50476	CLARKE	William Charles
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu Box: 1768

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

REGIMENTAL DOCUM

8 M S. NAME CLARKE. WILLIAM. CHARLES REGT. NO. 5047 M. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				23459	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	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)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category
7	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobilization
	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)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M.F.W. 71					
4	MISC.					
3	Corp Med Bd					
1	Med					
1	Pte					

M

B52 168

39-9
17-9
2-19

W 2589
17-12-39 1377

ORIGINAL

ATTESTATION PAPER.

No. ~~1065~~

Folio. 5 0476

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Clarke. William. Charles
2. In what Town, Township or Parish, and in what Country were you born?	Dorchester. England
3. What is the name of your next-of-kin?	Wife. Susannah. Mary Clarke
4. What is the address of your next-of-kin?	Government St. Alberni. B.C.
5. What is the date of your birth?	Feby 25th 1872
6. What is your Trade or Calling?	Nurse
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	88th Regt. V.V.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	12 years. R.C.A. M.C.
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

Wm Chas Clarke ....(Signature of Man).

J Mulligan ....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Wm C Clarke, 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.

Wm Chas Clarke ....(Signature of Recruit)

Date Nov 7 1914. J Mulligan ....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wm C Clarke, 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.

Wm Chas Clarke ....(Signature of Recruit)

Date Nov 7 1914. J Mulligan ....(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 Victoria this 7 day of Nov 1914.

J Mulligan J.P. ....(Signature of Justice)

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

R.L. Borden ....(Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of Clarke W.C. on Enlistment

Apparent Age 42 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 38 ins.; Range of expansion 2 ins.

Complexion Dark

Eyes Grey

Hair Brown

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

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

Defective joint, forefinger left hand.

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 7 Nov. 1914. W. Bayne Adams

Place Victoria A. Beggan Lt Col. A.M.S.
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.

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

(Signature of Officer)

Date Nov. 7th 1914.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 50476 (Rank) Q.M.S.

Name (in full) CLARKE. William Charles. enlisted in

the 88th Bat. 4/10/14. 30th Bat 7/11/14 C.E.F C.A.M.C.

CANADIAN EXPEDITIONARY FORCE at Victoria on the Fourth

day of October 1919.

HE served in Canada, England, France, Lemnos, Salonika,

and is now discharged from the service by reason of ~~Medically unfit.~~ General demobilization

~~Authority Militia Council~~.

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

Age 47

Height 5 Ft 6 in

Complexion dark.

Eyes Grey.

Hair d. Brown

Marks or Scars defarmity

distal phalanx L

fore finger.

W.C. Clarke
Signature of Soldier

Issuing Officer

Rank

Appointment

Date of Discharge April 2nd 1919.

Signed at Esquimalt B.C. this Second day of April 1919.

in Military District No. XI

File Reference No. D.O. 97.

COPIED Archives Copies

MAJOR C.A.M.C.
O.C. ESQUIMALT MILITARY HOSPITAL.

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. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

ESQUIMALT MILITARY HOSPITAL
ORDERLY ROOM
APR 2 1919
ESQUIMALT.

E 17723

Rank and Name d/Sgt CLARKE, William Charles,

Regimental No. ~~6981~~ 50476

Unit 30th. Batt.

Date of enlistment Nov. 7th. 1914

Place of birth Dorchester, England,

Married (Yes or No) Yes,

If in Permanent Force

Name and Address of Next-of-kin
Mrs. Susanah Clarke,
Government St.
Alberni, B. C. Canada

Date and place of discharge

Reason for discharge

Character on discharge

Promotions or appointments

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
	O.C. 50th Bn Commanding Canadians	Promoted Corporal-A.M.S. Returned to duty with Depot Co. C.A.M.C.	Shorncliffe do.	20/3/15 24-6-15	Confirmation Rank-O.S.50th Bn Routine Orders. 24-6-15.
24-6-15	Headquarters	Trans to C.A.M.C.	24-6-15		Letter Shorncliffe 11-6-15-9.
	Canadians	and ~~struck~~ drafted to France.			24-6-15. See R.L. 6-0-62.
3-8-15.	D.G.M.S.	Embarked for ~~Eng~~ England.	Boulogne.	29-7-15.	D.G. 829/06. A.F.B. 103.
1-8-15	D.A.A.G. Canadians	Proceeded to Dardanelles. (on nominal roll as sergt)	—	—	R.L. 28. Shorncliffe H-1-15-145.
6-9-15.		On Nom Roll. I can stat IP.			
13-10-15	3rd Echelon. (G.H.Q. 2nd C.E.).	Promoted to rank of Sergeant		28-6-15.	D.M.S Orders. 38 Para 109. sheet 3. 28-6-15.
17-12-16	1 C.C.S. Hp	Promoted to rank of S/Sgt 3rd Tech		15.11.16	Pt. I O-39
17-6-17	Do	Admn. to Hosp.	Salonika	6-6-17	S/Sgt. Pt II O. 24 Gastritis
24-6-17	do	Disch from Hosp	do	14-6-17	" —— 25 also Pt II DO 27
8-9-17	C.M.Hos.	att-for duty etc on arrival from Salonika	S/Sgt Hasting	5-9-17	Pt II DO 237
2-9-17	#1 6 Stly Gen Hosp	Sick Brit Sal Force on proc to United Kingdom pr duty	" Salonika	16-8-17	—— 35
25-10-17	#13 6 Gen Hosp	Tod from #1 6 Stly Hosp	" Hastings	25.10.17	—— 293.

A.F.B. 103 CHECKED 28 SEP 1917

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
3·10·17	136 Entrkg	SO Shaving proc to London for transport duty to Canada	S/Sgt Hastings	1-11-17	Pro D.O. 6
10-11-17	CAMDep	TOS on posting from 136 Entrkg	Shorncliffe	2-11-17	—— 314
10-11-17	do	Shown on comm on trans duty to Canada	do	6-11-17	—— 314
	CAMC	On boat duty returning first sailing		6-11-17	NR 3
24·2·18	CAMCD	On comm to 1st DD Lepton	S/Sgt Shorncliffe	23-2-18	Pro D.O. 55
15·3·18	do	SO to Canada for dis by AG.	do	24-2-18	—— 714
15·3·18	do	Rtd from On command on transport duty to Canada	do	18-2-18	—— 714

Date of Enlistment

1-11-14

RATE OF SEPARATION ALLOWANCE

25			

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Mar. 1-1915

RATE OF ASSIGNMENT

20.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 0981 (50476 Staff)

Rank Act. Sgt. Promoted Reverted Discharge

Soldier's Name W. C. Clarke.

Battalion 30th Battn.

Beneficiary Mrs Susannah M Clarke

Relationship wife

Address 1750 Hampshire Rd. Oak Bay. Victoria. B.C.

PARTICULARS OF ASSIGNMENT Wife

Name Mrs Susannah. May Clarke.

Address 1750 Hampshire Rd. Victoria

Change of Address B.C.

