AB 8-1-19

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

Attestation Papers..... 2 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 1

Corps History Sheet.....

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

Disch Parchment Certificate..... 1

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit..... 1

Last Pay Certificate..... 1

R & O 6045 - 1
a F B 122 - 2
m F B 465 - 1
m F W 71 - 1

M. F. W. 62.
50m.—8-16.
H. Q. 1772—89—935.

M

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

H

Name CHAPMAN JOHN, EDWARD

Regt. No. 123377 Rank Pte

Corps 1st Bn Can Garr Regt

15251 15254

Med. unfit

~~Proc's on Disc forwarded to B.P.C. on M.F.W. 2505, Ref B.P.C - 6.9 of 8-1-19 L.M.C.S.~~

Doc. Ret'd 16-1-19-N

H

Elgin 6 — ORIGINAL — 20th

ATTESTATION PAPER.

No. ~~123377~~

Folio. ~~189065~~ 123377 a.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS).
1.	What is your name?	John Edward Chapman.
2.	In what Town, Township or Parish, and in what Country were you born?	Leeds, Yorkshire - England
3.	What is the name of your next-of-kin?	Wife - Mrs. Annie Chapman
4.	What is the address of your next-of-kin?	37 Chester St. St. Thomas, Ont
5.	What is the date of your birth?	25 July 1879 Canada
6.	What is your Trade or Calling?	Painter
7.	Are you married?	Married - 2 children
8.	Are you willing to be vaccinated or re-vaccinated?	and Inoculated J. C. C. 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.	7 years R. R. R. 7 years 97 days D. A
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

John Edward Chapman. (Signature of Man).

Richard St. Graham (Signature of Witness).
Lieut

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Edward 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.

John Edward Chapman (Signature of Recruit)

Date 2 Sept Augt 1915 Richard St Graham (Signature of Witness)
Lieut

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Edward 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.

John Edward Chapman (Signature of Recruit)

Date 2 Sept 1915 Richard St Graham (Signature of Witness)
Lieut

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 Thomas this 2nd day of September 1915.

C Hammell
Police Magistrate (Signature of Justice)

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

Richard St Graham (Approving Officer)
Lieut

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Description of John Edward Chapman on Enlistment.

Apparent Age 36 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 5 ins.	
Chest measurement — Girth when fully expanded	37 ins.	
Chest measurement — Range of expansion	3 ins.	
Complexion	Fair	
Eyes	Blue	
Hair	Fair	
Religious denominations — Church of England	Yes	
Presbyterian		
Wesleyan		
Baptist or Congregationalist		
Other Protestants (Denomination to be stated.)		
Roman Catholic		
Jewish		

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 2 Sept 191 5 ..... J D Curtis .....

Place St Thomas Ont ..... 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.

John Edward 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.

F S Duncan Maj ~~Lt. Col.~~ (Signature of Officer)

Date Sept 19th 1915 Dr Off Com 70th O Overseas Bn C.E.F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 123377 (Rank) Private

Name (in full) Chapman. John Edward enlisted in

the 70th. Overseas Battalion C. E. F.

CANADIAN EXPEDITIONARY FORCE at St Thomas. Ontario. on the 2nd

day of September 19 15.

HE served in Canada & England

and is now discharged from the service by reason of being medically unfit for further general service, Auth R. O. No. 1080. Para (8).

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

Age 39 years 4 months

Height 5 feet 5 inches

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars Tattoo both arms.

John Edward Chapman
Signature of Soldier

W. T. Lawe Capt. & Adjt.
for O.C. 70th Bn. Can. Garr. Regt.
Issuing Officer

Rank

Appointment

Date of Discharge 13-11-18.

Signed at London. Ontario. this 18th day of November 19 18.

in Military District No. 1.

File Reference No. 1.D.30-C-610. d/13-11-18.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 123377 (Rank) Privaten Name CHAPMAN. John Edward

Unit 1st Battalion, C. G. R.

Address on Discharge 37 Chester Street. St Thomas, Ontario.

Character and Conduct Very Good.

Former Occupation Painter

Special Qualifications of Value in Civil Life

Medals and Decorations Nil

Remarks Nil

Signed at London. Ontario. this 13th day of November 19 18.

Name of Officer

Capt. & Adjt.
1st Bn. Cdn. Garr. Regt.

Rank

Appointment

L. L. Job 8 995—M. & D. 5953.

2-9-15

MILITIA AND DEFENCE

M. F. W. 11.
10m—9-15.
H. Q. 1772 - 39-818.

SEPARATION ALLOWANCE

Name Eliza Ann. Chapman

Address 37 Chester St
St Thomas
Ont

Relation to Soldier wife, child or mother } Wife

Name of Soldier Chapman John E.

Regtl. No. 123377

Rank Pte.

Corps ~~70th Battn~~

Transferred to 91st Battn 6/11/15 (PMLo/12/15)

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		E21031	59—	59.
Dec.		J18014	20	20
Jan.	1916	M17232	20	20
Feb.		E28090	20	20
March		J34444	20	20 Issue Ck

CONSOLIDATED ACCOUNT 3

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			5.
Sept.				2. 80
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

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Annie Chapman. Wife PAYMENTS.

Name of Soldier Chapman, J. E.

#123377 (Pte) 91st. Bn.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20 00	JUL 11 1916
April	1916			
May				
June				
July		V11803	20 -	
Aug.		G11121	20	
Sept.		G15775	20	
Oct.		G20334	20	
Nov.		G25509	20	
Dec.		D31776	20	
Jan.	1917	H36435	20	
Feb.		H42376	20	20 P.
March		J49725	20	20 Lap
April		Y674	20	20 6
May		7 7250	20	
June		R13689	20	20. S.
July		I20652	20	e
Aug.		N28023	20	Cu
Sept.		M37434	20	D
Oct.		S47730	20	
Nov.		ay 54625	20	
Dec.		R55190	20	$360.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

L. L. Job –M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

Wife

To Whom Mrs. Annie. Chapman
Address 37 Chester. St.
St. Thomas.
Ontario.

Rate 20.00

By Whom Assigned Chapman. J. E.
Regtl. No. 123377
Rank Pte.
Corps 91 st. Batt.
A. Coy.

