883

C.

ATTESTATION PAPER.

No. 883

Folio. 1141

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Walter MacKay Langdale Draycot
2. In what Town, Township or Parish, and in what Country were you born? ..... Belgrave Leicester
3. What is the name of your next-of-kin? ..... Mrs. Draycot
4. What is the address of your next-of-kin? ..... 101 Sunbeam Rd. Old Swan Liverpool
5. What is the date of your birth? 24-2-1883
6. What is your Trade or Calling? ..... Fruiterer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... No.
10. Have you ever served in any Military Force? If so, state particulars of former Service. ..... Yes 7th to K.R.Rs
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.

Walter MacK Draycot (Signature of Man).

Holeman (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Walter Mck Draycot, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Walter MacK Draycot (Signature of Recruit)

Date 17-12-1914. Holeman (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Walter Mck Draycot, 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.

Walter MacK Draycot (Signature of Recruit)

Date 17-12-1914. Holeman (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 Leamington this 17th day of December 1914.

Stanley L. Jones (Signature of Justice)

J.P.

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

(Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

Description of Walter Draycot on Enlistment.

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

Height 5 ft. 8½ ins.

Chest measurement.
- Girth when fully expanded 40½ ins.
- Range of expansion 2½ ins.

Complexion Fair

Eyes Blue

Hair Brown

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

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

5 scars on buttock

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 12-12- 1914.

Place Winchester

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.

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

.....(Signature of Officer)

Date.....1914.

C.E.F.

DRAYCOT, WALTER M. 883 P.P.C.L.I. 24939

M.U.

H

Box 2662

883 | DRAYCOT | WALTER MACKAY L.

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 2662

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

883. Sergt Walter M.L. DRAYCOT

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

3842

D/O. 44 - Service - 4 yrs.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names Walter M.L. 2. Surname Draycot
3. Rank Sergt. 4. Original Unit P.P.C.L.I. 5. Reg. No. 883
6. Address, in full, to which future payments of gratuity are to be forwarded Lynn Valley, North Vancouver B.C.
7. Date of enlistment in the C.E.F. Dec 18th 1914 Hdq
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Nil
9. Relationship of such dependent
10. Address, in full, of such dependent Not applicable
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? N.A.
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
P.P.C.L.I. Dec 1914 to June 1917
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service Not applicable
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served P.P.C.L.I. Dec 1914 to Feb 12th 1919
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

F.E.M.

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

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ..... No .....

20. Have you been issued with a War Service Badge? If so, what class ? ..... No .....

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

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... No .....

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

(b) If so, was such reversion in consequence of misconduct or inefficiency? ..... N.A. .....

24. Are you now serving in the C.E.F. ..... No ..... If not, give:—(a) Date of discharge ..... 12/12/19 ..... (b) Reason for discharge ..... Demobilization .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ..... PPCLI, Dec. 1914 to June 1917 .....

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

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

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: [signature]

Place of Residence: Lynn Valley North Vancouver B C

Declared before me at: Vancouver B.C.

This 12. day of Feb 1919.

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

W.B. Andrews. Capt.
O.C. Discharge Section, District Depot, M.D. No. 11

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

Particulars of Service in the Canadian Armed Forces of

Private Walter MacKay Langdale DRAYCOTT

1. Branch of service: Canadian Expeditionary Force
2. Date and place of enlistment:
   17 December 1914 Winchester, England
3. Theatre(s) of service: Canada, Britain and France
4. Date and place of discharge:
   12 February 1919 Vancouver, B.C.
5. Units — Highest rank attained
   P.P.C.L.I. — Corporal
   Canadian Forestry Corps. — Private
6. Next-of-Kin: UnKnown

(891) Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

2

Regiment or Corps P. P. C. L. I.

Regimental No. 883. Rank Pte. Name Draycot. Walter Mackay.

Enlisted (a) 2. 12. 14 Terms of Service (a) 1 Year or duration of War Service reckons from (a) 2. 12. 14

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

Extended _____ Re-engaged _____ Qualification (b) _____

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	Southampton	20 12/14	
11 1/15	O.C. Hosp.l	Admitted to 3 Sta. Hosp.l G.S.W. L. Eye.		11 1/15	
	0953	To England on Hosp.l Ship		13 1/15	

Alan Gough

LIEUT: COLONEL
1/c INFANTRY RECORDS, 3RD ECHELON G.H.Q.

SEP 24 1918 H.M.T. "K" NO. 64

Embarked ..... IDON

Disembarked ..... QUEBEC

SEP 24 1918

OCT -7-1918.

(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				
16-10-18.	O/S.	(T. O. S. District Depot, M. D. XI.	Victoria, B. C.	24-9-18.	D. O. Part 11, 182/2012 1918)
DISCHARGED		MEDICAL UNFITNESS	VANCOUVER, B. C.	12.2.19	D.O. 44/247 9. of 13/2/19.

V A MacLean Capt.
for O.C. District Depot., XI

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

District Depot M.D. XI
FEB 12 1919
Discharge Section

This is to Certify that No. 883 (Rank) Private

Name (in full) Walter Mackay Langdale Draycott enlisted in the P.P.C.L.I.

CANADIAN EXPEDITIONARY FORCE at Winchester Eng on the 17th day of December 1914

HE served in France with the P.P.C.L.I.

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 35 years
Height 5. 8½
Complexion Fair
Eyes Blue
Hair Brown

Marks or Scars 2 scars on buttock

Walt Draycott
Signature of Soldier

H. B. Andrews,
Issuing Officer

Rank Capt.
For O.C. District Depot, XI
Appointment

Date of Discharge 12-2-19

Signed at Vancouver BC this 12th day of February 1919

in Military District No. XI

File Reference No. DD.D.3714.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

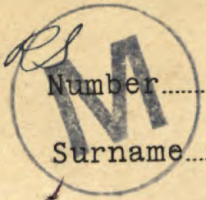
Signed at ..... this ..... day of 19

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

.....
Name of Officer

.....
Rank

.....
Appointment



Number 883 Rank Pte

Surname DRAYCOT

Christian Name Walter Mackay

Units PPCLI Theatre of War France

Late of Service 20-12-14

Remarks Draycot P.O. Lynn Creek

Latest Address ~~Lynn Valley~~ Lynn Creek ~~N. Vancouver~~ BC

Roll No. B Page 22570

200m.-6-21....

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

.....

R RANK SURNAME INITIALS UNIT

....

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

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

.....

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

..... Railway.....

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

tination.....

(Sgd.).....

c

SURNAME. Draycot

CHRISTIAN NAMES W. McK. L

REGL. No. 883 RANK ~~Pte.~~ Sgt.

UNIT ~~P.P.C.L.I.~~ No. 11. DD.

FORMER CORPS K.R. Rs. (7 yrs)

11

CARD No.

Sosdis P.U 12-2-19

DD 44 13-2-19

FOLL. No 11 DD.

NEXT OF KIN.

NAMES IN FULL Draycot. Hy.

RELATIONSHIP TO SOLDIER R.N.S.

ADDRESS 101 Sunbeam Rd. Old Swan. Liverpool - Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Eng. Belgrave, Leicester DATE Feb. 24/883

PLACE OF ATTESTATION Winchester ~~Ont.~~ DATE Dec. 17th/914

Morn Hd Camp

RHC 7.10.18 II 212/23.

L. L. 90580.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-835.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Printer RELIGION Church of Eng.

DESCRIPTION.

APPARENT AGE 32. YEARS MONTHS

HEIGHT 5 FEET 8 1/2 INCHES

CHEST MEASUREMENT 40 1/2. INCHES EXPANSION 2 1/2. INCHES

COMPLEXION Fair EYES Blue. HAIR Brown.

DISTINGUISHING MARKS 5 Scars. on buttock.

MEDICAL EXAMINATION. PLACE Winchester DATE Dec. 19/914

NAME Draycot. W. McK. REGT'L No. 883

RANK AND CORPS Pte Can For Corps H. Q. FILE No. 649.

FOLLOWS NO.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
C276 (4)	#16 Con Gen Orpington	25-7-18	Neurasthenia ~~N.Y.D.~~ 2 as per C307
C329 3	Invalided to Canada	24-9-18	"

H. Q. FILE No. 649-

NAME Draycott. Wm Mc H, L REGT'L. No. 8831

RANK AND CORPS Pte. P.P.C.L.I.

NO. 1281

FOLL.

CABLE

NO.	DATE	NATURE OF CASUALTY
640	19/1/15.	Wounded. left eye.
M 5030	21-5-17	Adm to 1st North Gen Hosp Newcastle May 16th 1917 Gas Poisoning slight

L. L. Job 83225—M. & D. 5842.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
.1	No 3 Stat. Hosp. Rouen.	11/1/15	G.S.W. Lt. Eye. ✓
.3	No 3. South. Gen. Hosp. Oxford	14/1/15	wounded Serious. ✓
a513(2)	Rep from Base	11-3-16.	GSW Lt Eye. Rejunit
a627	No 2 Aust Gen Wimereux	10-5-17	P.U.O. Ht
B317	1st North Gen, Newcastle	16-5-17	Gas poisoning slt.
B342	" " " "	24-6-17	" " "
B23	P.P.S.C.X Spec. Ramsgate	8-8-17	W Gas Shell Slt (Estm Ont
C228	Dischgd	2-6-18	Syncope
	#5 Can Gen. Kirkdale Liverpool.		
C242	Discharged	19-6-18	"
276	16 Gen Orpington	25-7-18	Neurasthenia
329	Invld Can	24-9-18	" "

Form R. 149. W. McK. L.

Name DRAYCOT Rank Pte. Reg. No. 883

Unit CFC. BD

Next of Kin Hy Draycot 101 Sunbeam Rd. Old Swan, Liverpool

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-6-18	No 5 C.G.H. L'pool		Syncope	C 228		19003
19-6-18	Discharged			C 242		5852
25. 7	16 C.G.H. Orpington		NYD Q	C 276		21984
Report	"NYD" changed to		"Neurasthenia"	C 307		1659.
24.9.18	Inval. to Canada			C 329		2492.

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

D.M.S. 1317

HOSPITAL.

A. & D. No. ~~15116~~ 1345 Ward JS 309-3

Unit P.P.C.L.I. Sick or Wounded.

Regtl. No. 883 Pl. of Act'n France

Rank Sgt Name Draycot WML

Age 34 Religion CofE

Service Compl'd 30.12 Time with Field Force 24.12

Diagnosis Gassed

Admitted 22 JUN 1917 Discharged To Duty 8/8/17

Transferred

RECORD FURTHER REMARKS ON BACK.

LEDGER NO. 100.

SERIAL NO. ~~21820~~ 13

REG. NUMBER 883 NAME Draycott Walter L

RANK Sgt CORPS P.A.C.I.

AGE 36 SERVICE C 1/12. E 2 1/12. F 2 years.

NAME OF HOSPITAL Van Military PLACE Vancouver

DATE OF ADMISSION 14-10-18

DISEASE Neurasthenia

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 12-2-19 IN CATEGORY E.

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

P. T. O.

REMARKS:

Name Draycott, W.McK, L. *Rank* Pte. *Reg. No.* 883

Unit P.P.C.L.I.