1

2

3

4

Date 1917	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
Dec 31			911	680	1591		
Jan	S	70307	25	20	45		
Feb.	D	95116	25	20	45.		
Mar.	A	113308	25	20	45		
Apl			~~25~~	~~20~~	~~45~~		

Sa + ap A/c Closed 31-3-18

Sd. 986 =

af. 740 = Ret'd per Orpington

sa+ap 1726 = Date 31-3-18 F.X. 23-2-18

Clerk J.A. Robinson

M. R. O. 2B. issued 23-2-18

J&R

M. F. W. 128
400M.—6-17—177-39-141
L. L. 22320—M. & D. 1493.

CERTIFIED ACCOUNTANTS

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—1772-3b-141
L. L. 22820—M. & D. 1193.

DEPARTMENT OF MILITIA AND DEFENCE.

5087

WAR SERVICE GRATUITY.

E. M. H. D/O. 92 - Service 4 yrs.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names William, Charles... 2. Surname ..Clarke.....
3. Rank ..Q.M.S..... 4. Original Unit 30th Bn. ..... 5. Reg. No. 50476.....
6. Address, in full, to which future payments of gratuity are to be forwarded .....

   William Charles Clarke... Breeds Cross Road.....

   ..... R.M.D. No I. Sidney. B.C. .....
7. Date of enlistment in the C.E.F..... Oct 4/1914 .....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ..Susannah, May, Clarke.....
9. Relationship of such dependent ..... Wife. .....
10. Present address, in full, of such dependent ....Breeds Cross Road.....

    .... RR R.M.D. No I. Sidney, B.C.
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:—

    ..... ~~No.~~ See question 15 .....

    .....
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 ? ..... No. .....
14. Were you on active service only in Canada or the United States ? If so, give particulars of units and dates of such service .....No. .....

    ....

    ....
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 .30th. Bn,..Can!..4/12..Eng.4/12.

    ·No·I·.·Can·Stat·Hospital···Fra'··2/12.··Dardenelles·7/12,Salonica 20/12

    ·Sp·Ser·&·E.M.H.·M.D.No·II.·II/12.
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.....

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments and under what regimental numbers and units ..... 88th Bn. 4..10..14.
30th Bn 7..11..19. No. 0981.

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? ..... No.

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

22. Are you entitled to received, 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? ....

24. Are you now serving in the C.E.F. ..... Yes. ..... If not, give:—(a) Date of discharge
..... (b) Reason for discharge .....
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 ..... No.

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit .....
No I. Can' Stationary Hospital. June 22nd 1915 to Aug 1st 1915.
France, 1/8/15. to 1/2/16. Dardenelles. 1/3/16. to 16/8/17 Salonica.

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ... No.
(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: W. C. Clark

Place of Residence: Irving House, Menzies St. Victoria.

Declared before me at: Victoria BC

This 3rd day of April 1919.

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

Percival R. Brown
NOTARY PUBLIC IN AND FOR THE PROVINCE OF BRITISH COLUMBIA.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....		.....	
.....	.....		.....	
.....	.....		.....	

Certified Correct.

District Paymaster.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

✓

No. Reservations

W. C. Clarke.

Copied
Archives
Copie

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper 2	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218
M F W		71

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.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT No. XI

NAME OF SOLDIER Clark William Charles No. 50476

REGIMENT C.A.M.C. RANK Sgt. A.M.S.

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	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																					
1919. Jan 30	2/ 2-3.									8/ 13. 4. 15. 14. 29 17. 29 32									Lt Keller	X1	X work required Ext 16. Cavity 18. 31
	2/ 18 31									1/ 16									Lt Keller		Complete
April 1st 19.																			Jno D. Hall Lt		Completed

Esquimalt Military Hospital

M.F.B. 465.
6-18.
9-950.

MEDICAL HISTORY SHEET

Surname Clarke Christian Name William Charles

Examined on 7 day of Nov 1914 at Victoria B.C.

Birthplace City or Town Dorchester Eng. County

Apparent age 42 yrs

Trade or occupation Nurse.

Height 5 feet 6 Inches

Weight 150 lbs.

Chest measurement Minimum 38 inches Maximum expansion 2 inches

Physical development Robust

Small-pox Marks

Vaccination Marks Arm Right 6 Left Number 6

When Vaccinated last Feby 1st 1915

(a) Marks indicating congential peculiarities or previous disease

Defective joint forefinger left hand.

(b) Slight defects but not sufficient to cause rejection

Nil

Approved by

Signed D J Cochrane.

Rank Capt CAMC M.O.

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

Date	Result	VACCINATIONS	
			M.O.
			M.O.
			M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	
			M.O.
			M.O.
			M.O.

Enlisted on 7th day of November. 1914 at Victoria BC

	CORPS	REGT'L NUMBER	HABITS	DATE
Joined on enlistment	88th C.F.	50476		7-11-14
Transferred to	30TH C.E.F.			
	No 1 Stationary Hosp			1-5-18

11th Batt'n Canadian Garrison Reg't C. E. F.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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

M. F. B. 313.

300M.—1-17.
H. Q. 1772-39-439.

Surname Glaube Christian Name Frank and Charles

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
Risboro Barracks		20	2	18				Debility		Biii perm approved J.O. Dwyer Capt.	Sgned E.T. Mann Lt Col.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT XI

NAME OF SOLDIER Clarke, W. G. No. 30476

REGIMENT M.G.C. RANK Lt. S. Mn.

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.

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	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 District	REMARKS
Condition on first Examination																							
Mar.	1920		1c 4 1/2									x			1	x					A J Henderson		Exams
																							cleaning

COMPLETED

Capt.

District Dental Officer, M.D. No. 11

FEB 14 1921

M.F.B. 465.
200m.—6-18.
1772-39-950.

J. MORTIMER SYSTEMS
OTTAWA, CANADA

NAME CLARKE William Charles

Regimental No. 50476 ~~0981~~

Unit 30th Batt.

Date of enlistment Nov. 7th, 1914

Place of Birth Dorchester, Eng.

Married (yes or no) Yes

Amount of pay assigned monthly $ 20 00/100.

To whom payable Mrs Susanah May Clarke. Government St. Alberni B.C.

Name and address of next-of-kin
Mrs. Susanah Clarke
Government St.
Alberni, B.C.

