NAME CHAPMAN GLYMALTER cpl REGT. NO. 69116 UNIT C.A.M.C. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	2				DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)				15167	
2	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
2	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
2	COMPANY CONDUCT SHEET (M.F.B. 208A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med. Unfit
	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)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
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1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	C.D.3.					
2	A.F.B.241					
	[illegible]			403	547	
	[illegible]					2
	[illegible]					
	[illegible]					23 — 1
2	[illegible]					15 — 1
1	[illegible]					11 — 1
	[illegible]					

#263 2nd Bn R3A1 D 783

6916

ATTESTATION PAPER.

No. 75

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Guy W. Chapman
2. In what Town, Township or Parish, and in what Country were you born?	Sackville N.B.
3. What is the name of your next-of-kin?	Douglas Chapman
4. What is the address of your next-of-kin?	Oakville N.B.
5. What is the date of your birth?	April 25 1895
6. What is your Trade or Calling?	Laborer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
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

G W Chapman (Signature of Man).

J Woodford (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Guy W. Chapman, 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.

G W Chapman (Signature of Recruit)

Date Nov 9th 1914. J Woodford (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Guy W. Chapman, 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.

G W Chapman (Signature of Recruit)

Date Nov 9 1914. J Woodford (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 St Johns P.Q., this 9 day of Nov 1914.

F A Elliott Capt (Signature of Justice)

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

F A Elliott Capt (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of Guy Walter Chapman on Enlistment.

Apparent Age 19 years 7 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. 7 ins.
Chest measurement.	Girth when fully expanded	34 ins.
	Range of expansion	4 ins.
Complexion		Light
Eyes		Blue
Hair		Light Brown
Religious denominations.	Church of England	Yes
	Presbyterian	
	Wesleyan	
	Baptist or Congregationalist	
	Other Protestants (Denomination to be stated.)	
	Roman Catholic	
	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 Nov 18 1914. L. M Curie Capt

Place St John N.B. 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.

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

A Glynn Lewis Major for Wise (Signature of Officer)

Date Nov. 18th 1914. Com 26th Batt

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Issued,
Class. A. No. 78502

THIS IS TO CERTIFY that No. 69116 (Rank) Cpl.

Name (in full) Guy Walter Chapman enlisted in

the 26th Canadian Infantry Battalion

CANADIAN EXPEDITIONARY FORCE at St John N.B. on the 9th

day of Nov. 19 14

HE served in 26th Batt. Canada & England 2nd Batt France, C.A.M.C. England.

and is now discharged from the service by reason of Demobilization. Medically unfit for General Service ~~Medical Unfitness~~.

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

Age 24 yrs

Height 5'-9"

Complexion Fair

Eyes Blue.

Hair Lt Brown.

G W Chapman
Signature of Soldier.

Marks or Scars Nil

Date of Discharge

Dispersal Station "B" JUL 18 1919 Military District No. 6

O. C. Dispersal Station "B"
Issuing Officer.

Capt.
Rank

HALIFAX, N.S. JUL 12 1919
Date 19

NB- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL. OTTAWA, CANADA.

M.F.B. 39A.

MEDALS & DECORATIONS

1945 Star

AUTHORITY

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

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and liable to usual military discipline, as if on the strength of a unit.

3.—That wearing of uniform renders him

Triplicate

69116

No.

Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Guy W Chapman
2. In what Town, Township or Parish, and in what Country were you born?..... Lakeville NB
3. What is the name of your next-of-kin?..... Douglas Chapman
4. What is the address of your next-of-kin?..... Cookville NB
5. What is the date of your birth?..... April 15th 1895
6. What is your Trade or Calling?..... Lumber
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. No
    If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

Guy W Chapman (Signature of Man).

J Woodford (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Guy W Chapman, 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.

Guy W Chapman (Signature of Recruit)

Date Nov 9th 191 4 J Woodford (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Guy W Chapman, 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.

Guy W Chapman (Signature of Recruit)

Date Nov 9th 191 4 J Woodford (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 St John NB this 9th day of Nov. 191 4

J H Elliott Capt (Signature of Justice)

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

J H Elliott Capt (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of Guy Walter Chapman on Enlistment.

Apparent Age 19 years 7 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. 7 ins.

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

Complexion Light

Eyes Blue

Hair Lt Brown

Religious denominations.
- Church of England Yes
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- 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 Nov. 13 1914 — L McCurrie

Place St John N B — Capt

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.

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

A Guthrie Maj Lt Col (Signature of Officer)

Date Nov 13 1914 Commd 26 Batte

(6490) 1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. [illegible] I.

W.S.B. Class "A"

3883

Army Form B. 103.

Casualty Form—Active Service.

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

Regiment or Corps 12th Res. Battalion

Regimental No. 69116. Rank Pte Name Chapman. G. W.

Enlisted (*a*) _____ Terms of Service (*a*) Period of War. Service reckons from (*a*) _____

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
20/12/15	Hdqrs. 10th. CR. 2.B.	Transferred to 2nd. Battalion in France	Shorncliffe	21/12/15	
1/1/16.	2nd Bn.	Taken on strength.	Can. Base.	22/12/1915.	Pt. 2. Orders No. 1.
9/1/16	do	Arrived at Unit	Field	3/1/16	B213. D.C.S.236.
18.6.16.	1.C.7a.	Shell Shock adm^d from	I.D.R.S.	13.6.16.	A36 " 324
"	2.C.7.A.	do " 13/6/16. "	To Duty	15.6.16	" " 331.
18.7.16	1st Canadian Mtr Battery	Attached 1st C.T.M.B.	" Field	21.6.16	Nominal Roll " 337.
5.8.16.	1st C. Divisional Coy	Adm. By order of A.D.M.S.	1st C.D.C. Coy.	1.8.16	A36 " 344 dated 14-8-16
13.8.16	H.S. Camerons	Debility To	England.	13.8.16	W3083 Pte Hodgson dated 14.8.16

SEP 1916

Mason Lt
ASST. ADJ. 12th RESERVE BATTALION C.E.F.

LIEUT.
FOR LT COL.
A.A.G.

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Taken on Strength C.C.A.C. Pt. II D.O. No. 349-22/8/16			J. Makler St for ob CCAC
Hastings 14/2/17		ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO CCH Epsom 2/2/17 PART II D.O. No. 69-6 9-2-17			
14.2.17	Epsom.	attached for duty	Epsom.	14.2.17	PT2 Do. X45
19-5-17	do.	Taken on Strength.	do.	19-5-17	PT2 Do 139.
11.11.18	—"—	aptd a/cpl with pay.	—"—	17.5.18	—"— 31.5.
2/7/19	CMCH.	S.O.S. om 7c to CE 7. Pt II DO 186 July 2/19	Epsom		[illegible]
		Embark RMS-Carmania Liverpool 5.7.19 [illegible] Capt. & Adjt.			
5.7.19		T. O. S. No. 6 D. D. from O/S and posted Disp. Ctr "B" Hfx. D.O. 204 D.O. 204			
18-7-19		S.O.S. on Discharge [illegible] Lieut. Officer i/c Records No. 6 D.D.			

