

Unit Medical Director, Unit, S.C.R.

Director of Medical Services, S.C.R.

Date

Date

DEPARTMENT OF SOLDIERS' CIVIL RE-ESTABLISHMENT

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL REPRESENTATIVES, S. C. R.

- For use in accordance with Instructions laid down in General Procedure—Medical Branch of this Department. Later amendments should be carefully noted.
- 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.
- The Medical Representative in charge of the case is responsible for the proper completion of Sections 1 to 21 of this Form, and will obtain the signature of the man to the "Statement", Page 3. The Senior Medical Representative of the Board of Medical Officers is responsible for the proper completion of the Sections reserved for recording the "Opinion of the Medical Board."
- In answering the questions, Medical Representatives, S. C. R., will carefully obtain and record the man'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 man concerned, from witnesses, or from documents, regimental or otherwise.
- Special care is required in answering question 9. Please read the questions carefully. All questions must be answered.
- If space provided under any Section is insufficient, add another sheet. Such sheets must be initialed by the Medical Board. A note will be made of attached papers by the Medical Board under the Section, "Opinion of the Medical Board."
- Under no circumstances may information other than that in sections 9, 10, 11 and 12 be communicated to the man, directly or indirectly.
- 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 28-8-18

- (a) Former Unit No. 1. D.D. (b) Regimental No. 53090 (c) Rank L/Cpl.
(d) Surname CATHCART (e) Christian Name JAMES CHESTER
(f) Home Address St. Marys, Ont.
- Age last birthday 25 Date of birth 8-8-1893
- Enlisted at London, Ont. on 22-10-1914
- Personal description:
(a) Height 5'6" (b) Weight 132 (c) Complexion Fair
(d) Colour of hair Light (e) Colour of eyes Blue (f) Identification marks
Irregular scar 1" above left ear
- Next of kin and Address
- Former trade or occupation Student

7. (a) Service: (The information should be secured from personal documents, but if documents are not available, the man'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
<u>3</u>	<u>311</u>

PERIODS

	From	To
<u>18th. B'n.</u>	<u>22-10-14</u>	
<u>In Canada No. 1. D. D.</u>		<u>28-8-18</u>
In England		
In France		
In other parts		

- (b) Date of Discharge Pension No. Pension Class
- Original disease or injury Tissue laceration middle left arm.
(a) Date of origin July 1917 (b) Place of origin Lens, France
(c) Cause Gunshot wound shrapnel

This Form is to be completed in quadruplicate and forwarded, together with all other available Medical Documents, to the Unit Medical Director for approval and disposal as follows:

- Secy. B.P.C., Ottawa.
- District Office, B.P.C.
- Chief Inspector, Dept. S.C.R.
- Unit Medical Director, S.C.R.

9. Disability for which the man was discharged from the Navy or Army

10. Present Disability: (Here state the exact nature of the disability resulting from the disabling condition:—(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 cause for restriction in choice of occupation.)

Partial loss of function of left arm. (This is present condition) States he is unable to fully execute movements of left arm. Has no pain or other complaints. Left arm presents, in centre of lateral aspect a large irregular scar about 5" x 1 1/2" running diagonally across arm below insertion of deltoid muscle. Scar is healed. Adherent to bone and moderately tender is lower portion. Circumference shoulder joints equal 16 1/2"

11. Present Condition: (a) (Before completing this Section the man 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 12. Describe all abnormalities, anatomical and functional, contributing to present disability. Objective findings are to be stated first, then subjective findings.)

arm centre right 10 1/2" left 9 1/2" movement left arm from shoulder-forward through arc of 90°. Backward through arc of 40° - abduction through arc of 80° limited 100°. Anterior and posterior movements limited by pain in scar. Abduction by muscular weakness. Elbow joint - flexion forearm through arc of 90° more than this causes pain in scar. Extension forearm normal. Supination and pronation complete.

(b) Has the man now any affection of the following systems not described in Section 11 (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 Genito-Urinary NO
(If pulse rate abnormal B.P. will be taken.) (Albumin and sugar will be excluded.)

Special Senses..... Respiratory System NO Integumentary.....

Disturbances of Mentality..... Digestive System NO Muscular.....

Osseous and Joint System..... Any other general condition No except as below.

Skin Has slight exzematous rash distributed over penis and groin. Patches are small in size. mild, chronic type. No disability.

12. History (a) (of condition referred to in Section 11 a.)

Wound not infected., Discharged for several months. Healed and broke down again in Sept. 1917. In October arm held at right angle with only 10% mobility. Fingers tightly flexed. In Nov. movements of elbow fair.

(b) (Here give a complete history, with dates of origin, of any affection from which the man has suffered, either prior to, or since enlistment, and not included in answer to Section 12 (a) above.)