Next of Kin H, Draycott. 101 Sunbeam Rd, Old Swan, Liverpool.

Date 1916		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11	1	3 S. H.	Rouen	GSW L.Eye	Old 2		
11	3	~~Disch.~~ Rejoined direct.			A 513.		
10-5		No 2 Aux. Gen. Hosp. W'eux		P.W.O.	A 627.		
16-5		1st Nor. Gen. Hosp. Newcastle		Gas Poisoning	Slt B 317		M 5030
24-6		P.P.C.R.X. Hosp. Ramsgate		Do	B 342.	21-5	22-5
8-8-17		Discharged		Do	B 23		Nom Roll

PPCLI

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

No. 883 RANK Pte NAME Draycot

T. O. S. 18-12-14 UNIT P. P. C. L. I.
Dec Paylist

M. D. Various

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Dec. 18	1914 Dec. 31	n.		
1915 Jan.	1915	n		
Feb.		n		
Mar		n		

UNIT SAILED
OCT 3 1914

*Name Draycott William M. Rank Sgt Regtl. No. 883

Fyle Depot D.D. 3714

Original unit P.P.C.L.I. Present unit M. or S. Age 35 Religion C of E Ref. H.Q.

Port, ship and date of arrival Quebec Harbor 7-10-18

Next of kin Hy Draycott 101 Sunbeam Rd Old Swan Liverpool

Address on leave

Address on discharge Lynn Valley N. Vancouver B.C.

Transportation issued Yes No Date Character on discharge

Previous occupation Fruiterer Date and place of enlistment 17/12/14 Winchester

Diagnosis Neurasthenia Defective Vision Bronchitis Date of Medical Boards 9/2/19

Discharged 19 G. 2 12 44/247 D.O.

Date.	Remarks.	Pt. 2 Order No.
16-10-18 T.O.S. O/Seas. 24-9-18 post Hosp Dect 14-10-18 leave 30-10-18		182/2012
30-10-18	Posted to Shaughnessy H.S.D.O.	166/1186
1-10-18	Prallow Subs 14-10 to 30-10-18 H.S.D.O.	167/1172
	Posted to Dis Sec 12/2/19	44/246 C

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

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

Surname: Draycott. Christian Name or Names: W. Reg. No.: 883.

Rank: Pte. Unit: (P.P.C.L.I.) Co.: E.D. Troop: C.F.C. Batty.: Depot

Hospital: 3 Sta. Rouen. Date of Admission: Hosp. 11. 1. 16

Transferred: 3rd South Gen Oxford Hosp. 14-1-15

No. 2 Aus. Gen. Wimereux Hosp. 10-5-17

1st N. G. H. Newcastle-on-Tyne Hosp. 16-5-17

Diagnosis: GSW. Lt. Eye

(1) Later Diagnosis (if changed): Gas. Poisoning Slt. R.

(2) Syncope at

(3) N. Y. D. "Q"

Additional Diagnoses, if more than one state present: Neurasthenia at

DISPOSITION: (2) Date

REMARKS

Rep. fm Bse Rej Unit 11. 3. 16

Dis 8.8.17

Dis. 19-6-18

Inv. to Canada 24/9/18

3

Ch date not stated

C.L. 21. 1. 15. 2.

" 23. 1. 15. 3a.

19.12.16 a 513

Ch. 19-5-17 @ 627

Ch 22-5-17 B 317

" 28. 6. 17 B 342.

29.9.17 B 23

4-6-18 b 228

20-6-18 C 242

31-7-18 b 276

5. 9. 18 C 307 ① Rep. N.Y.D.Q. Ch. to Neurasthenia

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Princess Pab. Ramsgate.	24. 6. 17.
2.	5 6. G. Liverpool 16 6. G. Orpington	2. 6. 18 25. 7. 18
3.		
4.		
5.		
6.		
7.		

C.L. 1.10.18 C 3292

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 Fairmont Vancouver B.C. Date 4.2.19

1. 1 (a) Unit P.P.C.L.I. (b) Regimental No. 883 (c) Rank Sgt

(d) Surname Draycott (e) Christian name Walter Mackay Langdale

(f) Home address Lynn Creek N.Vancouver B.C.

(g) Next of Kin Henry Draycott (h) Relationship brother

(i) Address of Next of Kin 101 Sunbeam Road, Stoney Croft, Liverpool Eng.

2. Age last birthday 35 Date of birth Feb. 24. 1883

3. Enlistment, or Appointment (if an Officer) (a) Place Winchester Eng (b) Date 15.12.14

4. Personal description:

(a) Height 5'10" (b) Weight 140 (stripped) (c) Complexion fair

(d) Colour of hair black (e) Colour of eyes blue (f) Identification marks, Scars, etc. 2 scars over lower part of spine

5. Former trade or occupation provision merchant.

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
	A.D.M.S., M.D XI, FEB 7 - 1919, VICTORIA, B. C.	
	Periods	
	From	To
Canada	Oct. 1918	present
England June 4th 1917 - Oct. 14th. 1918	Dec 15.14	Dec. 18.14
France or other theatres of War	Dec 18.1914	June 4.1917

7. Original disease, or injury 2. Neurasthenia. 1. Defective vision 3. Bronchitis

(a) Date of origin 1. Prior to enlistment 2. Feb. 1917. 3. May 1917 (b) Place of origin 1. Prior to enlistment 2. France 3. France.

(c) Cause 1. Structural defects of eye. 2. Strain of war work. 3. Cold and exposure.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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

1. Defective vision. 2. Neurasthenia. 3. Bronchitis

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.)

A man of medium build. Rather a worn and anxious expression. Eyes-see specialist's report. Nervous system- see neurological report. Respiratory system- is losing in wight he asserts . Occasional night sweats, cough - considerable during the night and considerable amount of expectoration No impairment of resonance, no adventitious sounds at present. X Ray and sputum findings negative. Cardiac system, save for definite roughening of 1st sound at the apex is normal. Work- can walk 2 miles on level. Up grades troublesome. This man is hardly fit to do other than light work, gardening or clerical where therein not too much eye strain.

(*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..... Genito-Urinary System.....no.....
(If pulse rate is abnormal, B. P. will be taken.) (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*).)

Carried on until Jan.1917. Had nervous breakdown. Did not go back to France again but was put in CFC by way of change. Vision in left eye defective when he joined but condition of right was good at that time he asserts, but since then on account of the nature of the fine work he feels his sight in the right eye has become defective.

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*).)

none

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

two small scars at base of spine

1.Yes. 2. No. 3. No.

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

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

1.Fine nature of work (topography) probably has contributed to a degree to defect of right eye. 2 and 3. N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? a. 1.2.3. No. b. 1.2.3. No.

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1.Permanent. 2. One year. 3. One year

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

rest and psycho therapeutic treatment. X Ray and sputum examinations

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

no

16. Can the former trade or occupation be resumed? not at present, memory defective and eyes rather weak.

(If not, briefly state why)

17. Recommendations

category B

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

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

I complain in addition of.....

A.R.T.

Rank.

Signature of invalid examined.

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.

a. Pulse at rest 132- after heading 10 times. 2 mins later 96.
11 b. Aggravation, 25% due to service. Shot at Bisley 1904, 1907 and 1911
did sniping for a year till 1916.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

no

(*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.)

Yes, category A for discharge

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.

A. P. Thompson Capt *President.*

PLACE Vancouver B.C.

DATE 5.2.19

J. MacDermot Capt } 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 FEB - 7 1919

APPROVED BY

A.M.C. M.D. 11

Director-General of Medical Services.

DATE.....

Army Form B. 104—81.

No. 1-15-26
(If replying, please quote above No.)

Canadian Record Office,
36 Victoria St. Station.
22 Jany, 1915.

SIR,

I regret to have to inform you that a report has this day been received from the War Office to the effect that (No.) 883
(Rank) Private (Name) W. Draycott
(Regiment) P.P.C.L.I. was {*dangerously / *severely / *slightly}
wounded in action in France and admitted
on the 14th day of Jany, 1915 to No. 3 Southern General Hospital Oxford

*Strike out words that do not apply.

I am at the same time to express the sympathy and regret of the Military Army Council.

Any further information received in this office as to his condition will be at once notified to you.

I am,

SIR,

Your obedient Servant,

F. H. Caplan
for Officer in charge of Records.

Mr. H. Draycott
101 Sunbeam Rd.
Old Swan
Liverpool.

(K11219) Wt W2537—200,000—8/14. W. & Co., Ltd.
Forms B. 104/80 2

96201

Forms
I. 1237
10

3rd SOUTHERN GENERAL HOSPITAL
No.....
Date.....
OXFORD

Army Form I. 1237.
D. 149.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
BF 230	883	Pte	Draycot	Walter

Year	Unit.	Age.	Service.
	2. P. P. C. L. I.	32	2/12

Station and Date.

14 JAN 1915

Disease 1033 Shock.

On Jan 9th Shell burst on parapet of trench. Was knocked down & stunned. Taken to Hosp.l same night. Pain in L. eye: 2 foreign bodies were removed immediately. Drops were put in eye. Has had much headache ever since & dimness of vision.

Jan 15/15. Pt pupil still semi dilated & sluggish = Has a high error of hypermetropia = F.H.A.

Friday 2 pm. at the Eye Hospital.

E C Bevers Capt

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

(xs) 88511 Wt. W6545/622 200m 10-14 W B & L

BB

P.T.O.

Station and Date.	

Forms
I. 1237
11

PRINCESS PATRICIA CANADIAN RED CROSS
SPECIAL HOSPITAL, RAMSGATE, KENT.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
	883	Sgt.	Draycott	Wa. M. L

Year	Unit.	Age.	Service.
	P. P. C. L. I.		

Station and Date.

Disease Gas Poisoning & Bronchitis

Coughing.

Jul. 14/17 Lungs clear - Rec - B I. category - Eyes examined July 10 - Right Vision 6/6. Left eye Amblyopic. Present condition previous to enlistment.

[illegible]
Capt

PRINCESS PATRICIA CANADIAN RED CROSS
SPECIAL HOSPITAL, RAMSGATE, KENT.

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1185] W11203/M1150 50m 12/16y 5 89 Forms/I. 1237/12

P.T.O.

Station and Date.	

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Drayeot Walter

REGIMENT PPCLI

RANK Pvt

DISTRICT 11

No. 883

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.

Condition on first Examination	Date 1918	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
Nov	2	2/14 9								8	11/10 4 5 13 20	19 18 30 15 29 9								Lieut Fergie	11	1 Ex 3
Nov	2																			Lieut Fergie	11	Completed.

M.[illegible]465. 200M.—6-18. [illegible]2-39-950.

