DB 13-8-19

REGIMENTAL DOCUMENTS

NAME Collins George REGT. NO. 201646 UNIT Can Engrs ~~C.O.F.L.E~~ NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)				29572	
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					on Demob Med unfit for Gen Service
	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)					
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2	AADC5009A					
1	AFW3172					

W. 2589
10-11-11-18
1772-39-1377

Original

No. 2010646

Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	COLLINS
1a. What are your Christian names?	George.
1b. What is your present address?	Windsor, Ontario
2. In what Town, Township or Parish, and in what Country were you born?	Gull Lake, Saskatchewan, Canada.
3. What is the name of your next-of kin?	Samuel Burke
4. What is the address of your next-of-kin?	Gull Lake Sasketchewan Canada.
4a. What is the relationship of your next-of-kin?	Cousin
5. What is the date of your birth?	May 11th 1886
6. What is your Trade or Calling?	Motor-truck driver
7. Are you married?	Widower.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	None
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	None

G. C.

Royal Dr

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Collins, 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.

George Collins (Signature of Recruit)

Date June 18th 1918. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Collins, 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.

George Collins (Signature of Recruit)

Date June 18th 1918. (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 Windsor, Ontario this 18th day of June 1918 191.

Major (Signature of Justice)

O.C. Windsor, Mobilization Centre

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of George Collins on Enlistment.

Apparent Age 32 years 1 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	6 ft 1½ ins.
Chest measurement. Girth when fully expanded	39 ins.
Chest measurement. Range of expansion	4 ins.
Complexion	Fair
Eyes	Brown
Hair	Dk. 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).

Hearing-----Normal
Vision------R.E. 20-30
L.E. 20-30

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 June 18th 1918 191 . J. Brenton Greenhalgh Major

Place Windsor, Ontario C.A.M.C.

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.

George Collins 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.

D. A. Ross Lt. Colonel C. E. (Signature of Officer)

O. C. Engineer Training Depot.

Date June 11 191 8

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

COPY ONLY

THIS IS TO CERTIFY that No. 2010646 (Rank) SAPPER

Name (in full) COLLINS, George enlisted in

the Canadian Engineers, C. O. M. F.

CANADIAN EXPEDITIONARY FORCE at WINDSOR, Ontario EIGHTEENTH

day of JUNE 18 on the 19

HE served in CANADA AND ENGLAND

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

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

Age 33 years.

Height 6' 1½"

Complexion DARK

Eyes BROWN

Hair DARK BROWN

Marks or Scars Middle finger left hand, and two terminal joints left index finger, missing.

G. Collins.
Signature of Soldier

J. Kelly
Issuing Officer

LIEUT.
Rank

O. C. DISCHARGE STATION, NO. 1 D.D.

Date JULY 26th., 19.

Date of Discharge

DISCHARGE SECTION
JUL 26 1919
No. 1 District Depot

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.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

A-T.S.

Prophylactic NO

with E.F. YES

DATE. 10/8/19

Date 10/8/19 **Units** 1.0 c.c.

Date.....**Units**.....

Date.....**Units**.....

Date.....**Units**.....

Triplicate

ATTESTATION PAPER.

No. 201064

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	COLLINS
1a. What are your Christian names?	George.
1b. What is your present address?	Windsor, Ontario
2. In what Town, Township or Parish, and in what Country were you born?	Gull Lake, Saskatchewan, Canada.
3. What is the name of your next-of kin?	Mrs. Ruth
4. What is the address of your next-of-kin?	Gull Lake, Saskatchewan, Canada.
4a. What is the relationship of your next-of-kin?	Cousin
5. What is the date of your birth?	May 11th 1886
6. What is your Trade or Calling?	Motor-truck driver
7. Are you married?	Widower.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? (If so, state particulars of former Service.)	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	None
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	None

G. C.

Naval or

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

Hospital Representative, for Adjutant General, Canadians, No. 14 Canadian General Hospital Eastbourne.

CAPTAIN

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Collins, 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.

George Collins (Signature of Recruit)

Date June 18th 1918 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Collins, 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.

George Collins (Signature of Recruit)

Date June 18th 1918. (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 Windsor, Ontario this 18th day of June 1918.

Major

D.S. Windsor, Mobilization Centre (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

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Apparent Age 32 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	6 ft. 1½ ins.
Chest measurement. Girth when fully expanded	39 ins.
Chest measurement. Range of expansion	4 ins.
Complexion	Fair
Eyes	Brown
Hair	Dk. 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).

Hearing-----Normal
Vision------R.E. 20-30
L.E. 20-30

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 June 18th 1918 191 . J. Brooks Major

Place Windsor, Ontario C.A.M.C.

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.

George Collins 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.

Lt. Colonel C. E.
(Signature of Officer)
O. C. Engineer Training Depot.

Date July 11th 1918

Regional No. ..... Continuation

MEDICAL HISTORY OF— A.F. B.178.

Regimental No. ..... Region .....

Surname Collins Christian Names George

TABLE I.—General Table.

Birthplace { Parish .....
County .....

Examined { on ..... day of ..... 191...,
at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches. Weight ..... lbs.

Colour of Hair ..... Complexion .....

„ Eyes .....

Chest Measurement { Girth when fully expanded ..... inches.
Range of expansion ..... inches.

Physical Development .....

Vaccination Marks	Right	Left
Arm,		
Number	.....	.....

When Vaccinated .....

Vision { R.E.—V = ... With Glasses { R. .....
L.E.—V = ... L. .....

Identification Marks, such as Tattoo, Moles, Scars, etc. :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On ..... day of ..... 191...

Enlisted { at .....
on ..... day of ..... 191...

	Corps	Regtl. No.
Joined on enlistment	.....	201046
Transferred to	Engineer	.....
	.....	.....
	.....	.....

TABLE III.—Boards, Courts of Enquiry, 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
.....	.....
.....	.....
.....	.....

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	12	JUN	1919	30	JUN	1919	C.F. 1st & 2nd Phalanges. left h.		Left index finger amputated 1st Interphalangeal joint. Left index finger. Suturing. Tenderness of Localised sinus.	
"ARAGUAYA,"	30 6	19	11 7	1						Capt.
			~~30-6-19~~				do		To change	E.G. Arthur Capt.

No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

29
42

5

No. 14 Canadian General Hospital Eastbourne, England

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	2010646	L/Cpl.	Collins	G.
Year 1918	Unit. C. E. F. D.		Age. 32	Service. 5/12

Station and Date.

2nd Nov 1918

Disease (Paralysis / Hysteria.

P. H. ~~Diag.~~ Typhoid Fever 2 at 4 yrs. Mumps Measles.
Arrived England 16th Aug 1918
Reg camp aldershott 2 weeks.
6 years ago had nervous breakdown. 1 Yrs. 6 mos.
could not walk for over 6 mos.
H. P. I. On 28th Aug 1918 while at sports
fell and twisted back. Lost feeling in legs & feet
does not feel any pain unless he attempts to lift
anything heavy. complains of eyes being
weak since receiving hurt in back
Bowels regular. complains of weakness
in legs. cannot walk far
T. 98 R. 20 P 92
Eats well. Stoop at night once or twice to pass his
Excess: (water)
F. H. 1 B. O.K. M. I. thrice
Urine: Nog.
Exam: Rt index finger stiff from.
old scar palmer surface of 1st Phalanx
Color. nutrition good. Abdomen Neg.
Heart & Lungs Neg. no enlarged glands
Pupils eyes react to light & accomadation
Knee jerks more active on Lt than Rt
no patellar clonus no Babinski
no ankle clonus. no Oppenheim
sensation to touch Normal
Achilles jerk normal superficial reflexes

control of them
could not move
anything below
waist. No
sensation
below hips
bones. No
change in
urine.

Pupils eyes.

Normal

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

25/11/18 Dis & Duty 5

Station and Date.	
	Transferred to Base. Camps for treatment J. Lewickham Major D.A.M.S.
	— Hepatitis —
16-11-18.	H
	Patient looks well, and says he feels well, and is not making any complaints. Has no aches nor pains and says he no loss of power of legs or arms. A.E. Fraleigh Capt.
22-11-18	To be discharged A.E. Fraleigh Capt.