C.A.D.C. 5009A

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

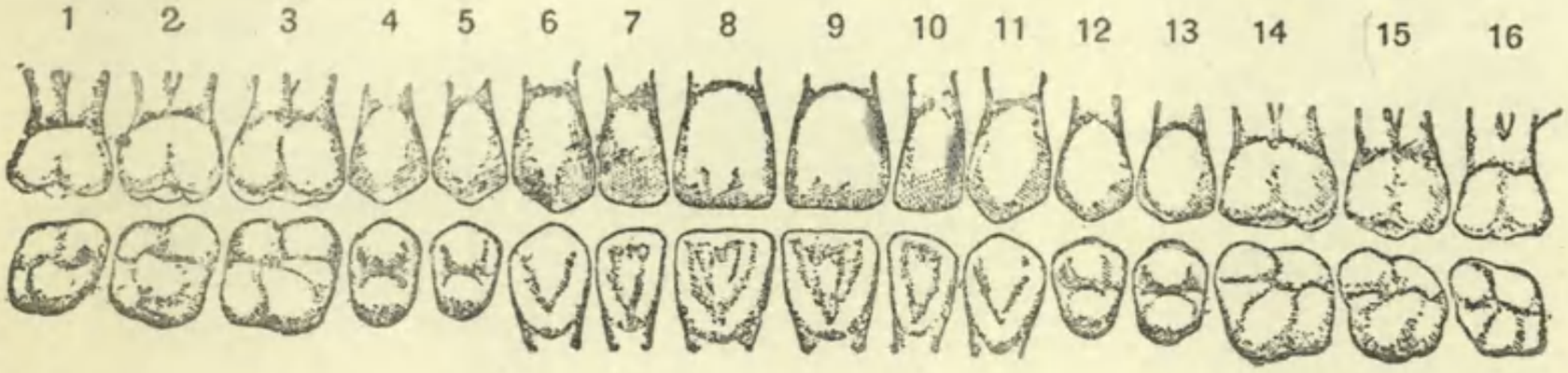
DENTAL CERTIFICATE FOR DEMOBILIZATION

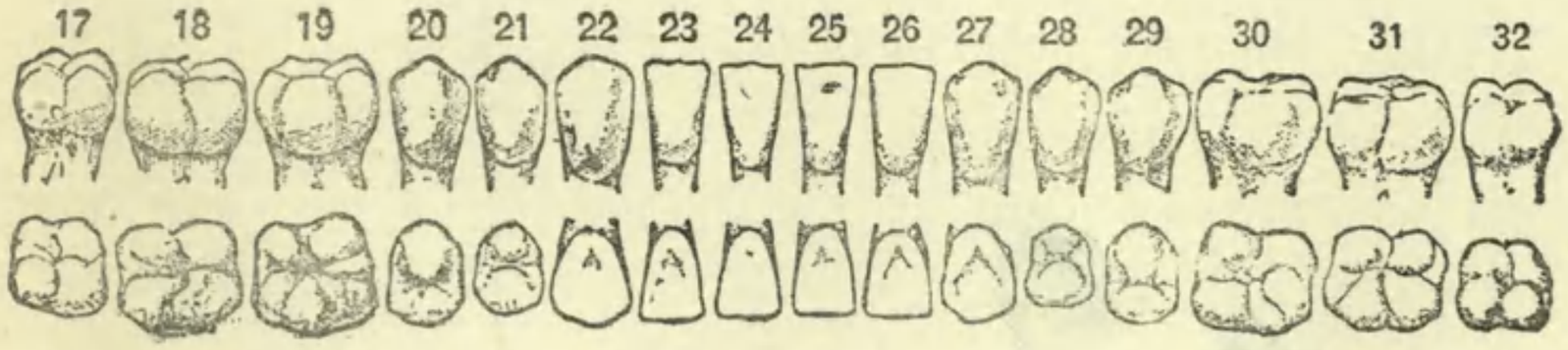
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Chapman. G. W.

REGIMENT C.A.M.C RANK Cpl. No. 69116

Date of Examination in England 29-6-19 | Date of Examination in France





DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 9.10
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ? No

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

- (*a*) In Canada No
- (*b*) In England No
- (*c*) In France No

ASSISTANT DIRECTOR DENTAL SERVICES M.O. No. 6 JUL 12 1919

Signature of Dental Officer B. E. Brownlee Capt. CADC

W8830—M940 250,000 10/16 HWV(bP696) Forms/B241/30 Army Form B. 241.

DESCRIPTIVE RETURN of a Soldier at present stationed at Epsom

who is desirous of being* { transferred / ~~posted~~ / ~~attached~~ } from the Eastern Ontario Regiment

at Seaford to the C.A.M.C. Regiment

or Corps at Epsom for the purpose of duty

Regiment and Battalion 2nd Battalion, 6th Reserve Battn.

No. 69116 Rank and Name Pte. Chapman, G.W.

Service towards engagement two years five months.

Date of Attestation November 9th 1914

Period for which attested duration Colours Reserve.

Age 22 years 12 days. Height 5 feet 8 inches.

Chest measurement { Girth when fully expanded 36 inches. / Range of expansion 4 inches.

Trade or Calling Laborer

Where born Sackville County New Brunswick

Married or single; if married, state if with leave Single

Certificate of Education Nil

Character Good

Good Conduct Badges Nil

Musketry Qualification and Score Qualified Overseas test

Schools or Courses of Instruction at which the Soldier has attended and qualified. Nature of certificates obtained to be stated. Nil

---

To be signed by a Soldier applying to be transferred.

I request to be transferred as above, and I understand that, if transferred, my conditions of service will be modified (if necessary) so as to correspond with the general conditions of service in the Corps to which I am transferred, in accordance with Section 83 (3) of the Army Act.

Signature of Soldier G W Chapman

To be signed by a Soldier applying to be posted or attached.

I request to be ‡ transferred as above.

Signature of Soldier G W Chapman

I have examined the above man and find him medically fit for the branch of the service to which it is proposed to * { transfer / ~~post~~ / attach } him. Signature of Medical Officer R. B. Jenkins CAPT. C.A.M.C.

"C" DIVISION.

I have no objection to this man being ‡ transferred as above.

Signature of applicant's present Commanding Officer W. H. Wallace Lt Col

(Station) Seaford (Date) 8/5/17 C.O. 19 C.E.

I have no objection to this man being ‡ transferred as above.

Signature of Officer Commanding applicant's proposed Regiment, Corps or Battalion H. Burton CAPT. ADJ

(Station) 1 MAY 1917 (Date)

Signature of competent authority for transfer

CONVALESCENT HOSPITAL WOOLCOTE PARK, EPSOM

* See King's Regulations. The words which do not apply to be erased, and in the case of the R.A.M.C., it should also be stated whether suited for the duties of the Corps.

‡ Insert "transferred," "posted," or "attached," as the case may be.

3 Canadian Training Brigade. Staff Captain,

[P.T.O.

CERTIFICATE to be rendered in the case of a Non-Commissioned Officer who

is to be {posted / transferred / attached} to the Regular Establishment of any arm of the

Special Reserve or to the Permanent Staff of the Territorial Force, &c.

I certify that _____

_____

is in every respect competent to undertake and suitable for the duties he will

be required to perform as an Instructor in the arm of the Special Reserve or the

Territorial Force to which I recommend he should be {posted / transferred / attached}

_____ Officer Commanding,

_____

Place _____

Date _____

DOCUMENTS TO ACCOMPANY THIS FORM.

In all cases	Copies of Regimental and Company Conduct Sheets.
In cases of tradesmen	Certificate of Proficiency on Army Form B. 195 or 195A, as the case may be.
In case of Clerks (or of any trade if for Royal Army Medical Corps)	Specimen of handwriting and ciphering.
In case of Candidates for Military Police	Specimen of handwriting.
In case of Candidates for the Military Provost Staff Corps	Copy of Record of Service on Army Form B. 200.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No.

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 No.

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

21. Have you, during the present war, served in the Imperial Forces? No.

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 No.

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? No

(b) If so, was such reversion in consequence of misconduct or inefficiency? No.

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

JUL 18 1919

DEMOBILIZATION

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

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

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

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

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: G W Chapman.

Place of Residence:

Declared before me at:

This 2 day of [illegible] 19 19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

Questions, 12, 13, 14, 20, 24, 25, 26 & 27 are unanswered.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			183 days	$420.00
			less 1919	70
				$350.00

Certified Correct.

