11-4-19 aa. (PTE)

REGIMENTAL DOCUMENTS

NAME COLE DAWSON ALBERT REGT. NO. 651755 UNIT 160TH BN H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		~~K.C.D. 16-2-20~~	Ret 16.2.20		DEATH
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				27964	
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med Unfit
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					2
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	MFW 192					20-19
2	[illegible]					20-19
1	[illegible]					1 19
	[illegible]					
1	[illegible]					
4	DMA 1348					

W. 2589
100M-11-18
1772-39-1277

DUPLICATE

ATTESTATION PAPER.

No. 651755

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Cole
1a. What are your Christian names?	Dawson Albert
1b. What is your present address?	Chesley, Ontario.
2. In what Town, Township or Parish, and in what Country were you born?	Roughton, England.
3. What is the name of your next-of kin?	Mrs. D. A. Cole
4. What is the address of your next-of-kin?	Chesley, Ontario.
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	December 22nd 1886
6. What is your Trade or Calling?	Railway Section-man
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	~~Yes~~ No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Dawson Albert Cole, do solemnly declare that the above are answers made by me to the above questions and that they 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.

D a Cole (Signature of Recruit)

Date February 18th 191 6 J Chilton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Dawson Albert Cole, 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.

D a Cole (Signature of Recruit)

Date February 18th 191 6 J Chilton (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 Chesley this 18th day of February 191 6.

E. Dallendar Major (Signature of Justice)

M. F. W. 23.
400M.—1 -15.
H. Q. 1772-39-841.

Description of DAWSON A COLE on Enlistment:

Apparent Age 29 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft 3½ ins.

Chest measurement: Girth when fully expanded ..... 35 ins.

Chest measurement: Range of expansion .... 2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Brown

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

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).

None

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 February 18th 1916. .....

Place Chesley, Ontario. ..... J. A. Ramme .....
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.

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

..... A. Weir Lt Col (Signature of Officer)

Date Feb 18th 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 651755 (Rank) PRIVATE

Name (in full) COLE, Dawson Albert enlisted in

the 160th Bruce Battalion, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at CHESLEY, ONT. on the EIGHTEENTH

day of FEBRUARY, 19 16.

HE served in FRANCE (With 18th BATTALION)

and is now discharged from the service by reason of MEDICALLY UNFIT

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

Age 32

Height 5 - 3½

Complexion FAIR

Eyes BLUE

Hair BROWN

Marks or Scars DOUBLE HERNIOTOMY SCARS.

Signature of Soldier

DISCHARGE SECTION
MAI 19 1919
No. 1 District Depot

J. C. Cuttle

Issuing Officer

Capt.

Rank

Date of Discharge ... O. C. DISCHARGE SECTION, NO. 1 D.D.

Appointment

Signed at LONDON, ONT. this NINETEENTH day of MARCH, 19

in Military District No. ONE

File Reference No. IDD-10-C-555

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.
250m.—6-18.
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

On demobilization the particulars called for on the back of this certificate will not be completed

E

Date of Enlistment 1/3/16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C 7569

Date of Assignment Oct 1/16

RATE OF SEPARATION ALLOWANCE

20	~~25~~ 00	30	

1-12-17 1-9-18 162753 30174

P. 6-3257

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 651755 D.A

Rank Pte Promoted Reverted Discharge

Soldier's Name Albert Dawson Cole

Battalion 160th Battn

Beneficiary Mrs Rose Mary Cole

Relationship Wife MJ N. 5554-7 8/18

Address Chesley Ont. Ret'd OK

PARTICULARS OF ASSIGNMENT Wife

Name Mrs Rose Cole

Address Chesley. Ont.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31		440	225	665	
1918 Jan.	63060 D	30	15	45	D
Feb	96306 D	25	15	40	
Mar.	114494 A	25	15	40	✓
Apr.	7873 N	25	15	40	
May	13916 M	25	15	40	
June	24546 G	25	15	40	✓
July	27979 S	25	15	40	
Aug	37758 G	25	15	40	
Sept.	46227 J	25	15	40	
Oct.	55437 J	25	15	40	
Nov	55421 D.	25	15	40	
Dec	64952 D	45	15	60	
Jan 19	75521 J	30	15	45	
Feb	79538 M	30	15	45	
		825	435	1260	

03433 D 9.

REMARKS

W B

28/3/19

A/c Closed

Ret'd per Empress of Britain

Date 25/3/19 F.X. 13/19

Clerk

73453 D 1/3/19

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

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22530—M. & D. 7988.

L. L. Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-319.

To Whom Mrs Rose Cole Wife

Address Chesley Ont

Rate 15 00

By Whom Assigned Cole. A/D. A.

Regtl. No. 651755

Rank Pte.

Corps 160th Battn.

OCT 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 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2.

L. L. Job 4503.—Req. 6832.

Mrs Rose Cole Wife — PAYMENTS. — 651755 — Name of Soldier Cole. A. D. & Pte. — 160th Battn.

15-00

OCT 1. 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		526590	15	
Nov.		E 29176	15	
Dec.		L 36147	15	
Jan.	1917	Q 35906	15	
Feb.		Q 42248	15	15
March		S 49795	15	15-L
April		V 1066	15	15-Cl.
May		O 6971	15	
June		E 13912	15	15-Cl.
July		S 21085	15	15
Aug.		N 29815	15	6
Sept.		V 33850	15	03
Oct.		K 47040	15	
Nov.		L 49013	15	
Dec.		L 55625	15	
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.				

1.3.16

L. L. Job 88773—M. & D. 6195.

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Rosemary Cole

Address Cheeley Ont.

Relation to Soldier wife, child or mother } Wife

Name of Soldier ~~Dawson~~ Cole, Albert Dawson

Regtl. No. 651755

Rank Pte

Corps 160th Battn

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.				
Dec.				
Jan.	1916			
Feb.				
March		J 29236	20 - 20	

CONSOLIDATED ACCOUNT 6

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

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

Sheet No. 2. ~~Albert D~~ Rose Mary Cole

L. L. Job 89002.—Req. 6213.

PAYMENTS. Wife

Name of Soldier Cole Albert Dawson
651755

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	0816	20	20
May		O5012	20 —	20
June		K8613	20	20
July	Z	7616	20	20
Aug.		L11825	20	20
Sept.		S.15350	20	20
Oct.		A18882	20	20
Nov.		C27112	20	20
Dec.		C25663	20	20
Jan.	1917	C29194	20	20
Feb.		C32079	20	20
March		C35263	20	20
April		D.773	20	20
May		D4577	20	20
June		G7548	20	20
July	F	11762	20	20
Aug.		F13904	20	
Sept.		17019	20	X
Oct.		O22735	20	X
Nov.	D	26742	20	B
Dec.		N25363	20	X
Jan.	1918			440.
Feb.				
March				
April				
May				
June				
July				

300

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.				