No. 13 Canadian General Hospital
Hastings, Sussex.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps 2nd C.C.R.B. Military Hospital

No. 2010646 Rank and Name L/Cpl Collins G. Age 32 Service 5/12

Disease Hysteria Date of admission 16/4/16 Date of discharge Result

Dates of Observation: 16 17

Days of Disease

Temperature Fahrenheit — Time (A.M. P.M.)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute: 18

Respirations per Minute

Motions per 24 hours

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature A. E. Fraleigh Capt. In charge of case.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	2010646.	Spr.	Collins	George.
Year	Unit.		Age.	Service.
8F	3rd. Can. R. Engineers		32	8/12.

Station and Date.

2nd. Canad. Gen. Hosp. Brighton

Disease Crushed Finger L. hand.

Pt states that on Feb 7 while turning a screw jack his left hand slipped off the jack & crushed his finger against the jack.

Feb. 8 Admitted to Canad. Hosp. Shorncliffe. Left index finger L. hand. Crushed. Amputated 3rd finger L. hand.

Feb. 9 Op. Left finger amputated at inter phalangeal joint.

Dressing

Discharged

In transfer to Canadian Hospital Eastbourne = Crushed.

Transf. to Canad. Hosp. Shorncliffe 14 Canad. Hospital Eastbourne

J. Parry Lt. Col. R.A.M.C.

Officer in Charge

No. 2 Eastern General Hospital

17 FEB 1919

19/2/19 Canadian Military Hospital Cooden Beach - Bexhill

Princess Patricia Canadian Red Cross Hospital,

19-2-19 Cooden Camp, Bexhill,

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

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

No. 14 CANADIAN GENERAL HOSPITAL WESTERN EXHIBITION SUBSIDY

F i (72)

Forms
J. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 6997

Year 3/1/19

Regimental No. 2010646 Rank. Spr. Surname. Collins Christian Name. G.

Unit. 2nd C.E.R.B. Age. 32 Service. 7/12

Station and Date.

Disease Monoplegia, Functional.

TAKEN SICK 2/1/19 REPORTED SICK 2/1/19

ENLISTED June 18th/18 PREVIOUS OCCUPAT. Motor truck driver

TO ENGLAND Aug 16th/18 FAMILY HISTORY Mother died Tuberculosis

TO FRANCE

INVALIDED FROM FRANCE — SICK — WOUNDED —

COMPLAINS — Pain across small of back, left leg feels numb and powerless

PREVIOUS ILLNESS — Measles whooping cough and mumps when a child. In 1912 a nervous breakdown laid up till 1914. Enlisted June 1918. Fit sports in Bramley Camp, Aug 28th/18, threw fell on him. Both legs were rendered powerless the right one for 3 days, the left one for a month. In hospitals till Nov 26/18. On light duty since

PRESENT ILLNESS Last night when walking in the town, left leg suddenly gave way and became powerless. Sent to hospital in this condition

PHYSICAL EXAM.

EYES — EARS — NOSE — THROAT —

TONSILS — TEETH — SPUTUM — TONGUE —

LOWER EXTREMITIES — (See other side).

UPPER " —

SKIN — 6997

URINALYSIS

DISCHARGED TO 11/1/19

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

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	
	T.P.R. Normal.
	The man looks well.
	Heart :— Normal
	Lung :— Normal.
	Abdomen :— Negative
	Liver :— palpable, Spleen — Not palpable
	G. U. S. — Seems normal, no signs or history of venereal disease
	N. S. — Pupils react equally to light Knee jerks present in both legs but less than normal. Plantar reflex Normal in right foot, absent in the left. Partial loss of sensation and movements from the left hip down Right leg Normal.
	Circulation — Good in both legs. by Capt. Trefry.
5/1/19	Seen by Maj. McPhedron to-day. Proved to patient that he could move left leg. The man finally walked around the room without help.
10/1/19	from Phedron Major Has been given P.T. for the past few days and does all exercises perfectly. Fit for duty.
11/1/19	Discharged Cat. A. A.W. Trefry Capt. CAMC

Forms
I. 1237
12

No. 14 Canadian General Hospital

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T. 54	2010646	Spr	Collins	G.

Year	Unit.	Age.	Service.
1919	3rd Can. C. R. B.	32.	10/12

Station and Date.

2-4-19

Disease Comp. Fract. 1 & 2 Phalanges

loss of the L. index finger at level of mid phalanx.
loss of mid finger L. total
index finger healed
wd. of amputation of the
mid finger not healed
stit ches still in.

~~L~~ R Hand.

wd healed.

for board. & To Canada.

R Hand

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

ORIGINAL

Original

2010646

MEDICAL HISTORY SHEET

Surname COLLINS *Christian Name* GEORGE

Examined { on 18th day of June 1918
at Windsor, Ontario

Approved by [signature]

Rank Lieut. M.O.

Birthplace { City or Town Gull Lake
County Saskatchewan, Canada

Apparent age 32 Years 1 Month

Trade or occupation Motor truck driver

Height 6 feet 1½ Inches

Weight 161 lbs.

Chest measurement { Minimum 35 inches
Maximum expansion 39 inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks { Arm Right Left 1
Number 1

When Vaccinated last 1906

(*a*) Marks indicating congential peculiarities or previous disease

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

Hearing----Normal
Vision-----R.E.20-30
L.E.20-30

Date	Fit or Unfit	Examined for Re-Engagement
	Fit	16 DEC 1918
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
JUN 22 1918		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
JUN 22 1918		M.O.
3/6/18 6/7/18		M.O.

Enlisted on 18th *day of* June 1918 *at* Windsor, Ontario

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	Canadian Engineers	2010646		19-6-18.
Transferred to	Engineers Training Depot, St. Johns, Que.			JUL 14 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

A 11

Station	Date	Disease	Result
London, Ont. JUN 19 1918		Attestation	considered
Supernumerary Capt. A. M. C. Pres.	H Eamess	Capt. A. M. C.	Capt. A. M. C.
London Ont	July 8-18	R G Brain Lieut Pte	
ST. JOHNS, P.Q.	JUL 16 1918	Amputated fingers Lt. hand	Invalided to Canada
14 Can-Gen-Hosp.	5-5-19		Service Medical Board Montreal, P.Q.
LondonOnt.,	2-7-19.	Amputation of Fingers Lt. hand.	Unfit for Service abroad not General Maj. PrService.

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.

No 14 Eastern Command 14-4-19.

Surname Collins Christian Name Jeremiah

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
CAMBRIDGE HOSPITAL ★ ALDERSHOT ★		29	8	18	18	9	18	Functional Paraplegia	22.	Fall on back 29.8.18. Immediate complete Loss of power in legs. No bladder loss of control. Paralysis both lower limbs. Some power returned to R^t. Leg. Transferred to Connaught	
No. 14 CANADIAN GENERAL HOSPITAL		3.	1	19	11	1	19	Monoplegia, Functional	9	On admission unable to move left leg. Also seemed to be partial loss of sensation in left leg. After being shown he could move leg alright was able to walk around as natural Discharged Cat. A	A. Wm Hefty, Capt. C.A.M.C.
No. 14 CANADIAN GENERAL HOSPITAL		2	11	18	16	11	18	Hysteria	15	Transf. to Hastings for treatment	H. Stevenson. Lieut Canc
No. 14 CANADIAN GENERAL HOSPITAL		2	11	19	9	11	19	Comp. Frac. 1st or 2nd phalanges Rt.	8.	Adm from 13 C Gen Hpl Aroalesing from Amputation of mid finger rt. To Cooden	H. Stevenson Lieut Canc.

W.O.M. Hosp. — 13-7-19 to 24-7-19 Contusion left hand — In good gen^l health. Boarded 227. Fit for service abroad. not general — A.E. Fraleigh. Capt.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT 1

NAME OF SOLDIER Collins S No. 20.10646

REGIMENT Can Engrs RANK Spr

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	July 24 1919	B 18.19 14									3 N- 18.29 30 20.									J J McEans Lt.	1.	Can 2.31

Temporary

Army Form B. 178.