District Paymaster.

H.F.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

1919

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Guy. 2. Surname Chapman

3. Rank A/Cpl 4. Original Unit 26th Bn. 5. Reg. No. 69116-

6. Address, in full, to which future payments of gratuity are to be forwarded ~~Cookville P.O. N.B.~~ H.B. Cookville N.B. Royal Bank of Canada Cookville N.B. (Westmorland Co.)

7. Date of enlistment in the C.E.F. Nov. 9th. 1914.

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Nil.

9. Relationship of such dependent Nil.

10. Address, in full, of such dependent Nil

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No

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:—

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?

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service

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 7 Months Canada. 4 yrs. 0 Month: Overseas 9 mos. 26th M. Canada & England 8 Months 2nd Mtn. France 3 yrs. 2 Months' C.A.M.C. England

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5434. Wt. /30P. 250,000(8). 2/19. S.O.,F.Rd.

R. & O. [redacted]5 (*Revised*).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom 28th February 1916.

No. 69116 Rank Pte. Name Chapman G. W.

Local Unit [redacted] Overseas Unit 2nd Bath. Age 22

Examination held at Epsom

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

PRESENT CONDITION.

B 1

BOARD RECOMMENDS:—

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

Signatures:—

Members { Thos Butler Capt ..... President.
C. H. Dowson Capt .....
O. L. Thomson Capt .....

APPROVED

Dated at.....1916. .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

No. ..... Rank ..... Name ..... Unit ..... Age .....

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

Examination held at .....

Dated at ..... this ..... day of .....

DISABILITY

(Strike out one line)

Overseas—Local.

PRESENT CONDITION

1. Fit for Duty.....

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

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

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

5. Discharge.....

Signatures:—

.....President.

.....

.....

.....

.....

BOARD RECOMMENDS:—

Approved

Dated at ..... this ..... day of .....

For A.D.M.S.

R. & O. 6045 (*Revised*).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Capetown 3 B Apt 1916.

No 60446 Rank Pte Name Chapman G W

Local Unit Overseas Unit 2nd Bn Age

Examination held at Capetown

DISABILITY.
Overseas—Local.
(scratch one out)

Shell shock June 13th/16

Trauma 9 mos

PRESENT CONDITION.

Dyspnoea. Tachycardia, pulse 140

BOARD RECOMMENDS:—

1. Fit for Duty.....

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

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

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

5. Discharge.....

Signatures:—

Members { A. K. Taylor Capt.....President.
C/H Dowson Capt.....
.....

APPROVED

Dated at Ebsom 23 4 1917. A. K. Taylor Capt.
.....
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

R. A. F. Form 2543 (Revised).

Dated at ..... 19[illegible]

From A.D.M.S. .....

APPROVED

.....

Members .....

.....

.....President.

Signatures :—

1. Disposal .....

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

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

4. Fit for Duty after ..... weeks, physical training.

5. Fit for Duty .....

BOARD RECOMMENDS :—

PRESENT CONDITION.

DISABILITY.

Overseas—Local.
(Strike one out).

Examination held at .....

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

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

Dated at ..... 19[illegible]

R. & O. 6045 (*Revised*). Pte Chapman G.W.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom 23 April 1916.

No. 6911 6 Rank Pte Name Chapman G.W

Local Unit ..... Overseas Unit 2nd Bn Age .....

Examination held at Epsom

DISABILITY.
Overseas—Local.
(scratch one out)

Shell shock June 13th/16

Finance of Mos

PRESENT CONDITION.

Dyspnoea. Tachycardia, pulse 140

Re Examined.
Category C II
Date 30.7.17
C. H. Dowson
Capt.

Re Examined
Category C II — Likely to be
Cassin Category within six months.
Date Sept 8/17
S. K. D. Forsyth
Capt

BOARD RECOMMENDS:—

1. Fit for Duty ..... Re Examined Category B II

2. Fit for duty after ..... weeks' physical training. Date Oct 9/17 S. K. D. Forsyth Capt

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

4. Fit for Permanent Base Duty ..... C III Re Examined Category B II

5. Discharge .....

Re Examined Category B II April 10/18 H Cas

Signatures:—

Members { R. K. Hayward Capt ..... President.
C. H. Dowson Capt .....
.....

APPROVED

Dated at Epsom 23.4.1917 R. K. Hayward Capt.
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19..

From A.D.M.S.

APPROVED

..... President

Members ..... }

..... }

Signatures :—

PRESENT CONDITION.

DISABILITY.

OVERSEAS—LOCAL.
(Strike out one.)

EXAMINATION held at .....

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

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

Dated at ..... 19..

R. & O. 6045 (*Revised*).

124300

N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom. Nov. 27th 1916. 1916.

No. 69116 Rank Pte. Name Chapman G.W.

Local Unit..... Overseas Unit. 2nd Battn. Age 21

Examination held at Epsom.

DISABILITY. Shell Shock. Ypres, 24/7/16.
In France 9 months.

Overseas ~~shock~~ XXXXX
(scratch one out)

PRESENT CONDITION.

Complaining of general weakness. Occipital cephalalgia. Vertigo. Insomnia. Pulse rapid : 110. Heart rapid, slightly enlarged. No organic lesion.

BOARD RECOMMENDS:—

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

Signatures:—

Members { .....President.
W.G. Simms Capt
C.F. Dawson Capt.
.....

APPROVED

Dated at Hach 16/8/1916 1916. D.J. McIntyre

For A.D.M.S.

Captain, C.A.M.C.
for A.D.M.S., Canadians, [illegible]

For A.D.M.S.

Dated at ..... 1918.

APPROVED

Member ..... President.

Signatures :—

5. Discharge.....

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

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

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

1. Fit for Duty.....

BOARD RECOMMENDS :—

PRESENT CONDITION.

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

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

Dated at..... 1918.

PROCEEDINGS OF A MEDICAL BOARD

Form 1394.
3468. 20/12/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom Dec 1917.

No. 69116 Rank Pte Name Chapman E.S.

Local Unit Overseas Unit 2nd Can Res Age

Examination held at M.D. H. Epsom

DISABILITY.
Overseas—Local
(scratch one out). SHELL SHOCK

PRESENT CONDITION.

Re Examined
Category B II
Date. Jan 15/18 HJ

Re Examined
Category
Date.

BOARD RECOMMENDS :—

1. Fit for Duty.....

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

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

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

5. Discharge .....

Signatures :—

..... President.

Members .....

.....

APPROVED

Dated.....1917. .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

D.M.S [redacted] 394- [redacted] M.
5958-18-2-18.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... July 20th ..... 1918.

No. 69116. Rank Pte. Name ..... J. Chapman C.W.

Local Unit ..... Overseas Unit ..... 2nd Bn. ..... Age 22

Examination held at ..... M. C. H. Epsom.

DISABILITY. SHELL. SHOCK.
Overseas-Local
(SCRATCH ONE OUT.)

PRESENT CONDITION.

Re Examined Bilateral likely to be caused c
Category when discharged temporary
unbalanced

Re-examined Jan. 13th 1919
Category A
Date.

H. MacDermot Lt. Col.

BOARD RECOMMENDS:-

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

Signatures:-

(..... President.
(Members (Redeman Capt
(.....

APPROVED

Dated ..... 1918. ..... For A.D.M.S.

MEDICAL OFFICER.

Forms
I. 1237
10

WARD B XI
Army Form I. 1237.

Capt Blackley — Sick. — Batt

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
4C 464	69116	Pte	Chapman	Guy Walter

Year	Unit.		Age.	Service.
1916	2 Batt Canadians	1 Div 1 Brig 1 Comp	21	1 10/12 - 9/12

Station and Date. — Disease Shell Shock.