JUL • 1 1916

PAYMENTS

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

CONSOLIDATED 2 ACCOUNT

File No.

WAR SERVICE GRATUITY.

Register No.

Reg. No.

Name

Address

Dec'n No..... W. S. C. File No.....

Award.....days at $ per day $

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

Less P. D. P. Credited

Less further debit balance

Net due paid as below

TO S...

Pay Soldier $

Clerk

Dependent

Address

$

$

$

$

Pay Dependent $

Days Rate Due

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Chapman, John E
Surname Christian Name

Regimental Number 123377 Rank Pte.

Unit 1st C.G.R.

Original Unit

District where paid M.D.1

Date of Discharge

P. D. P. Filing Number

Address (in full) 37 Chester St.
St. Thomas, Ont.

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		

Remarks: Account opened 22-12-18.

M. F. W. 127.
25M.—8-18.
1772-30-1140.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

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

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

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

Sheet No. 2 Eliza Ann Chapman Wife Name of Soldier Chapman John E.

PAYMENTS. #123377

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	0653	20 —	20
May		S 5255	20	20
June		Q 6761	20	20
July		R 10621	20	20
Aug.		J 12727	20	20
Sept.		F 15410	20	20
Oct.		U 18541	20	20
Nov.		W 22209	20	20
Dec.		W 25165	20	20
Jan.	1917	W 28200	20	20
Feb.		W 31088	20	20
March		W 33964	20	20
April		M 17	20	20
May		W 3567	20	20
June		Y 6897	20	20
July		X 9957	20	20
Aug.		C 14254	20	20
Sept.		C 17660	20	T
Oct.		22172	20	Bo
Nov.		W 24950	20	B
Dec.		H 26681	20	Br
Jan.	1918			$559.00
Feb.				
March				
April				
May				
June				
July				

a

R—122

FRN. Rank Name CHAPMAN, John Edward, Reg'l No. 123377

Unit 91st Bn. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment St Thomas, 2nd Sept, 1915. Place of Birth Leeds Yorkshire England.

Name and Address, Next-of-Kin Mrs Annie Chapman.
37 Chester St, St Thomas Ont. Canada. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 1525
File R.L.
Category C R Can

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

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	6 - JUL 1916		S.S. Olympic
18.7.16	91st	Tfd to 12th Bn	W Sandling	15.7.16	Pt II DO 174
19.7.16	vc 12th Bn	Taken on strength.	Shcliffe	15.7.16	" 201
18-8-16	12 Bn	SOS to CCAC attched to 12 Bn PBD	— " —	7.8.16	" 229
7-12-16	12 Bn	Ceases to be attched on proc to 64 Bn	W Sandling	7.12-16	" 329
15.8.16	ccac	T.O.S. & Ol Com @ 12th Bn	T'stone.	7.8.16	Pt II 334
15.12.16	64th Bn	Taken on strength.	Shoreham	7.12.16	Part II DO 8
17.12-16	CCAC	Proc of c to 64th Bn from 12th Bn	Hastings	7.12.16	" " " " 556 ccac 0-220 4/23 6 T)
27-6-17		SOS to 1s 151 CORD		10.3.17	" " 220 1st CORD
21.3.17	64th Bn	S.O.S to Can Ont Regt'l Depot	do	21.3.17	" " " 69 Pt II - 144/23.3.17

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.
13.4.17	1st C.O.R.D.	Ceases to be att. to Depot Coy & on Command Can. Postal Corps London	W'Sandling	13.4.17	Pt II - 35 & CPC London 261d/18.9.17
14-9-17	1st C.O.R.D.	Cease to be attd to C.P.C. London & S.O.S. on transfer to that unit	W'Sandling	11-9-17	Pt II - 189
5-9.17	CPC	Awd Good Conduct Badge	Pte London	2-9-17	- 257
7.11.17	"	attached.	- -	5.6.17	- 280
31.1.18	Gen Depot	TOS from CPC.	✓ Scliffe	29.1.18	CPC Pt II DO 5 D/31 1/18 Pt II DO 26
1.2.18	Gen Depot	Shown on Command. To Instructional Details,	Scliffe	31.1.18	Pt II DO 27
19.2.18	Gen Depot	Ceases on Command	"	15.2.18	Pt II DO 42
25.2.18	Gen Depot	On Com. to CDD Buxton	✓ "	25.2.18	Pt II DO 47.
18.3.18	Gen Depot	SOS proc to Can for Disc	✓ "	27.2.18	Pt II DO 65

REMARKS

ORIGINAL

32 / 20 / 123377 / ~~123377~~ / ~~189055~~

MEDICAL HISTORY SHEET.

Surname Chapman Christian Name John Edwards

Examined on 2nd day of Sept 1915 at St Thomas Ont

Approved by J O Curtis J Johnston

Birthplace City or Town Leeds County Yorkshire England

Rank Capt M.O. Invalided to duty

Apparent age 26

Trade or occupation Painter

Date	Fit or Unfit	Examined for Re-engagement,
19/11/17	B III	Unfitness to be Classified Capt Caesar M.O.
		M.O.
		M O.
		M.O.
		M.O.
		M.O.
		M.O.

Height 5 Feet 5 Inches.

Weight 140 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 37 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number 4

Date	Result	Vaccinations.
23/6/16		Jno J Johnston M O.
		M.O.
		M.O.

When Vaccinated last 7 years

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Date	Result	Anti-Typhoid Inoculations, Etc.
21/10/15	500 m	R H Stephens M.O.
3/10/15	1000 m	R H Stephens M.O.
12/5/17	T.A.T.B. 2	R Gibson Capt M.O.

Enlisted on 2nd day of Sept 1915 at St Thomas Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	70th Ot Bn	123377	Good	Sept 2/15
Transferred to..	91st Ot Bn	189055	Good	Nov 6/15
	2nd Ontario Reg Depot No 1. S.S.C.B.	123377	Good	21.3.17
	1st Bn London Military & Hospital	123377	Good	9-4-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
~~London. Ont.~~	18-9-18	Partial loss of function of feet.	Cat "C" 11 Capt. Pres. C.A.M.C.
W. Sandcliff	7/8/16	Common toes of feet	P.B.O. Wearing Soft
St Thomas	13/4/16	Esc. by board	found fit.
Shorncliffe	3/2/17	Claw foot and hammer toes	C. 3 Base Off-
Shorncliffe	17/2/18	Dep. Sick	Fit and [illegible]

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

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

SHORNCLIFFE 327

17 FEB 1918

APPROVED

London 6-4-18 Cat III

FOR A.D.M.S. CANADIANS, SHORNCLIFFE

Capt.