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.)

Slight weakness of the left lower abdominal wall following herniotomy in France.

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.)

OBJECTIVE-Double herniotomy scars.Well healed, not tender.Left side shows a bulging at the lower end of scar.Bulging is about size of small walnut and is increased on coughing.This gies an expansile impulse to the tumour.Mass is easily reducible, disappearing on lying down.Under the site of swelling there is a separation of the muscle, leaving a weakened spot simulating a ring. A truss supports it well.

SUBJECTIVE-Has not symptoms when he wears a truss.If he leaves a truss off it aches slightly.Never comes down into scrotum.

(*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*).)—

States he never had any swelling or pain in groins until about 9 months after enlisting.At Bramshott, November 1916, while jumping a trench, slipped and fell and states that he felt as if he strained himself there.Left hernia developed, was never complete but stayed about the same as it is at present.A couple of weeks later right hernia developed, being much smaller than left.

Boarded "C"III and light duty until Nov.1917 when he was boarded "A"II and fitted with truss.Went to France in March 1918.Fitted with truss and sent to Hospital.Here a double herniotomy was done.Left recurred soon after leaving hospital.

AM

28-3-18

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 London, Ontario. DATE March 15th, 1919.

1. 1 (*a*) Unit No.1 Dist.Depot. (*b*) Regimental No. 651755 (*c*) Rank Pte.

(*d*) Surname COLE (*e*) Christian name Dawson Albert.

(*f*) Home address Box, 73, Chesley, Ontario.

(*g*) Next of Kin Mrs.R.COLE (*h*) Relationship Wife.

(*i*) Address of Next of Kin Box 73, Chesley, Ontario.

2. Age last birthday 33. Date of birth Dec. 22nd, 1885

3. Enlistment, or Appointment (if an Officer) (*a*) Place Chesley, Ontario. (*b*) Date Feb.18th, 1916

4. Personal description:

(*a*) Height 5' 4" (*b*) Weight 135 lbs. (stripped) (*c*) Complexion Fair.

(*d*) Colour of hair Brown (*e*) Colour of eyes Blue (*f*) Identification marks, Scars, etc. Double herniotomy scars.

5. Former trade or occupation Sectionman(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	25.

	Periods	
	From	To
Canada	18-2-16 17-2-19	17-10-16 15-3-19
England	28-10-16. 17-12-18	28-3-18 17-2-19
France or other theatres of War	28-3-1918	17-12-18

7. Original disease, or injury Incomplete left inguinal hernia, recurring after herniotomy.

(*a*) Date of origin September 1918 (*b*) Place of origin FRANCE.

(*c*) Cause Weak abdominal wall.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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*).)

Right inguinal hernia developed in Nov. 1916. Radical cure in Sept. 1918.

No disability.

Gassed 16-8-18. Recovered. No disability.

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

Double herniotomy scars.

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

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

NOT APPLICABLE.

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.)

Double inguinal herniotomy on 15-9-18. Truss.

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)

Yes, operation for repair of abdominal wall.

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

17. Recommendations Operation for repair of abdominal wall.

R McCulloch 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 D. A. COLE. 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

D A Cole Rank Pte
Signature of invalid examined.
C Lines

OPINION OF THE MEDICAL BOARD

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

The Board agrees that condition is as described.

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.)	YES
(*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.)

Operation for recurrent hernia.

(*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.)

Operated on for recurrent hernia.

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

C Fullerton Major CAMC *President.*

F.C. Eakins capt *Members*

PLACE London, Ontario,

DATE March 15th, 1919.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness C Fullerton Signed D A Cole

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.

The board considers refusal reasonable on compassionate grounds.

C Fullerton Major CAMC *President.*

F.C. Eakins capt *Members*

PLACE London, Ontario,

DATE March 15th, 1919.

APPROVED BY

A T Laird capt. CAMC

for *Assistant Director of Medical Services.*

DATE 17.3.15

APPROVED BY

Director-General of Medical Services.

DATE

ORIGINAL Original

651755

MEDICAL HISTORY SHEET.

Surname Cole *Christian Name* Dawson Albert

Examined { on 18 day of Feb 1916
at Chesley. Ont.

Birthplace { City or Town Roughton
County England

Apparent age 29

Trade or occupation Section man

Height 5 Feet 3½ Inches.

Weight 140 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right. 0 Left. 2
Number Two

When Vaccinated last In childhood

(*a*) Marks indicating congenital peculiarities or previous disease none

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

Approved by A. A. Belcher

Rank Captain M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		30 DEC 1916 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
1916 June 7	Pos	A. E. Belcher M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
22/8/16		A Stewart M.O.
30/8/16		A Stewart M.O.
7/9/16		A Stewart M.O.

N.O. 13 11/9/16 1 cc

Enlisted on 18th *day of* February 1916 *at* Chesley, Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	160th Os. B'n. C. E. F.	651755		
Transferred to	CBAB 13/11/17 DO #13 attached 160th Bn Re-attached Gar Duty Bn 17/2/17 DO #47. R.B. Whitehead Capt			

18 Bn

W.D. 7/3/17

adj 160th Bn

160th Bn

4th Res Bn

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

3-11-17

Station.	Date.	Disease.	Result.
London	8/10/16	Med Bd Jet.	D. J. McNally Major C.A.M.C.
Bramshott Camp, Hants.	30/10/16	Inguinal Hernia	Class C iii Chairman Medical Board President.
Bramshott	8/11/17	Ing Hernia	A ii

FEB 23 1918

30 NOV 1916

APPROVED.

R. B. Stewart Major,
A.D.M.S. for A. D. M. S.,
Canadian Troops, Bramshott Camp

MEDICAL BOARD, BRAMSHOTT.