2nd WESTERN GENERAL HOSPITAL HOLLYWOOD PARK, STOCKPORT.

14-8-16

DATE OF ONSET OF INJURY OR DISEASE
June 13/16

17-8-16. Transferred to Hampton Hill.

Next of Kin.

Father
Douglas-Chapman
Cookville
Westmoreland - County
New Brunswick
Canada

FOR TRANSFER
CLASS.
4

INOCULATION AGAINST ENTERIC.

T V	T V	T V
1	2	—

Date 2-2-16

CROSS OUT THAT WHICH DOES NOT APPLY.

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

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

P.T.O.

Station and Date.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	69116	Pte.	Chapman	G.W.
	Unit.		Age.	Service.
	2nd Batt		21	13/12 9/12

Station and Date.

Disease Shell Shock

1ST CANADIAN RED CROSS CONVALESCENT HOSPITAL
BUSHY PARK
17 AUG 1916
HAMPTON HILL
ORDERLY ROOM

On June 13th was buried in trench at Ypres. No bleeding. Went back to duty after two days but had to report sick later. feeling weak and dizzie and could not eat. Sent to No 2 Australian Gen Hosp. Boulogne On 13th Aug. was sent to No 2 Western Gen Hosp. Manchester. On Aug 17th to K. C. R. C. C. Hosp. Bushy Park Aug. 17th 1916.

Present Condition

Only complaint is weakness dizziness.

Gets & sleeps fairly well

Knee jerks slightly increased

Lt duty. Marche - One wk.

P.T. Pulse - Resting 65 Regular After Brisk work. 75 Regular.

Parade - One wk J.D.A

Aug 25 Improving

Epsom J.D.A

Transf to Epsom 28-8-16

A.M.E.

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

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

P.T.O.

Station and Date.	
Born at	
N. B. Can.	
~~Married or~~	
Single	
Occupation	
Laborer	
Enlisted at	
Sackville N. B.	
On	
Nov. 7. 14	
T. Inoc.	
3.	
S.P.V.	
1	
Treatment	
Disposal	
Next of Kin	
M. Chapman Coverdale N. B.	

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Bushey Park Conval.	18-8-16
2.	Epsom Conval.	29-8-16
3.		
4.		
5.		
6.		
7.		

Surname: Chapman

Christian Name or Names: E W

Reg. No.: 69116

Rank: Pte

Unit: 26th Batt (12th Bn)

Co.

Troop (2nd Bn)

Batty.

Hospital

Date of Admission

Transferred Risboro Tent Hosp. 29.8.15

1 Div Resp. Stn Hosp. 13.6.16

#2 Aus. Gen. Wimereux Hosp. 11.8.16.

to #2 W. Gen. Manchester. Hosp. 14.8.16.

Diagnosis Gonorrhoea

(1) Shell Shock

Later Diagnosis (if changed)

(2) Shell Shock.

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

Date

Dis 26.10.15

Dis. to Duty. REMARKS 15.6.16.

Dis 22-12.16.

W/R 4.9.15.

Cl. 29.6.16 # 161

Cl. 13-7.16 # 1408

" 20.7.16 A 474

" 19.8.16 A 439

" 19.8.16 B 145

C.L. 22-8-16 B 147

C.L. 1-9-16 B 156

" 22-3.17. B 313.

A.M.D. 2 DEPT.

Bch. of D.G.M. & D.M.F.C. London.

D

From Halifax, Per. S.S. [redacted] "Caledonia" 15-6-15

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labarer. RELIGION Baptist

DESCRIPTION.

APPARENT AGE 19 YEARS 7 MONTHS

HEIGHT 5 FEET 7 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 4 INCHES

COMPLEXION Light EYES Blue HAIR Lt. Brown

DISTINGUISHING MARKS Not Stated,

MEDICAL EXAMINATION. PLACE St. John, N.B. DATE Nov. 13th 1914

Present Address Not Staked,

SURNAME. Chapman

CHRISTIAN NAMES Guy Walter

REGL. No. 69116 RANK Pte

UNIT 26th Bn

FORMER CORPS Mil

CARD No. 6a
SOS Dis. 18-7-19
Demob.

FOLL.
DD 204 of 23-7-19
DD6

NEXT OF KIN.

NAMES IN FUL Chapman, Douglas

RELATIONSHIP TO SOLDIER Not Stated

ADDRESS Cookville, N.B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Sackville N.B. DATE Apr. 15th 1895

PLACE OF ATTESTATION St. John, N.B. DATE Nov. 9th 1914

O/S. 15-6-15 115/7

R/C 12-7-19 371/9 Cpl. 6a

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

Canadian Convalescent Hospital, Woodcote Park, Epsom.

No. 69116 Rank Pte. Name C Lapman. G.W.

Corps 2nd Religion Bapt Age 21. Page, A. & D.

Disease or injury Shell Shock.

When and where wounded

Admitted from Bushy Pk Date 28.8.16 Discharged to Date

Hut No. Bed No.

Service 1107/12 Service Field Force 9/12

Transferred on Bleckingley to 23/12/16 Results

EPITOME OF HOSPITAL TREATMENT.

28/8/16 Shell Shock

weak & tired

OB Epsom

Name Chapman, G.W. *Rank* Pte. *Reg. No.* 69116

Unit 12th Res.Battalion.

Next of Kin Canada.

Date 1915.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
29-8	Tent Hosp. St Martin's Plain.		Gon.	51.		
26-10	Discharged			161		

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

R. 149.

Name Chapman Guy W. Rank Pte Reg. No. 69116

Unit 2nd Ball^n

Next of Kin Canada.

Date 1916		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
					a	M	
13	6	No 1. Dev. Rest. Sta.		Shell Shock	408	96.59	24/7/16
15	6	-do- disc.		-do-	414		
11	8	No 2 Aust. Gen Hosp Wimereux		-do-	439	~~M. 11379~~	
14	8	2nd. West. Gen. Hos. Manchester		-do-	B145	M. 11379.	19/8/16
18/8/16.		Kings Can. R.C. Hosp. Bushy Pk.	Hampton Hill	-do-	B147		
29.8		Can Dev Woodcote Pk	Epsom	-do-	B156		
22.12		Discharged		do	B313		

Shell in Hosp. 28/12/16

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

H. Q. FILE No. 649-

NAME Chapman G. W.

REGT'L. No. 69116

RANK AND CORPS Pte 2nd (Bw 2th Batt.) (Form 26th Bw)

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M 9659	12-7-16	Adm. No 1 Div Rest Stat. June 13th "Shell Shock."
M. 11379	18-8-16	Adm. to 2nd West Gen. Hosp. Manchester Aug. 14th 1916. shell-shock ✓

NO. 822

FOLL. X

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
51.	Tent St. Martin's Plain Shorne.	29-8-15	Gonorrhoea.
161	Mil Shorncliffe Discharged	26-10-15	V. D. G.
A408	No 1 Div. Rest Stat.	13-6-16	Shell Shock
A414	#2 Can. Fld Amb. Disc to duty	15-6-16.	" "
*B145.	Ex 2nd Australian Gen. Wimereux 2nd West. Gen. Manchester	14-8-16	" "
*A439.	No 2 Aust. Gen. Wimereux	11-8-16.	" "
B147.	Ex. 2nd West. Gen. Manchester King's Can. + Conv. Bushey PK.	18-8-16.	Shell shock
B/156 to	Can. Div. Conv. Woodcote Park Epsom	29-8-16	" "
B313	Discharged	22-12-16	Shell shock.

No. 25 RANK Pte. NAME Chapman G. W.

T. O. S. UNIT 26th Bn.
7-11-14 (D.O. # 3, 10-11-14)

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Nov. 4th.	1914 Nov. 30th.	—	Discharged.	D.O. # 3, 1-12-14
			a/c closed by payment £.	