Christian Name Edward

Surname Chapman

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Chapman J. E.

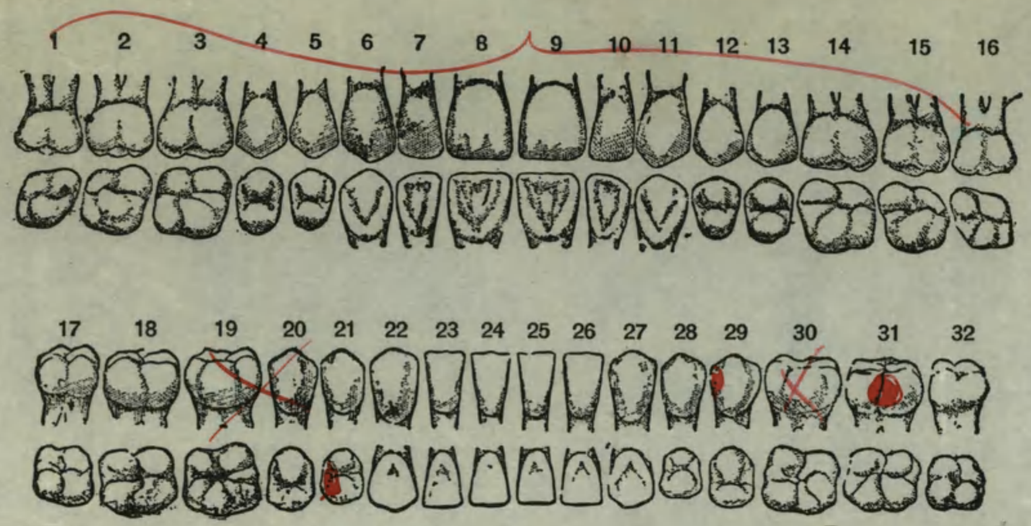
REGIMENT 91st Bn

RANK Ote

DISTRICT

No. 123377

M.F.B. 465
200M-1-17
1772-39 950



INSTRUCTIONS

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

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

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

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
	1918		1/31		2/21.29							3/19.20 30	1/								Exam. by R G McMillan Capt		Ex. 28 Complete 6/4/18
Condition on first Examination	Apr	6																					
	May	4										28									M H Hagy		

LABORATORY SHEET

DENTAL HISTORY

TRIPLICATE

M. D. 1

CANADIAN CONTINGENT EXPEDITIONARY FORCE

Dec.P.L.1-25-19

LAST PAY CERTIFICATE

No. 26

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

Regimental No 123377 Rank Private. Name CHAPMAN. John. E.

Corps 1st Bn. Can. Garrison Regt. C. E. F. who was* Discharged

On 13-11-18 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from .....191....,
to On 13-11-18 .....191...., the inclusive date of transfer or discharge. per Dec.1918.P.L.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	63.	60	Balance Cr. from prev. month		
Advances by Cheques No. Dr. Bal. Incoming L.P.C. credited to 13-11-18	90.	90	Regt'l. Pay .....days at $1. ...c.		
			Field Allow. .....days at $.....c. .10		
Assigned Pay and Sep'n Allce. No			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clothing All.	35.	00
Payment on transfer or discharge No.			Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	119.	50
Total	154.	50	Total	154.	50

*Give particulars. 91 days Pay & all.

A monthly stoppage of $...Rate $20.00..(†) has.....(‡) been paid on account of Assigned
Pay for the month of to XXX 13-12-18 .....191...
and Sep'n Allce. for month of .....191...
(to) Assignee Mrs. Annie. Chapman. 37. Chester. St.
(Address) S/A adjusted & paid to 13-12-18 1st rate of $30.00 Per Mo. St Thomas. Ont.
Dependent has been overpaid $40.00 A/P & S/A.
A/P $20.00 paid twice for Oct. S/A $20.00 credited & paid twice from .....
7-10-18 to 31-10-18

(†) 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.

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

REMARKS:— NOTE" Large Dr.Bal. credited by L.M.C.H. paying A/P:$20.00 & S/A:$20.00 for No. of October after man was transferred & discharged.

State (1) date of enlistment Unknown.

(2) if married and if a Separation Allowance Card has been submitted ...YES.....YES.....

(3) cause of discharge med. unfit. for. service. .....authority I.D. 30-C-610 d/15-11-18.)

(4) authority for ~~transfer~~ 1st Bn. C.G.R. D/O No. 202 d/18-11-18. .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date Dec. 13. 1918.

Place LONDON, ONT. .....Capt.

Paymaster, 1st Bn. Can. Garrison Regt. C.E.F.

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.

H.Q. 1772-39-903.
25M-9-18. D.P. 874.

I.G. 1
No. 26

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213. Army Form A. 36, or other official documents.
21-3-17	6th Bn	Trans. Wnd C Ontario Rgt	Shoreham	21-3-17	BOP II No 69 [illegible]
23.3.17	1st C.O.R.D.	Taken on strength	West Sandling	21.3.17	Pt II DO No. 14.
13.4.17	1st C.O.R.D.	Attach. to Can. Postal Corp.	West Sandling	13.3.17	Pt II DO No. 35
13.4.17	1st C.O.R.D.	ATTACH^D LONDON BASE C.P.C.	LONDON	13.4.17	Clk Browse Lieut for O.C. 1st C.O.R.D. Pt. II R.O. No. 88 [signature] CAPTAIN. O.C. LONDON BASE C.P.C.
21/6/17	Office P.S. O.M.F.C.	T.O.S. on attachment Can Postal Corps England	London	11/6/17	Pt II CPC 162 & 220.
8/9/17	off 1/c P.S. O.M.F.C.	Awarded a good. Conduct badge	London	2-9-17	Pt II C.P.C. 251
7-11-17	O 1/c P.S O.M.F.C	att C.P.C England Cancelling orders 162-220	London	5-6-17	Pt II C.P.C 280
18-9-17	O 1/c P.S O.M.F.C	T.O.S on Trans from 1st C.O.R.D	London	10-9-17	Pt II C.P.C 261
3[illegible]-1-18	O 1/c P.S. O.M.F.C	S.O.S on Posting to Genl Depot	London	29-1-18	Pt II C.P.C 5.