Date and place discharged
SEP 14 1918

Reason for discharge

Character on discharge

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	Remarks, Casualties, etc.
1/3/15	31/3/15	31	1.10	34 10	31	10	3 10		37 20			15 25	20		35 25	
1/4/15	30/4/15	30	1.10	33.	30	10	3.	1 95	37 95			17 25	20		37 25	
1/5/15	31/5/15	31	1.10	34 10	31	10	3 10	70	37 90			17 20	20		37 20	
1/6/15	22/6/15	22	1.10	24 20	22	10	2 20	70	27 10			7 50	20		27 50	Transferred to casualty 22/6/15
23/6	30/6	8	1.10	8 80	8	10	80		9 60					40	40	
July 1	July 31	31	1.10	34 10	31	10	3 10	920	46 40			18.	20		38.	
1/8	31/8	31	1.10	34 10	31	10	3 10	840	46 60				20		20	
1/9	30/9	30	1.10	33.	30	10	3.	25 60	61 60				20		20	
1/10	31/10	31	1.10	34 10	31	10	3 10	44 60	78 80	✓		7 30	20		27 30	
Nov 1	Nov 30	30	✓	33.	30	✓	3	~~24 30~~ 51 50	~~57 30~~ 87 50			14 60	20		34 60	
Dec 1	Dec 31	31.	✓	34 10	31.	✓	3 10	55 90	90 10			14 60	20		34 60	
Jan 1/16	Jun 31	31.	✓	34 10	31.	✓	3 10	55 50	92 70	✓		65 08	20		85 08	Carried in Ont Bal No 7.
Feb 1	Feb 29.	29	✓	31 90	29	✓	2 90	7 62	42 42				20	24 20	44 20	
~~Mar 1~~	~~Mar 20~~	~~20~~	~~—~~	~~22~~	~~20~~	~~✓~~	~~2 0~~		~~24 00~~			~~32 12~~	~~20~~	~~1 78~~	~~53 90~~	~~20 741 Stat Temp~~
Mar 1	Mar 20	20	—	22	20	✓	2 0	24 20	48 20	✓		32 12	20	1 78	53 90	6 24 20 Deducted in Ont on 7th Dd 28
21	31	11	1.10	12 10	11	10	1 10	2 01	15 21			14 90		5 70	20 60	Diff of Exchange
														5 39		
		397		436 70			39 70	262.	502 61			223 80	260	24 20	508 00	Dr Bal 5.39

Carried forward to Large Ledger sheet

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

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

L. L. Job 89002.—Req. 6213.

Sheet No. 2. Mrs Susannah M. Clarke Wife

Name of Soldier Clarke, William Charles Sergt.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	G750	71	71 6dy 2
May		M5231	25	25
June		L[illegible]87	25	25
July		R10719	25	25
Aug.		K14122	25	25
Sept.		M15206	25	25
Oct.		Y18400	25	25
Nov.		A22118	25	25
Dec.		A25487	25	25
Jan.	1917	A29063	25	25
Feb.		A. 32014	25	25
March		A 35218	25	25
April		B6[illegible]8	20	25
May		B. 4114	25	25
June		F7628	25	25
July		D[illegible]35	25	25
Aug.		H13728	25	R
Sept.		G17326	25	R
Oct.		M22761	25	Ro
Nov.		B26787	25	Hd
Dec.		J25910	25	Bd
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

911 Mae

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.				

Pte. Wm. D. Clarke
184 th. Batt
Wife Beatrice L Clarke
Lee Avenue Toronto Ont
7-11-16

L.L. Job 68939—M. & D.—5162

3 m. 10-14.
H. Q. 1772—1-13.

1-11-17

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Mrs Susannah M Clarke

Address ~~Government St~~ 20th ~~Marion~~ ~~Alberni~~ ~~B.C~~ ~~Street~~
Oak Bay
Victoria. B.C 1750 Hampshire

Relation to Soldier Wife
wife, child or mother

Name of Soldier William Charles Clarke

Regtl. No.

Rank ~~Corp~~ Prom. Sgt. 22/6/15 PMC 2/3/16.

Corps 50 Batt.

To what Corps belonging
when called out

PAYMENTS

	Month	Year	Cheque No.	Amt.		REMARKS
3/3/16	Aug.	1914				
	Sept.					
	Oct.					
	Nov.					
	Dec.		E 311	20	—	
	Jan.	1915	E 1193	40	—	
	Feb.		E 3096	20.		
	March		E 5108	20.		
	Apl.		F 5026	20		20
	May		76745	20.	—	20
	June		H 6944	20		20
	July		H 8586	20.		20
	Aug.		J 8148	20	—	20
	Sept.		J 9078	20		20
	Oct.		N 7840	20		20
	Nov.		E 21438	20	—	20
	Dec.		J 18410	20		20
	Jan.	1916	N 17385	20		20
	Feb.		F 27856	20		20
	March		30888	20		20

CONSOLIDATED INDUSTRY 2

adj

Taken out and sent to Englewood

Sheet top

1194 - 33
3097 - 20
5109 - 20

(Wife)

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

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

Sheet No. 2. Mrs. Susannah May Clarke Name of Soldier Clarke, W. C.

0981 Act. Sgt.

L. L. Job 89002.—Req. 6213.

$20.00 Remarks. 30th. Battn.

Month.	Year.	Cheque No.	Amt.	
April	1916	B367	20	
May		C 1536	20	
June		G 9640	20	
July		E 9534	~~20~~	
Aug.		H10920	20	
Sept.		M15661	20	
Oct.		M 20334	20	
Nov.		M. 25004	20	
Dec.		S 30058	20	
Jan.	1917	N 37612	20	
Feb.		[illegible]	20	20-R-
March		PH9677	20	20-B-
April		M 1102	20	20 L
May		2144	20	
June		Y 13843	20	20 B.
July		P20675	20	B.
Aug.		U 27436	20	6
Sept.		S 34963	20	D
Oct.		A 25499	20	
Nov.		L 5.4816	20	
Dec.		F51725	20	$680.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

L. L. Job 70481—Pay 5220.

Reinforcements

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Wife

To Whom Mrs. Susannah May Clarke

Address ~~Government St. Kent~~ 1750 Hampshire Rd. ~~Victoria~~ ~~2014 Marion St Oak Bay~~ Victoria B.C.

Rate $20.00 from March 1/15

By Whom Assigned Clarke W.C.

Regtl. No. 0981. 50476 Staff.

Rank Actg Sergt.

Corps 30th Battn

PAYMENTS

	Month	Year	Cheque No.	Amt.	REMARKS
	Aug.	1914			
	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1915			
	Feb.				
	March		A6799	20	
	April		J2105	20	
	May		6691	20	
	June		B10111	80	
	July		A11449	20	
	Aug.		J6741	20	
	Sept.		D7547	20	
	Oct.		H14650	20	
	Nov.		G14701	20	
	Dec.		F14045	20	
	Jan.	1916	E15237	20	
	Feb.		D17634	20	
	March		E18170	20	

CONSOLIDATED 5 ACCOUNT

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

86

To Whom Mrs S. May. Clarke

Address 1750 Stampshire Road
Oak Bay
Victoria
B.C

Rate $100 00

By Whom Assigned Clarke. W.C

Regtl. No. 50476

Rank Sgt.

Corps 1st. D. H.

SPECIAL REMITTANCE

Voted £237.10.11.16

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1916 1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917 1915	Q 32176	100	
Feb.				
March				
April				
May				
June				
July		A14690	100	Soldiers 383 19/6/17.
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT 4

S.Sgt. Name Clarke W. Chas. 1886

M. F. W. 41
1 0M—7-16
1772-39 889.

Regimental No. 50476

Unit C.A.M.C

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Escort Duty
Leave 16-11-17 to 25-1-18.

Date and place discharged

Reason for discharge Ret. to England. 4 2/18

Character on discharge

S.S. Olympic 14/11/17

A.F. 649-6-17354

Form 5351—M. & D. 6880.