UNIT SAILED
JUN 13 1915

No. 25 Rank Pte. Name Chapman G. W.

69116 Mar-payleist

T. O. S. Unit 26th-Bn.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Dec-1st.	Dec 31st.	✓		
	1915			
Jan-		✓		
Feb-		✓		
Mar.		✓		
April.		✓		
May.		✓		
June.		✓		
July		✓		

UNIT SAILED
JUN 13 1915

Number 69116 Rank a/bpl B

Surname CHAPMAN

Christian Name Guy Walter

Unit 2nd Bn. Can. Inf Theatre of War France

Date of Service 21-12-15

Remarks RFD BOX 302

Latest Address ~~Cookville~~ WHARTON

~~N.B.~~ N.J. USA.

Roll No. B. Page 21064

200m.-6-21.

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

D.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

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

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

.....

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

..... Railway.....

DESP. JUN 1 1923

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

stination.....

(Sgd.).....

R—122.

Rank Name CHAPMAN. Guy W. Env. 45686. Reg'l No. 69116.

Unit 26th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment St John. N.B. 9th Nov.1914. Place of Birth N.B.

Name and Address, Next-of-Kin Douglas Chapman. Cookville. N.B.

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

OS R133847

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		Arrived in England per S.S. Caledonia		24.6.15.	
30.8.15.	O.C. 26.	Admitted. Hospital.	East Sandling.	28.8.15.	Venereal. Pt. II O# 52.
24.9.15	O.C. 12th	Taken on strength 12th	Shorncliffe	23.9.15	Pt II O# 1374.
26-10-15	OC 12th	Rejoined Unit from Hosp.	"	26-10-15	Pt II. 01679.
3-11-15.	OC 12th	A.W.L. 14 days C.B. 2 days pay.	"	3-11-15.	Pt II 01765.
3-12-15.	OC 12th	Gambling & Dobbee. 10 days 2nd FP.	"	3-12-15.	Pt II. 02082.
21.12.15	"	Off Strength to 2nd Bn	overseas	21.12.15	P II O# 2266 do No 1 of 2nd Bn.
13.7.16	CL 408 – 2nd	Shell Shock	S/No 1 Div Rest Stn	13.6.16	A/439 B/145 S Shock
20.7.16	A 414 "	Dis to Duty 2 Aus "Gen Hos	S/No 2 C.7.a WIMEREUX	15.6.16 11.8.16	
19.8.16	OC 2nd	2 Western Gen Hos	Manchester	14.8.16	B/147 "
22.8.16	" "	Red + Conv Hos	Bushey Park	18.8.16	

69116 Chapman Guy W.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
21.8.16	OC 2nd	Transferred to C.C.A.C., Folkestone.		13.8.16	Pt II DO 33 S
22-8-16	CCAC	Taken on strength.	do.	14-8-16	Pt # 0 349
1-9-16	2nd Bn	Trans Can Div con Hosp.	Epsom	29-8-16	CLB 156
10-1-17	CCAC	On com to CCH Epsom for BD Pay Rat Orrts cls	Hastings	17-12-16	Pt # 0 16.
9.2.17	CCAC	On being discharged from Bletchingly Isolation hospital will be on com to CCH Epsom	do	2.2.17	Pt II do 69 (6)
14.2.17	CCH Epsom	Att from CCAC for PBD	Epsom	2.2.17	— 45
14.3.17	CCAC	SOS. to EORDep	Hastings	10.3.17	— 120
22.3.17	EORT	TOS & att CCH Epsom	Seaford	22.3.17	— 11
12.5.17	—	Ceases to be att & SOS to CAMC.	—	12.5.17	— 61 | came D. Pt II D.O. 217 5/8/17
19-5-17	C.C.H.	T.O.S from C.A.M.C. Depot	Epsom	10-5-17	— 139. | came D. Pt II D.O. 217 5/8/17
11-11-18	MC Hsp	To be A/corporal with pay	Pte Epsom	17-5-18	Pt II D.O. 315.
		93-B-40		5/7/19	
5-7-19	MCHS	SOS to Canada	Pte Epsom	5-7-19	— 186

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom D. Chapman. Esq
Address Cookville
Westmoreland Co.
N. B.

By Whom Assigned Chapman. G W.
Regtl. No. 69116
Rank Pte
Corps C. C. A. C.

SPECIAL REMITTANCE

Rate $60.

Schid 251-27-11-16

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	Q34720	60	
Feb.				
March				

DATE RECEIVED 4 ACCOUNT

L. L. Job [illegible]—M. & D. 5683.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom J D Chapman

Address Cookville
Westmoreland Co
N B

Rate 10 00

JUN 1 - 1918

By Whom Assigned Chapman J W

Regtl. No. 69116

Rank Pte

Corps B Co 26th Batt

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		R1676	10 00	
July		O4342	10 00	
Aug.		P2724	10 —	
Sept.		R7488	10 —	
Oct.		R 8734	10 00	
Nov.		Z 8069	10 —	
Dec.		V9263	10 —	
Jan.	1916	X 9106	10 —	
Feb.		M12132	10	
March		K10262	10	

CONSOLIDATED ACCOUNT 2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

J. D. Chapman

PAYMENTS.

Name of Soldier Chapman, G. W.
B. Coy. 26th Battn.

Month.	Year.	Cheque No.	Amt.	$10 00	Remarks.
April	1916	10075	10		
May		025778	10		
June		P7018	10		
July		E6467	10		
Aug.		10999	10		
Sept.		15751	10		
Oct.		20309	10		
Nov.		21485	10		
Dec.		31752	10		
Jan.	1917	H36407	10		
Feb.		H23447	10		10 R
March		49696	10		10 Rgw
April		Y644	10		10 6
May		F 7218	10		
June		R 13659	10		10. S
July		I 20616	10		C
Aug.		N27989	10		Cu
Sept.		M37401	10		D
Oct.		S47693	10		
Nov.		Y54592 Y 54591	10		Y54591 Canc. G.k.
Dec.		R55156	10		$310 00
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

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

Rank | Name CHAPMAN, Chas. E. | Reg'l No. 69116.

Unit 26th Bn. | If in perm. Corps, What Unit? | Married or Single single.

Place and Date of Enlistment St John. N.B. 9th Nov.1914. | Place of Birth N.B.

Name and Address, Next-of-Kin Douglas Chapman. Cookville. N.B. | Relationship

Assigned Pay Monthly $ 10. | Payable to J.D. Chapman, Cookville, Westmoreland Co N.B.

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
July 1	July 31	31	1	31	31	10	3 10	5	39 10			17 50	10		27 50	11 60	5th Battalion
"	" 31	Adjustment						47	12 07								
Aug 1	Aug 31	31	1	31	31	10	3 10		46 17			24 34	10		34 34	11 83	
Sept 1	Sept 30	30	1	30	30	10	3		44 83				10	4 95	14 95	29 88	
Oct 1	Oct 31	31		31	31		3 10		34 10	478		24 33	10	2 95	34 33	29 65	
1/11	30/11	30		30	30		3		33	538.		8 10 98	10.	220.	23 15	39 50	
1/12	31/12	31		31	31		3 10		34 10.			40 66	10	1395	64 61	899	
Jan 1 1916	31	31		31	31		3 10		34 10			5 23	10	1	15 23	27 86	
Feb. 1	29	29		29	29		2 90		31 90			5 22	10	15	15 22	44 54	
Mar 1	21	31		31	31		3 10		34 10			5 22	10		15 22	63 42	
				275			27 50	5 47	307 97			130 50	90	24 05	244 55	63 42	

(295 included in cash total)
295 Refunded Pat 11 81 20/11/15
Forfeited 12 days pay 13.0.705
Issued 2nd Pat 20 8 32 17/12/15 295
Issued 3rd Pat 25/12/15 295

BALANCE TRANSFERRED TO NEW LEDGER.