L. Inf. 3615 att 12 Res

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-R.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ~~91st~~ 70th Os. Bn. C.E.F.

Regimental No. 123377 Rank Private. Name Chapman, John Edward
C. E. F.

Enlisted (a) 2-9-15 Terms of Service (a) Duration of War. Service reckons from (a) 2-9-15.

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

Extended Re-engaged Qualification (b) Painter. A.F.B.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Transferred from 70th Bn. to 91st Bn.	St. Thomas.	6-11-15	Order # 12, part 2.
		Embarked	Halifax	29-6-16	H.M.T. 2810.
		Disembarked	Liverpool	5-7-16	S. S. Olympic
		Transferred from 91st Bn to 12th Bn.	W. Sandling.	15-7-16.	Order # 174 - part 2.
19.7.16	12th	Taken on Strength 12th Battalion,	W. Sandling,	19.7.16.	Part 2. B.O. No 9. [signature] Capt & Adjt.
18.8.16	12th	Transferred to C.C.A.C. attached to 12th Battn.	W. Sandling.	18.8.16.	Auth C.C.A.C. R.II O. No 334
DEC 7 - 1916	12th	Ceases to be att. to 12th on Trans to 64th Bn. W. Sandling	DEC 7 - 1916		J. E. Rutley, Lieut. ASST. ADJ. 12th RESERVE BATTALION C.E.F. Pt II 329
7/12/16	64 Bn	Taken on Strength	Shoreham	7.12.16	BOP 4 No 8 J. E. Rutley Captain & Adjutant

W. R. Clarke Lt
asst
ADJUTANT 64th BATTN. C.E.F.

(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: 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
	LONDON, ONT.				
	T. O. S. No. 1 Casualty Unit	20/3/18 D. O. #81			
	S. O. S. No. 1 Casualty Unit	9/4/18 D. O.			
		Transferred to No 1 S.S.			
9-4-18	No 1 Casualty Unit	T.O.S. No 1 Special Service Co. D.O. No 100 Para a. Part			
1-5-18	No 1 S.S. Co.	T.O.S. 1st Battn C.G.R. London D.O. No 1 Para A. Part II		D/1-5-18	
London Ont.		Transferred to London Military convalescent hospital Effect 15-10-18. B.O. #164 para K. part II			
London Ont.		Transfered to Canadian Garrison Regiment. effect 13-11-18. Auth. District order #152(J) 7/13-11-18.			
London, Ont.		Discharged as medically unfit for further general service Auth. R.O. No 1080. Para (8) I.D. 30-C-610. d/13-11-18. D.O. No. 202. Para E. Part II d/18-11-18. with effect 13-11-18.			

Herald
Lieut.

R. E. N. Barron Lieut & Adjt
for O.C. L.M.C.H.

O.C. No. 1 Special Service Co.

Army Form B. 103. Regimental Number 123377

Casualty Form—Active Service.

Regiment or Corps 70th of Bactn C E F.

Rank Pte Surname Chapman Christian Name John Edward

Religion ..... Age on Enlistment ..... years ..... months.

Enlisted (a) 2.9.15 Terms of Service (a) D of W. Service reckons from (a) 2.9.15.

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and Rate .....

..... Signature of Officer.

Report: 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...			
31.1.18	Gen Depot.	To S. Gen Depot	Scliffe	29.1.18	Pt II Do 26 31/1/18
1.2.18	" "	Comd Instnl Details Scliffe	"	31.1.18	Pt II Do 27.1.2.1
		A G Cockrill	Lieut.		
			For O C Gen Depot.		
19-2-18.	Gen Depot.	Ceases Com. Regdns Gen Depot.	S'cliffe	15/2/18.	Pt II D.O. 42 19/2/18.
23-2-18	" "	Com. C. D. D. Buxton		22/2/18	Pt II Do 23/2/18.
			J. Maxted Lt		
			Lieut & Asst Adjt		
			for O.C. Gen Depot		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c.

[P.T.O.

[M1101] W6135/M763 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

No. 123377 Rank Gle. Name Chapman John. E.

T.O.S. 2-9-15
DO 197 19-9-15

Unit 70th Battalion

M.D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Sep. 2	Sep. 30	✓		
	Oct.	✓		
Nov.	no a/c.	✓	Transfd to 91st O.S. Bn.	DO 68 of 6-11-15

No. 189055 RANK Pt. NAME Chapman. J. E

123377
apr paylist.

T. O. S. UNIT 91st Battalion C.E.F

Trans from 70 Bn C.E.F
6-11-15. (D.O 12 of 7-11-15)

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1915	1915			
Nov 1	Nov 30	✓	Emp as Batman.	D.O # 7 of 2-11-15,
	Dec.	✓		
	Jan.	✓	absent 12 0' a.m 19/1/16 to 7 p.m 19/1/16.	D.O. 15 of 19-1-16.
	Feb.	✓		
	Mar	✓		
	apr	✓		
	may	✓		
	June	✓		

UNIT SAILED
JUN 28 1916

No. 123377. RANK Pte. NAME Chapman J. E.

~~T. O. S.~~ Transfd. from C.D. 20-3-18. (D.O. No 81 of 22-3-18)

UNIT Casualties C. E. F.

M. D. 1.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Feb 24	1918 Apr. 9.	L.	Transfd. to No 1. A.S.C. 9-4-18.	D.O. No 100 of 10-4-18.

No. 123377. RANK Pte. NAME Chapman, John, G.

T. O. S. UNIT No 1. Special Service Co.

Trans. fr. 16th Unit. 9-4-18.
(D/100. Apr. 1918)

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Apr. 10	Apr. 30	M		
	May.	"	Name shown on 1. Depot.	
	June.	"	C.G.R.	

M. F. W. 71—500M.—5-18.
1772—39—961.

NAME Chapman, John Edward.

REGIMENTAL NO. 123377 RANK Pte.