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	Remarks, Casualties, etc.
														✓10 00		P.M.M.D.11 CK 173-3 7/12
														✓30 00		" " 11 . 194. 19 17
														✓50 00		" " 11 . 249. 11 1/18
															9000	C.P.M. advised re above advances 5/3/18

R.A. 18 4/18

Returned for duty to M.D 11- 17 2/18

-R.A.

P.M.M.D 11 authorized to credit sub. allce for the period 26 11/17 - 25 1/18 @ 80¢

M. F. W. 41
1 0M — -16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Dak J Birth: 25.2.1872.

Sheet 1.

Army Form B. 103. WDP

Casualty Form—Active Service.

Regiment or Corps 30th Bn C.E.F. 1 Can. Stat. Hos. Roman Cath

Regimental No. 50476 Rank ~~Sergt~~ Pte Name Clarke William Sadler

Enlisted (a) 7.11.14 Terms of Service (a) D.S.W. Service reckons from (a) 7/11/14.

Date of promotion to present rank 15.11.16. Date of appointment to lance rank Numerical position on roll of N.C.Os.

Extended Re-engaged Group 43 Forestry Survey HQ Qualification (b) Civil - nurse Military

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.
Embarked Alexandria 28/2/16. Disembarked Salonika 3/3/16. H.S."Lanfranc".					
9.9.16	A.D.M.S.	To hospital	Salonica	3.9.16	B. 213.
16.9.16	— " —	~~Disch. to duty~~ Admd. to hosp. Diarrh. + Haemorrhoids	— " —	15.9.16	R. 14463.
13.9.16	— " —	Discharged hpl. to duty. Malaria	— " —	12.9.16	R. 14180
23.9.16	— " —	Discharged from hpl. Diarrhoea + Haemorrhoids	— " —	22.9.16	B. 213.
19.11.16	— " —	Promoted S/Sgt. Anthy. to command	In the field	15.11.16	B. 213. O 1810. d/-17/12/1916.
10.6.17	— " —	Admd. to "Gastritis".	— " —	6.6.17	B. 213. O 1810.24 d/-17/6/1917.
17.6.17.	— " —	Disch. to duty	— " —	14.6.17	B. 213. O 1810.25 d/-24/6/1917.
29.6.17.	— " —	Diagnosed "Malaria".	— " —	10.6.17	Memo. O 1810.27 d/-8/7/1917.
25.8.17	M. C. O.	Embarked for Taranto	— " —	16.8.17	E 238. O 1810.35 d/-2/9/1917.
	O/C 30th Bn.	Promoted Cpl. A.M.S.	Shorncliffe	30/3/15	Confirmation Roll.
24/6/15	H.Q. Can	Trans to Camp & drafted to France	" — "		Letter Shorncliffe H.1-15-9 24-6-15 See RL. 6-0-62
3/8/15	D.G.M.S.	Embarked for England	Boulogne.	29/7/15	DG 829/06
1/8/15.	D.A.A.G. Canadians	Proceeded to Dardanelles	—	—	RL. 28. Shorncliffe 8-1-15.-145
6/9/15		6x nom. roll. * Can Stat Hosp.			
13/10/15	3rd Echn. G.H.Q. M.E.F.	Promoted to rank of Sgt		28/6/15	D.M.S. Order 39 para. 109. Sheet 3. 28-6-15 RL 267. 27/10/15

(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.

Nat. A. Lib. Mss. D.C. Clarke, 1353 Hampshire Rd., Oak Bay, Victoria, B.C., Canada.

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				
8/9/17.	Cm Hosp	Att for duty on arrival from Salonica	Hastings	5/9/17	Pte No 251 P K Peat CAPT: FOR LT: COL: I/C RECORDS, C.O.M.F.
4-11-17	Non Can Gen. Hosp.	SOS on being Posted to the C.O.M.C. Depot Shorncliffe.	Hastings	1-11-17	Auth D.A.D.M.S. - T. 650. 30-10-17 E. Williams LIEUT COL. OFFICER COMMANDING No. 13 CANADIAN GENERAL HOSPITAL HASTINGS.
10/11/17	Canada	T.O.S from 12 Gen Hosp	Shorncliff	2/11/17	Pte 251
10/11/17	do	On Command pending transportation to Canada	do	9/11/17	Pte 251
14-2-18	do	Returned from "On Comm"	do	12-2-18	Pt.2.D.O.45
24-2-18	do	On Command to 1st.C.D.D. Buxton pending R.T.C.	do	12-2-18	Pt.2.D.O.5[illegible] Lieut A/Captain A.G. ASST. ADJUTANT FOR O.C. D.A.M.C. DEPOT

MAR 2 5 1918 — HALIFAX — T. ON C. No. 11 CASUALTY UNIT — New Westminster, B. C. MAR 2 5 1918 — PART II. ORDER NO. 86.

APR 1 3 1918 — S. OFF S. No. 11 CASUALTY UNIT TRANSFERRED TO O/S a Co. — New Westminster, B. C. APR 1 3 1918 — PART II. ORDER NO. L.a. Capt FOR O. C. No. XI. CASUALTY UNIT

Sheet 2

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

M. F. W. 54. (A. F. B. 103.
350M.—5-1
H. Q. 1772-39-926.

Casualty Form—Active Service.

Unit, Regiment or Corps 30th Btn (Reserve)

Regimental No. 50476 Rank Pte Name Clarke William Charles

Enlisted (a) 7-11-14 Terms of Service (a) C. E. F. Duf W Service reckons from (a) 7-11-14

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) Bicl. nurse Military

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
14/4/18	T.O.S.	XI. Special Service Coy.	Vancouver B.C.	14/4/18	PART II. ORDER No. 108 18/4/18
30/4/18	XI S.S.Co	SOS XI S.S. Co. CEF	Vancouver B.C.	30/4/18	Part 2 orders no 120 30/4/18
1/5/18	XI S.S.Co.	SOS XI Batt C.G. Regt CEF	Vancouver B.C.	1/5/18	" 2 " 1 1/5/18
29/11/18	11th C.G.R.	S.O.S. 11th Batt'n C.G.R. C.E.F. on transfer C C.A.M.C certified correct in so far as it concerns 11th C.G.R.	Vancouver BC	29/11/18	PART II. ORDER No. 203 d. 29/11/18 Cap't & Adj. 11th Batt'n C.G.R. C.E.F.
20-11-18	OC 11 C.G.R.	T.O.S. Victoria Mil Hospital	Esquimalt BC	20-11-18	D.O. Pt 2 #20, - 20-11-18
27-1-19	O.C.E.M.H.	appld S.M.S. with Pro rata.	" "	20-11-18	D.O. Pt 2 = #27 = 27-1-19
2.4.19	auth #247	discharged from H.M. Forces Esquimalt general demobilization		2.4.19	D.O. Pt 2 = 92 2.4.19. Major C.A.M.C. O.C. Esquimalt Military Hospital

MILITARY HOSPITAL ORDERLY ROOM APR 2 1919 ESQUIMALT

(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				

275

417 MENZIES
VICTORIA, B. C.

FORM LETTER "C".

4-11-20

To Mr. W.C.Clarke, R.M.D.#1

Sidney, B.C.

Dental treatment.

You are hereby authorized to receive dental treatment from Dr. H.J.Henderson, 523 Sayward Bldg., Victoria, B.C.