K

NAME Draycott W. L

Regimental No. 883

Unit P. P. C. L. I

Date of enlistment 18th December 1914

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
18th Dec	31st Dec	14	1.00	14 00	14	.10	1 40	Nil	15 40			- -	- -	- -	- -	
Jan 1	Jan 31	31	"	31 00	31	"	3 10	15 40	49 50			27 50			27 50	✕ assigned pay wrongly charged, credited on
Feb 1	Feb 28	28	"	28 00	28	"	2 80	22 00	52 80				✕ 25 00		25 00	March Sheet
Mar 1	Mar 31	31	"	31 00	31	"	3 10	✕ 25 00 27 80	86 90			25 00			25 00	✕ $25 charged as assigned pay on Feby Sheet
Apr 1	Apr 30	30	"	30 00	30	"	3 00	61 90								✕ S. F. @ 30¢ per diem 26 15/15 - 26 2/15
								✕ 9 30								
								⊙ 2 50	106 70			50 00			50 00	Refund from Hospital
May 1	May 31	31	"	31 00	31	"	3 10	56 70	90 80			80 00			80 00	
June 1	June 15	15	"	15 00	15	"	1 50	10 80	27 30			— —			— —	97 Days
July 1	31	31		31	31		3 10	⊙ 13 80								Net Balance $27.30
								27 30	41 70			50 -	-		50 -	
								✕ 16 50								L.P. Cussons Adjt's
			Diff in Exchange					6.20 ✓				737 50				✕ 15 days under existing Regs. CPC cancelled. 27. 27-10 5 26-26 6 15-6 15
Aug 1	31	31	1.00	31	31	.10	3 10		40 30	247 -		38 93			53 53	28.47
										303 -		14 60				
Sept 1	30	30	1.00	30	30	.10	3		33	986 -		2 68			5 36	56.11
										1044 -		2 68				
Oct 1	31	31	1.00	31	31	.10	3 10		34 10	1104 -		2 61			5 22	84.99
										1159 -		2 61				
Nov 1	30	30	1.00	30	30	.10	3		33	1220 -		2 61			9 75	108.24
										1410 -	A	1 79				
										1484 -		2 68				
										1242 -		2 67				
										250 -	28	4 86				
Dec 1	31	31	1.00	31	31	.10	3 10		34 10	1397 -		2 68			13 73	128.61
										1625 -		3 82				
1916										1484 -		3 57				
Jan 1	31	31	1.00	31	31	.10	3 10		34 10							162.71
Feb 1	29	29	1.00	29	29	.10	2 90		31 90	1817 -		2 61			6 97	187.64
										1890 -		4 36				
				424			42 40	73 30	539 70			327 06 25			352 06	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Bal.	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
				424.			42 40	73 30	539.70			327 06	25		352 06		
March 1	31	31	1.00	31 00	31	10	3 10		34 10	1954 Nov 16 33.		2 62 87 60			90 22	131.52.	
				455			45 50	73 30	573 80			417 28	25		442 28		

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 883. RANK Private NAME Draycott W. J.

IF IN PERMT. CORPS WHAT UNIT UNIT PPCLI

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION

DATE OF ATTESTATION Dec 18/1917.

ASSIGNED PAY MONTHLY $ Nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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)

TRANSFERRED TO E.O.R.D. DATE 21-7-17 AUTHORITY C.R.O. 317 22-5-17

TRANSFERRED TO Base Dépt. DATE 1-1-18 AUTHORITY 162

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

339

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916																																			
			455.				4550							73.30	5728												447.28	25.		442.28	131.52				
April	30	1	30		30	10	3								23		23/4/16								349.						349	16102				
1/31/5/16	31	1	31	00	31	10	3	10							34	10																19513				
1/30/6/16	30	1	30		30	10	3	.							33	00		216	12/6/16	7THQ					511											
																		194	31/6/16	7	7th				426.						937	21876				
July	31		31		31		3	10							34	10																25286				
Aug	31		31		31		3	10							34	10		248	4/9/16	7th Sig Bde					436.						436	28260				
Sept	30		30		30		3								33			369	19.8.16						436.											
																		355	4/9/16						436.											
																		376	6/9/16.						9733.											
																		319	15/9/16.						523.											
																		275	21/9/16.						436.											
																		286	24/9/16.						349.											
																		290	5/8/16.						349.											
																														243	1250.5	19055				
Oct	31	1	31		31	10	3	10							34	10		442	9/10	7th Sig Bde					436.											
Nov.	30	1	30		30	10	3	.							33	.		397	12/10						436.						872	21593				
																															-	24893	165	8393		
Dec	31	1	31		31	10	3	10							34	10		497	27/11	"					1744.						1744	26559	180	8559		
1917			73	-			73	-						7330	8730										349.	16251	41728	25.	243	61071			180.	8559	
			733																																

883. Pte Draycott, W. L.

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
B. F.														73 30	385 30																				
1917			22 3																					3 49	162 51	447 28		25	2 43	610 71	265 59		180	85 59	
Jan															34 10																				
1-31	31	1 10	34	10																										29 69		195		
Feb															30 80					582	5/2/17	4 2nd Bde				8 72				8 72	321 77				
1-28	28	1 10	30	80																1690	5/9/17	42nd Bn				4 30									
Mar															34 10					268	9/6/17	7th Bde				3 49				17 44	338 43	225		113 43	
1-31	31	"	34	10																776	21/3/17	"				4 36									
Apl															33 ..					1703	19/3/17	42 Bn				5 23									
1-30	30	"	33	..																47	5/4/17	42 Bn				5 23				5 23	366 20	240		126 20	
May 1-31	31	"	34	10											34 10					107	3/5/17	"				5 35									
																				118	17/4/17	"				5 23				10 58	389 72	285		134 72	In Hosp 16-5-17 C.F.B. 21-5-17
June 1-30	30	"	33												33											20 4 08				-	422 72	270		152 72	
July 1-20	20	"	22												22															-	444 72	285			Trans to E.O.R.D. 21-7-17 Cert C.R.B. 21-5-17
Jul 21/31			12	10											12 10																456 82				
Aug.			34	10											34 10																490 92	300			
Sept			33												33																523 92	315		208 92	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
		~~523 92~~							523 92	315	
Oct	31 1 10	34 10		AR986 9/8/17 Pgate	48 66					330	
				AR176 15/9/17 EoRD.	9 73						
				4432 AR700 18/9/17 7PMR gate	19 46				480 17	345	
		34 10			77 85						
Nov	P.P.	33		AR 292 EORD. 15/10/17	9 73						
Dec	✓	34 10		AR 344 ✓ 31/10/17	9 73					360	
				DD AR 475 PPRX Hosp 28/6/17	9 73						
				✓ 156 EORD 31/8/17	14 60						
				✓ B 317 ENG BD 14/11/17	24 33				479 15		
		67 10			68 12						
1918 Jan	P Pay	34 10		AR B450 4-12-17 BD	9 43						
				B374 29-10-17 "	9 73						
				Ch B516 18-12-17 BD	9 43						
		34 10			29 19				484 06	345	
Feby	P Pay	30 80		Ch B456 11.1.18 Base Dpt	4 84						
				" B1046 30.1.18 " "	9 43				500 26		
		30 80			14 60				500 26		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Mar				Feb bal forrd.					500 26		
	P pay	34 10		AR. B1216 15/3/18 BD.	9733 ✓						
				" B1652 18/3/18 "	1947 ✓				417 56	400	
		34 10			11680						

P 820
12474—375M—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:- DRAYCOTT. W. L.

NUMBER:- 883.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- PRCLI.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.F.C. Eng
	1.10.18	22/10/18	NE "H"

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
				C.S.F.	3/9/18	100 days P686	7 30

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis. Can 30/9/18 Orp. 18A/105 5/9

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch	Bal ford								417 56	405	
Apr	P.P.	33		A.R. B55. 10/4/18. B.D.	4 87				446 69	420	
		33			4 87						
May	P.P	3H 10							479 79	435	
		3H 10									
June	P.P	33		ARB1H11 26-6-18 BD.	9 73				503 06	450	
		33			9 73						
July	P.P	3H 10		ARB1710 13-7-18 BD.	9 73				527 43	465	
		3H 10			9 73						
Aug	P.P	3H 10		AR3878 7-8-18 Orpington	H 87						
				H584 30-8-18 —	H8 67				507 99		
		3H 10			53 5H						
Sept.	P.P.	33		—							
	Int. on Def. Pay 31/8/18	33		—					~~581 29~~		
	SF. ~~3~~ 9-9-18 & ~~13~~ 9-9-18. Dp. 221.(3.010) BD. CFC 16/9/18	4	30	over cr. adj. exch (£2·50 recred 24/9/18)		~~07~~	07		~~573 92~~ 581 22	Error	17½
		7	33			07					
Nov				Dr 1/15 Bal to Canada	581 22						
					581 22						

A.F.W. FORM REN'D. EFFEC. 30/9/18
DISCHARGED TO Can DATE
PAY BOOK VERIFIED 16-9-18
Cr. BAL. 581·22 L.P.C. REN'D. 16/9/18
AUTHY. Orp. 18A/105 5/9

Checked H. V. Williams
L.P.C.

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation

Demobilization Pay M.D. No. 11

M. D. 11
No. 52

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 883 Rank Pte Name DRAYCOTT - W.M.L

Corps 11 Dist Depot who was* Discharged

On 12/2/19 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 191...

to 12/2/19 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month 1	12	
Advances by Cheques No.			Regt'l. Pay 12 days at $ 1 c. 10	1	20
Advances by Cheques No.			Field Allow. days at $ c.		
Assigned Pay and Sep'n Allce. No. Wash Dept	70		Separation Allowances* (Monthly)		
Other charges	48	20	Other Allowances* Clothing	35	
Payment on transfer or discharge No.			Other Credits* P.D.P.	70	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	118	20	Total	118	20

*Give particulars.

A monthly stoppage of $.....(†) has.....(‡) been paid on account of Assigned

Pay for the month of Nil 191...
and Sep'n Allce. for month of 191...
(to) Assignee

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment

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

(3) cause of discharge .....authority

(4) authority for transfer

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

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

Date 12/2/19

Place Vancr Pte

[signature] 72 Dept.

Demobilization Pay M.D. No. 11

Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

Draycot,

Rank and Name DRAYCOT? W.McK.L.

Regimental No. 883

Unit P.P.C.L.I.

Date of enlistment 17th Dec.1914

Place of birth Leicester, Eng.

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin
Hy.Draycott, 101 Sunbeam Road,
Old Swan, Liverpool

Date and place of discharge

Reason for discharge

Character on discharge

N/E. R.B. No 2,510
File R.L.
Category Can. M.U.