ENLISTED AT

PROMOTIONS, &c. AND DATE

DATE

IF SERVED PREVIOUSLY. STATE UNIT. &c. 91st Bn.

MARRIED, WIDOWER, OR SINGLE Married

NEXT OF KIN Mrs Annie Chapman RELATIONSHIP Wife

ADDRESS OF 37 Charles St. St. Thomas, Ont.

ASSIGNMENT OF PAY $ 20.00 c. TO Same

ADDRESS Same

SEPARATION ALLOWANCE, ENTITLED OR NOT Yes

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
D.O. 197/13-11-18 Transfd. from Lon. Mil.		Clem. Hosp. 13-11-18	
D.O. 202/18-11-18 Credited with £11 ±0, Kit retd. on discharge			
D.O. 202/18-11-18 Discharged Med. Unfit for service		Eff. 13-11-18, Elig. for 91 days pay & all of rank	

Number 223377 Rank Pte

Surname CHAPMAN

Christian Name John Edward

Units 91st Bn / Can. Inf. Theatre of War England

Date of Service 6-7-16

Remarks

Latest Address 37 Chester St.
St. Thomas Ont.

Roll No. A Page 4184

200m.-6-21.

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

.....

R RANK SURNAME INITIALS UNIT

....

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

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

.....

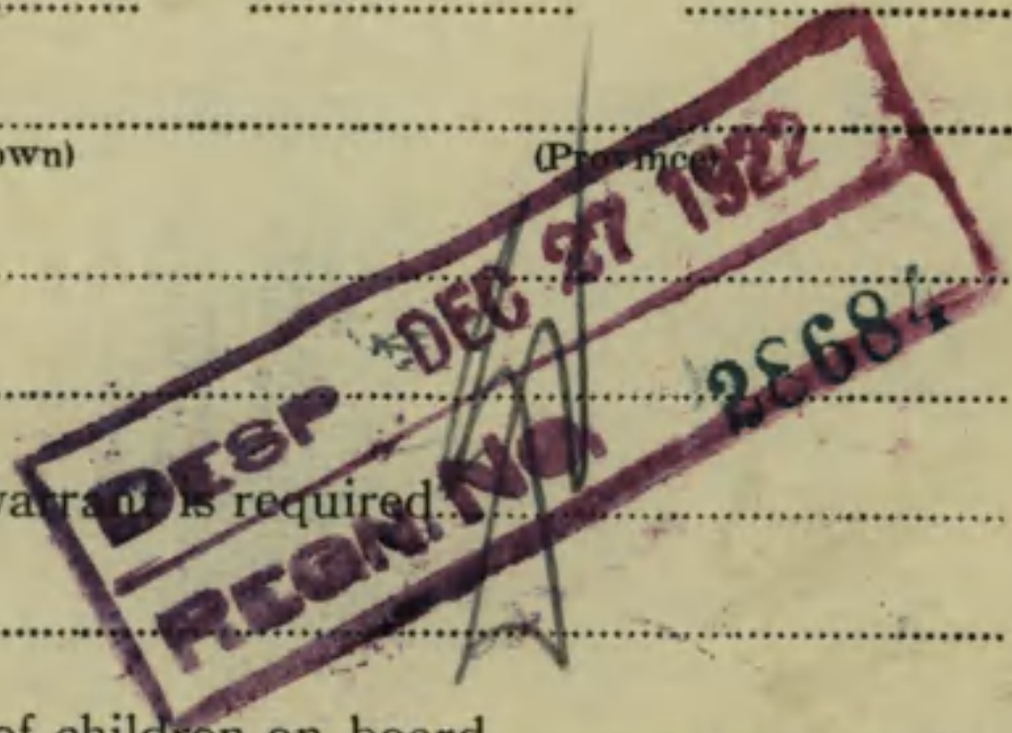
Station in Military District to which a furlough warrant is required.....

..... Railway.....

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

tination.....

(Sgd.).....



Sailed from Halifax per. S.S. "Olympsic" 28/6/16

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Painter RELIGION Church of England

DESCRIPTION.

APPARENT AGE 36 YEARS MONTHS

HEIGHT 5 FEET 5 INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Blue HAIR Fair

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE St. Thomas, Ont. DATE Sept. 2nd 1915.

Present Address Not Stated

SURNAME. Chapman

CHRISTIAN NAMES John Edward

REGL. No. 123377 RANK Pte

UNIT ~~75th Batt.~~ 91st Batt.

FORMER CORPS R. R. R. & S. A.

CARD NO.

S.O.S. this u.T.S. 13-11-18
D.O. 2027 FOLL 18-11-18 1/C.E.R. I

NEXT OF KIN.

NAMES IN FULL Chapman, Mrs Annie

RELATIONSHIP TO SOLDIER Wife

ADDRESS 37 Chester St., St. Thomas, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Leeds, Yorks. DATE July 25th 1879.

PLACE OF ATTESTATION St. Thomas Ont. DATE Sept. 2nd 1915.

Trans: Auth. N. R. 10/11/15. N.B. 16-3-18. 4/4 I

O/S 28/6/16 466/5

9.11

L. L. 90589.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Date of Enlistment 2. 9. 15.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment Jul. 1/916

RATE OF SEPARATION ALLOWANCE

~~20~~	25.		

1-12-17.
P.C 3257

RATE OF ASSIGNMENT

20.			

126C 57
ap.

PARTICULARS OF SEPARATION ALLOWANCE

No. 123377

Rank Pte. Promoted Reverted Discharge

Soldier's Name J. E. Chapman

Battalion 91st Battn "A" Coy.

Beneficiary Eliza Ann. Chapman.

Relationship Wife.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Annie Chapman (wife)

Address 37 Chester St. St Thomas Ont

Change of Address

1

2

3

4

Date 1917.	Cheque No.	Amount S/A	Amount A/P	Total	
Dec. 31		$559.	$360.	$919.	
Jan	T 65838	30	20	50	
Feby	D 93027	25	20	45	
Mch	a 111350	25	20	45	✓
Apr		25	20	45	
		664	440	1104	

REMARKS

M. R. O. 2 B. 23 3/18

31.3.18 A/c Closed

Ret'd per Orpington

Date 21.3.18 F.X. 0325

23.3.18 Clerk A. Hunt

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1774-39-141
L. L. 22825—M. & D. 1493.