MEDICAL HISTORY of—

Surname Collins *Christian Names* Geo?

TABLE I.—General Table.

Birthplace { Parish.....
County .....

Examined { on.....day of.....191 ,
at.....

Declared Age .....years.....days.

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair.....Complexion.....

„ Eyes .....

Chest Measurement { Girth when fully expanded } .....inches.
Range of expansion .....inches.

Physical Development .....

Vaccination Marks { Arm, RIGHT | LEFT
Number ..... | .....

When Vaccinated .....

Vision { R.E.—V = ... With Glasses { R.....
L.E.—V = ... L.....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at.....

On.....day of.....191.....

Enlisted { at.....
on.....day of.....191.....

	Corps	Regtl. No.
Joined on enlistment	.....	2010646
Transferred to	.....	.....
	.....	.....
	.....	.....

TABLE III.—Boards, Courts of Enquiry, 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
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Special Remarks: state if a discharged Soldier

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TABLE IV.—Service Table.

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

Became non-effective by .....

on.....day of.....191.....

(*Signature*) .....

(*Rank*) .....

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
[18] W463/P943 200m 4/18 45 G & S 59

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

Name of Hospital	Admitted to Hospital: Day	Month	Year	Discharged from Hospital: Day	Month	Year	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
2nd Eastern Gen. Hpl. Brighton	8	2	19				Contd. fract. L. hand		Left arm in splint & sling. Fracture of lower end of radius & ulna & fracture of ulnar styloid. Left index finger amputated at metacarpo-phalangeal joint & right thumb amputated at 1st phalangeal joint. Contused wounds of left leg. Transferred to A.I.F.	[illegible] Major R.A.M.C.
Princess Patricia Canadian Red Cross Hospital, Crowborough Camp, Beckhill	19	2	19	26	2	19			Proceed on duty rejoining command. Suitable case for Convalescence.	[illegible] Capt.
13 C & H. Hastings	26	2	19	2	4	19	do.	36	Middle finger Rt hand amputated at metacarpo phalangeal joint. Transfer to 14 C & H. Eastbourne	Wedderburn Lieut.
14 C & H. Gen Hosp Eastbourne	2	4	19	9	4	19	Comp. fract Ist & 2nd phalanges Rt hand	8	admitted from no 3 Gen Hosp Convalescing from amputation of finger middle of hand to Cowden 14 4 19	J. Atmore Maj
Princess Patricia Canadian Red Cross Hospital, Cowden Camp, Hexhill	9	4	19	14	4	19	do	5	Still S.H. [illegible]	[illegible]
Princess Patricia Canadian General Hospital, Seaton, Shawlands, Surrey	14	4	19	2	6	19	Comp. fract Ist & 2nd phalanges Rt hand	50	Invalided to Canada	[illegible]

No. 2010646 Name. COLLINS, George Coy. Canadian Engineers Corps. Date of Enlistment 18-6-18

Service or Proficiency Pay.

Date of last entry in Coy Conduct Sheet)

No & date of last drunk

Period not reckoning towards) forfeiture from extra fine)

Sheet) No.) One

Signature O.C.) Company etc.) .....Capt.
O.C. Service Co. Canadian Engineers, M. D. No. 1

Place	Date of Offence	Rank	Cases of drunkenness.	Offence	Names of Witnesses	Punishment awarded.	Date of award or of order dispensing with trial.	By whom awarded.	Remarks.
Engineers Training Depot, St. Johns, Que.	JUL 14 1918			1-D-C-249-Amt					

J C Fletcher Capt.
O. C. Service Co. Canadian Engineers, M. D. No. 1

CASE HISTORY SHEET.

W.O.M.H. London

No. 2010646 Rank Spr. Name Collins, G Age 32

Unit H I D D Completed years of service Where and how long } C 3/52 E 1/7/12

Date of admission 13-7-19 Date of discharge 24-7-19.

Diagnosis Contusion Lt Hand + Toes. Place of origin Canada

CONDITION ON ADMISSION AND PROGRESS OF CASE

17-7-19. Previous to enlisting - no serious illness since childhood.

Since enlisting - Had back injured Aug 1918. Had hand (left) crushed Feb 1919. Losing all of middle finger, and two terminal pholgoges of index finger.

Present condition - In good general health at present and not making any complaints. Looks well and feels well. A.E. Fraleigh Capt.

FAMILY HISTORY neg.

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE, as described above - In good health.

(and disposal made of case.) Boarded 22.7.19 for service abroad not general.

Date 24-7-19. Capt B

A.E. Fraleigh Capt.
Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

F 39381

A.F. B.178

Regional No. .....

MEDICAL HISTORY of— Seaford

Regimental No. 201064 6 Region .....

Surname ..... Collins Christian Names ..... G. .....

TABLE I.—General Table.

Birthplace { Parish .....
County .....

Examined { on ..... day of ..... 191 ,
at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches. Weight ..... lbs.

Colour of Hair ..... Complexion .....

„ Eyes .....

Chest Measurement { Girth when fully expanded } ..... inches.
Range of expansion ..... inches.

Physical Development .....

Vaccination Marks { Arm, RIGHT ____ | LEFT ____
Number ..... | .....

When Vaccinated .....

Vision { R.E.—V = ... With Glasses { R. .....
L.E.—V = ... L. .....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On ..... day of ..... 191 .....

Enlisted { at .....
on ..... day of ..... 191 .....

	Corps	Regtl. No.
Joined on enlistment	Can. Engineers	201064
Transferred to		

TABLE III.—Boards, Courts of Enquiry, 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

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

CAPTAIN

Hospital Representative, for Adjutant General, Canadians, No. 14 Canadian General Hospital Eastbourne.

Special Remarks : state if a discharged Soldier

.....

.....

.....

.....

TABLE IV.—Service Table.

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

Became non-effective by .....

on ..... day of ..... 191 .....

(*Signature*) .....

(*Rank*) .....

(29056) W375½/₇₈ 1398. 800m. 7/18. M.R.Co.,Ltd. E 3540.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Cumberland Aldershot	19	9	18	16	10	18	Neurosis		Transferred from Cambridge H.A. Accident at football 2.6.18. Paralysis of right leg. Typical functional paralysis. Returned at once with duration & medication. Still now perfect normal. Fit to rejoin unit	E. Davies Surgeon Lieut

Temporary. Original not Available

Army Form B. 178

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

MEDICAL HISTORY OF

Surname Collins *Christian Name* G

TABLE I.—General Table.

Birthplace { Parish..... / County .....

Examined { on.....day of.....191 , / at .....

Declared Age .....years.....days.

Trade or Occupation.....

Height.....feet.....inches

Weight .....lbs.

Chest Measurement { Girth when fully Expanded } .....inches / Range of Expansion .....inches

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT / Number ..... | .....

When Vaccinated .....

Vision { R.E.—V= ..... / L.E.—V= ....

(*a*) Marks indicating congenital peculiarities or previous disease—

.....

.....

(*b*) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at..... / on..... day of .....191...

	Corps	Regtl. No.
Joined on enlistment	Can Eng to	2010646
Transferred to	2nd C.E.R.B.	

Became non-effective by .....

.....

on..... day of .....191...

(*Signature*).....

(*Rank*) .....

TABLE III.—Boards; Courts of Enquiry, 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
22-11-18	A. a-E. Inglis Capt.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

Hospital Representative, for Adjutant General, Canadians, No. 14 Canadian General Hospital Eastbourne.

CAPTAIN

TABLE IV.—Service Table.