6-6-18

London Ont 17-3-19 Inguinal Hernia. med unfit

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.

200M—11-15.
H. Q. 1772 39-439.

Surname Cole Christian Name Queen G.

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.

R—122
8,401—50,000—21-10-16.

E. D. Rank Name COLE Dawson Albert Reg'l No. 651755

Unit 160th Battn If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment Chesley Ont. 18th February 1916 Place of Birth Roughton England

Name and Address, Next-of-Kin Mrs D. A. Cole

P.O. Chesley Ontario Relationship Wife

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 3382
File R.L.
CAN.OR

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.
C.		ARRIVED IN ENGLAND "S.S. METAGAMA 28-10-16			
13-1-17	160th Bn	Transferred to C.C.A.C. and attached to 160th Battalion.	Bramshott	30 11 16 ~~13-1-17~~	Pt II DO 59 28 2/17 Pt II D.O. #13.
12. 1. 17	C.C.A.C	T.O.S. on Com 160th Bn.	Hastings	30. 11. 16	" 20.
16. 2. 17	160th Bn	Re attd to Garr Duty Bn.	Bramshott	17. 2. 17	" 47.
19 2 17	G.D. Bn.	att to G.D. Bn for BDDR 96F	"	17 2 17	" " 43.
20. 3. 17	W.O.R.D	Taken On Strength from CCAC & On Comm. Cass. D.B.	"	11. 3. 17	— 10 Aug CCAC. 120 D/14 3/17
15-5-17	do	Ceases On Comm'd G.D. Bn. & On Comm'd Mytchett Ranges.	"	27-3-17	— 59
14-9-17	do	On command No 3 Hut Y.M.C.A.	"	13-9-17	— 163
13.11.17	"	Reps to Depot Pay and is "Off Corn"	" Pl	12-11-17	— 214
14.11.17	"	Posted to 160th Bn.	" "	13.11.17	— 215. 160 Bn. 272 d 16 11/17

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.
18.2.18	160th	Granted good Conduct Badge	Witley		18-2-18	Pt II O. 24 4th Res Bn DO. 48 of 23.2.18
23.2.18	160th Bn	S.O.S on Transfer to 4th Res Bn	"	Pt.	23.2.18	Pt II O. 28 18th Bn Pt II O 27 of 5.4.18
29.3.18	4th Res Bn	Posted to 18th Bn O/Seas	Bofrott	–	28.3.18	Pt II O 75
24.8.18	WOR (18)	WOUNDED	field	"	18.8.18	CLA 297 & WORD
28.12.18	18th Bn.	S.O.S. to W.O.R.D.	"	"	12.12.18	Pt II O 128 307 of 31.12.18
14.3.19	W.ORD	Ceases Com Phyl + S.O.S to C.E.F. Canada	Witley	"	17.2.19	" " " 62.
17.2.19	MDCWI	Att from G.D.	Phyl	"	13.1.19	" " 41
17.2.19	"	Cease Att.	"	"	17.2.19	" 41

Duplicate

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 160th Os. B'n. C.E.F.

(2) Regimental Number 651755.

(3) Full Name of Soldier COLE, Dawson Albert

(4) Place of Birth Roughton, Norfolk Co. England.

(5) Are you married, or not ? Yes.

(6) If married, state,
(a) Full name of your wife Rose M. Cole.

(b) Present Postal Address Chesley, Ont.

(7) Are you a widower ? No.

(8) Have you any children ? Yes.

If so, give number of boys and girls 1 girl.

Also their names and ages Hazel 3 yrs.

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....No.....

If so, state name and address .....Nil.....

(10) Is your Mother alive ?.....Yes.....

If so, state name and address.....Elizabeth Cole.....

.....Cromer, Norfolk Co. England.....

(11) If your Mother is a widow.....No.....

Are you her sole support, or not ?.....Nil.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....Nil.....

.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....Nil.....

.....

.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance ? If not, this must be done.

.....Yes.....

(15) Are you insured ?.....Yes.....

If so, in what Company ?.....C. O. F.....

Have you made arrangements for payment of your Insurance premium.....Yes.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

.....Lt.Col.

Officer Commanding.

Date...May 25th., 1916.....

160th Os. B'n. C.E.F.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER COLE Dawson Albert

REGIMENT 160 th

RANK Pte

DISTRICT 1

No. 551755

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 District	REMARKS
Condition on first Examination	1919 Mar 14	4 4.15 17.32									3 18.17 30									R G McMillan Capt		Oct. 6.12.17.31. Nov. 14.29 lower restoration

M.F.B. 465.
150M.—6-18.
772-39-950.

Form D.[illegible]. 1348 (Revised).
2075—30m—2/12/16.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

Nov 8 1917

No. 651755 Rank Pte. Name COLE D. A.

Local Unit WORD. Overseas Unit Age 32

Examination held in Bramshott area.

DISABILITY. INGUINAL HERNIAE, BOTH SIDES

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

Left Hernia acquired existed 3 yrs.
Rt Hernia Bubonocele quite recent
1 yrs standing. Can be retained by
a proper Truss. Refuses operation
Otherwise fit

Board recommends : A ii

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

Signatures :

Pres. C Maywood Capt

Members { W.H.T. Baillie Capt
W.R. Stackhouse Capt.

Approved.

Bramshott 8-11- 1917 M. MacTaggart Lt.

for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

PRESENT CONDITION

DISABILITY

STANDING MEDICAL BOARD, BRAMSHOTT

BY

EXAMINATION

D.M.S. 134 (Revised).

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

30-11- 1916.

No. 651755 Rank Pte Name Cole D. A.

Local Unit 160 Bn Overseas Unit Age 29

Examination held at Bramshott, Hants.

DISABILITY. ~~Double~~ Inguinal Hernias Right and Left Sides.

~~Overseas~~—Local.
(scratch one out)

PRESENT CONDITION.

Has had left Inq Hernia - small
Sept for 3 years - Right side very small
Inguinal Hernia - duration one year.

Board recommends:

1. Fit for Duty.
2. Fit for duty after ..... weeks physical training.
3. Fit for Base duty ..... weeks.
4. Fit for Permanent Base Duty. Yes - class C (temp)
5. Discharge.

