M. D. 1st DEPOT BATTALION 2nd. QUEBEC REGIMENT
FIRST Depot Battalion SECOND QUEBEC Regiment

Regtl. No. 406689

TRIPLICATE

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname: Drew
2. Christian name: William John
3. Present address: 307 Champlain St. Quebec Canada
4. Military Service Act letter and number: Nil
5. Date of birth: March 6th 1895
6. Place of birth (town, township or county and country): Frampton, Dorchester. P.Q. Canada
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Laborer
10. Name of next-of-kin: David Drew
11. Relationship of next-of-kin: Uncle
12. Address of next-of-kin: 307 Champlain St. Quebec Canada
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: Nil
15. Medical Examination under Military Service Act:—

(a) Place: Quebec (b) Date: 23-3-18 (c) Category: A 2

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT
HOSPITAL REPRESENTATIVE, CANADIAN MILITARY HOSPITAL, BRAMSHOTT

DECLARATION OF RECRUIT

I, William John Drew, do solemnly declare that the above particulars refer to me, and are true.

William John Drew (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	23	yrs	0	mths.
Height	5	ft	3	ins.
Chest measurement	fully expanded		35	ins.
	range of expansion		1½	ins.
Complexion	Medium			
Eyes	Blue			
Hair	Brown			

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

J. COL.
O. C. 1st DEPOT BATTALION, 2nd QUEBEC REGIMENT
O. C. FIRST Depot Btln.
SECOND QUEBEC Regt.

Place: Quebec Date: March 22-1918

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

MILITARY DISTRICT No. 3
CENTRAL REGISTRY
DEC 3 1918

MT 10-12-18

S

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
Attestation Papers..... 3
Declaration of change of name.....
Authority for special enlistments.....
Documents of re-enlisted men.....
Regimental Conduct Sheet.....
Compulsory Stoppages.....
Casualty Forms..... 1
Proceedings on discharge..... 2
Corps History Sheet.....
Date and No. of Deposit Receipt for Purchase Money and Amount.....
~~Parchment~~ Check Certificate..... 1
Medical Report for Invalids..... 2
Medical History Sheet..... 2
Proceedings of Regt. Court Martial.....
Copies of Convictions by Civil Power.....
Company Conduct Sheet..... X
Clothing Transfer Certificate..... 1
Inventory of Kit.....
Last Pay Certificate..... 1

M F B 465-1
M F W 478-1
A. F. D. 1237-3
J Caclard
A & D -1
A F B 181-4

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

W

DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

Name DREW WILLIAM JOHN

Regt. No. 4040689 Rank Pte

Corps 20th Res. Bn

Med. Unfit

25169

H

KCD
~~23/1/20~~
R 27-1-20

H

M.F.B.263A-1
R12
M.F.B.263-1

10-4
25-7
27-7
1

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. 4060689 Rank Private. Name Drew, William John.

Corps Q. R. R. - who was* Discharged.

On 25-11-18 191...., to Medically unfit.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-10-18 191...., to 25-11-18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month Orgn. LPC.	34	85	Bal. Cr. from prev. month		
Advances by Cheques No. 2138	5	00	Regt'l Pay 56 days at $ 1 c. 00	56	00
Nov. paid by Ottawa.			Field Allow. 56 days at $ c. 10	5	60
Assigned Pay and Sep'n Allce. No.	15	00	Separation Allowances* (Monthly)		
Other charges			Subs. Other Allowances* 29-10-18/13-11-18	11	20
Payment on transfer or discharge No. 2196	52	95	Other Credits* Clothing.	35	00
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	107	80	Total	107	80

*Give particulars.

A monthly stoppage of $ 15.00 (†) has been (‡) charged been paid on account of Assigned

Pay for the month of November - - - - 1918 and Sep'n Allce. for month of NIL. 191.... (to) Assignee Mrs. Patrick Sullivan,

(Address) 307, Champlain Str., Quebec, P.Q.

(†) 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

Outfit 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 NIL.

(3) cause of discharge Medically unfit. authority D.O.2553 of 22-11-18

(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 25-11-18

C.M. Quebec, P.Q. Capt.