Abduction through 90°. Full flexion and extension of fingers. but marked loss of power. All muscles respond to Faradism. April 1918 - Fingers and wrist move fairly well. Flexion of fingers limited. Arm kept on angular splint from July 1917 till Nov. when adkistable splint was applied and passive motion was instituted. Use of splint discontinued in April 1918. b. Moverate left varicocele causes on symptoms. No disability

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

13. (a) Did the disabling condition have its origin before enlistment? N.A.

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

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

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

15. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one Indefinite, but lessening.

16. Treatment: If the man has received any treatment since discharge from His Majesty's Forces.

(a) Where treated 18th. Casualty clearing station and 5th. Gen. Hosp. France

(b) Duration of treatment: from..... to.....

(c) Nature of treatment Wet dressing to wound an angular splint to arm British Hosp. Bearwood Hosp. No special treatment Ont. Mi. Hosp.

(d) Results of treatment Orpington in Oct. Dressings discontinued. Passive motion massage and electricity. M.C.H. Epsom treatment continued. Adjustable

17. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? splint applied 5th. Can. Gen Hosp. Kirkdale, similar treatment L.M.C.H. London, Ont. No special treatment. Specialists report attached Page 4.

Is further treatment in Hospital likely to be of material benefit - No

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

(b) Name of Course in Industrial training, if any, taken by the man.....

19. (a) If the man requires any orthopaedic accessories, state exact requirements.....

(b) If any such have been supplied, state date.....

20. (a) Is the identity of the man satisfactory?.....

(b) Has the discharge certificate been presented?.....

21. Recommendations: Category C. 111

J. G. Ross, Capt. C. A. M. C.

Signature of Medical Representative by whom the case is brought forward.

STATEMENT OF THE MAN

22. (Sections 9, 10, 11 and 12 are to be read to the man, and either "satisfied" or "not satisfied", struck out.)

I, the undersigned, James Cathcart. have heard read the description and history of my disability, and present condition, and am satisfied (or not satisfied) with it, and have not withheld any information concerning any affection from which I suffered, either prior to, or during service. (If dissatisfied, statement should follow.)

I complain, in addition of:.....

James Cathcart.

Signature of man examined.

MARRIED OR SINGLE *S*

PLACE OF BIRTH *Bridgeport, N. S.*

NAME AND ADDRESS OF NEXT OF KIN *William Cathcart*
Bridgeport, N. S.

RELATIONSHIP OF NEXT OF KIN *Father*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Relinquish Acty Rank of 2nd Lt. with pay from 27/3/17 B.O. 25. 14/4/17</i>	<i>27/3/17</i>	<i>B.O. 25-74-2 14/4/17</i>

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *53090* RANK *1st Lt. Plc.* NAME *Cathcart James*

IF IN PERM. CORPS | UNIT *18th Bn* TRANSFERRED TO *b.c.a.c.* DATE *12/7/16* AUTHORITY *Do as 2/6/16*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *39th Res* DATE *1/12/16* AUTHORITY *Do as 19/1/16*

PLACE OF ATTESTATION *London ent* TRANSFERRED TO *18th Bn* DATE *16.12.16* AUTHORITY *Do as 1/16*

DATE OF ATTESTATION *October 22nd 1916* TRANSFERRED TO *W.O.R.O.* DATE *1/11/17* AUTHORITY *1. Rose*

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1st October 1916* *12th. 26th 20/19*

PAYABLE TO *Miss Ha Pearl St Mary's Oak Ave.* RELATIONSHIP *Daughter*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4	ASSIGNED PAY	OTHER CHARGES				TOTAL DEBITS	CREDIT	DEBIT				
			\$	C.			\$	C.			\$	C.																		NO.	DATE	NO.	DATE	NO.	DATE
<i>Mar 31</i>			<i>336</i>				<i>3360</i>								<i>260</i>	<i>27220</i>																			
<i>Apr 30</i>	<i>30</i>	<i>1.00</i>	<i>30</i>		<i>30</i>	<i>10</i>	<i>3</i>								<i>33</i>	<i>936</i>	<i>187-4/6 1006</i>	<i>27/4/17</i>							<i>261</i>	<i>261</i>			<i>522</i>	<i>22552</i>					
<i>May 31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>310</i>								<i>3410</i>	<i>1086</i>	<i>13 632, 135</i>								<i>256</i>	<i>9734</i>			<i>9990</i>	<i>15972</i>					
<i>June 30</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>30</i>								<i>33</i>																				
<i>JULY</i>																																			
<i>1-31</i>	<i>31</i>		<i>31</i>		<i>31</i>	<i>10</i>	<i>210</i>								<i>3410</i>																				
<i>1-31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>310</i>								<i>3410</i>																				
<i>Sept 30</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>30</i>								<i>33</i>																				
<i>Oct 31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>310</i>								<i>3410</i>																				
<i>Nov 30</i>	<i>30</i>		<i>30.00</i>		<i>30</i>		<i>300</i>								<i>33</i>																				
<i>Dec 15</i>	<i>15</i>		<i>15</i>		<i>15</i>		<i>150</i>								<i>1650</i>																				
<i>Dec 16</i>	<i>16</i>		<i>16</i>		<i>16</i>		<i>160</i>								<i>1760</i>																				
<i>Jan 21</i>	<i>1.00</i>		<i>3410</i>												<i>3410</i>																				
<i>Feb 28</i>	<i>1.00</i>		<i>3080</i>												<i>3080</i>																				
			<i>129</i>												<i>260</i>	<i>72960</i>																			

Checked *Edward*

Checked *H. Dutton*

Checked *Carroll*

J.R.B.