Checked ...

31.3.16 Cr Balance # 63 42 Carried forward

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						

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C

Date of Assignment

4324 4378 June 1/1915

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

10.			

10 L 1 C 11
9 B

PARTICULARS OF SEPARATION ALLOWANCE

No. 69116

Rank Pte. Promoted Reverted Discharge

Soldier's Name G. W. Chapman

Battalion 26th Battn. "B" Coy.

Beneficiary

Relationship

Address

4236

PARTICULARS OF ASSIGNMENT

Name J. D. Chapman

Address Cookville, Westmoreland Co. Change of Address N. B.

1

2

3

4

Date 1914.	Cheque No.	Amount S/A	Amount A/P	Total	
Dec. 31			$310.	$310.	
Jan.	T 65811		10	10	
Feby	D 93000		10	10	
Mch	a 111323		10	10	✓
Apr.	L 8455		10	10	
May	K 17154		10	10	
June	G. 21208		10	10	
July	T 31178		10	10	
Aug	E 34696		10	10	
Sept	J 42539		10	10	
Oct.	I 51737		10	10	
Nov	D 51760		10	10	
Dec	m 66994		10	10	
JAN	J 72140		10	10	
Feb.	M 76478		10	10	
Mar.	H 83643		10	10	
APR	I 2451		10	10	✓
May	F 7829		10	10	
June	E 10837		10	10	
July	C 12860		10	10	
			500	500	

03074-G-36

REMARKS

A/c Closed 31-7-19
Ret'd per Carmania
Date 13-7-19 M.F.W. 187 to #6
Closed B. D. Lefort

MRO-101496 Dec. 24-7-19

AUDITED AH 25/7/19

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7493.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 1493.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W[redacted]3
Field Conduct Sheet	Militia Form W. 178 or A F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M,F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B.227 or M.F.W,129)
5. Dental Certificate (C.A.D.C. 5009a),
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O,S. 2).
12. Last Pay Certificate (P, [illegible]1).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

I have checked documents pertaining to all ranks hereon, and found them correct.

.....

Date.....

Group a-1

Checked by No. 21

CMS

Date 3/7/19

War Service Badge A 388022

B.

SHORT FORM.

W. S. B. CLA[illegible]

MEDICAL DOCUMENTS FORWARDED TO C. R. B. P. C. ON 29-7-19

W. S. B. C[illegible]SSA

M

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 69116.
2. Rank. Cpl.
3. Name. Chapman. Guy Walter.
4. Unit. C.A.M.C.
5. Date of Discharge 18/7/19 Place Halifax N.S.
6. Reason for Discharge SERVICE IN FRANCE
   NEXT OF KIN Father
   RELIGION C of E.
   CATEGORY B iii
   OCCUPATION 7.
7. Authority. R. O. 1420
8. Proposed Residence after Discharge Cookville N.B.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? .....

G W Chapman

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place HALIFAX, N.S. JUL 12 1919

Date .....

Embark RMS-Carmania Liverpool 5.7.19 Capt. & A

Signature [illegible] Capt. O. C. Dispersal Station "B"

(O. C. Discharging Unit.)

M.F.B. 218a

(1184) Wt.P247/P53 5/19 25M (2) D.St.
(1209) Wt. /P54 5/19 10M (2) D.St.

OPINION OF THE MEDICAL BOARD

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

Concur except Q.9. Pulse returns to 80 within 2 minutes.

Q.8. D.A.H.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.)	No.
(*b*) Service abroad, not general service,	(" B)	(Yes or No.)	Yes. B.111.
(*c*) Home service (Canada only),	(" C)	(Yes or No.)	N.A.
(*d*) Temporarily unfit.	(" D)	(Yes or No.)	N.A.
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	N.A.

20. It is certified that the invalid

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

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

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

Boarded for Return to Canada. Auth. A.G. Telegram 9083 11-11-18.

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

J. H. Gunn Lt.-Col. A.M.C. *President.*
L. D. Primrose Major

PLACE Epsom.
DATE 29-6-19. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

.....*President*

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

CERTIFIED TRUE COPY

APPROVED BY
Jno. J. Stanborn
Assistant Director of Medical Services.
DATE Captain, C.A.M.C. for A.D.M.S., Canadians, London Area

APPROVED BY
ASSISTANT DIRECTOR MEDICAL SERVICES CANADIANS 13, BERNERS ST. LONDON, W.1
Director-General of Medical Services.
DATE JAN 1 1919

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION M.C.H., EPSOM. DATE June 28- 1919

1. 1 (*a*) Unit C.A.M.C. (*b*) Regimental No. 69116 (*c*) Rank Cpl.

(*d*) Surname CHAPMAN (*e*) Christian name GUY

(*f*) Home address Sackville, N.B.

(*g*) Next of Kin D. Chapman (*h*) Relationship Father

(*i*) Address of Next of Kin Cookville N.B.

2. Age last birthday 24 Date of birth April 15, 1895

3. Enlistment, or Appointment (if an Officer) (*a*) Place St.John N.B. (*b*) Date Nov.7,1914

4. Personal description:

(*a*) Height 5' 7" (*b*) Weight 130 est. (stripped) (*c*) Complexion Fair

(*d*) Colour of hair Fair (*e*) Colour of eyes Blue (*f*) Identification marks, Scars, etc. NIL

5. Former trade or occupation Laborer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4 8/12	20

	Periods	
	From	To
Canada Soldiers statements	Nov.7,1914	June 13,1915
England	Aug.13,1916 / June 24,1915	To date / Dec.15,1915
France or other theatres of War	Dec.15,1915	Aug.13,1916

7. Original disease, or injury Soldier's Heart (D.A.H.through Shell shock)

(*a*) Date of origin June, 1916 (*b*) Place of origin YPRES front

(*c*) Cause Shell shock (Immediate cause)

Continued War Strain (Continual Cause)

M. F. B. 227.
40m.—11-18.
1778-30-117.

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

VERTIGO AND WEAKNESS AND MODERATE DYSPNOEA - ON MODERATE EXERTION.

HEART ACTION GOOD - PULSE AT REST - 80. on EXERTION - 120.
NO ORGANIC LESION DETECTED. PRESENT CONDITION IS NOT FAVOURABLE TO HIS FORMER OCCUPATION OF LABORER.

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

The patient tires easily on exertion of the average kind, such as running 50 yards. He becomes breathless easily. His heart action is good and is not now hurried above normal. No organic lesion can be detected. Hypertrophy of the heart, if there is any, is very slight indeed. Patient sleeps well. Says he becomes dizzy when he strains himself or moves his body suddenly from one position to another. He complains of an occasional pain about his heart, like a neuralgia, stabbing in nature, of short duration. Resting on left side soothes him he says.

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

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

Special Senses NO Respiratory System YES Integumentary System NO

Disturbances of Mentality NO Digestive System NO Muscular System NO

Osseous and Joint Systems NO Any other general condition NO

10. (*a*) History (of the condition referred to in Section 9 (*a*).) Patient says that on June 13,1916 he was in a shell explosion at Ypres, where he was shell-shocked. At the same time his heart went wrong, and from that date forward he has suffered more or less this condition described above.

Dyspnoea is present as an accompaniment of the heart condition.

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

Patient suffered shell shock on June 13,1916 and was transferred to England 13-8-16 for debility. Shell shock and debility soon disappeared in England - 22-8-16.

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

One vaccination right arm.

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

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

N. A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? NO.
The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

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

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

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? NO
(If the answer is "yes" state nature of treatment required and probable duration)

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

17. Recommendations That he be discharged.

W Rourke Capt CG-R C
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned, have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I ~~complain in addition~~ of N.A.