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

[11,823] W2836/M2217 1,800,000 6/17 W. P. & Co. (1349)

1 P.M.

ORIGINAL

LAST PAY CERTIFICATE

Regt.No. 2010646 Rank Spr Name COLLINS George

Corps 6E who was Discharged

on 26-7- 1919 to

The following is a statement of the account of the above named from 1-7-19 to 26-7-19

Bal Dr from mon. of		Bal Cr from mon.of	134.08
from L.P.C.		from L.P.C.	
ASSIGNED PAY:		Regt.Pay 26 dys. @ $	
		F'ld All. 26 dys. @ $1.10	28.60
SEPARATION ALLOWANCE:		SEPARATION ALLOWANCE:	
		WSS	70.00
OTHER CHARGES:		OTHER CREDITS: Clothing Allowance	35.00
PAYMENTS:	267.68	Subsistence @ 80¢ per day	
L 297771			
Bal.Credit (to be pd.)		Bal.Dr.(to be deducted)	
	267.68	(from soldier $ / from Dependent $)	267.68

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BND
at $ per month has been to by this Unit	at $ per month has been to by this Unit	Subcribed $ Pd.by $ other Units pd.by this Unit $
Nil	Nil	

Dependent or Beneficiary : Nil

Address:

REMARKS: D.O. 206 Discharged on Demobilization. 26-7-19 Med Exam't

Date of Enlistment: 18-6-18

If married and if Separation Allowance card submitted. No 240

Paymaster, District Depot

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

JUL 26 1919

No. 1 LONDON, ONT.

Date:: London, Ontario.

J D Patterson Captain.

Paymaster, No.1 District Depot.

M. F. B. 239.
1 million—10-16.
H.Q. 1772-39-194.

In any further correspondence on this subject please quote Number and Date of this Communication.

No.....

.....191....

From.....

.....

To.....

.....

C.A.D.C. 5069A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) COBBINS. G.

REGIMENT C.E.R.B. RANK Spr. No. 1010646

Date of Examination in England 13.6.19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (*a*) In Canada
- (*b*) In England Yes
- (*c*) In France

Signature of Dental Officer W Kennedy

A.D.C. 3069A

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

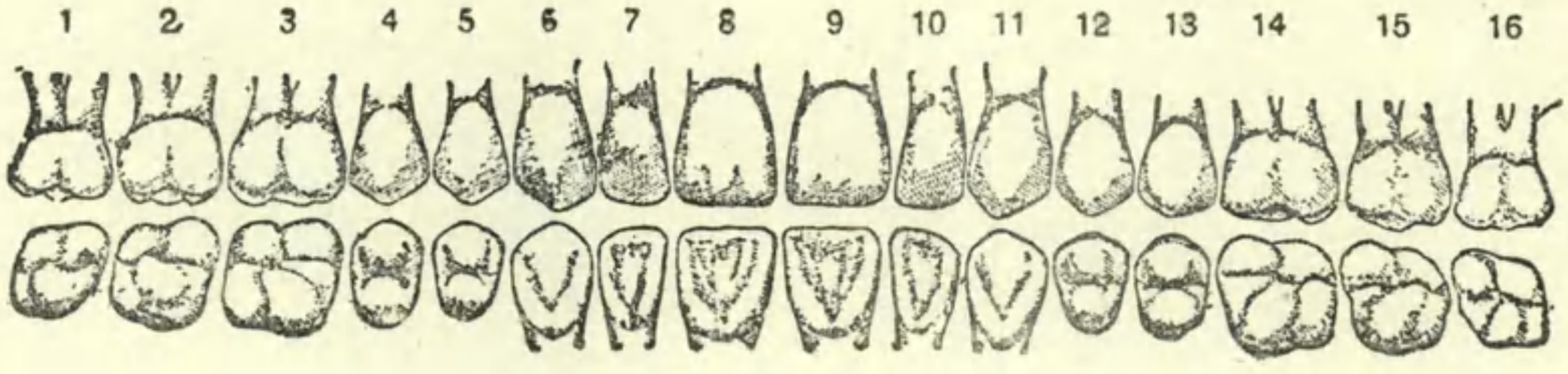
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) COLLINS . G.

REGIMENT 3 C E R B RANK Spr No. 2101646

Date of Examination in England 3.6.19 | Date of Examination in France



DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 9
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

Stomatitis

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (*a*) ~~In Canada~~
- (*b*) In England yes
- (*c*) ~~In France~~

Signature of Dental Officer W Kennedy Capt

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps Canadian Engineers

Regimental No 2010646 Rank Sapper C. E. F. Name Collins George

Enlisted (a) 18-6-18 Terms of Service (a) ~~6 G.S.~~ Service reckons from (a) 18-6-18

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) Motor Truck Driver

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				
		Engineers Training Depot, St. Johns, Que. AUG 14 1918 Auth. 1-D-C-249.			
		Embarkation	Canada	3.8.18	
		Disembarkation	England	15.8.18	
9-9-18	2 C&R D.O.R.	From Canada	Seaford	15.8.18	Part II Ord 94
7-12-18	2 C&R C.C.	to C.M.P. Seaford	Seaford	4-12-18	Part II Ord 171
19-12-18	2 C&R	Off Command C.M.P. Seaford	Seaford	12-12-18	Part II Ord 181

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

Hospital Representative, CAPTAIN
for Adjutant General Canadian Expl. Force
No. 14 Canadian General Hospital
Eastbourne.

J. C. Fletcher Capt.
O. C. Service Co. Canadian Engineers, M. D. No. 1

Lieut. C.E.,
for Lieut. Colonel, C.E.,
Commanding 2nd Canadian Engineers Reserve Bn.

(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				
23-1-19	~~2nd CERB~~	~~Struck off Strength~~ ~~Command~~ to No 1 Wing. Kinmel Park.	Seaford	23-1-19	Pt II O.O 19
					W.R. Wilbee Lieut. C.E. for Lieut. Colonel, C.E. Commanding 2nd Canadian Engineers Reserve Bn.
23-1-19	2nd CERB	Posted to 3rd CERB	Seaford	23-1-19	Pt II. O.O 19
					W.R. Wilbee Lieut. C.E. for Lieut. Colonel C.E. Commanding 2nd Canadian Engineers Reserve Bn.
25-1-19	3rd CERB T.O.S.	from 2nd CERB.	Seaford	24-1-19	Pt II DO 20
30.6.19		Taken on strength No. 1 District Depot London D.O. 199			
		for C.O. [illegible] Capt			

LONDON, ONT, DISCHARGED JUL 26 1919 ON DEMOBILIZATION Medically unfit for general serv

J Black Lt

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

Army Form B. 103—2.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps _____ Regimental Number 2010646

*Substantative Rank Spr. Surname Ickling Christian Names J.

*Acting Rank _____
(*To be entered in pencil to facilitate alteration.)

(A) Report. Date.	(A) Report. From whom received.	(B) Authority of Part II. of Orders.	(C) 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.	(D) Place of casualty.	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer.
2/5/19	3rd C.E.R.B.	S.O.S. to C.E.R.D.		Seaford	16/5/19	P.L. 11.20118

N.J. Vadeboncoeur
LIEUT. C.E.
FOR LT. COL. O.C. 3RD. C.E.R.B

To be folded on this line.

Nothing to be written in this margin.

(B26983.) Wt. W. 9893—P. 2068. 500,000. 3/19. S. & S., Ltd. E. 4602.

(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.

Nothing to be written in this margin.

The finger was soaked in Lysol
2-a prophylactic dose of "Antistaph"
Vaccine (Staphylococcus 500 mills +
Streptococcus 25 mills) given.
1/4 gr: Morphia hypodermically.

Rash Farquharson

8/2/19

C..N.DI..N .NGINE.. TR.ININ. C.NTRE.
.E ..OL?SUSSEX.

Date.....2nd Nov.....1918

Regimental Number 2010646 Octo.cry.

Rank. Spr

Name. Collins G.

.....S.W.Agnew.....
Capt C.A.M.C.
M.O. C. E. T. C.

No.692. STRENGTH DECREASES. (Continued)

The following Other Rank is struck off the strength of the A.D.M.S. Canadians, Hastings, on his return to the Canadian Garrison Duty Depot 7.3.17.

No. 59574 Pte. T.R.Leach.

Lt.-Col. A.D.M.S.

From S.M.O. C.E.T.C.