Signatures:

C. E. Cooper Cole Major C.A.M.C. Pres.
Members { A. A. Dickson Major
H. Fraser Jackson Capt.

Approved.

Bramshott Nov. 30 - 1916.

F. A. Stewart Maj
for A.D.M.S. 1st C. C.
Canadian Troops, Bramshott.

1 P.M. 10 Co. 184

ORIGINAL

LAST PAY CERTIFICATE

Regt.No. 651755 Rank Pte. Name Cole. Dawson Albert

Corps 160 Bn. Who was Discharged

on 19 3/14 1919 to

The following is a statement of the account of the above named from 1 3/19 to 19 3/14

from mon. of		from mon. of Feb 33 20	
Bal Dr		Bal Cr	
From L.P.C.	50	from L.P.C.	
ASSIGNED PAY: 9 00 19	28 50	Regt.Pay 19 dys. @ $ 1	19 00
AR 344		F'ld All. 19 dys. @ $ 10	1 90
SEPARATION ALLOWANCE:		SEPARATION ALLOWANCE:	19 00
		OTHER CREDITS: Clothing Allowance	35. 00
OTHER CHARGES:			
PAYMENTS: AR 344 19/3/19	91 60	Subsistence @ 80 per day 28 3/19 - 14 3/19	12 00
Bal.Credit (to be pd.)		Bal.Dr.(to be deducted)	
W P G	120 10	(from soldier $ (from Dependent $	120 10

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BND
at $ 30 per month has been paid to 19 3/14 by this Unit	at $ 15 per month has been paid to 19 3/14 by this Unit	Subscribed $ Paid by other Units $ Nil Unit

Dependent or Beneficiary : Mrs Rose Cole

Address: Chesley Ont.

REMARKS: D.S. 77 Discharged 19 3/14 on Demobilization. Nil

Date of Enlistment: 18 2/16
If married and if Separation Allowance card submitted.

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

Date:
London, Ontario.

Captain.
Paymaster, No. 1 District Depot.

Payment
District Depot
MAR 1
No. 1
LONDON, ONT.

This form must not be used when the Proceedings are for the information of the B.P.C. In such cases, M.F.B.227 is the only form applicable.

FOR ALL RANKS

PROCEEDINGS OF A MEDICAL BOARD (short form).

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

Number..... Rank..... Name.....

Corps..... Age..... Height..... Weight.....

Religion..... Has he been Overseas.....

(1) Disease or Injury.....

(2) Cause.....

Where incurred..... Date.....

([redacted]) Disability.....

(4) Present condition (describe fully).....

(5) History.....

(6) Probable duration of Disability.....

(7) Is officer or other rank fit for Category, A..... B..... C..... D.....
(answer yes or no).

(8) If for treatment, specify nature of.....

.....President.

.....Member.

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

Approved..... A.D.M.S., M.D.

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

M.F.W.180.

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.
16-11-17	O.C. 160th Bn	Taken on strength 160th Bn	Witley	13-11-17	D.O. Part 2 # 272 ✓
23/2/18	O.C. 160th Bn	S.O.S. on transfer to 4th Cdn Reserve Bn	Witley	23/2/18	D.O. Part 2 # 28 ✓ + 18th Bn Pt 2027 S 4/18 R B Whitehead ADJUTANT, FOR O.C. 160th CANADIAN INFANTRY BATTALION.
26.2.18	O.C. 4th Res. Bn.	T.O.S. 4th. Res. Bn.	Bramshott	24.2.18	Pt. 2. Order 48 ✓
29-3-18	O.C. 4th Res. Bn.	Having proceeded overseas to 18th Battn. is S.O.S. 4th Res. Battn.	Bramshott	28-3-18	Part 2 Order No. 75. ✓ J. E. Hylie Lieut. A/Adjt. 4th Canadian Res. Battalion.
19-1-17	CCoC	T.O.S. on Command 160	Hastings	30-11-16	Pt 20
19-2-17	G.D.B.	attd G.D.B. for B.O.D. RACP.	Bishott.	17.2.17	Pt 43
14-9-17	WORD	on Command to No 3 Hub YmCa	Bishott.	13.9.17	Pt 163
14-11-17	WORD.	Posted to 160 Bn	Bshott.	13.11.17	Pt 215 160 Bn 272 16/11/17
					H P Charter LIEUT: FOR LT. COL. I/C RECORDS, C.O.M.F.
29-3-18	2 Can I.B. Depot	Arr from 4 Can Res Bn Eng & T.O.S. of 18 Can Bn	2 Can IBD ETAPLES	29.3.18	Nom. Roll Pt II Ord 27 d-5.4.18 also No 38 d-30.4.18

CERTIFIED CORRECT. 24 APR 1918 CAN. RECORDS LONDON.

OVER

(Sheet No. 1)

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 160th O. S. Battalion, C. E. F.

Regimental No. 651755 Rank Pte. Name Cole Rawson Albert

Enlisted (a) 18-2-16 Terms of Service (a) C. E. F. Duration of War Service reckons from (a) 18-2-16

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) (Sectionman

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 - Canada	Halifax	7/10/16	
		Arrived - England	Liverpool	28/10/16	
13/1/17	160th Bn	Transferred to C.G.A.B. & attached to 160th Battalion	Bramshott	13/1/17. 30-11-16	D.O. Part II # 13 R.B. Whitehead Adj 160th Battalion & P.U.O.S.7 Capt 28/12/17
16/2/17	160th Bn	Re-attached to Gar. Duty Bn	Bramshott	17/2/17.	D.O. Part II # 47 R.B. Whitehead Adj 160th Battalion Capt
Ceases to be wtih effect.		Attached to the G.D. B. on Trans to the West: Ont; Reg; Depot 21-5-17. Auth. D.O. 120.	P.U.O.S.7		Geo R. Collins Captain, Adjutant, The Garrison Duty Battalion Canadians. (Grenadiers Hants)
20.3.17	world.	T.O.S. From 160th Bn.	Bishott.	11/3/17	Do # 10 Ad Class 120 # 3/17
15.5.17	world	on Command 160th Bn	Bishott	21/5/17	do # 39
16.8.17	world	on command Depot	Bishott	14/8/17	do # 138
14.9.17	world	Reported to Coy Hdqrs Range on command	Bishott	13/9/17	
[redacted]		Leave on command			
15.12.17		and S.O.S. Posted to 160th Bn	Bishott	[redacted]	Do # 210

(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.