Cpl. G W Chapman Rank.
Signature of invalid examined.

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

Date	Brief details, and signature
27/10/16 Chpmn.	Boarded P.B. Chpmn. M.G. Inman Capt. Shell shock
10.10.17	B II H.L.C.
7-12-14	Vaccination. (Signed) T.E. Bishop.
19-11-14	Anti-Typhoid Inoc. " "
30-11-14	" " " " "
Epsom 24-6-15	D.A.A. B III Rheumatism Lancs Corps

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

D/783DT

69116

ORIGINAL.

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname CHAPMAN *Christian Name* Guy W.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Sackville County N.B.

Examined ... ... on 13th day of November 1914
at St John N.B.

Declared Age ... ... 19 years 7 mos. days.

Trade or occupation ... Laborer

Height ... ... 5 feet 7 inches.

Weight ... ... 128 lbs.

Chest Measurement — Girth when fully Expanded: 36 inches.
Range of Expansion: 4 inches.

Physical Development ... Good

Vaccination Marks — Arm ... Right / Left ✓
Number ... 1

When Vaccinated ... R.

Vision ... ... R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a) Shot mark in centre of forehead.

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

Approved by (*Signature*) L.M.Currie
(*Rank*) Capt. *Medical Officer.*

Enlisted ... ... at St. John N.B.
on 9th day of November 191 5

Joined on Enlistment ...	Corps.	Regtl. No.
	2nd Batt. C.E.F.	69116.
Transferred to		

Became non-effective by

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

on day of 191

(*Signature*)

(*Rank*) Lieut.-Col.
In Charge of Records,
Canadian Contingent.

22 AUG 1916
18 JUL 1918

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

Lieut.-Col.
In Charge of Records,
Canadian Contingent.

CANADIAN

(5506.) W. 14 71/M. 89. 750M. 1/16 C. P., Ltd.

Forms B. 178 39

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
No 1 Div Rest Stn	13	6	16	15	6	16	Shell Shock	2.	Dis to duty A 408-414.	
2nd WESTERN GENERAL HOSPITAL, MANCHESTER.	14	8	16	17	8	16	Shell Shock	4	Explosion occurred 13-6-16	G. Bentin Major, R.A.M.C., T.F., Secretary and Registrar, 2nd WESTERN GENERAL HOSPITAL.
THE KING'S CANADIAN RED CROSS CONVALESCENT HOSPITAL	17	8	16	28	8	16		11	Transferred to Epsom for Physical training	T. T. Dunham Capt THE KING'S CANADIAN RED CROSS CONVALESCENT HOSPITAL
Woodcote Park Epsom	28	8	16				do		Ypres 24. 7. 16 feels weak & tired P.T. Disch to CCAC unfit.	M. G. Brown Capt

Carmania 13.7.19

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

M. OR S. | REGT. No. 691[illegible]6 | RANK a/cpl | NAME (IN FULL) Chapman G.W. (BLOCK LETTERS SURNAME FIRST)

AUDITOR | PAYMASTER

NEXT OF KIN | RELATIONSHIP
ADDRESS
IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE
TO WHOM PAID | RELATIONSHIP
ADDRESS Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Tous	5-7-19	Des 204

ORIGINAL UNIT C.E.F. C.A.M.C. | IF IN P.F. WHAT UNIT?
PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY
DATE OF ATTESTATION | TRANSFERRED TO | DATE 1990 | AUTHORITY
ASSIGNED PAY $ 10 00 | DATE EFFECTIVE 1.8.19
PAYABLE TO J.D. Chapman | RELATIONSHIP Brother | ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS Cookville Westmoreland Co N.B.
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE
DISCHARGED | PLACE Halifax | DATE JUL 18 1919 | REASON Demob | AUTHORITY Des 204 | IF ENTITLED TO POST DISCHARGE PAY

ELRC

Adj. MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.	$ C.	TOTAL CREDITS $ C.	ACQUITTANCE ROLLS COL. NO. 1 NO. DATE	COL. NO. 2 NO. DATE	COL. NO. 3 NO. DATE	CASH PAYMENTS COL. NO. 1 $ C.	COL. NO. 2 $ C.	COL. NO. 3 $ C.	ASSIGNED PAY $ C.	REMISSIONAL CHARGES $ C.	OTHER CHARGES $ C.	$ C.	TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	CREDIT $ C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																				Cr Bal Clo Allce
31.7.19		1 20		35 00 70 00		206 20														Adv W.S.G. Cat 1 2
						311 20				4 87	5 00	301 33					311 20			on boat Cat 3 Bal
																				on Discharge
																		S.		
183 days			420 00			420 00							70 00		13 20			350 00		1st Pmt. W.S.G.
													56 80					280 00		x 1127133 21-8-19 Overpaid 11 days 8 Pd.
													70 00					~~210 00~~		20-7-19 to 31-7-19
													70 00					140 00		1138386 12-9-19
													70 00					70 00		1506859 14/10/19
													70 00					Nil		1772569 14-11-19
																				1782740 16-12-19
			420 00			420 00				406 80			13 20			420 00				
																		Completed		

WAR SERVICE GRATUITY W.S.G. S.A.

Certified that all payments due on this acct. have been paid.
[signature] CAPT.
For Senior Officer Pay Services, M. D. 6

AUG 15 1919

200M-3-19.—L. L. 58788-M. & D. 9985.
M. F. W. 2596.
1772-39-1390.

MARRIED OR SINGLE S.

PLACE OF BIRTH New Brunswick.

NAME AND ADDRESS OF NEXT OF KIN Douglas Chapman.
Cookville, Westmoreland Co. New Brunsk

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 69116 RANK Pte NAME Chapman, Guy W.

IF IN PERMT. CORPS WHAT UNIT | UNIT 2nd Battn | TRANSFERRED TO 6b al DATE 1.9.16 AUTHORITY AO 33. 21.8.16

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO Corp DATE 1/11/17 AUTHORITY

PLACE OF ATTESTATION St John, N.B. | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 9.11.14 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ 10 00 DATE EFFECTIVE 1/7/15

PAYABLE TO J. D. Chapman. Cookville, Westmoreland Co. New Brunswick RELATIONSHIP Brother

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 No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916																																		
Mar 31			2 75				27	80						54 7	307	97										13	50		90	24	05	244	55	63	42		15	48	42
Apl 30	30	1 00	30	-	30	1 00	3								33		89 1012	12/5	922					2 62 2 55	2 61			10		15	23	81	19			
May 1-31	31		31		31		3	10							34	10	979	6/5						2 55				10		15	10	100	19			
June 1-30	30		30		30		3								33				1033	4/6					2 56			10		12	56	120	63			
1/7 31/7	31		31		31		3	10							34	10	1098	16/6	1119	1/7				2 56	2 61			10		15	17	139	56 80			
1/8 31/8	31		31		31		3	10							34	10										2 62		10		12	62	161	04			
Sept 1/30	30		30		30		3								476 33	27										7 30 4 87 2 43		10		315 29	23 47	164	51			
Oct	31		31		31		3	10							34	10										4 87 9 73 4 87 2 62		10		27	22	171	45			
Nov	30		30		30		3								33											4 86 7 48 2 61	60	10		79	90	124	55	55		
Dec	31		31		31		3	10							34	10										3 41 7 30		10		19	74	138	91	61		
			55	00			55	00																										
Jan 1-31	31	1 00	34	10											34	10	E 152	20 17/1						9 74				10		14	74	153	27	67		
Feb 1-28	28		30	80											30	80	561	29/1						24 33				10		32	33	149	74			
Mar 1-31	31	1 00	34	10											34	10	E 952	3/3							58	40		10	11	79	40	104	111			10 days Pay Apl 9/2 204 45
			704	00										54 7	709	47								44 35	66	18	189 45	60	210	35	05	605	03	104	44			