To The Registrar, No 14 C.G.H.

2010646 Collins Spr C.

II C.E.R.B.

Sir-

My man was injured in back accidentally Aug 25/18. Admitted to Cambridge Hosp. & then the Connaught Hosp. Aldershot. Does not complain of back, but has spastic gait & is unfit for duty. We have had him under observation in Sick but since he returned from Hosp. to this unit. I wish you would admit him for observation & treatment

MAJOR,
C. A. M. C.

MEDICAL HUT
28 OCT. 1918
C.E.T.C.

y further
dence on
ject please
umber and
this Com-
ion.

No. .....

..... 191 .....

2192. W.6520./M.2849. 10,000 Pads. 8/17. A. J. W. & Co., Ltd. E.1631.

Army Form W. 3172.
(In pads of 50.)

13, Can. Gen. Hospital.

Ward A. II. No. of Bed [redacted] Date 27.2.19.

Regt. No.	Rank and Name.	Corps.	Part to be X-Rayed.
2010646	Spr. Collins S.	3rd C.E.R.B.	Rt. Hand.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Signature of M.O. _____

Date _____

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 1541.

Amputation distal Phalanx
Index finger. Rt. Old Fracture
distal Phalanx middle finger.
several sequestra present.
many Dentiles present.

Signature of Radiographer A H Hanley Kirkham Capt

Date _____

(4527) Wt. W5141/M702. 2,500,000. 8/16. McA. & W. Ltd. (E. 323)

Forms
I. 1202
32

Army Form I. 1202.

CANADIAN MILITARY HOSPITALS EASTBOURNE.

DIET AND EXTRA SHEET FOR PATIENTS IN HOSPITAL, AND EXTRA SHEET FOR DINING HALLS, AND KITCHEN SUNDRIES.

_____ Hospital, at _____ Period from 27 JUN 1917 to 30 JUN 1917

Regtl. No.	RANK AND NAME (Surname first)	Corps	Squadron, Troop, Company, or Battery	Age	Service	DISEASE
M[illegible] 176	Pte Laney C. W.	7th Lan.		27	2y 5m / 12	Chronic Bronchitis

Ward Number	Number in Admission and Discharge Book	Admitted into hospital	Discharged from hospital	Religious denomination
14	1985	27 JUN 1917 19	_____ 19	C of E

W.U.54-4-1

C.M.H.E.52

14th Canadian General Hospital, Eastbourne,

2016646 Spr Collins G.
C.E.C.

This certifies that the marginally named who is being discharged from this Hospital .....Category .....is free from Infectious Disease, Transmissible Skin Disease, Venereal Disease and Vermin.

Lewisham. Major
Capt. C.A.M.C.
Officer i/c Camp

TEMPORARY

No. 2010646 Name COLLINS, George | Sqn., Batty., or Company | C.E. Corps | Date of enlistment | 18-6-18 | G.C. Badges | Service or Proficiency Pay

Date of last entry in Company Conduct Sheet | No. and date of last drunk | Period not reckoning towards freedom from extra fine | Sheet No. | Signature O.C. Company, etc. | Character

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

(P.T.O.

M. F. W. 178 (A.F.B. 122)
150M—1-18—1772-39-1211

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

Form R 122
2353—100M—9-12-16.

Rank ~~85th Dft~~ Name COLLINS, George. Reg'l No. 2010646

Unit ~~85th Dft~~ CAN ENG If in perm. Corps, What Unit? Married or Single Widower.

Place and Date of Enlistment Windsor, Ont. June 18/18. Place of Birth Gull Lake, Sask Can.

Name and Address, Next-of-Kin Samuel Burke. Gull Lake, Sask. Can. Relationship Cousin.

Engrs

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

M/E. R.B. 20724
Fld. R.L.
CAN.INF

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		b.			I5 8 18 S S Pannonia
					Arrived in England.
9.9.18*	2CERB	T.O.S. from *Canada		SEAFORD 16 Aug 18	DO-94
~~7-12-18~~	—"—	~~S.C.S. to C.M.P. Seaford Gr.~~	—"—	~~4-12-18~~	~~D.O 171.~~ Cancelled by DO. 176/18 12/18
12-12-18	—"—	On com C.M.P. Seaford	—"—	7-12-18	DO 170
19-12-18	—"—	Ceases o/com Cl. P.	—"—	15-12-18	DO. ~~94~~ 157
7-1-19	2 C.E.R.B.	Awk from O.S.I.C.	—"—	3-1-19	DO 5
24-1-19	3 C.E.R.B.	T.O.S. from 2 C.E.R.B	—"—	23-1-19	DO 20 & 2 C.E.R.B 19/23-1-19
3.2.19	—"—	Awk from M/N.	—"—	30-1-19	DO 25.
18.5.19	C.E.R.D.	T.O.S. from 3rd C.E.R.B	—"—	16.5.19	DO 138 & 3rd C.E.R.D. DO/S 21/5/19

210

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.					
8.7.19	CE.	Invalided to Canada	5 C G H.			
		MD. 1 S.S. 505	Liverpool	30.6.19	CCW. C 557	
					CE RD RO 203 d/ 22.7.19	

20.2.23

MEDICAL EXTRACT OF INFORMATION FORM

Regt'l No 2010646 NAME : Surname Collins,

Christian Names George

	CODE No.	1	2	3	4	5	6
No. of Admissions	1	3	1				
Invalided to Canada		0 0	6 6				
Married or Single	2	2	2				
Unit	3	7 0 7	7 0 7				
Enlisted at	4	1 5 6	1 5 6				
Birth Place	5	0 3	0 3				
Age		3 2	3 2				
Occupation	6	1 3	1 3				
Rank	7	3	3				
Date of Admission to Hospital		2 9 8 5	1 9 2 6				
Days off Duty		0 7 7	1 5 5				
W. or D.	8	0	1				
Wound (or Disease)	9	0 0 7 6 9	5 2 2 8 8				
(Wound or) Disease	10	0 0 7 8 6					
Operation	11		5 7 0				
Operation			3 8 6				
Place of Treatment	12	1	1				
Check							
Results	13	0	E				
No. of times a Casualty	14	0	2				

H.Q. 54—21-40-96—600m—6-8-20.

16.10.18 24.7.19.
3.11.18 = 23.11.18
4.1.19 = 11.1.19.

Form DMS 1401

T54

Orig sent 11/11/19

No. 14 Canadian General Hospital

HOSPITAL.

A. & D. CARD

AT

A. & D. No. ~~8467~~. PL. OF ACTION

RANK Spr REG. No. 2010646 UNIT 3 Can E R B SICK ~~OR~~ WOUNDED

NAME Collins G. AGE 32 RELIGION C of E.

PLACE IN HOSPITAL 62.

DIAGNOSIS Comp Frac 1st & 2nd Phalanges Lt Hand

ADMITTED 2-4-19 A FROM 13 C.C.S. Hastings.

DISCHARGED TO

TRANSFERRED P.P. Can R.C. Hosp Cadet 9/4/19.

SERVICE AT HOME 10/12. IN FIELD

RESULTS

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

P.T.O.

REMARKS.

Form DMS 1401.

A. & D. CARD

HOSPITAL.

AT

A & D No T 2570 PL. OF ACTION

RANK Spr. REG. No 2010646 UNIT 3rd Bde R.E. SICK OR WOUNDED

NAME COLLINS G. I AGE 33 RELIGION C.E.

PLACE IN HOSPITAL

DIAGNOSIS G.S.W. L. Phalanges Lt. Hand

ADMITTED 2 JUN 1919 FROM Eastbourne

DISCHARGED 30 JUN 1919 TO INV. TO CANADA

TRANSFERRED

SERVICE AT HOME 1 yr IN FIELD

RESULTS

London

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

[P.T.O.

REMARKS.

Surname Rochford

Christian names George

Regtl. No 201646 Rank Spr

Unit Can Engrs 2nd Div (185 R.D.)