You are entitled to the following work: Examination; 1 compound amalgam #12; 4 simple amalgams #18-19-31-31; Cleaning of teeth; Partial upper denture of 6 teeth #2-3-4-13-14-15; with 2 gold clasps; Extract with local anaesth. #1-30;
and the amount allowed for this work is $ 24.50

You will please forward immediately on completion of this work, an account in quadruplicate, showing that the work for which payment is claimed has been performed, certified by the Dental Surgeon.

Capt.

District Dental Officer,
Military District No. 11

M.F.W. 2649.
21m.-4-20.(M)
H.Q.1772-39-1468.

C.A.D.C.5009-10M.
3[illegible]-30-8-17.

5[illegible]476.
S/Sgt. Clarke. M.
C.A.M.C.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
21-2-18	Sat			
			F. R. Lemin Capt.	C.A.D.C.

275

FORM LETTER "D"

417 MENZIES ST.
VICTORIA, B. C.

To Dr. H.J.Henderson,

City.

4-11-20

Dental treatment.

#50476 W.C.Clarke, Sidney, V.I., B.C.

The marginally named man has been authorized to receive dental treatment from you.

He is entitled to Examination; Cleaning of teeth 1 compound amalgam #12; 4 simple amalgams #18-19-30-31; Partial upper denture of 6 teeth #2-3-4-13-14-15; with 2 gold clasps; Extract with local anaesth. #1-30;

and the total amount authorized to be paid for this work is $ 24.50

In case the patient desires a different class of work to that specified above, the difference in cost must be born by the patient. The Militia Department will in no case assume any responsibility for any expenditure in excess of that authorized by them.

M.F.W. 2650.
21m 4-20.(M)
H.Q. 1772-39 1469.

Capt.
District Dental Officer
Military District No. 11

12

1. L.E.C.issued, date. 24-2-18.....
2. Authority. C.R.O.3457. 28/2/18. B.M.....
3. Discharged to. Londre.....
4. Pay Book verified. J.W.Bowers. T/Sgt 193...
5. Balance shown on L.E.C. £ 6.1.6.38.....
6. Balance shown in Ledger Sheet £. 101:25.....
7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & Particulars of entry.	Amount Debit	Amount Credit
	3/12/17	Victoria B.C. 7.D.E.	10 00	
	19/12/17	do do	30 00	
	11/1/18	do do	50 00	
1700.	2/2/18	Ration Deduc	4 87	
			94 87	94 87

Net Difference £ 94 87

8. Assigned Pay cancelled. Stopped 2/2/18
A.F.M.Forms rendered.....
or
9. Separation Allowance and Assigned Pay continued to dependent in England and transferred to Accounts Branch for payment.....

Certified correct. M Batt Lieut
Officer i/c Group.

LHP.

Dock.

Mrch-letter 10-11-20.

CHANGE OF ADDRESS

No. 5476 Rank Gnr. Surname Blaske, Christian Names Wm. Charles

Address "Stalwick" R.M.D. 1.g
Sidney.
Bc

Section Hdqrs.

D-19.
LHP.

No. 50476 RANK S/Sgt NAME Clarke. W C.

T. O. S. UNIT Miscellaneous unit
Victoria Military Hospital
M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 June	1918 no apc	n.	Original date of Enlistment 15-4-18.	June payslip

M. F. W. 71—500M.—5 13.
1772—39—961.

ESQUIMALT MILITARY HOSPITAL. C.E.F.

NAME CLARKE. William Charles.

REGIMENTAL NO. 50476. RANK S/Sgt.

ENLISTED AT Victoria B.C. PROMOTIONS, &c. AND DATE Q.M.S. 20/11/18

DATE 7-11-14

IF SERVED PREVIOUSLY, STATE UNIT, &c. 30th Bn. Etc.

MARRIED, WIDOWER, OR SINGLE Married.

NEXT OF KIN Mrs. Susanna Clarke. RELATIONSHIP Wife;

ADDRESS OF 310 Phoenix Place, James Bay, Victoria, B.C.

ASSIGNMENT OF PAY $ 24.00 c. 00 TO Wife.

ADDRESS as above.

SEPARATION ALLOWANCE, ENTITLED OR NOT 30. ~~$25.00~~ per month.

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR wife.

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O. No.	PART II. D. O. DATE	REMARKS IF IN HOSPITAL, [illegible] NAME [illegible] &c.
T.D.S. Esq. Mil. Serf. 27/10/18	20	20-11-18	Transferred from 11 C.G.R.
P.M.S. With Pay & all	27	27-1-19	Effect from 20.11.18
Subsistence Allce	36	5.2.19	effect from 21.11.18
Discharged from Mil. Forces	92	2.4.19	2.4.1919 cam C#47

No. 30476 RANK S. Sgt. NAME Clarke, W C

T. O. S. UNIT No. 11 Special Service Co. C.E.F.

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Dec 25	April 30	C		
May.		C.		
June		C		

NAME Clarke Wm Charles. REGT. No. 50476.

RANK AND UNIT Q.M.S. C.A.M.C.

NEXT OF [redacted] Mrs S.M. Clarke (R.M.D. # 1) Sidney B.C.

CABLE	
NO.	DATE

NATURE OF CASUALTY MD 11

SOS. Dis Demob 2-4-19

Do 92 - 2-4-19. Esq Mil Hosp

auth for card Do 92. 2-4-19 + PT II O-

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

HERB

Number S.04716. Rank Pvt.

Surname CLARKE

Christian Name William Charles

Units 6 a m c Theatre of War France 29-7-15 Salonica 3-3-16

Date of Service

Remarks

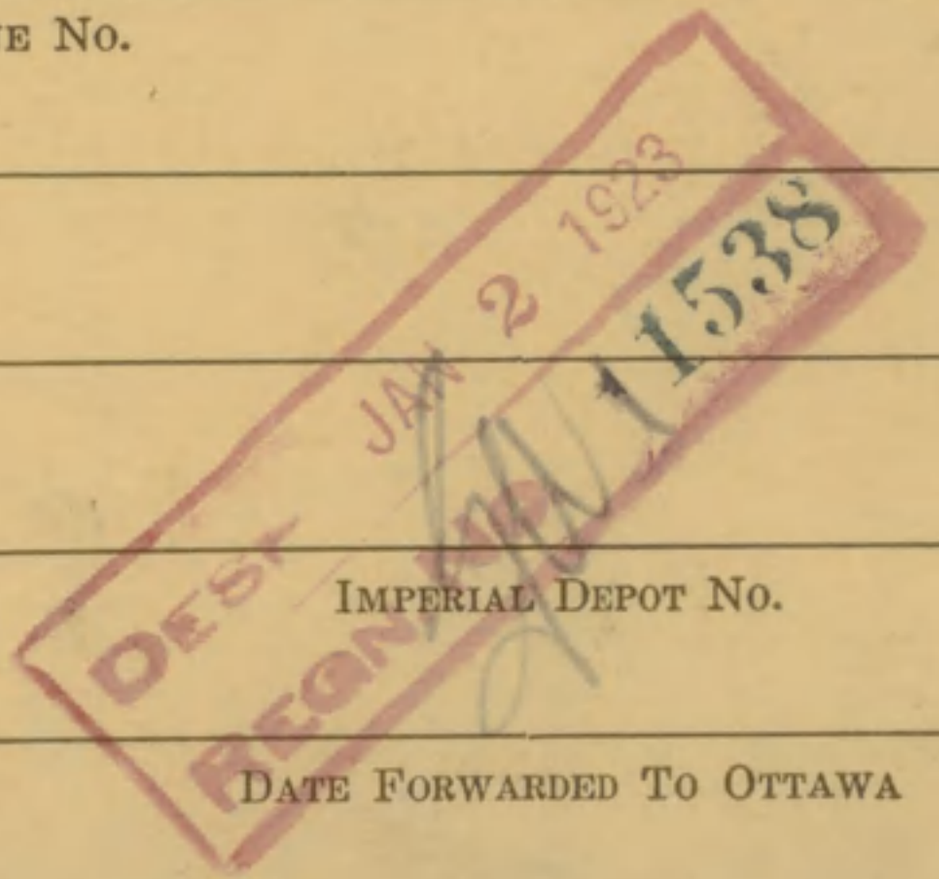
Latest Address R.M.D. # 1. Stalicck Sidney BC