P. 559.

MARRIED OR SINGLE: Married

PLACE OF BIRTH: Leeds, Yorkshire, Eng.

NAME AND ADDRESS OF NEXT OF KIN: Mrs Annie Chapman. 37 Chester St. St. Thomas. Ont. Can.

RELATIONSHIP OF NEXT OF KIN: Wife

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ 20.00 EFFECTIVE (DATE) 2/9/15.

PAYABLE TO: Mrs. Eliza Ann Chapman. 37 Chester St. St Thomas. Ont.

RELATIONSHIP OF DEPENDANT: Wife

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 123377 RANK Private NAME Chapman John Edward

IF IN PERMT. CORPS WHAT UNIT | UNIT 91st Bn TRANSFERRED TO 12th Res. Bn DATE 15/7/16 AUTHORITY DO 174-1

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO 6th Bn DATE 1-1-17 AUTHORITY BO 329/16

PLACE OF ATTESTATION St. Thomas. Ont. TRANSFERRED TO L.A.D. DATE 13-4-17 AUTHORITY By Request

DATE OF ATTESTATION 2nd Sept. 1915. TRANSFERRED TO Gen Depot DATE 30-1-18 AUTHORITY Postal 5

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1st July 1916

PAYABLE TO Mrs Annie Chapman, 37 Chester St., St. Thomas. Ont. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

OCT 30 1918

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.3.18 REASON Discharge to Can

DISCHARGE DATE AND PLACE Canada 24.2.18 REASON AND AUTHORITY A.F.B. 179, Gen Dep. 21.2.18 Disposal

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
														800	800										Balance from Canada							$8 00				
Checked [illegible] Hutchings	1916 July 1/15	15	1 00	15	15	10	150								1650	8	15th							243				20		2243	207				Transferred to 12th Res. Bn 15-7-16 DO 174-1
	16/7 31/8	47		47	47		470								5170	1441	31/7	1566	15/8					730	730			20		3460	1917				
	1/9 30/9	30		30	30		300								33	1542	31/8	1671	15/9					487	487			20		2974	2243				
	Oct	31		31	31		310								3410	1704	30/9	1778	15/10					487	487			20	6x 30/29	36	2617				Q 40054 79 20/9/16
	Nov. 1-30	30		30	30		3								33.	1856	30/10	1960	15/11					487.	730			20		3217	2700				
	Dec. 1.31	31		31			310								3410	2051	30/11							730				20		2730	3380				Trans to 6th Bn. 1-1-17 BO 329 7/12/16
	Jan.		F.A.	1840			1840																	3164				140	6x	1760					
1917	1-31	31	1 10	3410											3410	13	20/12							1460				20 -		3460	3330				
	Feb. 1/28	28	1 00/10	3080											3080	113	30/1	68	15/1					243	730			20 -		2973	3437				
	Mar 1/31	31		3410											3410	180 150	24/2 13/2	210	15/3	672	24/3	3rd Res. Bn.		730 730	730	973		20		5163	1684				
	Apr. 1/30	30		3300											3300													20 -		20 -	4984				
	May 1/31	31		3410											3410													20 -	1930	2000 3980	4394	996			Trans to L.A.D 13/4/17 By Request
	June	-		- -											- -														5390	5390		996			
				36850										800	37650									6327	3894	973		220 -	5452	38646		996			

Pay 1/20
Fa 50
1100 21%

#123377 Pte. Chapman John Edward

#20.00 Assigned Pay

DATE 1917	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
Fwd.			368	50										80	376 50
Apr.															✓
May															✓
June 30	19	1/10	114	30					19	1/00	19	00			213 30
July	31		53	70					31		31				83 70
Aug	31		53	70							31				83 70
Sept	30		51								30				81 —
			650	20							171			8	838 20

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		2416	Jan	420	10/4		
				644	15/5	847	31/5
				1058	15/6	1301	30/6
				1455	15/7	1750	31/7
				1976	15/8	2210	31/8
				1540	15/9	2119	24/9

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
6327	3894	973		220 —	5452	38646		996			
1460		1941				3401		3401			
	2920	1460				4380		4380			
	2433	4867		20		9300	1241				
	4380	2920		20		9300	2317				
	3406	3407		20		8813	1874				
	2920	2920		20		7840	3134 ✓				
7787	19953	18494		300	5452	81686					

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Dec	Bal	2134							21 34		
Oct	Pra	83 70					20				
				4/R 97582 10/10 Lao	34 07 ✓						
				3995 27/11	29 20 ✓				21 77		
		83 70		c/f	63 27		20				
Jan	1st Cl P	81 —					20				
				9/R. 10183 [illegible] L.A.O.	34 07 ✓						
Dec	1st cl Ch. Pro	83 70		Dis/P 6			20				
				4/R 25933 11/12 L.A.O.	29 20 ✓						
				6.V.L. 31/12/17	10 00 ✓				73 70		
Jany	1st cl Ch Pro	164 70			73 27		40				
		89 70		4/R. 31318 2/12. L.A.O.	34 07 ✓						
				4/R. 63701 9/1 ✓	29 20						
				AR 99920 17/1	34 07						
				Jan A.P.			20				
				6.V.L. 31/1/18	10 00				79 56		
		83 70		C/V 2 dys Clothes allce	107 34	3 20 3 20	20				
Feb	P.P.	25 30		C.a. P.			20		31 66 30 46		
				3+4 C.V.R. B2834	40						
				1989 7/12/17 Local C.	29 20						
		25 30			69 20	3 20	20		37 54		

MONTH 1918	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Jany	Bal. brought Forward.										
				Dr 2969 Sept 14 7/8	487						
					487						
April	6 bar Vic W.L cane B2834				60 00						
					60 —						
June				C.V.W.L B. 2834	60 —						
Sept.	Cr. Note #10446				42 41						
					42 41						

1. L.P.C. issued, date 23-2-18
2. Authority Gen Dep. A-7B:179 21/2/18
3. Discharged to Canada 24/2/18
4. Pay Book verified 23-2-18
5. Balance shown on L.P.C. $ Dr. Bal: 7:27
6. Balance shown in Ledger Sheet $ 31.66
7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & Particulars of entries.	Amount. Debit	Amount. Credit
	Nov.	Cash London	34 07	
2969	14/2/18	Sept	4 86	
See	amended L.P.C.			
Net difference $		38 92	38 93	

8. Assigned Pay cancelled A.3.M.Forms rendered Stopped E11 6.3.18 60.00
or
9. Separation Allowance and Assigned Pay continued to dependent in England and transferred to Accounts Branch for payment 4241 1759 Tr 60.00

Certified correct [signature] Officer i/c Group.