Place Demobilization Pay Divn. M.D.S. *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.

300M.—2-18.
H. Q. 1772-39-903.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 5.

NAME OF SOLDIER DREW. William John. RANK Private. No. 4040689.

REGIMENT 19th DISTRICT DEPOT No 5 C. E. F.

DISTRICT DEPOT. No. 5.

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	Nov 25/1918	1/14.									10 1.3.4 13.16.17 19.29.30-31									R. M. Price Capt	#5	Requires a partial lower plate

M.F.B. 465
2000-1-17
1772-39 950

DENTAL HISTORY SHEET

Name

Address

Phone

Occupation

Date of Birth

Age

Sex

Married

Single

Children

Ages

Name of Parent or Guardian

Address

Phone

Occupation

Name of Husband or Wife

Address

Phone

Occupation

Name of Nearest Relative

Address

Phone

Relationship

Name of Family Physician

Address

Phone

Name of Dentist Referring Patient

Address

Phone

Reason for Visit

Last Visit to Dentist

Last Visit to Physician

Have you had any serious illness?

Have you had any operations?

Are you under the care of a physician now?

Are you taking any medicine now?

Are you allergic to any drugs?

Do you bleed excessively when cut?

Do you have frequent headaches?

Do you have frequent colds?

Do you have frequent sore throats?

Do you have frequent indigestion?

Do you have frequent constipation?

Do you have frequent nervousness?

Do you have frequent dizziness?

Do you have frequent fainting spells?

Do you have frequent rheumatism?

Do you have frequent asthma?

Do you have frequent hay fever?

Do you have frequent skin eruptions?

Do you have frequent venereal disease?

Do you have frequent tuberculosis?

Do you have frequent diabetes?

Do you have frequent kidney trouble?

Do you have frequent heart trouble?

Do you have frequent high blood pressure?

Do you have frequent low blood pressure?

Do you have frequent epilepsy or convulsions?

Do you have frequent stomach trouble or ulcers?

Do you have frequent liver trouble?

Do you have frequent goiter?

Do you have frequent cancer or tumor?

Do you have frequent anemia?

Do you have frequent emphysema?

Do you have frequent arthritis?

Do you have frequent hepatitis?

Do you have frequent AIDS?

Do you have frequent herpes?

Do you have frequent mononucleosis?

Do you have frequent pneumonia?

Do you have frequent bronchitis?

Do you have frequent tonsillitis?

Do you have frequent sinusitis?

Do you have frequent allergies?

Do you have frequent eczema?

Do you have frequent psoriasis?

Do you have frequent acne?

Do you have frequent dandruff?

Do you have frequent hair loss?

Do you have frequent nail problems?

Do you have frequent foot problems?

Do you have frequent vision problems?

Do you have frequent hearing problems?

Do you have frequent speech problems?

Do you have frequent memory problems?

Do you have frequent concentration problems?

Do you have frequent sleep problems?

Do you have frequent appetite problems?

Do you have frequent weight problems?

Do you have frequent energy problems?

Do you have frequent mood problems?

Do you have frequent anxiety problems?

Do you have frequent depression problems?

Do you have frequent suicidal thoughts?

Do you have frequent homicidal thoughts?

Do you have frequent hallucinations?

Do you have frequent delusions?

Do you have frequent paranoia?

Do you have frequent schizophrenia?

Do you have frequent bipolar disorder?

Do you have frequent obsessive-compulsive disorder?

Do you have frequent post-traumatic stress disorder?

Do you have frequent panic disorder?

Do you have frequent agoraphobia?

Do you have frequent social phobia?

Do you have frequent specific phobia?

Do you have frequent generalized anxiety disorder?

Do you have frequent substance abuse?

Do you have frequent alcoholism?

Do you have frequent drug addiction?

Do you have frequent smoking?

Do you have frequent chewing tobacco?

Do you have frequent snuff?

Do you have frequent marijuana use?

Do you have frequent cocaine use?

Do you have frequent heroin use?

Do you have frequent methamphetamine use?

Do you have frequent ecstasy use?