Checked H.R. Rodgers

E. & O.E.

69116 Pte Chapman G W. a. 9th Oct.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			70 4											5 47	709 47								44 35	66 18	189 45	60	210	35 05	605 03	104 44				
ap			33 00												33 00	Epo. 107	6/H							1H 60			10		2H 60	112 84				
May			33												33													10		10	135 84				
	1		1 10												1 10																136 94				
June	30		33												33													10		10	159 94		92		
July	31		34 10												34 10													10		10	184 04				
Aug	31		34 10												34 10													10		10	208 14				
Sep	30		33												33					571 GCH Epo						9 74		10		19 74	221 40				

MONTH	PARTICULARS	CR 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
		~~221 40~~							221 40
Oct	P.P.	34 10							10 245 50
"				662 Epsom 6d	29/6/17	9 74			235 76
		34 10				9 74			
				AR 216 Epsom	28/9/17	9 73			
Nov Dec	P.P.	67 10		AR 255 " "	16/9/17	4 87			
									10
									10
				AR 286 H Epsom	29/9/17	4 87			
				Anar 187 " "	19/9/17	4 87			
				" " 137 " "	15/8/17	9 73			
				" " 160 " "	4/9/17	19 47			
				" " 86 " "	17/9/17	9 73			
				" " 26 " "	21/5/17	14 60			
				" " 102 " "	21/7/17	29 20			
				" 318 " "	15/11/17	9 73			
				Anar 37 " "	3/4/17	9 73			
		67 10				126 53			20 156 33
Jan	P.P.	34 10		AR 361 66 H Epsom	29/9/17	4 87			
				Corr. AP					10
				AR 40 66 H Epsom	6/9/17	4 87			
				AR 471 " "	18/2/17	14 60			
		34 10				24 34			10

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
Dec	Ppwd.	67 10							126 53
	Drwd.	34 10							24 34
				AR 49 66 H Epsom	19/6/17	9 73			
		34 10				34 07			10
									20
									10
	Tele PP.	30 80		AR 232 29/1 "		4 87			
				" 54 11/1 "		9 73			
				AP					10
		30 80				14 60			10
Mar	do	34 10		AR 357 1/2 Epsom (Ed)		9 73			
				B 54 326/2 " (Cs)		9 73			
				AP					10
				AR 697 13/3 " (Bag)		9 73			
		34 10		" 549 26/3 " B35		4 87			
						34 06			10

1 5 2 56
34 10
186 66
44 06
14260 130
190 43
44 07
146 36
50
177 16
24 60

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-7-15	EFFECTIVE DATE:-
AMOUNT:- 10/-	AMOUNT:-

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

Mr J D Chapman
Coolville
Westmoreland Co N.B.
Brother
~~Stopped~~ 1/8/19

NAME:- CHAPMAN Guy W

NUMBER:- 6916

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte
Part D6.315 11/11/18	17/5/18	L/Cpl
Epsom.		

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2nd Batt

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1-11-17		C C H Epsom

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
12/6	957	Epsom £3	~~14~~ 60
27/6	913	" 2	~~9~~ 95
27/6		" 5/-	~~1~~ 24
			25 54

DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT
		L.P.C. Compiled 2/7/19	
		Leaper Bal Crd.	231 74
		L P C Bal Crd.	206 20
		Appx a/cpe with Pay 17/5/18	
		Roll No 315 dy. 11-11-18 Epsom	

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans to Canada 31/3/19 R R G 1327 Epsom to Epsom 1/2/19

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March 31	Bal Fwd								14260	135	
April	Pte pay	33							17560		
				Can a Pay				10	16560		
				aR 73 16/4 Epsom C2	973				15587		
				" 170 26/4 " C10	973				14614	140	
		33			1946			10			
May	Pte pay	34 10		Can a Pay				10	17024		
				aR 29 13/5 Epsom C2	1947				15077		
				aR 325 15/5 " C8	487				14590		
				" 490 29/5 " C18	487				14103	145	
		34 10			2921			10			
June	Pte pay	33		Can a Pay				10	16403		
				aR 5 668 14/6 Epsom C3	730				15673		
				" 5 890 28/6 " C11	487				15186	150	
		33			1217			10			
July	Pte pay	34 10		Can a Pay				10	17596		
				aR 5 1142 12/7 Epsom C1	973				16623		
				" 5 1470 26/7 " C10	730				15893	155	
		34 10			1703			10			
Aug	Pte pay	34 10		C a P.				10	18303		
				aR 5 122 13/8 Epsom C2	1460				16843		
				" 5 308 29/8 " C10	487				16356	160	
		34 10			1947			10			
Sept 1	Pte pay	33		C a Pay				10	18656		
				aR 5 446 13/9 Epsom C1	973				17683		
				" 576 27/9 " C12	973				16710	165	
		33			1946			10			

Passed Pay Office 20/9/18

COMPILED BY W. L. Fenwick

CHECKED BY .....

NUMBER 6916 RANK Pte NAME CHAPMAN G W

MONTH 1918	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sept.	B/F								16 7 10	165	
Oct	Pay	34 10		Cap				10	19 1 20		
				AR 3751 15/10 Epsom C21	9 7 3				18 1 47		
				" 915 29/10 " C39	9 7 3				17 1 74 70		
		34 10			19 4 6			10			
Nov	DP	33		Cap				10	19 4 74		
				AR 1088 13/11 Epsom C7	9 7 3				18 5 01		
				" 1256 28/11 " C36	2 9 2 0				15 5 81		
Dec	DP	34 10		Cap	3 8 9 3			10	17 9 91		
				AR 415 16/12 Epsom C65	19 4 7				16 0 44		
1919 Jan	DP	34 10		Cap				10	18 4 54	185	
		101 20			58 4 0			30			
Feb	DP	20 8 0		Cap				10	20 5 34		
				AR 1639 10/1 Epsom C15	14 6 0 -				19 0 74		
				" 1826 29/1 " C52	9 7 3 -				18 1 01		
				" 2001 13/2 " C83	9 7 3 -				17 1 28		
Mar	DP	34 10		Cap				10	19 5 38		
				" 2155 27/2 " C116	9 7 3 -				18 5 65		
					43 49						
				" 2299 13/3 " C140	9 7 3 -				17 5 92		
				" 2454 25/3 " C158	9 7 3 -				16 6 19		
		64 90			63 25			20			
April	Cl	33 -		Call				10 -	18 9 19		
				AR 43 Epsom 15/4/19 (14)	14 6 0 -				17 4 59		
				AR 198 — " — 24/4/19 34	9 7 3 -				16 4 86		
				AR 464 — " — 14/5/19 71	9 7 3				15 5 13		
				Lt. 71481 London 27/5/19 91	4 8 6 7				10 6 46		
May	Cl	34 10 -		Call				10 -	13 0 56		
		67 10			82 73			20 -			
June	Cl	33 -		Call				10 -	15 3 56		
				AR 577 Epsom 29/5 7	9 7 3				14 3 83		
July		34 10 -		Cap				10 -	16 7 93	215	
	Int on Def Pay to 31.7.19	19 71							18 7 64		
	ex pay from 17/5/18 to July 30.19 @10/4	- -									
	a day P.O. 315. 11.11.18. Epsom.	HH 10			- -				23 1 74		
				AR 757 Epsom 12/6/19 19	14 6 0				21 7 14		
				AR 1055 — " — 27/6/19 49	1 2 2				21 5 92		
				AR 913 — " — 2/6/19 52	9 7 3				20 6 19		
		130 91			35 28			20 -			

Balance Lst-93 DB Com 5/7/19