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
20 Dec 1914	WO.	Embarked	Southampton		
11 Jan 1915	O.C. Hosp 0953.	Adm. No. 3 State Hosp G.S.W. L. Eye	Rouen.		
13 Jan 1915	"	To Eng. Hosp Ship			B103 Oyc. I.R. 3rd Echelon
14/1/15		No 3. Southern General H.P.	Oxford.		
26.1.15	O.C. Depot	On sick furlo. to 26/2/15	Shorncliffe	28/4/15	Part II orders.
24-4-15	Sub. R.O.	With unit at	Shorncliffe	24-4-15	Muster Parade Nom Roll
12.7.15	O.C. 11th Bn	Granted sick furlough 10/5/15	"	12.7.15	Pt. II or 973
23.8.15	"	Trans. to P.P.C.L.I.	"	23.8.15	Nom. Roll
25.9.15	P/C P.P.C.L.I.	Taken on Strength	In the Field	21.8.15	pt II # 40
1-3-16	P.P.C.L.I.	Granted 9 days leave	Field	21.2.16	Pt II D.O. No 11.
19.12.16	"	Rejoins unit		4.3.16	C.L. A 513 G.S.W. L. Eye
31.8.16	"	Appta. L/Cpl. unpaid.	Field	4.8.16.	Pt II 34
31.8.16	"	" A/Cpl. "	"	4.8.16	Pt II 34.
12.2.17	"	Attached to 7th Inf Bde Hqrs as Draftsman and Topographer	"	7.2.17	Pt II O. 11

Over

E1

883 Draycot W. McK. L.

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
12.2.17	P.P.C.L.I.	Mentioned in "Dispatches" by Sir Douglas Haig	Field	13.11.16	Pt II O. 11
2275.	C.S.C.	Mentioned in Dispatches. (P.P.C.L.I.)			L.G. 29890. d/4/1/17
19.5.17	P.P.C.L.I.	No 2. Austral. Gen Hosp.	Nimereux	15.5.17	C.L. A627 P.U.O Slt.
22 5/17	"	Adm. 1st Northern Gen. Hosp.	Newcastle	16 5/17	— B. 317 Gas poisoning Slt
5 6/17	"	Invalided & Posted to the E.O.R.D. (Gas & Bronchitis)	Field	16 5/17	E.O.R.D. D/O 80 d/31 5/17 Pt. II. D/O. 45
5 6/17	"	ceases to be attach to Hqrs. 7th Inf. Bde.	"	10 5/17	— 45.
28 6/17	P.P.C.L.I.	Trans. to: P. Pats. Can. Red X Spec. Hosp.	Ramsgate	24 6/17	Gas poisoning Slt. C.L.B. 342.
28 9/17	E.O.R.	Dis. " " " "	"	8 8/17	"W" Gas Shell (Slt.) C.L.B. 23.
24 10/17	E.O.R.D.	Reverts to perm. Grade of Pte.	Seaford	23 10/17	Pt. II. D/O. 226
2.11.17	C76 B.D.	T.O.S. from E.O.R.D. Pte	S'dale	1.11.17	Pt II 162. Pt II 235 d/2.11.17 of EORD S.O.S.
28.9.18	B.D.C.F.C.	S.O.S. having been Invalided to Canada "	" "	24.9.18	C.L. 232 Neurasthenia S.O.S. Pt. II O. 238 d/5.10.18 B.D.C.F.C.

(2178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Ref, File, K.I.111/1346

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps PPCLI DRAYCOT. Draycott Walter Mackay

Regimental No. 883 Rank Pte Name ~~Draycock~~ N. Mck. D.

Enlisted (*a*) 17.12.14 Terms of Service (*a*) Duration Service reckons from (*a*) 17.12.14

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

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

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.
1. 9. 15	27 Bde	Joined from Eng	27 Bde	24 8 15	H93-27-15
3. 9. 15	OC B	Joined Batt	In the field	1. 9. 15	B 213
26-2-16.	O.C. Battn	Leave 9 days	from	21-2-16.	B·213.
18-3-16	OC Battn	Rejoined from HP.	In the Field	11-3-16	B213,
12-8-16.	OC Battn.	Appointed L/Cpl. Unpaid	Field.	4-8-16.	B213. Pt II Ords 34 d/- 31-8-16.
" "	"	" Acting Corpl "	"	4-8-16.	B213. ——— do ———
7-2-17.	7th C. Inf. Bde.	Is attached to Headquarters 7th Can Inf Brigade for Duty as Draughtsman & Topographer.	Field.	1-6-16	7th Can Inf Bde. S.C.R. 1602-R. Ref File, K.I. 116-2282. Part II Orders No 11 d/- 12-2-17
4-1-17.	London Gazette No 29890.	Mentioned in General Sir Douglas Haigs Despatches. dated	Field.	13-11-16.	authy London Gazette No 29890. Part II Orders No 11 d/- 12 2/17.
10-5-17.	2 Aust Gen.	P.U.O. Ltr. Adm to No 2 Aust Gen.		10-5-17.	W3034-W722.
10-5-17.	" "	Ceases to be att to 7th Cdn Inf Bde Hqrs on Admission to Hospital		10-5-17.	W3034-Part II Ords 45 d/- 6/6/17

(*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				
16-5-17.	H/B Pieter De Conick	Gas & Bronchitis. Transferred to England & Posted to Eastern Ontario Regimental Depot Seaford Per H/B Pieter De Conick.		16-5-17	W3083 A.4990. Part II Order 45 d/- 5/6/17. Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
21/5/17	C.O.R.D.	Taken on Strength	Seaford.	16/5/17.	Pt. II Do 80. LIEUT. FOR LT. COL. I/C RECORDS, C.O.M.D.
23-10-17	O.C. C.O.R.D.	Reverts to permanent grade of Private. Effect 25.9.17	Seaford	24-10-17.	Pt. II Do 226.
10-8-17	O.C., C.O.R.D.	Furlough 10 days	Seaford	8-8-17	Pt. II Do. 151
2-11-17	O.C., C.O.R.D.	S.O.S. of C.O.R.D. on transfer to Can. Forestry Corps.	Seaford	1-11-17	Pt II Do. 235 H. Chamberlain Lt. Asst. Adjt. for O.C., C.O.R.D.
2-11-17	O.C. C.F.C.	T.O.S.	Base Depot C.F.C.	S/dale	1-11-17	Pt. II. Do. 162.

883

MEDICAL HISTORY SHEET.

Surname Draycott Christian Name Walter MacKay Langdale

Examined { on 18 day of Dec 1914
at Winchcombe

Birthplace { City or Town Belgrave, Leicester
County Leicestershire

Apparent age 32

Trade or occupation Fruiterer (Wholesale)

Height 5 Feet 8½ Inches.

Weight 160 Lbs.

Chest measurement { Minimum 38 inches.
Maximum expansion 2½ inches.

Physical Development

Small-Pox Marks

Vaccination Marks { Arm Right Left.
Number

When Vaccinated last 1907

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by C R Keenan
C R Keenan
Rank Mgr M.O.

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

Date	Result	Vaccinations.
Dec 1914		C. A. Keenan Major M. O.
		M. O.
		M. O.

Date	Result	Anti-Typhoid Inoculations, Etc.
Aug 24/1917	Tab 1	Asst Surgeon M. O.
		M. O.
		M. O.

Enlisted on 18 day of Dec 1914 at Winchcombe

	Corps.	Regt'l Number	Habits.	Date.
Joined on enlistment.	P.P.C.L.I.	883.		18-12-14.
Transferred to.....	Can. Forestry Corps			1-11-17.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
PRINCESS PATRICIA CANADIAN RED CROSS SPECIAL HOSPITAL, RAMSGATE, KENT.	31 JUL 1917	Gas poisoning + bronchitis.	B't Pte Queensberry Capt
Bexhill 2/7/18		Syncope. Defective Vision Neurasthenia	Invalid to Canada. Discharge Certificate. Pte.
No. 76 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.	14 AUG 1918		

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.

A.M.F.B. 313.

Vancouver - 5-2-19 Defective vision E
Neurasthenia
Bronchitis
J A MacDermot Major

5M—8-14.
H. Q. 1772-39-439.

CANADIAN

Surname Draycot Christian Name Walter Mackay Kenyon

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital: Day	Month	Year	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.
3 Stat Hosp,	Rouen	11	1	16 (5)	14	1	16 (5)	Gun Shot wound eye serious			N S
No 3 So hospital, Oxford		14	1	16 (5)	11	3	16 (5)	" "		Reported from Base- Rejoined unit- Duplicate Medical History Sheet posted to here. Hks	A513
1st N. G. H. Newcastle on Tyne		16	5	17	22	6	17	Gas Poisoning and Bronchitis	36	Transferred to Canadian Hospital Ramsgate 22/6/17	W T Hoskins MAJOR R.A.M.C. (T.) REGISTRAR 1st N.G.H.
PRINCESS PATRICIA CANADIAN RED CROSS SPECIAL HOSPITAL, RAMSGATE, KENT		22	6	17				do		Coughing - July 14 Lungs clear no cough Recommend B1 category Eyes [illegible] at Westcliffe July 10 - Slight vision 6/6 left eye amblyopic - condition present previous to enlistment	C H Wallace Capt
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL		1	6	18	19	6	18	Neurasthenia.		Admitted shortly after an attack of syncope. Complains headache backache, easily tired etc Vision as above	A S Burns Capt Camp
No. 16 Can Gen Hosp. Orpington		24	7	18				Neurasthenia		Complaining of general weakness. Nervousness - syncopal attacks on exertion loss of memory & inability to sleep - He is now B3 & unable to carry on & is recommended for invaliding as unlikely to be fit for service in any category within six months.	E Cox Capt Camp

EMBKD SEPT 24 1918

LISEMBKD OCT 7 1918

G

DUPLICATE.

8 8 3.

ARMY FORM B. 178.

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

MEDICAL HISTORY of

Surname D R A Y C O T *Christian Name* Walter

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Belgrave, Leicester County England

Examined ... ... on 18th day of December, 1914,
at Winchester

Declared Age ... ... 32 years days.

Trade or Occupation ... Fruiterer

Height ... ... 5 feet 8½ inches.

Weight ... ... 160 lbs.

Chest Measurement — Girth when fully Expanded 40½ inches.

Chest Measurement — Range of Expansion 2½ inches.

Physical Development ...

Vaccination Marks — Arm ... (Right / Left)

Vaccination Marks — Number

When Vaccinated 1907

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*)

(*Rank*) *Medical Officer.*

Enlisted ... ... at Winchester
on 18th day of December, 1914.

Joined on Enlistment ...	Corps.	Regtl. No.
	P.P.C.L.I.	8 8 3.
Transferred to		

Became non-effective by ...

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

on day of 191 .

(*Signature*)

(*Rank*)

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

(4887.) W. 9597/1588. 500M. 9/15. C. P., LTD.

Forms B. 178 88

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Rema
	Day	Month	Year	Day	Month	Year			
3 Stationary Hospital Rouen	11	1	16	14	1	16	Gun shot wound-eye serious-		
3 So. Hosp. Oxford	14	1	16	11	3	16			Rep
Fairmount M. H.	21	11	18				Neurasthenia		[illegible]
							Defective Vision		M

List in the case of Warrant Officers treated in quarters.

...ks 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
	N S
...m Bass - Reg^d Unit	A 523
...here is still some disability due to his	
...eurasthenia. Reddressing return to Civil Life	
	J. L. Seyrd Capt.

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

Date	Brief details, and signature

Table IV.—Service Table.

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

.....C.A.M.C.
Officer in Charge of Records
Canadian Contingents.

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.

Fairmont

STATION Vancouver B.C. DATE 4.2.19

1. 1 (a) Unit P.P.C.L.I. (b) Regimental No. 883 (c) Rank Sgt

(d) Surname Draycott (e) Christian name Walter Mackay Langdale

(f) Home address Lynn Creek N.Vancouver B.C.