Roll No. B

200m.-6-21. Copy 21004

GRATUITY (IMPERIAL)

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



868—D.P.—40M-1-12-19.

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.)

No. 50496.

Rank Q.M.S.

Surname CLARKE.

Christian name William Charles.

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

Corps (Squadron, Battery or Company) C.A.M.C. Ellis Hosp.

Date of discharge Second - April - 1919.

Place of discharge Esquimalt, Victoria. B.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 47 years months.

Height 5 feet 6 inches.

Complexion dark.

Eyes grey.

Hair Brown.

Trade nurse

Intended place of residence (To be given as fully as practicable.)

Descriptive marks

Deformity distal phalanx L forefinger.

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

General demobilization.

Authority for discharge A.D.M.S. M.D. #11

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

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

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

very good.

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

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

MEDICAL DOCUMENTS FORWARDED TO ~~S. C. R. OR~~ B. P. C. ON 15/4/19

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

RECD 9R 4/2/20

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

COPIED Archives

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

6. Medals and Decorations

Soudan, Imperial, Egyptian
with bar for Khartoum 1898.
Medal 1915

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery*, and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Esquimalt B.C.

(Date) 2nd April 1919.

W. O'Hagan
MAJOR C.A.M.C.
Commanding O.C. ESQUIMALT MILITARY HOSPITAL

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, and that I have received my permanent discharge certificate.

(Place) Esquimalt B.C. W. C. Clarke *(Signature of Soldier.)*

(Date) 2nd April 1919. J. Gibbs *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of Service.

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

France & England 3 y. 16 d. 165
Canada

Total 4 years 181 days.

11. Confirmation of Discharge.

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

(Place) Esquimalt B.C.

(Date) 2nd April 1919.

(Signature) W. O'Hagan
MAJOR C.A.M.C.
O.C. ESQUIMALT MILITARY HOSPITAL

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.

9. apart from time when headaches are severe he is able to do a full day's work.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.)	NO.
(*b*) Service abroad, not general service,	(" B)	(Yes or No.)	NO.
(*c*) Home service (Canada only),	(" C)	(Yes or No.)	Yes, C. 3.
(*d*) Temporarily unfit.	(" D)	(Yes or No.)	NO.
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	NO.

20. It is certified that the invalid

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

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

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

Return to duty.

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.

President.

PLACE Esquimalt B.C.

DATE Mar. 7th 1919

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

David Donald Lyle

Assistant Director of Medical Services.

DATE.....

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.

STATION Esquimalt DATE 7.3.19

1. 1 (*a*) Unit CAMC (*b*) Regimental No. 50476 (*c*) Rank S.M.S.

(*d*) Surname Clarke (*e*) Christian name William Charles

(*f*) Home address R.M.D. No. 1. Sidney B.C.

(*g*) Next of Kin Mrs. Susannah May Clarke (*h*) Relationship wife

(*i*) Address of Next of Kin same address

2. Age last birthday 47 Date of birth Feb. 25. 1872

3. Enlistment, or Appointment (if an Officer) (*a*) Place Victoria (*b*) Date Oct. 4. 1914

4. Personal description:

(*a*) Height 5.6" (*b*) Weight 153 lbs. (stripped) (*c*) Complexion dark

(*d*) Colour of hair d. brown (*e*) Colour of eyes grey (*f*) Identification marks, Scars, etc. Deformity distal phalanx l. forefinger.

5. Former trade or occupation Nurse.

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).

A.D.M.S., M.D. XI.
MAR 7 1919

	Years	Days	Periods From	To
4th				
Canada	Oct. 1914 - Feb. 1915		Mar. 1918 - present.	
England	Feb. 1915 - June 1915		Sep. 1917 - Mar. 1918.	
France or other theatres of War	June 1915 -		Sept. 1917.	

7. Original disease, or injury 1. Dysentery. 2. Malaria.

(*a*) Date of origin 1. Sept. 1915 2. Oct. 1916 (*b*) Place of origin 1. Lemnos. 2. Salinica.

(*c*) Cause 1. 2. Infection.

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.)

1. Attacksof headache occuring about twice a week, resulting from malarial infection.

2. Diarrhoea , occasional attacks of, dating from attack of dysentery in. 1916

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.)

1. Has headache about twice a week , usually lasting 6 hours. Begins mildly, growing in intensity. Last half an hour if attack very severe. Sometimes nauseated. Attack relieved by vomiting. Exposure to cold likely to bring on headache.

2. Occasional attacks of diarrhoea, induced by indiscretion in diet. Considerable tenesmus with later stools.

Tender area over L. costal area, spleen not palpable. Some sclerosis of radials.

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

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

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

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

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

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

Had severe attack of dysentery in the Soudan in 1898. Complete recovery. In 1915 had another attack in Lemnos. Was able to carry on duties but lost a great deal of weight. Occasional attacks of diarrhoea have persisted since that time. In Oct. 1916 developed malaria. Admitted to hospital twice. Last chills were in June and November 1918. Headaches complained of date from attac k of malaria in 1916.

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*).)

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

11.—(*a*) Did the disabling condition have its origin before enlistment? 1. 2. 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.)

1. 2. N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? a. b. 1. 2. 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? 1. 2. Six months.

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

Diet and avoidance of exposure.

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? Yes.
(If not, briefly state why)

17. Recommendations for disposal.

PTO

J. Meadows
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 W. C. Clarke. 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

W. Clarke Dmr. 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
	Victoria Barracks 20-2-18 Debility – B III perm. Pg. E.G. Mann Lieut. Approved A.J. Dawson Capt.

Table IV.—Service Table.

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

PAY & RECORDS OFFICE JN 2 R.I. CANADIAN CONTINGENTS

ORIGINAL

Army Form B. 178.

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

MEDICAL HISTORY of

Surname Clarke *Christian Name* William Charles

TABLE I.—GENERAL TABLE. 20 SEP. 1917

Birthplace ... Parish Dorchester County Eng.