OVER

Army Form B. 103. (Sheet No. 2) Regimental Number 651755

Casualty Form—Active Service.

Regiment or Corps 18th BATTALION, C.E.F.

Rank Pte. Surname COLE Christian Name Dawson Albert

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

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

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

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

or Corps Trade and rate .....

Occupation ..... (Sheet No. 2) Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
30-3-18	C.C.R.C.	Arr at Can. Corps Reinf. Camp		30.3.18	Nom Roll
11-4-18	do	To 58 C.C.S.		2-4-18	do
2-4-18	58 C.C.S.	Double Ing. Hernia. Adm.	58 C.C.S.	2-4-18	A.36. (Ext. E. 895)
3-4-18	7 Stat.	Hernia, double Adm.	7 Stat.	3-4-18	W.3034 (Ext. E. 1485)
16-4-18	do	Double Ing. Hernia. Trans. to	10 Conv. Dep.	10-4-18	do (Ext. E. 4623)
do	10 Conval. Dep.	do do Adm.	10 Conval. Dep.	16-4-18	do (Ext. E. 5816)
18-4-18	do	do do Discharged to	5 Rest Camp.	18-4-18	do (Ext. E. 7248)
20-4-18	2 Can. I.B. Dep.	Admitted	2 Can. I.B. Dep.	20-4-18	Nom Roll.
7-5-18	C.C.R. Camp	Arrived at Can. Corps Reinf. Camp.		7-5-18	do
18-5-18	18 Bn.	Joined 18th. Can. Bn.	In the Fld.	12-5-18	B.213
24-8-18	18th Bn.	Wounded—gassed.	In the Fld.	16-8-18	B.213

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

(*b*) Signaller, Shoeing-Smith, &c.

W. 8635—M2733 2000m 9/17 (356)1, C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

OVER

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
18-8-18	10 Gen.	W- Gas Poisoning (5) Adm.	10 Gen.	18-8-18	W. 3034 (No. W. 604)
20-8-18	do	W- Gas Poisoning Trans.	to Trouville	20-8-18	do (Ext. H. 955)
20-8-18	72 Gen.	Gassed - W. Adm.	72 Gen.	20-8-18	W. 3034 (Ext. H. 251)
20-10-18	do	Detained	72 Gen.	20-10-18	Letter 20/10/18 (Can. Sect. No. KI. 17/258)
27-10-18	do	Gas. Shell Trans.	15 Con Dep.	27-10-18	W3034 (Ext M 646.)
30-10-18	15 Con Dep.	For Board. Trans.	to C.I.B.D	30-10-18	do (Ext M 2048)
2-11-18.	Can I.B.D.	For Board. Adm	Can I.B. Dep.	2-11-18.	Nom. Roll.
11-11-18.	do.	Trans.	26 Gen Hosp	11-11-18	do
do	26. Gen	Hernia Adm	do	do	W 3034 (Ext M 5005)
25-11-18.	do	To	Base.	25-11-18	do (Ext M. 7639)
26-11-18	C. I. B. D.	Class. A. Adm	C. I. B. D.	26-11-18	Nom. Roll
5-12-18	do	Class. B.1.	do	5-12-18.	do (587)
4.12.18	Do	Classified B1.	do	4.12.18	W3339 (587)
17-12-18	Do	Trans to England & posted to West Ontario Depot Witley		17-12-18	NR 17
			Chas. B. Maxwell		
					Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
31.1.19	WORD.	T.O.S from 18th Bn & attchd 4th Res Bn	Witley	20.12.18	Do 307
16-1-19.	W.ORD.	On Com to C.C. Camp Rhyl.	Witley	15-1-19	Do 13. J. H. Pearse. LIEU OFFICER i/c RECORDS

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place)
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. 3241 Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No. 3241 A. E. Avery Lt for Major Commanding M.D. 1 Wing, Kinmel Park Camp.		4/2/19	

SAILED FEB 17 1919 ARRIVED FEB 25 1919

EMPRESS OF BRITAIN

FEB 28 1919 From 6/5 Taken on strength No. 1 District Depot London D.O. 65

A. Cedric McKeary Lt
NO. 1 DISTRICT DEPOT
for O.C.

Discharged

DISCHARGE SECTION MAR 19 1919 No. 1 District Depot

MEDICALLY UNFIT

J. C. Little Lieut.
for O. C. Discharge Section, No. 1 D. D.

Nothing to be written in this margin.

*Name COLE, Dawson Albert Rank Pte. Regtl. No # 651755

Fyle Depot IDD 10-C-555

Original unit 160th Bn. Present unit 18th Bn. M. or X Age 33 Religion E. Ref. H.Q. ID

Port, ship, and date of arrival Halifax, Empress of Britain. 25-2-19.

Next of kin Wife, Mrs. D. A. Cole. Chesley, Ont.

Address on leave

Address on discharge Box. 73. Chesley, Ont.

Transportation issued Yes / No Date Character on discharge

Previous occupation Railway Section-man. Date and place of enlistment Chesley, Ont. Feb. 18th. 1916.

Diagnosis Incomplete left inguinal hernia. Date of Medical Boards London, Ont. 15-3-19.

Date T.O.S.	Remarks	Pt. 2 Order No.
17-2-19	No. 1. D.D.	
28-2-19	Posted to Cas. Co. and granted furlough with subs. all.	
	to 14-3-19.	65
19-3-19	Discharged from H.M.S. Medically unfit (P.D.P.)	77

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

D.M.S. 1300 50M-21-11 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
COLE.		

RANK Pte. UNIT D.A. CO. W.O. 18. TROOP 651755. BATTY.

HOSPITAL 58. C.C.S. DATE OF ADMISSION 2-4-18.

7 Sta. Boulogne 3-4-18

1. 10. Convl. Etaples. Hosp. 16.4.18.

10 G. Rouen. 18-8-18.

2. 72 Gen. Trouville Hosp. 20-8-18

15. Conv. Depot. Trouville

3. 26 G. Etaples Hosp. 27.10.18 10.11.18.

4. Hosp.

DIAGNOSIS Double Ing. Hernia Rt

1. "D" Gas Rt

2. Hernia Rt.

3.