C.I.

53190

Ste

Cathcart James

At 15⁰⁰

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	c.						\$	c.																
Nov 20	1-13	1 ⁰⁰	14	30					260	739 60					5 17	12 34	266 19	174 46	75	17 92	551 08	188 52			Apptd acting 1/1/17 with 2 hrs Rev. B.O. 20. 27.3.17.		
Dec 14-31	1 ⁰⁰	20	70						35 -										15		30 71	192 81	45 -		Relinquish Acty. Rank of Lt Col with pay from 27/3/17. 30.25 14/4/17		
Apr 30	1 ⁰⁰	34	50						34 50		3 4/4			2 62	1	15	1 75	17 62	2 07 94			2 07 94			Overpaid 35 days @ 5 ⁰⁰ 1.75		
May 31	1 ⁰⁰	34	10						34 10	55	27/4			2 62		15		17 62	2 24 42			45	179 42				
June 30		33	-						33 -	106	14/5	162	2/6	2 68	5 35	15		23 03	2 34 39			45					
July 31		34	10						34 10							15		15 -	2 53 49								
Aug 31		34	10						34 10	226	19/6			2 68		15		17 68	2 69 91			45	224 91				
Sept 30		33	-						33 -	291	2/7			2 67	15	15 87	20 31	21 90	17 93	3 100	19 67	22 54	280 37	45 -			

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SER. ALLG. ENG.
1917									280 37	45	
Oct		34 10							15	299 47	
Nov 30	3 days at Pe. 1 ⁰⁰	34 10		Can. MP					15	299 47	
Nov 30	PP	33		M. 19-11	9 73				15		
Dec 31		34 10		band					15	326 84	
		67 10			9 73				30		
Jan. 31		34 10		band					15		
				Defects 1 day pay a.w. 2/1/17		1 10					
				4/1/17 work							
				AR 463 for black Epsom	9 73						
				AR 7261 28/1/17 ✓ ✓	9 73						
				AR 800 3/10 OR M.H.	4 87						
				AR 252 10/17 black Epsom	4 87				15	315 67	45 ⁰⁰
		34 10			29 20	1 10					
Feb. 28		30 80		b.o.p.					15		
				AR 1261 4/1/18 black Epsom	9 73						
				AR 779 17/17 black Epsom	2 43				15	319 28	
		30 80			12 16				15		
March 31		34 10		band							
				AR 737 5/1/18 black Epsom	14 60						
				AR 15540 5/3/18 ✓	9 73						
				AR 16989 7/1/17 ✓	9 73						
				AR 16985 20/3/18 ✓	4 87				15	255 65	135 ⁰⁰
		34 10			8 29 93						

CANADIAN
ASSIGNED PAY AUDITED
E. B. Bradley
AUDIT CLERK
DATE 18/3/19

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: **CATHCART James**
NUMBER: **53090**

EFFECTIVE DATE: **1/10/16.**
AMOUNT: **15⁰⁰**

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Privats

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

**Miss Iva Pearm,
St. Mary's Ont.
Stopped off. 1-5-1918.**

UNIT AND TRANSFERS
ORIGINAL UNIT: **18 Bn**
DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
Request.	1/11/17	1/3/19	Woods.
		2/2/19	Can. Section

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
14/1/16	2076	La Hare	436				
26/7/16	2076	For 34 days pay	3740				
		AW 22/5/18					
		Spent 2 days + 2 days (Endorsed)					

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: **Discharged Canada. 1/5/18. 12/2/19. 3/13/18 Ep/low**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal. Forward								255 65	135	
April 30	Ptes Pay	33		Can. Pay				15	286 59	135	
	Sub on Def Pay. to 31-3-1918	1294							284 16		
				AR 91090 23/4/18 5/20/18	243						
				Endorsed on L.P. 6.	243			15			
May				AR P2205 7/5/18 5694 End	243						
				v P3516 21/5/18	243				279 30		
					486						
June				Sp DN	333 14				Checked 4616		
					233 14						
July 19				AW 10 days depr + deprived of 24 days pay for 2076 MAT 26/7/16		37 40			876		
				Total 34 days Obs. 966AC July 16		37 40					
				AWAR - 14/11/16 for La Hare	436						
				AWAR 22/5/18 AW 22/5/18 22/5/18							
				To rft 2 days pay + 2 days		440			nil		

**CANADIAN
ASSIGNED PAY AUDITED**

E. S. Bradley
AUDIT CLERK

DATE **10/3/19**

1.8
Ba
F.
No
As.