H. Q. 1-K

M. D. No

T. O. S. June 18 1918

D. O. Pt. II 182 of 6/7/18

S. O. S. 19

Reason

Auth

Next of kin Burke Samuel Relationship Cousin

Address Gull Lake Sask

Also notify:

BORN—Place Canada Gull Lake, Sask Date May 11th 1886

ATTESTED—Place Windsor Ont Date June 18th 1918

O/S 27-7-18/395/3

R/C 11-7-19 366/3 Spr

W. 22—75M-5-18. 1772-39 839.

No. 2010646 RANK Spr. NAME Collins G.

T. O. S. 18-6-18. UNIT 7th Field Coy (Can. Eng
(D.O. No 171 of June 1918)

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 June 18	1918. June 30.	C.		

Form DMS 1401.

Princess Patricia Canadian Red Cross Hospital, HOSPITAL
Cooden Camp, Bexhill.

A. & D. CARD

T 2547

AT

REGULAR
A. & D. No. 10646 Pl. of Action Lewes or Lear

Rank Spr Reg. No. Unit 3rd C.E.R.B Sick or Wounded

Name Collins G. Age 33 Religion C.E.

Place in Hospital Ward +

Diagnosis Comp Frac 1st & 2nd Phalanges Hand L. (amp)

Admitted 9-4-19 From 14 C.G.H. Eastbourne

Discharged To

Transferred 14-4-19 14 C.G.H. Eastbourne.

Service at Home 10/12 In Field

Results

(Use Document Card for M.H. sheet and other Documents.)

[P.T.O.

REMARKS.

Form DMS 1401.

Local Regt. 20/10/19

T 2103

Princess Patricia Canadian Red Cross Hospital. HOSPITAL.

A. & D. CARD

AT Cooden Camp, Bexhill

A. & D. No. 201064 PL. OF ACTION On Leave at Lewes

RANK Spr. REG. NO. UNIT 3rd C.E.R.E. SICK OR WOUNDED

NAME Collins G. AGE 32 RELIGION C.E.

PLACE IN HOSPITAL Div II

DIAGNOSIS Injury to Hand (L) Amp. 1st finger (acc)

ADMITTED 14-2-19 FROM 2nd E.G. Hosp. Brighton

DISCHARGED TO

TRANSFERRED 16-2-19 13 Cgt Hastings

SERVICE AT HOME 8/12 IN FIELD

RESULTS

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

P.T.O.

REMARKS.

Form DMS 1401.

No. 14 CANADIAN GENERAL HOSPITAL HOSPITAL.

AT EASTBOURNE, SUSSEX

3 SEP 19 U.K.

A. & D. CARD

A. & D. No. 6997 PL. OF ACTION

RANK Spr REG. No. 2010646 UNIT 2nd C.E.R.B. SICK OR ~~WOUNDED~~

NAME Collins G. AGE 32 RELIGION Cath.

PLACE IN HOSPITAL H.

DIAGNOSIS Para plegia / Monoplegia / functional /

ADMITTED 3.6.19 A. FROM

DISCHARGED 11/6/19 A. TO 2 C E R B

TRANSFERRED

SERVICE AT HOME 7/12. IN FIELD

RESULTS

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

P.T.O.

REMARKS.

NAME Mc Ollins. G

REGT. No. 2010646

RANK AND UNIT Pte

Can Eng.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

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

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
b 318	Cambridge Aldershot	29-8-18	Inj Spine Ny 40
b 342	Command		Paraplegia
b 346	Discharged	16-10-18	
b 360	1H.b.Gen Eastbourne	3-11-18	Hysteria
b 370	13 " " Hastings	17-11-18	" "
b 378.	Discharged	25-11-18	" " "
C 438 (1)	14 Can Gen Eastbourne	4-1-19	Paraplegia
C 438 (2)	Discharged	11-1-19	" "
b 449	P.P.C.L.I.b.R.b. Bexhill	20-2-19	Inj 1st finger R Amp
b 455	13 Gen Hastings	27-2-19	Amp, 1st finger Acc
b 487	14 Gen Eastbourne	3-4-19	" " " "
b 491.	P.P.C.L.I.b.R.b. Bexhill	11-4-19	" " " " "
b 484	14 Gen. Eastbourne	15-4-19	" " " "
b 531	4 Gen. Kirkdale	3-6-19	" " " "
C 5-57 (1)	Invalided to Canada	30-6-19	Amp 1st L finger acc 25-05-Dr D

LEDGER NO. 322 SERIAL NO. F39381 37

REG. NO. 2010646 NAME Collins · G.

RANK Spr. CORPS #1. 16 16 AGE 32 SERVICE C 3/5.2 E 12/12

HOSPITALS	DATE OF ADMISSION
1 W. O. M. H. London	24-7-19
2	
3	

DIAGNOSIS Contusion Lt Hand & Frac.

TRANSFERRED TO

DISPOSITION Rtnd to unit 24-7-19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:	HOSPITALS.	DATE.	DIAGNOSIS.

Form DMS 1401.

CASUALTY U.K.

No. 14 CANADIAN GENERAL HOSPITAL WEST ENTRANCE

HOSPITAL.

A. & D. CARD

AT

A. & D. No. 169. PL. OF ACTION

RANK Spr. REG. No. 2010646 UNIT 3 Can E.R.B. SICK OR WOUNDED

NAME Collins S.G. AGE 33 RELIGION C of E.

PLACE IN HOSPITAL B2 / B1

DIAGNOSIS Comp frac - 1st + 2nd Phalanges Rft.

ADMITTED 14/4/19 A FROM 9th C.C.S. Hpl Boodun.

DISCHARGED TO

TRANSFERRED No 3 Can Gen Hosp Kirkdale 2 JUN 191

SERVICE AT HOME 1/12 IN FIELD

RESULTS

Boarded for Invalid 5/5/19

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

I.P.T.O.

Canada leave May 17 May 29

REMARKS.

Form R. 149.

Name COLLINS GEORGE. Rank Spr Reg. No. 201646.

Unit ~~2 C.E.F.B.~~ 3rd C.E.R.B.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
29 8	Cambridge H. Aldershot		Inj Shin			
July 7			104 D	6318		25186
19 9	Connaught H. Aldershot		Paraplegia	6323		24238
16 10	Disch		do	6350		24789
3-11	14 Gen Eastbourne		dysentria	6760		27[illegible]
4-11	13 Can Gen Hastings		do	6370		12885
25 11	Disch		do	C376		9442
1919						
4-1	14 Can. E'bourne.		Paraplegia	C438		4474
1919				C435		
11 1	Disch					10014
1919						
20 2	PPCLI R.T.A. Beachville		Inj Pt Leg Rt arm.	C449.		9440

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1919						
Jan 2	13 Bde G.H. Hadrumo		Sick	C453		
	Ret to C.C. Hqrs					4844
	Std to "Any Pt"					8196
3 4	14 Bde G.H. Bourne	do		C487		9476
10 4	PP CK X.D. Deschutes	do		C491		9603
15 4	14 Bde G.H. Limerick	do		C496		9886
3 6	[illegible] Can Kirkdale	do		C531		11046
30 6	Sail St Canada			C537		9406
	S.L. 5-6 Sailed					

Form DMS 1401.

No. 14 CANADIAN GENERAL HOSPITAL, EASTBOURNE, SUSSEX

HOSPITAL.

A. & D. CARD

AT

A. & D. No. 6000 PL. OF ACTION

RANK Spr. REG. No. 2010646 UNIT C.E. T.D. 6 SICK OR WOUNDED

NAME Collins G AGE 32. RELIGION C of E

PLACE IN HOSPITAL B2.

DIAGNOSIS Paralysis / Hysteria

2 NOV 1918

ADMITTED A FROM

DISCHARGED TO

16 NOV 1918

TRANSFERRED B 6 N. Hastings

SERVICE AT HOME 5/12. IN FIELD

RESULTS

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

P.T.O.

REMARKS.

G. M. G.

Number 2010646 Rank Spr.