DISPOSITION

C.I. 5-4-18. A180.

10-4-18 A184

23.4.18 A195.

26.4.18 A198.

24-8-18 A297

26-8-18 A298

8.11.18. A364

11.11.18. A370.

18.11.18. A370.

3.12.18 A383.

Dis 5. Rest Camp. 18.4.18. DATE

REMARKS

Dis to M.B Etaples P. 30.10.18

To B. Dep. Etaples 25.11.18

A.M.D. 2 Dept.

Bch. of D.G.M.S. O M.F.C. London

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Number 65-17553 Rank Pte.

Surname Cole

Christian Name Dawson Albert

Units 18th Can. Inf. Theatre of War France

Date of Service 29-3-18

Remarks

Latest Address Box 73 Cheadle, Ont.

Roll No.

200m.-6-21. Page 22210

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	

13968
DEC 27 1922

868—D.P.—40M-1-12-19.

No. 651755 RANK Pte. NAME Cole. D. A.

T.O.S. 18-2-16 (2044-21-2-16) UNIT 160th Battalion.

M.D. 1.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Feb 18.	Mar 31.	✓		
Apr.		✓		
May		✓		
June		✓		
July		M.		
Aug.		✓		
Sept.		✓		
Oct.		M.		

UNIT SAILED

OCT 17 1916

NAME Cole. L.D. A REGT. No. 651755

RANK AND UNIT Pte 18 Bn.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a383	26 Gen Etaples Dis to B D	25-11-18	Hernia

6.

NAME Cole, Dawson Albert.

RANK & NO. Pte. 651755.

CORPS 160th. Batt.

ENLISTMENT, PLACE Chesley, Ont. DATE Feb. 18th 1916.

FORMER CORPS Nil.

COUNTRY OF BIRTH England, Broughton.

NEXT OF KIN Cole, Mrs. D. A. "Wife".

ADDRESS OF NEXT OF KIN Chesley, Ont.

DISCHARGE, PLACE DATE SOS. Dis 19-3-19
DO. 77. of 18-3-19
Med unfit w.l.D.D

P/C 25-2-19 270 Pte M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011. H Q. 1772-39-839.

MARRIED Yes. SINGLE WIDOWER

TRADE OR CALLING Railway Section-Man. RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 29 YEARS _____ MONTHS

HEIGHT 5 FEET 3 1/2 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 2 INCHES

COMPLEXION Fair EYES Blue HAIR Brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Chesley, Ont. DATE Feb. 18th. 1916.

REMARKS:

NAME Cole Dawson Albert

REGT'L. No. 651755

RANK AND CORPS Pte W.O.R. - 18th Bn

H. Q. FILE No. 649

FOLLOWS No. Form 160th Bn

FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	
Nofk.	Mrs. D. A. Cole (Wife) Chesley Ont.	
H.274	26-8-18 3-3.	Adm. 10 Gen Hosp. Rouen Aug 18th 1918. Gas.

L. L. 31493. M. & D. 8476.

M. F. W. 42 100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 180	58 Gas. Bl. Stat	2-4-18	Double Ing. Hernia
A 184	Stat. Boulogne	3-4-18	" " "
A 195 1/	10 Conv. Depot Ecault	16-4-18	" " "
A 198 1/	Disch. to No 5 Rest Camp	Boulogne	18-4-18 Ing. hernia double
A 247	10 Gen Rouen	18-8-18	Sl. Gas
A 248	72 Gen Granville	20-8-18	" "
A 362	15 Gen Granville	27-10-18	" "
A 364	Dis to MB Staples	30-10-18	" "

Form R. 149.

Dawson. Albert

Name COLE Rank Pte Reg. No. 651755.

Unit ~~4th Res.~~ 18th Bn.

Next of Kin Canada.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-4	58 CCS.	Double Ing	Hernia	A.180		16199
3.4	7 Sty H Boulogne	do		A1811		61179
16-4.	10 Con Camp.	do		A195		836/5
18-4	Dis to 5 Rest Camp Boulogne	do		A198		8982
18-8	10 GH Rouen.	"H"	Gas.	A297.	H274	3405/8
20-8.	72 GH T'ville		"	A298		3447/7
27.10	15 C.D Trouville		-	A362.		5271-6
30.10	Disc. M.B. Etaples		"	A364.		5293-7
10-11.	26 G.H. Etaples		Hernia	A370.		5566-6
25-11.	Disc B.D. Etaples		-	A383		5971-14

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

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.

8-6-33

War Service Badge
This space to be for numbers Class A No. 82962 Issued

War Service Badge.
Class B No. 52593 Issued.

Proceedings on ~~Discharge~~.

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

No. 651755

Rank PRIVATE

Surname COLE,

Christian Name Dawson Albert

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

Corps (Squadron, Battery or Company) 160th Bruce Bn.

Date of Discharge MAR 19 1919 20077 18/3/19

Place of Discharge LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 32 years ..... months.
Height 5 feet 3½ inches.
Complexion FAIR
Eyes BLUE
Hair BROWN
Trade Railway Section Man.
Intended place of residence (To be given as fully as practicable.) Box 73 Chesley, Ont.

Descriptive Marks

DOUBLE HERNIOTOMY SCARS

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

MEDICALLY UNFIT

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.

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.)

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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)..... .....

(Date)..... *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. D A Cole (*Signature of Soldier.*)

(Date) MAR 19 1919 L Reddon (*Signature of Witness.*)

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

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

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

.....(*Signature of Soldier.*)

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) LONDON, ONT.

(Date) MAR 19 1919

(*Signature*) J C Little Lieut

for O.C. Discharge Section, No. 11040.

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.)

D A Cole

(OVER)

PART III.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

PART I.

A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 651755 Rank PTE. Surname COLE Christian Name DAWSON ALBERT.

Unit or Corps—(a) Overseas from United Kingdom L. POOL (b) in United Kingdom GEN. DEPOT

Born at—Town ROUGHTON. County or Province NORFOLK. Country ENGLAND.

Date of Birth—Day 22. Month DEC. Year 1882. Age 33 yrs. months.

Joined at CHESLEY "ONT" Date 16. FEB. 1916.

Former trade or occupation RAILROADER.

Permanent Marks or any peculiarity that will serve for future identification :—
2 face marks on right arm.