(g) Next of Kin Henry Draycott (h) Relationship brother

(i) Address of Next of Kin 101 Sunbeam Road, Stoney Croft, Liverpool Eng.

2. Age last birthday 35 Date of birth Feb. 24. 1883

3. Enlistment, or Appointment (if an Officer) (a) Place Winchester Eng (b) Date 15.12.14

4. Personal description:

(a) Height 5'10" (b) Weight 140 (stripped) (c) Complexion fair

(d) Colour of hair black (e) Colour of eyes blue (f) Identification marks, Scars, etc. 2 scars over lower part of spine

5. Former trade or occupation provision merchant.

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

A. D. M. S., M. D. XI
FEB 7 - 1919
VICTORIA, B. C.

	Years	Days	Periods From	Periods To
Canada			Oct. 1918	present
England	4	60	Dec 15.14	Dec. 18.14
France or other theatres of War			Dec 18.1914	June 4.1917

7. Original disease, or injury 2. Neurasthenia. 1. Defective vision 3. Bronchitis

(a) Date of origin 1. Prior to enlistment 2. Feb. 1917. 3. May 1917 (b) Place of origin 1. Prior to enlistment 2. France · 3. France.

(c) Cause 1. Structural defects of eye. 2. Strain of war work. 3. Cold and exposure.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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

1. Defective vision. 2. Neurasthenia. 3. Bronchitis

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.)

A man of medium build. Rather a worn and anxious expression. Eyes-see specialist's report. Nervous system- see neurological report. Respiratory system- is losing in wight he asserts . Occasional night sweats, cough - considerable during the night and considerable amount of expectoration No impairment of resonance, no adventitious sounds at present. X Ray and sputum findings negative. Cardiac system, save for definite roughening of 1st sound at the apex is normal. Work- can walk 2 miles on level. Up grades troublesome. This man is hardly fit to do other than light work, gardening or clerical where thereis not too much eye strain.

(*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 ...Genito-Urinary System... no ...
(If pulse rate is abnormal, B. P. will be taken.) (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*).)

Carried on until Jan.1917. Had nervous breakdown. Did not go back to France again but was put in CFC by way of change. Vision in left eye defective when he joined but condition of right was good at that time he asserts, but since then on account of the nature of the fine work he feels his sight in the right eye has become defective.

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*).)

none

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

two small scars at base of spine

1.Yes. 2. No. 3. No.

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

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

1.Fine nature of work (topography) probably has contributed to a degree to defect of right eye. 2 and 3. n.a.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? a. 1.2.3. No. B. 1.2.3. No.

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1.Permanent. 2. One year. 3. One year

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

rest and psycho therapeutic treatment. X Ray and sputum examinations

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

no

16. Can the former trade or occupation be resumed? not at present, memory defective and eyes rather weak.
(If not, briefly state why)

17. Recommendations

category E

J. L. Gerard 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.....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.....

A.R.T.

Wm Draycot Sergt Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

9 a. Pulse at rest 132- after bending 10 times. 2 mins later 96.

11 b. Aggravation, 25% due to service. Shot at Bisley 1904, 1907 and 1911 Did sniping for a year till 1916.

19. Is the invalid fit for

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

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.)

no

(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.)

Yes, category E for discharge

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.

A. T. Thomson Capt. *President.*

PLACE Vancouver B.C.

DATE 5.2.19

J. Macdermot Capt. } 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.* M. D. 11

DATE FEB - 7 1919

APPROVED BY

A.M.C.

Director-General of Medical Services.

DATE.....

Overseas Board 3.7.18

Sgt Draycott-883 Sunningdale
PPCLI

Disability: Defective vision. Syncope
History; Is one of the original PPCLI. England Sept.1914, France Dec. 1914 returned from France June 1917. Syncope and conjunctivitis. GSW face January 1915 at St Eloi GSW hand Nov.1915 Laclytte. Ypres-shell shock, unconscious for two days, June 3rd.1916. Gas poisoning and bronchitis Vimy; to No 1 NGH Newcastle on Tyne 16.5.17 to 22.6.17. PPCRC Ramsgate 22.6.17 to 20.9.17. No 5 Canadian General Liverpool 1.6.18 to 19.6.18. Neurasthenia.
Present condition. Is 35 years of age. Specialist's report Westcliffe June 10th.1917. R.V. 6/6. Left vision M.H.S. Left eye-amblyopia. Has had recurrent conjunctivitis for last five months. Attacks of syncope present for four months; gradually getting worse-come on at irregular intervals following exertion, when-if he does not lie down will lose consciousness and fall. Has marked dyspnoea at times. Pain in back and tires easily. Heart and lungs normal, appetite poor, is easily excited Kneejerks exaggerated.

Eye report Vancouver Jan.6.1919

Sgt Draycott. W.M.L.

Pathological condition present- Complaints- Eyes are weak. Worn glasses for six months.
Examination. Pupils active and equal. Right slightly larger than left. R.V. 20/20 poorly, L.V. 6/200 Homatropine and cocaine-

x 1.75 / x 1.75	x 7.00 / x 7.00	R.x 0.75 spr x 0.25 cyl axis 90-20/15

L. no improvement.

Re. R. x 0.50 spr x 0.25 cyl x 90
L. no improvement.

Fundii normal.
Estimated percentage of disability? 1. Moderate grade of hypercropic astigmatism. (Right)
Is this condition due to service? NO 2. Left-amblyopia due to amisometropia.
If not has it been aggravated by service? NO
If aggravated, state in percentages how much?.....
Will further treatment be of benefit? recipe Given receipt for glasses.
Prognosis..... E.H.Saunders. Capt.
A.R.T.

Neurological report Feb.1.1919.

Sgt Draycott

Patient is a man apparently in middle life who looks to be at least 5 years older than his stated age of 35. He has an anxious expression of face but color is average. Looks somewhat reduced in flesh and is not very brisk in his movements. Intellect normal, memory poor, emotions considerably disturbed and general tone noticably reduced. He complains principally of mental fatigue as well as generalX lack of physical endurance. The tone of his musclesis rather slack. He perspires very profusely on the slightest exertion and is often bathed in perspiration at night. This later I would attribute to his persistent emotivity from dreams of the battle field. He seldom has nightmares but he seldom has a night free from unpleasant dreams. Thereis slight rhombergism and slight general tremor, the pupil reflexes are normal. Knee jerks and ankle jerks areincreased in activity but there is no evidence whatever of any organic disease. Patient was in France 2 years during which timehe was actively engaged in the battle area on special work as a draftsman. His condition a good portion of that time was unsatisfactory and he was compelled to exercisehis very utmost will power to maintain control of his nervous system.
Diagnosis. Neurasthenia, Disability in my opinion amounts to the neighbourhood of 25%. Recommendations: Category A for discharge as I do not think that further hospital treatment is likely to benefit him and he now has an excellent opening to reenter civil life under suitable auspices.
A.R.T. G.H.Manchester. Capt. CAMC

R. & O. 6045 (*Revised*).
8778 - [illegible] 31/10/16.

PROCEEDINGS OF A MEDICAL BOARD.

PRINCESS PATRICIA CANADIAN RED CROSS
SPECIAL HOSPITAL, RAMSGATE, KENT.

Dated at Ramsgate 31 JUL 1917 1917.

No. 883 Rank Sgt Name Draycott W. M. L.

Local Unit P P C L I Overseas Unit P P C L I Age 34

Examination held at PRINCESS PATRICIA CANADIAN RED CROSS SPECIAL HOSPITAL, RAMSGATE, KENT.

DISABILITY. Overseas ~~Local~~. (scratch one out) Left eye amblyopic - Gas Poisoning and Bronchitis

PRESENT CONDITION.

July 14/17 no cough - Lungs clear.

Special Report - from West cliffe Eye & Ear Hosp. July 10/17

Right Vision 6/6

Left Vision - H M S

Remarks Left eye amblyopic.

Condition present previous to enlistment and has not been caused by service. Recommend Patient for B T category.

BOARD RECOMMENDS:—

1. Fit for Duty B T
2. Fit for Duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:

Members: G H H Newburn Capt President.
C K Wallace Capt

APPROVED 4 AUG. 1917

Dated at ..... 1917.

[illegible] Davis Capt.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

For A.D.M.S.

180

PROCEEDINGS OF A MEDICAL BOARD.

Vancouver General Hospital
X Ray department. Jan.15.1919

Sgt Draycott.
Attag Physician Dr J.L.Telford
Region for examn. CHEST for T.B.C.
Finding and diagnosis. The heart is normal in size. The arch of the aorta is not dilated. The diaphragmatic movements are free. The rib interspaces are normal. The lungs are clear throughout.
X Ray diagnosis. Negative finding.
A.R.T. Dr Whitelaw.

Vancouver Gen.Hospital
Report on examn for
B.Tuberculosis Lab.No. 50

Spec. received. 16.1.19. Reported 17.1.19
Physician. J.L.Telford. Address Shaugh.Mil.Hos.
Patient Sgt W.Draycott #883. Address do
Material examined. Sputum.
In a direct smear stained by Ziehl-Neelson method, TUBERCLE BACILLI WERE NOT FOUND IN SPUTUM
A.R.T. R.H.Mullin, Director.

Overseas Board 3.7.18

Sgt Draycott-883 Sunningdale
PPCLI

Disability: Defective vision. Syncope
History; Is one of the original PPCLI. England Sept.1914, France Dec. 1914 returned from France June 1917. Syncope and conjunctivitis. GSW face January 1915 at St Eloi GSW hand Nov.1915 Laclytte. Ypres-shell shock, unconscious for two days, June 3rd.1916. Gas poisoning and bronchitis Vimy; to No 1 NGH Newcastle on Tyne 16.5.17 to 22.6.17. PPCRC Ramsgate 22.6.17 to 20.9.17. No 5 Canadian General Liverpool 1.6.18 to 19.6.18. Neurasthenia.
Present condition. Is 35 years of age. Specialist's report Westcliffe June 10th.1917. R.V. 6/6. Left vision M.H.S. Left eye-amblyopia. Has had recurrent conjunctivitis for last five months. Attacks of syncope present for four months; gradually getting worse-come on at irregular intervals following exertion, when-if he does not lie down will lose consciousness and fall. Has marked dyspnoea at times. Pain in back and tires easily. Heart and lungs normal, appetite poor, is easily excited Kneejerks exaggerated.

Eye report Vancouver Jan.6.1919

Sgt Draycott. W.M.L.

Pathological condition present- Complaints- Eyes are weak. Worn glasses for six months.
Examination. Pupils active and equal. Right slightly larger than left.
R.V. 20/20 poorly, L.V. 6/200 Homatropine and cocaine-

x 1.75 / x 1.75	x 7.00 / x 7.00	R. x 0.75 spr x 0.25 cyl axis 90 - 20/15

L. no improvement.

Rc. R. x 0.50 spr x 0.25 cyl x 90
L. no improvement.