Checked [signature]

Pay 1 20
72 50
Ka 100
27½

#123377 Pte. Chapman John Edward

#20.00 Assigned Pay

DATE 1917	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
Fwd.			368	50										800	3765 0
Apr.															✓
May															✓
April 3															
June 30	91	1/10	134	30					91	1/00	19	00			21330
July	31		52	70					31		31				8370
Aug	31		52	70							31				8370
Sept	30		51								20				81 —
			659	20							171			8	838 70

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		2416	00	420	10/4		
		644	15/5	847	31/5		
		1058	15/6	1301	30/6		
		1455	15/7	1750	31/7		
		1976	15/8	2310	31/8		
		1970	15/9	2329	24/9		

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE
6327	3894	973		220 —	5452	3864		996		
1460		1941				3401		3401		
	2920	1460				4380		4380		
	2433	4867		20		9300	3241			
	4380	2920		20		9300	2317			
	3406	3407		20		8813	1874			
	2920	2920		20		7840	2734 ✓			
7787	19953	18494		300	5452	81686				

REMARKS

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct	Bal Bd	2734							2134		
Oct	P.a	8370					20				
				a/R 9758 10/10 Lao	3407 ✓						
				3995 27/10 "	2920 ✓				2177		
					8327						
Nov	1st Cr P	8370		a/p			20				
		8100									
				a/R. 10182. 5/11 L.A.O.	3407 ✓						
Dec	1st bl b the Pod	8370		Dec a/p 6			20				
				a/R 10582 1/12 L.A.O.	2920 ✓						
				b.V.L. 31/12/17.	1000 ✓				7380		
		16470			7327		40				
Jany.	1st b.b the Pod	8970		a/R. 3/318 2/12 L.A.O.	3407 ✓						
				a/R. 63701 9/1 ✓	2920						
				a/R 99920 17/1 "	3407						
				Jan a/p.			20				
				b.V.L. 31/1/18.	1000				2956		
		8370		c/cv 2 dys Cleopatra's Alice	10734	320	20				
						330			3166		
Feb	P.P.	2530		C.a.P.			20		3046		
				344 C.V.R. B2834	40						
				198 qr 1/12/17 Local C.	2920						
		2530			6920	320	20		3754		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
1918											
July	Bal. brought Forward.								3754		
				bw 3969/Sept 14 2/18	487 ✓						
					487				4241		
April	Liban Vic W L care. B 2834		6000						1759		
			60 —								
									4241		
June				C.V.W.L.B. 2834	60 —						
					60 —						
Sept.	Cr. Note # 10446.		4241								
			4241								

L.R. Orig. Dr. Bal. 7.27
3rd & 4th C.V.L. B 2834 40.00
198 qr 1/12/17 Local Cashier 29.20
NIL 69.20 69.20

Amended L.R. Dr. Bal. 7647
when Taken

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

619

B4

17-1-33

Military District No. 1
DEC 24 1918
I. M. D. 30 C 610

This space to be for numbers.

Proceedings on Discharge.

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

H M

No. 123377

Rank Private

Name Chapman. John Edward

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

Corps (Squadron, Battery or Company)

Date of Discharge 13-11-18.

Place of Discharge London. Ontario.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 39 years 4 months.
Height 5 feet 5 inches.
Complexion Fair
Eyes Blue
Hair Fair
Trade Painter
Intended place of residence (To be given as fully as practicable.) 37 Chester street St Thomas Ont.

Descriptive Marks
Tattoo both arms.

2. The above-named man is discharged in consequence of being medically unfit for further general service
R.O. 1080 Para (8). I.D. 30-C-610. d 13/11/18.
D.O. 202. Para E. Part II d/18-11-18.

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

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

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

Very Good.

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

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

Painter

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

K.C. Comp.
17-10-19 a.m.

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

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 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. W.S. Lewis Capt. & Adjt.
For O.C. 1st Bn. Cdn. Garr. Regt.

(Date) 13-11-18. 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. John Edward Chapman (*Signature of Soldier.*)

(Date) 13-11-18. E.E. Ouellette. (*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.

John Edward Chapman (*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 3 years 78 days.

Total 3 years 78 days.

11. **Confirmation of Discharge.**

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

(Place) London. Ont.

(Date) 13-11-18. (*Signature*) W.S. Lewis. Capt. & Adjt.
For O.C. 1st Bn. Cdn. Garr. Regt.

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.)

I have received all just demands due me.
John Edward Chapman

(OVER)

PART III

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

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.

PART I. Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C.

Regt. No. 123377 Rank Pte Surname Chapman Christian Name John Edward

Unit or Corps—(*a*) Overseas from United Kingdom (*b*) In United Kingdom Gen Depot.

Born at—Town Leeds County or Province Yorkshire Country England

Date of Birth—Day 25 Month July Year 1879 Age 38 yrs 5 months.

Joined at St. Thomas Ontario, Canada Date 2nd. Sept 1915

Former Trade or Occupation Painter

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

Tatoo (Rt. forearm Ant Surface - Carrier Pigeon
(" " " " Ballet Dancer
(Left " " " Soldier & Girl

Scar near Sternum, at level of 3 rib, on Rt. side.

Military District No. 1
JUN 20 1918
I. D 30 C 610

Height—feet 5 inches 5 Colour of eyes Grey

Signature of Soldier (*for identification purposes*) John Edward Chapman

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*) Deformity Feet

Disabilities Group (*b*)

Disabilities Group (*c*)

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.	HAMMER TOES	Eng.	Nearly life
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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 ? Yes — If yes, has Active Service aggravated it ? Yes

(*ii.*) As to Group (*b*) above ? No — If yes, has Active Service aggravated it ? No

(*iii.*) As to Group (*c*) above ? — If yes, has Active Service aggravated it ?