Height—feet 5 inches 3½ Colour of eyes BLUE

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

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) INGUINAL HERNIA Lt.

Disabilities Group (b)

Disabilities Group (c)

2. CAUSE OF DISABILITY

	Place of origin.	Date of origin.
(i.) As to Group (a) above.	GENERAL SERVICE En France	1916-18
(ii.) As to Group (b) above.		
(iii.) As to Group (c) above.		

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

(i.) As to Group (a) above ? NO. If yes, has Active Service aggravated it ?

(ii.) As to Group (b) above ? N.A. If yes, has Active Service aggravated it ? N.A.

(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 ? YES

(ii.) As to Group (b) above ? N.A.

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

PART I. (continued).

5. MEDICAL HISTORY. Enlisted Feb. 18/1916 Shorncliffe Can. In France 9 mos. States he was 9 mos in Army before any symptoms of hernia came on. The left hernia developed first – the rt. one came on one month later. Was operated upon in No 2 Can. Gen. Hosp. Ironville, while there for being gassed. A.F.W. 548 Statement. Operat. was a success on rt. side. – Left recurred about 7 wks after Oper – Has remained about same since – Controlled by a truss.

Boarded { Brantford – Inj. Hernia Can. 30-10-16
" " " " Can 2 8-11-16.
" " " " 30-11-16.

6. PRESENT CONDITION. Complr. 1. Inj – Hernia – Well developed, well nourished man who appears about the stated age. Inoperable hernia (rad. cure) Oper. left side – Small Inj. Oper. rt. Controlled by truss.

Heart & lungs negative

No disability from gas poisoning

7. OPERATION. (i.) Was one performed? yes (ii.) If so, state what. Radical cure Inj. Hernia – Bilateral.
(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.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No
(ii.) If so, describe.

9. DO YOU RECOMMEND:—
(a) Fit for duty? (state category) B1
(b) Invalid to Canada? No
(c) Discharge from the Service as permanently unfit? No

Date of Report Jan. 8th 1918.
Station Witley Camp Surrey
Signed Thos. F. Malone Officer in medical charge of case. Capt. C.A.M.C.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except NOT IN HOSPITAL {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at .....Station, on.....191.....

*Delete if inapplicable.

PART II.

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

10. Is the disability fully described in Part I. (1)? If not, describe it. Yes.

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. Yes.

12. From the medical information now adduced, was the disability caused or aggravated by:— (a) Negligence of the Soldier {Caused? / Aggravated?} Nr – (b) Misconduct of the Soldier {Caused? / Aggravated?} Nr

13. 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, 5%, 10%, 15%, 20%, etc.*) N.A.

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) N.A.

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? N.A.
(ii.) If not permanent, what is its probable minimum duration (*in months*)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? N.A.

17. Can the former trade or occupation be resumed? Yes.

18. REMARKS:— Authority A.F. 1 (9083) d. 11-11-18

19. RECOMMENDATION:—
(a) Fit for duty? (state category) B1
(b) Invalid to Canada? Nr
(c) Discharge from Service as permanently unfit? Nr

Date of Board 6-1-19.
Station Witley
Signatures of the Board: W. Nugent Lt Col A.M.S. President. H. Gordon Hogg Capt. C.A.M.C.
Approved A.D.M.S.
Dated at Station 191

A.D.M.S. - HEADQUARTERS CANADIAN TROOPS, 7 JAN. 1919 WITLEY, SURREY

CAPTAIN. FOR A.D.M.S. CANADIAN TROOPS, WITLEY

P. 559

MARRIED OR SINGLE M

PLACE OF BIRTH Roughton Eng

NAME AND ADDRESS OF NEXT OF KIN Mrs. Rose Cole Chesley Ont

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 651755 RANK Private WORD NAME Cole Dawson Albert

IF IN PERMT. CORPS WHAT UNIT UNIT 166th Bn TRANSFERRED TO 66A.6 DATE 13-1-17 AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Brit Hos. DATE 31.5.17. AUTHORITY

PLACE OF ATTESTATION Chesley Ont TRANSFERRED TO WORD. DATE 1.11.17 AUTHORITY

DATE OF ATTESTATION 18/2/16 TRANSFERRED TO 160 A.S. DATE 1-1-18 AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1-10-16

PAYABLE TO Mrs Rose Cole Chesley Ont RELATIONSHIP wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C.F.

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
														14 10	14 10																14 10				e Ass'd Pay paid from Brandts and recovered direct pay list Canada
Nov 1-30-16	30	1.00	30		30	10	3								33	20	8-11-16	57	30-11-16					19 47 86				15			39 33	7 77	7 50	27	Balance from Canada
Dec 1-31-16	31	1.00	31		31	10	3	10							34 10	112	15-12-16	128	20-12-16					2 43 7 30				15			24 73	17 14	15 50	164	
Jan 1-15-17	15	1.00	15		15	10	1	50							16 50													15			15	18 64			
			7	60											9 70																79 04			
1917 Jany 16	1.00	17	60												17 60																36 24			
Feby 28		30	80												30 80													15			15	52 04			
Mch 31		34	10												34 10													15			54 06	32 08			
Apl 30		33													33													14			36 90	28 18			
May 30		33													33													15			15	46 18			
" 31		1	10												1 10																	47 28			
June 30		33													33													15			15	65 28			
July 31		34	10												34 10													15			15	84 38			
Aug 31		34	10												34 10													15			15	103 48			
		7	60																															
		326	80											14 10	348 50													150			245 02	103 48			

160th Bn. 227 3/1 320 15/3 1207 23/2 W15 16/2 160 Bn 1322 3/3 9 070 19 15/4

19 47
7 30
12 29
4 87
9 73
7 30

Trans Brit Hos. 31.5.17.