Examined ... ... on 7. day of November 1914.
at Victoria B.C.

Declared Age ... ... 42. years 5. days.

Trade or Occupation ... Nurse.

Height ... ... 5 feet, 6. inches.

Weight ... ... 150. lbs.

Chest Measurement — Girth when fully Expanded. 38 inches.

Chest Measurement — Range of Expansion 2. inches.

Physical Development ... Robust.

Vaccination Marks — Arm ... Right 6 Left

Vaccination Marks — Number 6.

When Vaccinated ... Feb. 1st 1915.

Vision ... ... R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a) Defective joint forefinger left hand

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

Approved by (*Signature*) A/Cochrane
(*Rank*) Capt. CAMC
Medical Officer.

Enlisted ... ... at Victoria B.C.
on 7. day of November 191

Joined on Enlistment ...	Corps.	Regtl. No.
	88th C.F.	
Transferred to	30 Battn C.E.F. No 1 Stationary Hosp.	~~2987~~ 50476

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

CANADIAN

(25012) Wt.W10943–1990. 300 M. 1/15. M.R.Co.,Ltd. 59.

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				

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. 50476 Rank Staff Sergt. Surname CLARKE Christian Name WILLIAM CHARLES

Unit or Corps—(a) Overseas from United Kingdom C A M C (b) In United Kingdom C A M C

Born at—Town Dorchester County or Province Dorset Country England

Date of Birth—Day 25 Month February Year 1872 Age 46 yrs months.

Joined at Victoria British Columbia Canada Date ~~August~~ 7 Nov. 1914

Former Trade or Occupation Nurse

Permanent marks or peculiarities that will serve for future identification :—
Dr's papers Terminal Phalanx first finger left hand due to bite

Height—feet 5 inches 6 Colour of eyes Grey

Signature of Soldier (*for identification purposes*) W. Clarke

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*) DEBILITY

Disabilities Group (*b*) Nil

Disabilities Group (*c*). Nil

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.	CEREBRO SCLEROSIS	Sudan	1898
(*ii.*) As to Group (*b*) above.	Nil	Nil	Nil
(*iii.*) As to Group (*c*) above.	Nil	Nil	Nil

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 ? } not applicable — If yes, has Active Service aggravated it ? } not applicable

(*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 ? } not

(*ii.*) As to Group (*b*) above ? } applicable

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

PART I. *(continued).*

5. If a cause of disability was an injury received on Active Service, was it received—
(*i.*) While on duty? Not A Factor (*ii.*) While off duty? 20.
(*iii.*) Was a Court of Inquiry held? applicable (*iv.*) Where? (*v.*) When?
(*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*). Scarlet fever in boyhood — Dysentery 1895 in The Sudan While with Egyptian army — Wife at home Enlistment — Oct 1914 — Arrived in England Attached to 3-15 with 30th Batt — Went France Nov 1 Slating Hosp CO Mc — Full duty 2 mos. Sent to Lemnos Aug 15 Sent full duty 7 mos. Had dysentery — Alexandria — rest camps — Mch 1916 Salonica until mos return Aug 1917 — While Salonica was ill in hospital with malaria Duty at Hastings Hospital until left for Canada on Leave — duty Complains of Colds — Headaches. Gunshot Shell Severe wound. Dysentery in Sudan lasted several months + says that he was given up for dead

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)
Age 46 Loses 50 —
Pulse 60 Poor quality Radial Artery well thickened —
Heart Sounds distinct — but — Second Snappy —
Spleen normal
Digestive System normal Genito Urinary System normal Nervous System normal —
Grey hairs all over body
Arteri Sclerotic condition of arteries well developed

8. OPERATION. (*i.*) Was one performed? No
(*ii.*) If so, state what. applicable
(*iii.*) Was one advised and declined?

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? 2 Loss, 1 Broken
(*ii.*) If so, describe. Loss Incisors Left upper jaw Broken off + Extracted in Alexandria

10. DO YOU RECOMMEND:—
(*a*) Fit for duty? No
(*b*) Fit for base duty? Yes B III No Likely to be raised in 6 mos
(*c*) Invalid to Canada? No
(*d*) Discharge from the Service as permanently unfit? No

Date of Report Feb. 20 1918 Signed H D Murray Capt.
Officer in medical charge of case.
Station Stonehouse

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

H D Murray Capt. | Officer i/c Hospital / S.M.O. Brigade | Strike out one of these.

Dated at Reboro Barracks Station, on Feb 21 1918

* Delete if inapplicable.

PART II.

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)?
If not, indicate it. Yes

12. Is the cause of the disability fully indicated in Part I. (2)?
If not, indicate it. Yes

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

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

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? No.
(*b*) Fit for base duty? Yes B III permanently
(*c*) Invalid to Canada? No.
(*d*) Discharge from service as permanently unfit? No

Classification for the Military Hospitals Commission

Date of Board Feb 20/18

Signatures of the Board. E Gunason Dge President. / A Macaulay Capt / C W Allum Capt

Station Reboro Bks Stonehouse

Approved A.D.M.S.

Dated at Station 191

5087

AUDITOR 2M | PAYMASTER 4

M. OR S. Married

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

REGT. No. 50476 RANK Q.M.S. NAME (IN FULL) CLARKE, William Charles (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN Mrs Susanna Clarke RELATIONSHIP Wife

ADDRESS 340 Phoenix Place James Bay, Victoria BC

IS SEPARATION ALLOWANCE PAID? Yes DATE EFFECTIVE

TO WHOM PAID as above RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
205	24.4.19	P.O. 92

ORIGINAL UNIT C.E.F. 30th Btn. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Victoria, BC TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 7 Sept 17 TRANSFERRED TO E.M.H. DATE 20-11-18 AUTHORITY

ASSIGNED PAY $ 2H00 DATE EFFECTIVE

PAYABLE TO Mrs S Clarke RELATIONSHIP

ADDRESS ~~340 Phoenix Place~~ James Bay, Victoria BC

ANY CHANGE IN ASSIGNEE OR ADDRESS: RMD No 1. Sidney BC

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Victoria DATE 2.4.19 REASON Demobilization AUTHORITY P/O 92 IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				
Feb 1/28	28	2.00	56	00	22	40			108	40	2659		35672		2739		20	-			34	40	24	-							108	40					Salary Deductions
Mar	31	.	62	.	24	80			116	80	38411		51776		45355		20	.			42	80	24	-							116	80					
Apr	2		4	00	1	60			42	60	Payments have been made								38	60			4	00							42	60					Clothing allce
					2	00					Certified that payment on this account for 1919 amounting to $ has been received by me																										S.O.S. 2.4.19 Of. II to 92.
					35	00																														
											War Service Gratuity																										
											Paymaster, Demobilization Pay M.D. No. 11 Service 3 years months																										
	183 days		420		180	00	600	00			Apl 4		160365 - 263		70		30				70		30		350		150										
											May 5		17535 - 6		70		30				70		30		280		120										
											June 2		188238 - 39		70	-	30	-	31		70		30		210		90										
											July 2		914520 - 1		70	-	30	-	4		70		30		140		60										
											Aug V		833556		70		30		7		70		30		70		30										
											Sept V		1153376 - 7		70		30		7		70		30														
																													420		180							
							600																								600							

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.