Surname Collins

Christian Name George

Units C E Theatre of War England

Date of Service 15-8-18

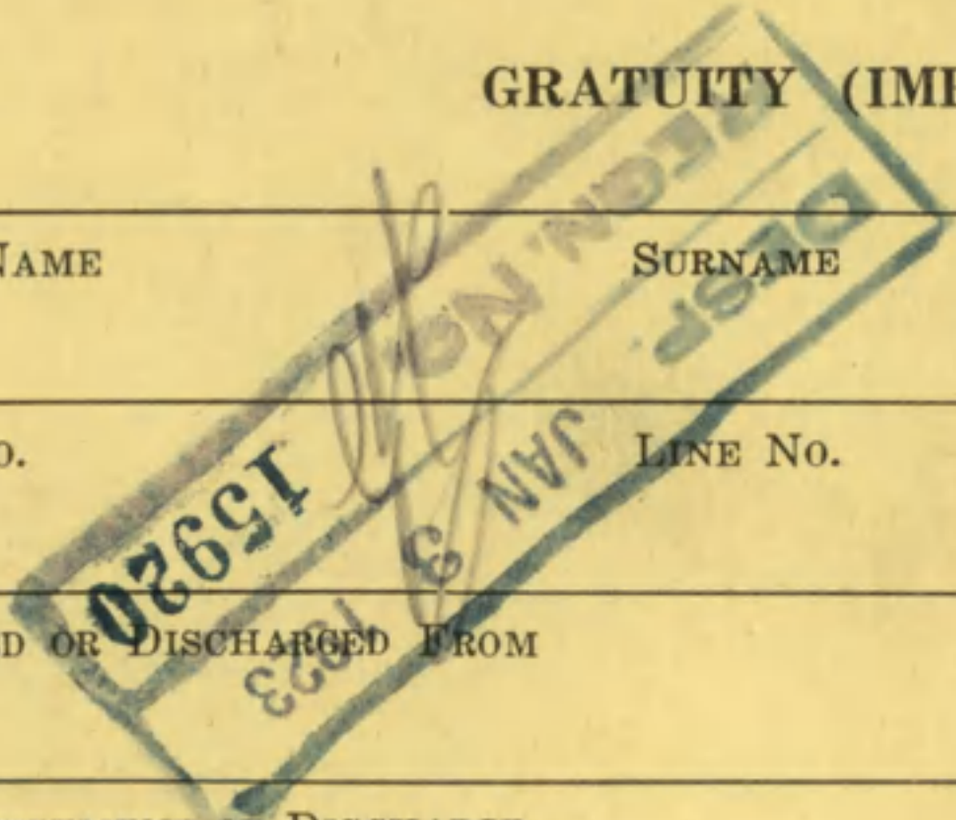
Remarks

Latest Address ~~Gen. Del Lima, Ohio~~
Ward 4-2 ~~USA~~
Ionia State Hospital
Ionia, Mich.
U S A

Roll No. A Page 4808

200m.-6-21.

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.

*Name COLLINS, George Rank Spr. Regtl. No. 2010646

Fyle Depot 10-C-727

Original unit C.E. Present unit C.E. Widower ~~XXXXX~~ Age 33 Religion C. of E Ref. H.Q.

Port, ship, and date of arrival Portland, Maine. U.S.A. Araguaya 11-7-19

Next of kin Cousins - Samuel ?, Gill Lake, Saskatchewan

Address on leave

Address on discharge G.P.O. Lima, Ohio

Transportation issued Yes / No Date Character on discharge

Previous occupation Motor Truck driver Date and place of enlistment June 18th, 1918, Windsor, Ont.

Diagnosis Crushing of Midle and index fingers of left hand Date of Medical Boards London, Ont. 21-7-19

Date. T.O.S.	Remarks	Pt. 2 Order No.
30-6-19	No. 1 D. D.	
13-7-19	Posted to Hosp. Sect. (W.O.M.H) and granted furlough	
	with subs. to 27-7-19	199

JUL 24 1919 Posted to Casualty Coy. 206

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

(over)

Date.	Remarks.	Pt. 2 Order No.
17-7-19	Ceases to draw Sub. allowance	206
26-7-19	Discharged from H.M.S. On Demobilization Medically	
	Unfit for Gneral Service (P.D.P.)	206

M.F.W. 192
150M—6-18.
1772-39-1243.

Collins

Surname	Christian Name or Names	Reg. No.
Collins	C.	2,010,646

Rank	Unit
Pte	3 C & R.B

Cas. List.	
20.9.18 C318	Cambridge Aldershot 29.8.18 Inj spine N.Y.D. not paralysed Paraplegia R
26.9.18 C323	Connaught a'slt 19.9.18
23.10.18 C346	Disch 16.10.18
8.11.18. C360	14 C.G.H. Eastbourne 3.11.18 Hysteria
20.11.18 C370 (2)	13 Can Gen. Hastings 17.11.18
27.11.18 C376	Dis 23.11.18
11.2.19 C438-1	14 Can Gen Eastbourne 4-1-19 Paraplegia
11-2-19. C438-1	Disch 11-1-19
24.2.19 C449	2 P.P.C.L.I. Bexhill 20.2.19 Inj. 1st finger. R. Amp. Rt.
3.3.19 C455-1	13 C.G.H. Hastings 27.2.19
25-3-19 C474/2	Ref C455 report injury 1st R finger amptd. Changed to amp 1st L finger ack.
9.4.19 C484	14 C.G. Eastbourne 3.4.19
14.4.19 C491	D.I.C.R.C. Bexhill 10.4.19
23.4.19 C496	14 Can Gen. Eastbourne 15.4.19
5.6.19. C531	5 C.G.H. Kirkdale 3.6.19.
8.7.19 C557	Inv to Canada 30.6.19 S Lst. 503 MD 1

BD. of D.G.M.S.

Cas. List.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DISTRICT 1

NAME OF SOLDIER Collins, Geo. No. 2010677

REGIMENT Engineers RANK Sapper

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	1918																					
	19/4																			J. M. Dean	1	Ex. 2.3.29.30.
	June 25/18.										2.3. 29 30									Jn. H. Hagey	1	Complete 25/6/18

M.F.B. 465.
10M.—6-18.
772-39-950.

Forms. I. 1237 / 12

No. 12 Canadian General Hospital, Hastings, Sussex.

Bed 15

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T686.	2010646.	Spr.	Collins.	George.
Year	**Unit.**		**Age.**	**Service.**
1919.	3rd C.E.R.B.		33.	8/12.

Station and Date.	Disease Compound fracture. 1st & 2nd Phalanges. Hand (left).
26.2.19.	On admission – Amputation of index finger at middle joint. Rt middle finger greatly swollen and inflamed. and discharging pus. Sutures still in fingers.
	X ray report — "Amputation distal phalanx index finger Rt. Old fracture, distal phalanx, middle finger. Several sequestra present. Many dust like F.B's' present."
	A Hanley Kirkland Capt RAMC.
	Hot fomentations.
3.3.19	Operation – Removal of sequestra and F.B's of middle finger rt hand. Dead nail removed. Amputation Stump.
	Hot fomentations
27-3-19	Amputation of middle Rt finger at metacarpo phalangeal joint.
	Transfer to Sanatorium – 14 c.H.H.
	W Halliwell Capt RAMC.
8-4-19	Transferred to Cooden
	J Stevens Major R.A.M.C.
Princess Patricia Canadian Red Cross Hospital, Cooden Camp, Bexhill.	
9-4-19.	To A.T.H.
	Kingsland Capt

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10933). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	
5 C. S. H.	Left inden Juniper accepted at 1st reinforcement joined said Juniper mining. Proceeded overseas - Also joined Company of Home Base. A. E. Macdonald Capt

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2010646

2 Rank. Sapper

3. Name. COLLINS, George

4. Unit. Canadian Engineers

5 Date of Discharge JULY 26 1919 Place LONDON, ONT

6 Reason for Discharge ON DEMOBILIZATION Medically unfit for general service

7. Authority. R. O. 1894 DO 206 25/7/19

8. Proposed Residence after Discharge Genl Dely, Lima, Ohio

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.? 39

G. Collins
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date July 26th., 1919.

K & D
30/11/20

Signature (O. C. Discharging Unit.)
O. C. Discharge Section, No. 1 D. D.