Fundii normal.
Estimated percentage of disability?
Is this condition due to service? NO
If not hasit been aggravated by service? NO
If aggravated, state in percentages how much?.....
Will further treatment be of benefit?
Prognosis.....
A.R.T.

1. Moderate grade of hyperopic astigmatism. (Right)
2. Left-amblyopia due to amisometropia.

recipe
Given xxxxxpt for glasses.
E.H.Saunders. Capt.

Neurological report Feb.1.1919.

Sgt Draycott

Patient is a man apparently in middle life who looks to be at least 5 years older than his stated age of 35. He has an anxious expression of face but color is average. Looks somewhat reduced in flesh and is not very brisk in his movements. Intellect normal, memory poor, emotions considerably disturbed and general tone noticably reduced. He complains principally of mental fatigue as well as general lack of physical endurance. The tone of his musclesis rather slack. He perspires very profusely on the slightest exertion and is often bathed in perspiration at night. This later I would attribute to his persistent emotivity from dreams of the battle field. He seldom has nightmares but he seldom has a night free from unpleasant dreams. Thereis slight rhombergism and slight general tremor, the pupil reflexes are normal. Knee jerks and ankle jerks areincreased in activity but there is no evidence whatever of any organic disease. Patient was in France 2 years during which timehe was actively engaged in the battle area on special work as a draftsman. His condition a good portion of that time was unsatisfactory and he was compelled to exercisehis very utmost will power to maintain control of his nervous system.
Diagnosis. Neurasthenia, Disability in my opinion amounts to the neighbourhood of 25%. Recommendations: Category E for discharge as I do not think that further hospital treatment is likely to benefit him and he now has an excellent opening to reenter civil life under suitable auspices.
A.R.T.

G.H.Manchester. Capt. CAMC

DRAYCOT, Walter M.
Mentioned in Despatches details

No details on card

FF3

CER

Vancouver General Hospital
X Ray department. Jan.15.1919

Sgt Draycott
Attdg Physician Dr J.L.Telford
Region for examn. CHEST for T.B.C.
Finding and diagnosis. The heart is normal in size. The arch of the aorta is not dilated. The diaphragmatic movements are free. The rib interspaces are normal. The lungs are clear throughout.
X ray diagnosis. Negative finding.
Dr Whitelaw.

A.R.T.

Vancouver Gen.Hospital
Report on examn for
B.Tuberculosis Lab.No. 50

Spec. received. 16.1.19. Reported 17.1.19
Physician. J.L.Telford. Address Shaugh.Mil.Hos.
Patient Sgt W.Draycott #883. Address do
Material examined. Sputum.
In a direct smear stained by Ziehl-Neelson method, TUBERCLE BACILLI WERE NOT FOUND IN SPUTUM

A.R.T. R.H.Mullin, Director.

13 - 1 - 0.

WEST CLIFF CANADIAN EYE & EAR HOSPITAL.

FOLKESTONE ..July 16.. 1917.

SPECIAL REPORT ON EYES

NO. 883

RANK Sgt.

NAME Draycot W. L.

IN OR OUT PATIENT

UNIT P.P.C.L.I.

FROM: OFFICER COMMANDING

TO O.C. P.P.C.R.C.D.H. Ramsgate

RIGHT VISION - 6/6

LEFT VISION - H.M's

REMARKS: Left eye amblyopic.

HE IS X .....FIT FOR OVERSEAS SERVICE. GLASSES HAVE not BEEN ORDERED. CONDITION..... PRES ENT PREVIOUS TO ENLISTMENT AND HAS not BEEN CAUSED BY SERVICE.

RECOMMEND PATIENT FOR CATEGORY ..B+.....

J.A. Stewart Capt
.....C.A.M.C.
FOR O.C. WEST CLIFF CANADIAN EYE & EAR HOSPITAL.
per C.H.R.

L.

Junior School

DEPOT BLDG. ...
DN JUL 1914
HOSPITAL FOLKESTONE

o/c
Princess Pats Can Red X Hosp
Ramsgate

CASE HISTORY SHEET.

#11. 2

Fairmont Section, Mn Hospital. Vancouver Station.

No. 883 Rank Sgt Name Draycott Walter Age 36

Unit PP Ch 1 Completed years of service Where and how long } C 1/12 E 2 1/12 F 7 years.

Date of admission 11. 11. 18 Date of discharge 12-2-19

Diagnosis 143 Neurasthenia Place of origin Vancouver

CONDITION ON ADMISSION AND PROGRESS OF CASE Complaints - General weakness - most marked in mornings before 9 o'clock. Dizzy spells. Headaches. Defective Vision - Constant expectoration during the night. Insomnia.

History of P.I. - Carried on as fit until Jan 1917. Had nervous breakdown. Did not go back to France again - Was put on C.E.C. by way of change of rest. Invalided to Canada Sept 1918.

C.O.A. - General nutrition fair - Color Good. Wears rather an anxious expression.

Digestive System - Teeth in fair condition - Appetite poor - Bowels regular take Laxatives No Gastric symptoms.

Cardiac System - No enlargement - Definite roughening of 1st sound at apex - B.P. 110-80. Rate standing 72 after bending 12 times 74 after 2 mins.

Respiratory System - Expansion fair - 2" - rather deficient towards upper lobes on both sides. Considerable expectoration - day & night.

FAMILY HISTORY Neg.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Rest - Electrical

(Especially any specific or special form.)

CONDITION ON DISCHARGE, G.C. Fair. Assets there is since

(and disposal made of case.) some General weakness & dizzy of sex fact there is little if any change from condition as stated above. Memory poor

Date 11-2-19

J. L. Telford Capt

Medical Officer i/c case.

M. F. B. 313a.
100M.—6 18.
1772—39-439.

21820

Draycott.

Night sweats quite frequently. Losing in weight. Slight impairment of resonance on percussion over right supra - of infra clavicular areas. Fine crepitations in both Supra clavicular areas and occasionally in Infra clavicular areas on Right - constantly on Left.
Having tray examination done.

G.U. System - neg.
Locomotor System - neg.
Tegumentary System. neg.

Special Senses. Has some defective vision was engaged in Topography in France. of this fine work he asserts was a great strain on his right. his left being already defective.

Nervous System - Has Dizzy spells a varying intervals - frequently occur in mornings never unconscious. Headaches. usually occipital type - sometimes very severe - forcing him to lie down - occur about every alternate day. Asserts he has marked Insomnia, a very light sleeper at his best. - Dreams a great deal - usually associated with war of fighting. Has very vivid recollection of the fighting & sets of his dead comrades scattered about. Having had as a despatch rider to trouble over them on a few occasions - No pathological reflexes save slight Rhombergism.

J L Gifford

20-1-19 - no change. 27-1-19 Sleet headaches no change
3-2-19. Some headaches & weakness
10-2-19 Bowsded

Forms
I. 1237
10

O. S.

1ST. N. C. H. NEWCASTLE.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Can. 263	883	Sergt	Draycot	W. M. L.

Year	Unit.	Age.	Service.
1917.	P. P. C. L. I	34.	2 7/12.

Station and Date.	Disease P. U. O.
N/C. on Tyne May 17th	Reported sick ~~C. C. S.~~ 8th Field Can. Amb. May 6 1917 with above diagnosis was given Quenine gr 11 Aspirin gr v Phenazone gr v. Admitted 2nd Aust. Gen. Hos Boulogne 16.5.17 with Diagnosis of "Effects of gas Bronchitis" He says he was gassed at Vimy on night of 5th & 6th He says he now feels weak ~~weak~~ & has pain in head & back of eyes & between the shoulders. He says his cough has nearly gone Nothing in chest Temperature normal W. L. Ruxton CMP
June 22nd	Trans to Canadian Auxe Hosp. W L Ruxton CMP

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

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

P.T.O.

Station and Date.	

Copy of Case Sheets & History

Forms I. 1237 / 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	883.	a/Sgt	Draycot	W M L.

Year	Unit.	Age.	Service.
	C.F.C	35.	44/12.

Station and Date.

5 Can Gen Liverpool 1/6/18

Disease Neurasthenia

Complains of fainting spells - dizziness conjunctivitis Enlisted. Vancouver Sept 1914. To England 1914. Went to France Decr 1914 Wounded Jany 1915 in face by shell explosion with some injury to eyes. Invalided to Eng same month to Oxford Gen Hospl for abt 3 months Thence to Folkestone for med treatment. Returned to France Aug '15 with P.P.C.L.I. Shell shock Ypres June '16 Carried on in Intelligence Dept. under med: supervision Nov 1916 Went to Vimy Ridge with 7 C.I.D. Intell: dept. Two nervous breakdowns here. also Gassed. May 1917) Sent to 3 Aus Gen Hosp Boulogne. Evac to Newcastle on Tyne for two months then to P.P. Can. Cross Hosp Ramsgate. Went to E Ontario Reg Dept Abt Aug 1917. To Can F. Corps 1/11/17 Carried on since at Sunningdale. Health prior to Enlistment good Fainting spells since May 1917. Sometimes 2 per week. Sometimes alright for 3 weeks whilst has had 3 in a day. Lost consciousness for 3 times usually attacks preceded by dizziness. Conjunctivitis periodically. Shorting pains both sides both eyes. Also pains back of head. Since injury 1915 unable to read with left eye. With attacks has congestion of sclerotic & glancing together of lids & photophobia.

Admitted to this hospl 1.6.18 While on leave. Had fainting spells previous evening. Deficiency of vision both eyes most marked in left. Myopic left eye. Occipital headache & frontal just above eyes. Since admission some dizziness but no fainting spells. Weak in legs appetite poor, backache tires easily. Cough & expect: at night, for last six months

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

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

[P.T.O.

Station and Date.	
	No indigestion. Easily excited Knee jerks + + Headache. Backache easily tired. Transferred to 16 Can Gen Hospl.
No. 16 Can. Gen. Hosp. 16.7.18	History of repeated syncopal attacks. Eye Condition is negligable transferred to Med Section
Ward 42	Civil Occupation Merchant.
16 Can Gen Hospl	Was acting as instructor in Topographical work & map reading till Sept '17 but had to give up on a/c of Eyes.
	Examination. 35 yrs of age, Gen tremulousness when stng. very nervous, pale, apparently lost weight. Bad dreams, memory poor, 30 months service in France wounded twice.
	Pulse 84 Stng after touching toes 5 times 108. recovery to 84 in 30 Secs - no dyspnoea. lungs Neg Abdomen Neg.
31.7.18.	Lt Col McVicars C.A.M.C. Heart & lungs clear Evidence as hitherto. Recommend board for S to C for NEURASTHENIA due to Strain of "trench warfare". Unlikely to be fit for service in any Category for 6 months.

E C Capt.

(To Remain on File)

Details For page 2–B.P.C. Form 800.

File No. 101395 Date 6-9-19

Medical Clerical

The following details are to be entered on page 2 B.P.C. form 800

Date of Medical Board

Present condition

Slips Neurological report

Diagram

History

Kindly take the necessary action.

R J Kee
Asst. Medical Adviser.

Typed on B.P.C. Form 800 by Date

Date of expiry

Examination required Aug 1920

B.P.C. Form 839 Mult.
10M-5-19.