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

(*i.*) As to Group (*a*) above ?

(*ii.*) As to Group (*b*) above ? No.

(*iii.*) As to Group (*c*) above ?

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

(i.) While on duty? (ii.) While off duty?

(iii.) Was a Court of Inquiry held? (iv.) Where? Not applicable

(vi.) Opinion of the Court?

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*).

This man has had this condition for many years, but it has been aggravated by Active Service.

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

Every toe on each foot exhibits the phenoenon known as "Hammer Toe" This he declares makes him unable to continue at work on his feet for vey long & he has had to give up Batman's work for he was unable to run errands, also he states that he had to give up work as Mess waiter.

Other Systems normal

8. OPERATION. (i.) Was one performed?

(ii.) If so, state what.

(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?

(ii.) If so, describe.

hot applicable

10. DO YOU RECOMMEND:—

(a) Fit for duty? No

(b) Fit for base duty? Yes. B 111. not likely to be raised in six months

(c) Invalid to Canada? No

(d) Discharge from the Service as permanently unfit? No

Date of Report 12-2-18 191 Signed C. R. Church, Capt. Officer in medical charge of case.

Station Shorncliffe, Kent

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

F B Wilson Capt Officer i/c S.M.O. Hospital Brigade Strike out one of these.

Dated at Shorncliffe Station, on 12/2/18 191

* 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%.)

not applicable

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*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).

(i.) Is it permanent?

(ii.) If not permanent, what is its probable minimum duration (*in months*)? not applicable

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applicable

18. Remarks.

NIL

19. Recommendation:—(a) Fit for duty? No

(b) Fit for base duty? Yes B 111. not likely to be raised in 6 months.

(c) Invalid to Canada? No

(d) Discharge from service as permanently unfit? No

Classification for the Military Hospitals Commission

Date of Board 12-2-18

Signatures of the Board. "C.S. McVicar" Lt-Col President. "R.M. Harvie" Capt.

Station Shorncliffe

Approved J R Goodall A.D.M.S.

Dated at FOR A.D.M.S. CANADIANS, SHORNCLIFFE Station 17 FEB 1918 191

21

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.

Board concurs with preceding report.

19. Is the invalid fit for

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

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.)

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.

PLACE London, Ontario

DATE November 5th, 1918.

Capt. CAMC *President.*
Capt. CAMC
} 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

APPROVED BY .....
Assistant Director of Medical Services.
DATE 7.11.18

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

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

MILITARY DISTRICT No. 1
NOV 8 1918
30 C 610

STATION Camp London, Ontario DATE 4-11-18

1. 1 (*a*) Unit No. ~~1 Dist. Depot~~ (*b*) Regimental No. 123377 (*c*) Rank Pte.

(*d*) Surname CHAPMAN (*e*) Christian name John Edward

(*f*) Home address 37 Chester St., St.Thomas, Ontario.

(*g*) Next of Kin Eliza Ann Chapman, (*h*) Relationship Wife

(*i*) Address of Next of Kin 37 Chester St., St.Thomas, Ontario.

2. Age last birthday 39 Date of birth 25-7-79

3. Enlistment, or Appointment (if an Officer) (*a*) Place St.Thomas, Ont. (*b*) Date 2-9-15

4. Personal description:

(*a*) Height 5' 5" (*b*) Weight 135 lbs. (stripped) (*c*) Complexion Medium

(*d*) Colour of hair Brown (*e*) Colour of eyes Blue (*f*) Identification marks, Scars, etc. Tattoo both forearms (Carrier Pigeon, Ballot Girl)

5. Former trade or occupation Car repairer (Railroad)

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	63

	Periods	
	From	To
Canada (Before going overseas.)	2-9-15	25-6-16
England	5-7-16	27-2-18
France or other theatres of War	NO	
Canada.	19-3-18	4-11-18

7. Original disease, or injury Hammer toes and callouses on both feet.

(*a*) Date of origin 2 years before enlistment. (*b*) Place of origin Canada.

(*c*) Cause No cause known. Callouses first noticed and hammer toes came later.

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

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

Partial loss of function of both feet.

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.)

Soldier complains of (1)sharp shooting pains across soles and dorsum of both feet on walking or standing.No pain when feet are at rest but soldier states he experiences great discomfort from callouses constantly.Soldiers condition is aggravated in cold or damp weather.
EXAMINATION-Soldier walks with marked limp and uses cane.Movement of hips knees and ankles of both legs normal. Condition of right foot worse.Shape similates claw foot.Callouses are present under ball of great toes under distal end of 5th metatarsal bone and under great toe.Left foot has two callouses corresponding to the first two mentioned under right foot.All callouses are very tender and pain is elicited on pressure over them.2nd, 3rd and 5th toes of both feet are hammer toes.No swelling or bony deformity present.Soldier cannot bear weight of body on toes.Soldier states he cannot walk more than 2 blocks at own pace without resting.General condition good, heart and lungs normal. Reflexes normal.Eye sight and hearing good.

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

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

Special Senses NO Respiratory System NO Integumentary System NO

Disturbances of Mentality NO Digestive System NO Muscular System NO

Osseous and Joint Systems NO Any other general condition NO EXCEPT AS IN 9A.

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

Soldier states trouble first stated in 1911.Callouses first appeared in positions above described.Five months later soldier noticed hammer toes. After enlisting soldier carried on at drill for few months when feet became troublesome and soldier was given lighter duty.After going to England, soldier carried on at drill for 2 months. He then reported sick and was given lighter duty.Since then soldier has not been able to carry on at regular drill.

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*).)

Double pneumonia 1902. No pleurisy, good recovery.

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

Scar on chest 3" x 1" Blister from poultice Childhood, no disability.

11.—(*a*) Did the disabling condition have its origin before enlistment? YES

(*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.)

Yes, Soldier was able to carry on at drill for two months after enlisting At present soldier states he cannot walk more than two blocks without great pain which causes him to rest.

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? Permanent.

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

Local treatment to callouses. Plasters, Liquid preparation, Special fitting boots and hair soles.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

NO

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

17. Recommendations Category "B".

E. H. Armstrong Capt
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 J. E. Chapman have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

J. E. Chapman. Private Rank.
Signature of invalid examined.