M.F.B. 218a—300M.-11-18—1772-39-113.

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 except.. No. 17. fit for Service abroad not general service.

19. Is the invalid fit for

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

Is fit for Service Abroad not General Service.

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.

MAJOR. C.A.M.C. *President.*

Capt.C.A.M.C.

PLACE London.Ont.,

DATE 22- 7- 19. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President.

PLACE.....

DATE..... } Members

APPROVED BY

for *Assistant Director of Medical Services.*

DATE 23.7.19.

APPROVED BY

Director-General of Medical Services.

DATE.....

THIS FORM WILL BE USED FOR ALL RANKS.

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

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.Ont., DATE 21- 7- 19.

1. 1 (a) Unit No. 1.D.D. (b) Regimental No. 2010646 (c) Rank Spr.

(d) Surname C O L L I N S. (e) Christian name George.

(f) Home address Lima Ohio. U.S.A.

(g) Next of Kin Samuel Burke. (h) Relationship Cousin.

(i) Address of Next of Kin Gull Lake. Sask.

2. Age last birthday 33 Date of birth May 11- 1886.

3. Enlistment, or Appointment (if an Officer) (a) Place Windsor. Ont., (b) Date June 18th 1918.

4. Personal description:

(a) Height 6' 1½" (b) Weight 167 Lbs. (stripped) (c) Complexion Dark.

(d) Colour of hair DkBrown (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Middle finger of left hand, and 2 terminal joints of Index finger, left hand missing.

5. Former trade or occupation Motor-driver.

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
	1	33

	Periods	
	From	To
Canada	18- 6- 18	27- 7- 18.
England	16- 8- 18.	3- 7- 19.
France or other theatres of War		

7. Original disease, or injury Crushing of meddle and index fingers of left hand.

(a) Date of origin 7- 2- 19. (b) Place of origin Lewes. Sussex, Eng.

(c) Cause Trainwreck while a passenger.

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.)

Slight restriction of occupation due to loss of middle finger and part of index finger of left hand.

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

Soldier in good general health- well nourished- looks well and feels well. The middle finger of left hand ismissing and the two terminal joints of index finger of left hand missing.

Soldier is not making any complaints.

(*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*).)

Soldier was inggood health when he enlisted, while returning from leave was injured in a train wreck at Lewes resulting in the loss of middle and part of index finger of left hand. was thrown from train. and left hand run over by a passing train.

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*).)

M.D.H. Reports Cambridge Hospital 29- 8- 18 to 18- 9- 18, Function parapligia from injury. No. 14 Can. Gen. Hospital. 2- 11- 18 to 16- 11- 18. Hysteria- From injury. This was from an injury to back by falling while engaged in sports There is no disability whatever now.

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

As Per. 4 F.

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.)

In No. 2. Eastern General Brighton. No. 13 and 14 Ca General HOSPITAL R. P. Can. Red. Cross. at Cooden. No. 5. Can. General Hospital.for Injury to hand.

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 special service.

A. E. Raleigh Capt. C.A.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

I, the undersigned G. Collins. 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

George Collins. Rank.
Signature of invalid examined.

P 820
12474—378M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ENGLAND or CANADA.	SEPARATION ALLOWANCE.	* ENGLAND or CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		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.

NAME:- COLLINS, George. K

NUMBER:- 2010646

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
A.P. 62		Spr.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 55 Dft. C.E.

DATE ACCOUNT FIRST OPENED:- 1-8-18.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			CETC

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
14.5.19	4/20		2 4/3			S Funbridge	8 1/0
4.5.19	4/68		~~3 5 3~~				
			5 5 9 6				
		D.of.	8 7 6				
			4 7 2 9				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
A.P. 62	1 - -	10		
			8	
S.S.Bks. 19469		S.P.&Bn.	14 7	19

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transf'd Can'l 6.19 K-a 117. 14 Ch Gen Ho. Eastbourne 16/5 Eastbourne Mus.

MONTH 1918	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
July 31	Balance.								27 22		
aug	A. Pay	34 10		A R 12. Bourley 20 8/18	4 8 7				56 45	15-	
		34 10									
Sept	P.P.	33-		DNS 1851-81 ~~DH~~ CB. 27.7.18.	5-						
				Hospadv. R 5588 - 18.9.18.	1 7 0				82 15		
		33-			6 7 8						
oct.	S.P.	34 10		a/c Hosp Rem. 40459 - 8.10.18.	4 8 7						
				Hospadv 2951. 30.9.18 Comeyht	8 5						
				" 2846. 23.9.18	5 2 3 8 3						
				" 3729. 7.10.18.	6 5 1 8 5				109 43		
				" R 5462 18.9.18. Cambridge	8 5				108 58		
		34 10			8 2 7						
Nov	SP	33 -									
				a/c 3015. 14/11/8. 14 Can Gen Hos.	2 4 3						
				" 1003. 13 CG Hos. 20/11/18	2 4 3						
				399 Connaught Hos. 14/10/18	8 5						
				" 4328 2 CCRB	9 7 3.						
Dec	SP	34 10		" 4438 2 CCRB 19/12/18	4 8 6 7						
									145 67		
Jan	SP	34 10									
		101 20			6 4 11						
FEB	"	30 80		a/c 3869 14 BG. Hos 9/1/19	2 4 3						
				" 3432 2 CCRB 13/1/19	4 8 7						
				" 263 3 CCRB 27/1/19	3 8 9 3						
	Mch	34 10		" 7918 Berlin 25/1/19	2 4 3						
				" 1780 13 CG Hos 11/3/19	9 7 3				152 18		
		64 90			5 8 3 9						

COMPILED BY... Acheson

CHECKED BY... [illegible]

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									152 18		
Apl	P P	33 -		AR 70 14 CG. HOS 17/4	2 43						
				663 Berhill 10/4	9 73						
				1 OR Trousers. Apl. 19	3 70						
May		3 4 10		164 142 HOS 22/4/19	12 17						
	Leave to Sea.	3 4 4							19 4 69	150 -	
				H20 CCC 14/5/19 =	2 43						
	S Fur 6/5-29/5/19 DO 139. CCRO 19/5	8 7 6		408 14 G HOS 17/5/19	53 53				147 49		
		79 30			83 99						
				AR 5351 6 6/19. 11 C.g.H.	4 8 7	Kind Let					
				" 5730 20 6/19 5 C g H	4 8 7		Do.		137 75		
					9 7 4						
				Sailing list 505. Sos to Canada 30 6/19							

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 2010646 RANK Lpl NAME (IN FULL) COLLINS George

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 40th Btn. C.E. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO Gen Del Lima Ohio U.S.A. — DATE — AUTHORITY

DATE OF ATTESTATION 18-6-18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE LONDON, ONT. — DATE 26-7-19 — REASON Demob M.U. DO206 — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							147	49																			4	87								Araguaya
																											4	87								T.D.S. 30-6-19 and posted Hosp with effect 13-7-19 D.O. 199
																											4	87								Attaugh. Exhs. 13-7-19 to 31-7-19 D.O. 199
																											5	00								cancn to dramr. as at 17/7/19 D.O. 206
																											30	00								
1-6-19																															49	61			97	88	
30-6-19	30	110	33	00	12	00	97	88	142	88																	8	80			88	68			134	08	
1-7-19					35	00																														35 00 Hosp rates
26-7-19	26	110	28	60	70	00	13	08	267	68							129	77									26	68			267	68				
																													70	00	70	00				
																																				A R Shortlidge Maj
			WAR SERVICE GRATUITY																																	
			W.S.G.	S.A.													W.S.G.	S.A.																		Soldier Depend
122 days					280	-			280	-							70	-													210	-				1st pay W.S.G. as above
																	70	-													140	-				23/9/19 1160359
																	70	00													70	00				SEP 22 1919 1171209
																	70	00																		OCT 21 1919 1179923
			280	-			280	-									280	-													280	-				

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.