651755 Pte Cole D A. A.P 15.00

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.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			334	40										14 10	348 50									21 90	12 16	60 96		150		245 02	103 48				
																				9 73					~~9 73~~	~~67~~ 9 73	~~257~~ 73								
Sept	30	1st	33												33					9 73					"	~~120~~ 9 73	~~157~~ 75	15		34 46	102 02				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Defer-red. Pay	Set. Allce. Eng.
		~~102 02~~							102 02		
Oct	P.P.	34 10						15	121 12		
		34 10						15			
Nov.	30	33		A.R. 123 WORD 12/9/17.	7 30						
Dec	31	34 10		" 149 " " 13/10/17.	7 30						
					14 60						
				" 165 " " 26/10/17.	9 73						
				D.N.A.R. 136 " " 26/9/17.	9 73						
				" 200 5th Div Sig Co 15/6/17.	7 30						
				" 106 WORD 28/8/17.	12 17						
				Can A P				15			
				D.A.R. 163 Do. 1/6/17.	9 73						
				253 5th Div 17-7	9 73						
				384 Do. 30-7	9 74						
				92 WORD 13-8	4 87						
				314 5th Div Eng 18-7	9 73						
				Can A P				15	60 89		
1918		67 10			97 33			30			
Jan	P.P.	34 10		✓ ✓				15			
									94 99		
				AR 993 160 Bn 30/11	19 47				61 24		
				✓ 974 ✓ ✓ 30/11	7 30				33 75		
				1097 Do 17-12	19 47						
		34 10			24 34			15	33 75		
Feb	28	P.P.	30 80	Can P				15			
				1159 9/1/18 160 Bn (6)	7 30						
				1218 28/1 " (7)	9 73				32 52		
					17 03						
				1470 12/2 " (19)	7 30				25 22		
		30 80			24 33			15			

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Defer-red. Pay	Set. Allce. Eng.
1918	Fwd.								25 22		
Mch	31	P.P.	34 10	Can A P.				15			
				1761 28/2 4 Reo (22)	9 73						
				1965 20/3 –	19 47						
		34 10			~~29~~ 28			15	15 12		

10 Co - 184

4173

13

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 651755 RANK Pte. NAME (IN FULL) Cole, Dawson D. Albert (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? 30 — Pte to 28 2 DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

same as A.P.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
	P.D.P.	
	Box 73 →	

ORIGINAL UNIT C. E. F. 160 Bn — IF IN P. F. WHAT UNIT? Same as A.P.

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 18-2-16 — TRANSFERRED TO Box 73 Chesley, Ont — DATE — AUTHORITY

ASSIGNED PAY. $ 15 — DATE EFFECTIVE Pte to 28 2/19

PAYABLE TO Mrs Rose Cole — RELATIONSHIP M. — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Chesley Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE London DATE 19-3-19 REASON M.W. AUTHORITY DO 27 IF ENTITLED TO POST DISCHARGE PAY Yes.

MONTH	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																					
E.P.C.																																					
31-1-19		1 10					9	86 73	86	73													15				9 73 / 9 73 / 40 / 4 87 / 5				84	33			HPS 2 40		
1-2-19 to 28-2-19	28		30	80				2 40	33	20																									HPS 33 20		201.17 2/19 Subs 28 2 to 14 3/19 2065
1-3-19																							AR344														
19-3-19	19	1 10	20	90	35 00 / 17 00 / 19		33	20	101	10	AR344 19/3/19										9	60	9	50							101	10					35 00 Clothing Allee / 19 00 Sardan
									19														19	00							19	00					

—War Service Gratuity—

A. McArthur Maj

183 Days	19/3/19	420	180	600	70	30							100	350	150	12-247			
	19/4/19	350	150		70	30								280	120	19/4/19	71177-8		
					70	30								210	90	13/5/19	81705-6		
					70	30								140	60	19/6/19	93434-5		
					70	30								70	30	11/7/19	96136-7		
					70	30										17/8/19	118981-2		
		420 - 180		600	420	- 180 -							600						

Capt.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-10-16		EFFECTIVE DATE:-	
AMOUNT:- $15.00		AMOUNT:-	

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

Mrs Rose Cole (Wife)
Chesley Ont.

Stopped effec 1/2/19

NAME:- COLE Dawson Albert

NUMBER:- 651755

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 160th Batt.

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
77	29.3.18	25.4.18.	18th Bn

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~24/10/18~~	~~1124~~	Witley	~~48 67~~ ~~99 33~~				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred to Canada 1/7/19 Disposal auth: NR B 1907 9/4/19 Witley 17/4/19 Witley M D 1 L.P.C. ~~1807~~ 86 2/3 c/o Bal

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31 March	Bal Fwd								15 12		
Apl	P.P.	33 -		Cap				15			
				O 4005 288. 26-3-18. 4 Res.	— 62						
				AR 1817. 22-4-18. Details Boul.	2 68						
				✓ 295 30-4. 2 IBD.	4 46				25 36		
May		33 -		Cap	7 76			15 / 15			
	31 ✓ PP	34 10		AR 359. 7-5-18 C IBD.	4 46						
				- 148 16-5 18 Bn	4 46				35 54		
June	P.P.	34 10 / 33 -		Cap	8 92			15 / 15			
				AR 206 4-6-18 18 Bn	4 46						
				· 271 22-6 ✓	3 57				45 51		
		33 -		Cap	8 03			15 / 15			
July	31 PP	34 10		- 395 9-7-18 "	4 46						
				· 509 24-7 "	3 57				56 58		
		34 10		Cap.	8 03			15 / 15			
Aug	31 PP	34 10			- -				75 68		
		34 10			—			15			
Sept	"	33 -		Cap.				15	93 68		
		33 -			—			15			
Oct	31 ✓	34 10		Cap.				15	112 78		
				CR 3745 31/10/18 Hon. Lieut.	5 60				107 18	P95P agnd 12-1-19	
		34 10			5 60			15			
Nov	30 ✓	33 -		Cap.				15			
Dec	31 ✓	34 10		CR 3986 6/11/18 C IBD	9 33						
				✓ 5408 30/11/18 ✓	13 99						
				Cap	23 32			15			
				Amk 6477 19/12/18 C IBD.	4 46				116 30		
				Cap.	27 98			15	135 40		
Jan	31 ✓	34 10									
		101 20			27 98			45 —			

Checked C.R. Dave 7/11/19

NUMBER 651755 RANK Pte. NAME COLE D. A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Balance Bro Ford					13540		
Feb.				OK 3624 24-12-18 1st Rec.	4867						
				✓ 891 1-2-19 Kimmel Pk	973						
				✓ 1056 11-2-19 ✓	973				6727		
				Endorsed	6813						
				S.O.S to Canada 17-2-19	Cancd. A.L. 1st Ed.						

X