PART I. A.F.B. 179 Canada (Revi

Reserved for M.H.C.

Regt. No. 883 Rank Pte Surname Draycot Christian Name Walter M.L.

Unit or Corps—(a) Overseas from United Kingdom P.P.C.L.I. (b) In United Kingdom CFC

Born at—Town Leicester County or Province Leicestershire Country England.

Date of Birth—Day 24th Month February Year 1883 Age 35 yrs. 4 months.

Joined at Winchester Ont Canada Date 18th Dec 1914.

Former Trade or Occupation Fruit Merchant.

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

Deformity of forefinger right hand from shrapnel wound.

Height—feet 5 inches 8½ Colour of eyes Blue.

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

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

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

Disabilities Group (*a*). Defective vision

Disabilities Group (*b*). Syncope.

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Left eye Amblyopia	England	1898
(*ii.*) As to Group (*b*) above.	Shell shock Gas Poisoning	France	1916'7
(*iii.*) As to Group (*c*) above.			

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

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

(*i.*) As to Group (*a*) above? Yes If yes, has Active Service aggravated it? Yes

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

(*iii.*) As to Group (*c*) above? No If yes, has Active Service aggravated it? No

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

(*i.*) As to Group (*a*) above? No

(*ii.*) As to Group (*b*) above? Yes

(*iii.*) As to Group (*c*) above? No

(continued).

Cause of disability was an injury received on Active Service, was it received—

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

(iii.) Was a Court of Inquiry held? No (iv.) Where? (v.) When?

(vi.) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Is some of the original P.P.C.L.I. England Sept 1914 France Dec 1914 returned from France June 1917. Syncope and Conjunctivitis, G.S.W. face January 1915 St Eloy. G.S.W.Hand Nov 1915. Laclytte; Ypres Shell shock. unconscious for two days june 3rd 1916. Gas poisoning and bronchitis Vimy, to No 1 N.G.H. Newcastle-on-tyne 16-5-17 to 22-6-17. P.P.C.R.C. Ramsgate 22-6-17 to 20-9-17. No 5 Canadian General Liverpool 1-6-18 to 19-6-18. Neurasthenia.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*) June 10/17

Is 35 years of age, Specialists report Westcliffe { Right Vision 6/6 left " M.H.S. Left eye ambiyopia

Has had recurrende conjunctivitis for last five months. Attacks of syncope present for four months. gradually getting worse come on at irregular intervals following exertion, when if does not lie down will loose consciousness and fall. Has marked dyspnoea at timesPain in back and tires easily. Heart and lungs normal, appetite poor. is easily excited, knee jerks, exagrated.

8. OPERATION. (i.) Was one performed? No

(ii.) If so, state what.

(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty?

(b) Fit for base duty? B. III Not likely to be raised in category within

(c) Invalid to Canada? six Months.

(d) Discharge from the Service as permanently unfit?

Date of Report June 27th 191 8 Signed J.M. Davies Capt CAMC

Officer in medical charge of case.

Station Sunningdale.

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

L.H.Roberts Capt CAMC { Officer i/c Hospital / S.M.O. XXX Brigade } Strike out one of these.

Dated at London Station, on July 1st 191 8

* Delete if inapplicable.

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

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)?

If not, indicate it.

Yes

12. Is the cause of the disability, fully indicated in Part I. (2)?

If not, indicate it.

Yes

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? / Aggravated? } (b) Misconduct of the Soldier { Caused? / Aggravated? }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

Do No

15. THE PENSIONABLE DISABILITY (*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).

Not applicable.

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

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

(*i.*) Is it permanent?

Do

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

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

Do

18. Remarks.

Do

Rt. Eye 6/6
Lft. " Blind. Is nervous and poorly nourished, was two years in France with P.P.C.L.I. and since then has had definite syncopal attacks which are induced by any exertion and unfit him for anything but sedentary work.

19. Recommendation:—(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalid to Canada?

(*d*) Discharge from service as permanently unfit?

B. III Not likely to be ~~xxxxxxxx~~ raised within 6 months.

Classification for the Military Hospitals Commission.

Date of Board 3/7/18

President.

Signatures of the Board J.D. Adamson Capt CAMC

Station Sunningdale

J.D. Adamson Capt CAMC

Approved

A.D.M.S.

Dated at

Station

191

PART III.

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

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

President.

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

Reserved for M.H.C.

Regt. No. 883 Rank Private Surname Draycott Christian Name Walter Th. L.

Unit or Corps—(a) Overseas from United Kingdom P.P.C.L.I. (b) In United Kingdom C. F. C.

Born at—Town Leicester County or Province Leicestershire Country England

Date of Birth—Day 24th Month February Year 1883 Age 35 yrs. 4 months.

Joined at Winchester, Ont. Canada Date 18th December 1914

Former Trade or Occupation Fruit Merchant.

Permanent marks or peculiarities that will serve for future identification:

Deformity of forefinger Right hand from shrapnel wound.

Height—feet 5 inches 8 1/2 Colour of eyes Blue.

Signature of Soldier (*for identification purposes*) Walter Draycott

Medical Report.

1. *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted. Follow the official nomenclature as far as possible.*)

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

Disabilities Group (a) DEFECTIVE VISION

Disabilities Group (b) SYNCOPE.

Disabilities Group (c).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	LEFT EYE Amblyopia	England	1898
(ii.) As to Group (b) above.	Shell Shock, Gas Poisoning	France	1916-17
(iii.) As to Group (c) above.			

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

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

(i.) As to Group (a) above? n/a If yes, has Active Service aggravated it? n/a

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

(iii.) As to Group (c) above? n/a If yes, has Active Service aggravated it? n/a

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

(i.) As to Group (a) above? No

(ii.) As to Group (b) above? Yes

(iii.) As to Group (c) above? n/a

PART I. *(continued)*.

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

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

(iii.) Was a Court of Inquiry held? no (iv.) Where? (v.) When?

(vi.) Opinion of the Court?

6. HISTORY OF THE CASE. *(State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).*

Bone & organs R.R.A.M.C. Embarked Sept 1 1914 France Dec 1914, returned from France June 1917 Synalgia conjunctivitis. G.S.W. face Jan 1915 5th Glos; G.S.W. Hand Nov 1915, Bacyltt; Ypres Shell Shock unconscious for two days Dec 30 1916; Gas poisoning and Bronchitis Vimy 6 Apl 1917 Westcentre 24 Apl 16-5-17 to 22-6-17, P.P.C.L.C. Ramsgate 22-6-17 to 20-9-17 No 5 Can Gen Liverpool 1-6-18 to 19-6-18. Pleurisy then

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

35 years of age. Patient reports that he has rheumatic conjunctivitis for last five months. attacks of synalgia present for four months, gradually getting worse, some on & off unguided intervals following exertion, when he does not lie down well loose conscious and tell has worried dyspnoea at times, pain in back and bones and Klartan's two normal Reasily excited nervousness associated. appetite poor

Weight 11st 1 June 10-17
Right vision 6/6
left " " M.S.
left eye amblyopic

8. OPERATION. (i.) Was one performed? no

(ii.) If so, state what.

(iii.) Was one advised and declined? no

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? no

(ii.) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty?

(b) Fit for base duty? Will not be fit to be retained in category for three six months

(c) Invalid to Canada?

(d) Discharge from the Service as permanently unfit?

Date of Report June 27 1918 Signed J. Dawes

Station Bannockburn Officer in medical charge of case. Capt R.A.M.C.

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

L. A. Roberts Officer i/c / S.M.O. Hospital / Brigade Strike out one of these.

Dated at London Station, on July 1st 1918

* Delete if inapplicable.

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

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? Yes.
If not, indicate it.

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

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? No / Aggravated? } (b) Misconduct of the Soldier { Caused? No / Aggravated? }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

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

18. Remarks. Rt eye 6/6.
Lft eye blind.
Is nervous & poorly nourished.
Was two years in France with P.P.G.L.I. and since then has had definite syncopal attacks which are induced by any exertion and unfit him for anything but sedentary work.

19. Recommendation:—(*a*) Fit for duty?
(*b*) Fit for base duty? B. Kree (not likely to be raised within 6 months)
(*c*) Invalid to Canada?
(*d*) Discharge from service as permanently unfit?

Classification for the Military Hospitals Commission.

Date of Board 3/7/18

Signatures of the Board. [signature] President. [signature] Capt. [signature] [signature] Capt. [signature]

Station Sunningdale

Approved A.D.M.S.

Dated at Station 191

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

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

PART Ward 42 Form (D.M.S. 1312). A.F.B. 179 Canada Revised) 12367. 50M. 29-12-17.

OR 36

Reserved for M.H.C.

Regt No. 883 Rank SGT. Surname DRAYCOT Christian Name WALTER. MACRAY LANGDALE

Unit or Corps—(a) Overseas from United Kingdom PPCLI. (b) In United Kingdom C.7.C.

Born at—Town Belgrave County or Province Leicestershire Country England

Date of Birth—Day 24th Month February Year 1883 Age 35 yrs. 5 months.

Joined at Winchester - Hants - England Date Dec. 18th 1914

Former Trade or Occupation Fruiterer (wholesale)

Permanent marks or peculiarities that will serve for future identification:

Nil.

Height—feet 5 inches 8 1/2 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) [signature]

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

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

Disabilities Group (*a*) GENERAL WEAKNESS, NERVOUSNESS FAINTING SPELLS ON EXERTION. LOSS of MEMORY

Disabilities Group (*b*)

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	NEURASTHENIA	FRANCE	1917
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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

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

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

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

(*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?

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

PART I. (continued).

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

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

(iii.) Was a Court of Inquiry held? (iv.) Where? (v.) When?

(vi.) Opinion of the Court? NOT Applicable

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*). States he came over to England in Oct. 1914 and on Dec. 18th 1914 enlisted in P.P.C.L.I. and in same month went to France. In Jany 1915 states he was slightly wounded in face and eyes and in Nov. 1915 again received a slight wound in right hand - no disability. In May 1916 was put on Intelligence department in France and carried on until gassed at Vimy May 1917. Evacuated to England June 1917. After recovering from gas he was acting as Instructor in Map Reading and Topographical work in England but states he had to give it up on account of Eyes in Sept. 1917 - July 31/17 categorized B. for gas poisoning & Bronchitis. Nov. 1917 was transferred to C.F.C. and since then he states he has been unable to do any work, M.H.S. shows he was in hospital (No 5 Can. Gen.) for 19 days C Neurasthenia. Reported sick last time 15/7/18 & admitted here 24/7/18. Categorized B3 2/7/18 for Syncope and defective Vision. History of two Nervous breakdowns in France in Jany & February 1917.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*) Patient is 35 years of age and has had about 30 months active front line work. History of two nervous breakdowns during that time in Jany & Febry. 1917. He now complains of general weakness - "Jumpy Nerves" - Fainting spells on exertion. Bad dreams - usually of terrifying experiences - inability to sleep and loss of memory. He states he has done no work since November 1917. He is rather pale and has lost twenty pounds in weight.