Capt.,
Officer i/c War Service Gratuity
M.D. No. 11

100M-1-19.—L. L. 53962-M & D. 9723.
M. F. W. 2596.
1772-39-1390.

MARRIED OR SINGLE: M.

PLACE OF BIRTH: Dorchester Eng.

NAME AND ADDRESS OF NEXT OF KIN: Mrs J Clark Government St Alberni B.C.

RELATIONSHIP OF NEXT OF KIN: wife

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
From Sgt	13/10/15	Dmd 109 CD
" Sgt.	15/11/16	Records 11 Do. 39 17.12.16
		$ U.S. 6.35

ADMISSIONS TO HOSPITAL, &c.

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

REG'L No. 50476 RANK S/Sergeant ~~Opl.~~ NAME Clarke William Charles.

IF IN PERMT. CORPS WHAT UNIT | UNIT 1st Can Sta Hosp | TRANSFERRED TO 13th Bde | DATE 1/11/17 | AUTHORITY Gen. Rolls

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO CAMCD | DATE 1-1-18 | AUTHORITY P.608

PLACE OF ATTESTATION | TRANSFERRED TO NEG | DATE 1-3-18 | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ 20. DATE EFFECTIVE

PAYABLE TO next of kin Mrs S. Clarke Government St Alberni B.C. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

SEP 14 1918

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.3.18 REASON Dis to Canada for Disposal

DISCHARGE DATE AND PLACE Canada 24 25-2-18 REASON AND AUTHORITY Invalided CRO 3457 8/18 B III

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
Mch 31	397		436	70			39	70						26 21	502 61											223 80		260	24 20	508 00		539			
Apr 1-	30	1.10	33		30	10	3								36 00															30 61				ap for apa charges on May Shts
May 1	31		34	10	31	10	3	10							3720	83	15/4							994✓				20 20	49 94	17 87				
June 1-	30	1.35	40	50	30	15	4	50						60 30	10530													20	20	10317				Promoted Sgt. 13.10.15 Dmd. 109 CD. 232 dys @ 30c 69.60 dif adj Mar 1917
July 1-	31		41	85	31		4	65							46 50	92	1/6							994✓				20	29 94	11973				
Aug 31	31	-	41	85	31	-	4	65							46 50													20	20 -	14623				
Sept 30	30	.	40	50	30	-	4	50							45 00	124	1-8-16		111 15-7-16 106 17-7-16					994✓	994✓ 993✓			20 -	49 81	14142				
Oct 31	31		41	85	31		4	65							46 50									994✓ 994✓				20	39 88	14804				
Nov 30	30		40	50	30		4	50							45	144	1/10/16	152	15/10/16.			F.R. 30.37 36.		994✓	994✓	7733		20	137 21	5583		225	35 83	
Dec 31	31		41	85	31		4	65							46 50	14 168 162	7/11/16 9/11/16							1490✓ 1987✓				20	54 77	4756		625		
			39	90																														
Jan 31	31	1.35 .6	38	20											46 50													20	20	7406		1025		Prom: S/Sgt. 15/11/16 Do 39 17/12/16
Feb 28	28		42	00											42 00	183 175	15/12/16 1/12/16							993✓ 994✓				20	39 87	7619		1425		
Mch 31	31	1.35 .15	46	50										930✓	5580	203 197 191 211	1-2-17 16-2-17 1-2-17 16-2-17							994✓ 994✓ 994✓ 994✓				480 20	79 62	5237		1825		39 underwritten 31 dys. dif Cpl's Sgt's Pay June 1916
			1005	60										9581	110141									17390	29812	23380	9733	500 00	24 20	101490				

Small Ledger Sheet.

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5046 Sgt. Clarke W.C.

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
Jan.			100	60										95 81	1101 41
Apl.	30	1 35/16	45	00											45 00
May	31		46	50											46 50
June	30		45	-											45 -
July	31		46	50											46 50
Aug	31		46	50											46 50
Sept	30		45	-										96 -	141 -
			1280	10										191 81	1471 91

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		223	15/4				
		217	1/4				
		238	16-4				
		331	2-4			83	1.5.17
		266	30.6				
		261	1.6				
		272	8.7				
		278	14.7				

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS
173 90	29 81	223 80	97 33	500 00	24 20	1049 04
9 94				20		20
14 90				20 -		44 84
9 94						
9 94			100 -	20		139 88
				20	26 7	32 87
9 93				20 -		20 -
9 94						
9 94						
14 90				20 -		64 71
263 33	29 81	223 80	197 33	620 00	26 87	1361 14

BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE
52 37			
77 37		22 25	
79 03		26 25	
	15 85	20 25	
7 98		34 25	
34 48		38 25	
110 77		42 25	

REMARKS

Ord #2 1st Sta Hosp Nov 1916 to 20/4/16 Chg as 97.33 should be 100.00

98 to Off Canteen Dbgt & Sgts pay forms 15.11.16 to 30.9.17 not credited Ealing 378

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	BALANCE	DEFER. SER. RED. ALLCE. PAY ENG.
Oct 1	Balce	110 77					110 77	
	S/S P.	55 80		1st Sta Hosp 1082 12/9	73 -		20 - 16 57	
		55 82		do 1258 7/9	97 33		10273	
					82 73		6384	
				AR 149-13GH-10-10-17 TH	97 73		20 - 10980	
							13564	H625
Nov	S/Sgts Pay	54 00		C.P. 1992-2-11-17	24 33		14506	
				AR 1284-13GH-1-8-17 TH	97 73			
				AR 289-13GH-15-8-17	16 60			
				AR 254-13GH-30-10-17	48 67			
							20	50 25
Dec	S/Sgts Pay	55 80					20	26 58
1918		107 80			107 06		10	52 25
Jan	"	55 80		m/255			20	15 97
				" 16 can Stn.	99 41			
				" 247 do	99 41			42 50
		55 80			198 88		20	65 70
Feb	S. Sgt. Pay 1.24 2nd yr	43 20		6 a day.				
	16/3/17 to 12/7/17							67 35
	Amt on Deferred Pay	1 65						
	Underscribed Pay as Sgt. from 22/3/15 to 12/7/15 1/3 2nd yr	33 90						101 25
	Contn CPM file Cpl 2316	78 75					20	
April				Trail 1700 B.A.M.C.D. 22.2.18 (114)	4 87			96 38
					487			
May				Advances while on furlough auth. GO letter Emp. C. 17354	90 -			6 38
					90			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. SER. RED. ALLCE. PAY ENG.
1918				Brot forward					6 38	
June				Salary Balance to 27.2.18 (93)	6 38				- -	

A3M. FORM REN 2 Stpd EFFLC 1/3/18
DISCHARGED TO Canada DATE 25/3/18
PAYBOOK VERIFIED [illegible] psg 182
to BAL 6 38 to P.O. REM 2 2/7/18
AUTHY. G.R.O. 3451 8/7/18. B111.

1M 21' 6 11 95 N