Respiratory - Circulatory - Digestive - Lymphatic and Genito-urinary Systems - negative - Eye report at this hospital state that Eye condition is negligible.

Recommend Board for Invaliding for Neurasthenia due to Strain of Trench warfare. He is unlikely to be fit for service in any category within six months.

8. OPERATION. (i.) Was one performed? No

(ii.) If so, state what.

(iii). Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty? No

(b) Fit for base duty? No

(c) Invalid to Canada? Yes

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

Date of Report August 2nd 1918 Signed E. Craig Capt Can. C.

Officer in medical charge of case.

Station No 16 Can. Gen. Hospital Orpington

I have satisfied myself of the general accuracy of the above Report, and concur therein *~~except~~ D.W. McPherson COLONEL, C.A.M.C.

O.C., No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL. { Officer i/c Hospital / S.M.O. Brigade } Strike out one of these.

Dated at No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT, Station, on 16 AUG 1918 191

* Delete if inapplicable.

PART II.

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

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)?
If not, indicate it. Yes

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

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? no / Aggravated? no. (b) Misconduct of the Soldier { Caused? no / Aggravated? no.

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

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

18. Remarks.

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

Classification for the Military Hospitals Commission.
G.

Date of Board 14 AUG 1918

Signatures of the Board. Dr Davis Capt Cam C. President.
L. M. Morton Capt. Cam C
H. W. Martin Capt Cam C

Station No. 16 CANADIAN GENERAL (ONTARIO) HOSPITAL, ORPINGTON, KENT.

Approved [signature]

~~A.D.M.S.~~

A.D.M.S. CANADIANS, LONDON AREA, LONDON,

Dated at ..... Major, O.A.M.S. for A.D.M.S., Canadians, London

Station 19 AUG 1918 191

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

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

MC 76

W.O.G.

FORM FOR HISTORY AND MEDICAL RE-EXAMINATIONS OF PENSIONERS

B. P. C. No. 800 101398 83542

THE BOARD OF PENSION COMMISSIONERS FOR CANADA

OTTAWA, Canada,

Date Feb. 28, 1919

TO MEDICAL EXAMINER:

Medical Report required; review date:—

August 1919. 12

The Secretary, Board of Pension Commissioners for Canada

Per .....

Regimental No 883 Rank Pte.
Name Walter MacKay Longdale Draycott
Unit P.P.C.L.I., C.E.F.
DESCRIPTION OF PENSIONER:
Apparent Age 35 on 4-2-19 Height 5'10" Colour of Eyes Blue
Complexion Fair Colour of Hair Black Build Weight 140
Marks of Identification: 2 scars over lower part of spine.

5-2-19 "Memory poor, reflexes increased, slight tremor, mental fatigue, expression anxious, unpleasant dreams. Vision right 20/20 left 6/200."

(History- Neurasthenia C.O.A.S. France Feb 1917 Defective vision aggravated on active service France.)

RECEIVED
1919
VANCOUVER D. O.

B. P. C. Form 800.
25M-11-18.

AUG 21 1919

Disability for which pension has been awarded :—

MEDICAL REPORT.

(1) Are you satisfied that the man presenting himself for examination is the pensioner named and described on page 1?

(2) Give a definite detailed description of the present condition.

Special Questions :—

Note,- Give degree of acuity of both eyes according to the Eye Disability Table.

Neurologists report?

This is to certify that I have read, or have heard read, the above description of my disabling condition, that I find it to be correctly and satisfactorily stated, and have not withheld any information concerning any disability resulting from service. I also wish to state that my complaints are :—

(If there are no complaints, it will be so stated.)

Signature of Witness.....

Pensioner's signature.....

3. (a) **PENSIONABLE DISABILITY**—(Here state the nature of the disability which has been contracted, or aggravated, while on Active Service.)

.....

.....

.....

3. (b) **NON-PENSIONABLE DISABILITY**—(Here state the nature of the disability which has not been contracted, or aggravated, while on Active Service.)

.....

.....

4. (a) To what extent, if any, have the disabilities diminished or increased since last examination?.....

.....

(b) If increased or undiminished, is increase or failure to diminish due to intemperance, improper conduct or neglect to exercise reasonable care required by the nature of the disabling condition?

.....

5. Will disabilities materially increase or diminish?.....

6. Are the disabilities permanent?.....

7. (a) Is pensioner wearing an artificial appliance for disability due to or aggravated by service?

.....

(b) Should he continue to do so?.....

(c) If so, is any alteration in the form of the present appliance recommended?.....

(d) If any appliance is required and has not been previously supplied special I.S.C. Form 144 should be completed as directed.

NOTE.—The information supplied by answers to question 7, must be forwarded by Head of District Office to the nearest representative of the Invalided Soldiers' Commission.

8. (a) Would treatment reduce the pensioner's disability, or increase his comfort?.....

(b) Nature of treatment advised.....

(c) Is pensioner willing to accept treatment advised?.....

(d) If not, is his refusal reasonable?.....

REFUSAL OF TREATMENT:—This is to certify that I thoroughly understand the nature of the
(To be completed when treatment advised has been refused.)

treatment advised, and refuse to accept the same for the following reasons:.....

.....

Pensioner's signature.....

The foregoing report submitted by

Signature.....

Medical Examiner.

Place.....

Date.....

.....

.....

} Members (of a Board)

The answers to the following questions are to be filled in by the representative of the District Office of the Board of Pension Commissioners.

(In cases in which medical re-examination is being made by a medical practitioner in accordance with the second to last paragraph of page 1 hereof the medical practitioner will fill in such answers.)

9. (a) Has pensioner married since last medical re-examination?.....
(If so, forward B.P.C. Form 185 with B.P.C. Form 800 unless the answer to 9 (b) is in affirmative.)

9. (b) If so, is he receiving the additional allowance for a wife?.....

10. (a) Has a child been born to pensioner since last medical re-examination?.....
(If so, forward B.P.C. Form 185 with B.P.C. Form 800 unless the answer to 10 (b) is in affirmative.)

10. (b) If so, is he receiving the additional allowance for a child?.....

11. If pensioner was married, has his wife died since last medical re-examination?.....
(State date of death.)

12. Have any of pensioner's children died since last medical re-examination?.....
(State date of death and names of children who have died.)

Place.....

Date.....

Head of District Office,
(or Medical Practitioner)

Urgent for L.P.C.

11 SEP

Pay 2A.
7/9/18

To Records.

883 Pte Draycott W.L.
P.O.C.L.I. E.O.R.D - Base Depot - C.F.C. Eng.

Promotions & Reversions please.

Appts L/Corp unpaid 4/8/16 D.O. 34 a 31/8/16 P.P.C.L.I
" A/Corp " 4/8/16 D.O. 34 a 31/8/16 "
Reverts to Perm Grade Private 23/10/17 D.O. 226 a. 24/10/17 E.O.R.D

ROYAL AIR FORCE
No. 6 SCHOOL OF AERONAUTICS
BRISTOL.
6- AUG 18
No. 6/SA/118c
HEADQUARTERS
REGISTRY.

From :- Commandant,
No.6 School of Aeronautics,
Royal Air Force, BRISTOL.

To :- Pay Officer,
Canadian Expeditionary Force,
7, Millbank, LONDON. S.W.

6th. Aug. 1918.

Herewith, Nominal Roll of Canadians requiring Pay on Friday next 9th. inst., as per standing arrangement.

Pay Parade to be at 5.0 p.m.

C.R. PAY OFFICE, C.E.F.
P.L.
REFD TO PM II
-8 AUG. 1918
ACTED ON
AS
LONDON, S.W.

H.W. Hanner Esq
Lieut. Colonel,
Commandant,
No.6 School of Aeronautics,
Royal Air Force.

BRISTOL.
MH.

Urgent for L.P.C.

Pay 2 H.
12/9/18

To ~~Observations~~ Audits

883 Pte Draycott W. L.

P.P.C.L.I — E.O.R.D. — B.D. — C.F.C. Eng.

Readings of Pay Lists of P.P.C.L.I. for months of April 1915 + July 1915 please

April 15.

Cr	Pr a/c	O Cr	Total	Dr	Total	Bal Cr	
30.00 3.00	61.90	9.30 2.50	106.70	50.00 (1c/c)	50.00	56.70	Money retd from hosp See Capt Taylor S.F. 26/1 — 26/2/15.

July 15

Cr	Pr a/c	O Cr.	Total	Dr	Total	Bal Cr	
31.00 3.10 Pay II	27.30	13.80 ○ 16.50 ×	91.70	50.00 (2c/c)	50.00	41.70	× 15 days pay u/cr May L.P.C. Cancelled ○ S.F. 27/4 - 10/5 26/5 - 26/6/15.

Payments to cease or ceased 1/10/18 and M.F. A3M. (Stop Payment Form) received

Separation Allowance 20.00 per month

Payable by England (insert England or ~~Canada~~)

To (Name) (on Trg) John Davidson, Nursery Cottage

Address Skerwith Langwathby Cumb.

Total payment made in England for Separation Allowance, including amount paid or to be paid for ~~current month~~ aug. 1917 $ ~~80.00~~ 670.00

Payments to cease or ceased 31/8/17 inclusive

Date 10/9/18

Capt. For Paymaster 2.

Note 1. This Form to be attached to all Last Pay Certificates of Officers and Men returned to Canada.

2. Payment of Assigned Pay and Separation Allowance is to cease on the last day on the month in which the Officer or Man sails from England.

3. In the case of Officers and Men who have made no Assignments or Separation Allowance being in England this should be noted hereon.

H.Q. 161-15-2, dated 14th January, 1916.

M. OR S. Single

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

REGT. No. 883. RANK Pte. 3842 NAME (IN FULL) ~~Dry~~ Draycot, W.M.L (BLOCK LETTERS SURNAME FIRST)

AUDITOR R.M. | PAYMASTER L.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID ✓ | RELATIONSHIP

ADDRESS ✓

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1.10	1-10-18	D0198.
Discharged	12/2/19	

ORIGINAL UNIT C.E.F. C.F.C Eng (P.P.C.L.I.) | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO ✓ | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS: Draycot Road. Lynn Valley N. Vancouver

ADDRESS ✓

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Vancouver | DATE 12/2/19 | REASON | AUTHORITY DO. 44 | 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
1919					Car																																FH
BALANCE FROM PREVIOUS ACCOUNT Jan 1	✓	1.10			34	35																															
Jan	31	✓	34	10					68	45	20052						68	45													68	45					
Feb	12		13	20	35				48	20	20215						48 / 70	20 / -													118	20	70	-			
183 days					W.S.G. 420				420																								420				
																											70				70		350				
																	Mch 18	81 98	70												70		280				
																	Apl 19	166573	70												70		210				
																	May 14	172533	70		4th										70		140				
																	June 12	803907	70												70		70				
																	July 12	821358	70		4										70						
									420	00																					420	-					

Certified that all payments have been made on this account for which covering authority has been received to date.
Lieut.
Paymaster, Demobilization Pay
M.D. No. 11

War Service Gratuity
Service 4 years — months

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.
Capt.
Officer i/c War Service Gratuity
M.D. No. 11

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL 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.	