Do you have frequent LSD use?

Do you have frequent PCP use?

Do you have frequent inhalant use?

Do you have frequent prescription drug abuse?

Do you have frequent over-the-counter drug abuse?

Do you have frequent caffeine use?

Do you have frequent nicotine use?

Do you have frequent alcohol use?

Do you have frequent sugar use?

Do you have frequent artificial sweetener use?

Do you have frequent food allergies?

Do you have frequent food intolerances?

Do you have frequent food sensitivities?

Do you have frequent food cravings?

Do you have frequent food aversions?

Do you have frequent eating disorders?

Do you have frequent anorexia nervosa?

Do you have frequent bulimia nervosa?

Do you have frequent binge eating disorder?

Do you have frequent pica?

Do you have frequent rumination disorder?

Do you have frequent avoidant/restrictive food intake disorder?

Do you have frequent other specified feeding or eating disorder?

Do you have frequent unspecified feeding or eating disorder?

Do you have frequent other specified mental disorder?

Do you have frequent unspecified mental disorder?

Do you have frequent other specified neurodevelopmental disorder?

Do you have frequent unspecified neurodevelopmental disorder?

Do you have frequent other specified personality disorder?

Do you have frequent unspecified personality disorder?

Do you have frequent other specified paraphilic disorder?

Do you have frequent unspecified paraphilic disorder?

Do you have frequent other specified gender dysphoria?

Do you have frequent unspecified gender dysphoria?

Do you have frequent other specified sexual dysfunction?

Do you have frequent unspecified sexual dysfunction?

Do you have frequent other specified elimination disorder?

Do you have frequent unspecified elimination disorder?

Do you have frequent other specified sleep-wake disorder?

Do you have frequent unspecified sleep-wake disorder?

Do you have frequent other specified movement disorder?

Do you have frequent unspecified movement disorder?

Do you have frequent other specified neurocognitive disorder?

Do you have frequent unspecified neurocognitive disorder?

Do you have frequent other specified delirium?

Do you have frequent unspecified delirium?

Do you have frequent other specified substance/medication-induced disorder?

Do you have frequent unspecified substance/medication-induced disorder?

Do you have frequent other specified trauma- and stressor-related disorder?

Do you have frequent unspecified trauma- and stressor-related disorder?

Do you have frequent other specified dissociative disorder?

Do you have frequent unspecified dissociative disorder?

Do you have frequent other specified somatic symptom disorder?

Do you have frequent unspecified somatic symptom disorder?

Do you have frequent other specified factitious disorder?

Do you have frequent unspecified factitious disorder?

Do you have frequent other specified disruptive, impulse-control, and conduct disorder?

Do you have frequent unspecified disruptive, impulse-control, and conduct disorder?

Do you have frequent other specified neurocognitive disorder?

Do you have frequent unspecified neurocognitive disorder?

Do you have frequent other specified mental disorder due to another medical condition?

Do you have frequent unspecified mental disorder due to another medical condition?

Do you have frequent other specified mental disorder?

Do you have frequent unspecified mental disorder?

INSTRUCTIONS

1. Complete all questions.
2. Sign and date.
3. Return to office.

Signature

Date

1st DEPOT BATTALION 2nd QUEBEC REGIMENT

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Bn. 2nd Quebec Rgt.

Regimental No. 4040689 Rank Private Name William John Drew

Enlisted (a) 22-3-18 Terms of Service (a) C. E. F. Can. Expd. Force Service reckons from (a) 22-3-18

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

Extended Re-engaged Qualification (b) Laborer

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT
HOSPITAL REPRESENTATIVE, CANADIAN MILITARY HOSPITAL, BRAMSHOTT

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	Halifax N.S.	9-5-18	H. M. T.
		Disembarked	London	24.5.18	"Teiresias"
28/5/18	O.C. 10th. Can. Res. Bn. T.O.S. on ~~transfer from~~ arriving from Canada		B'shott	24/5/18	D.O.P. 11 124
5-7-18	O. C. 10th. Res. Bn.	Transf. to 20th Res Bn, C. E. F.	B'shott	3.7.18	D. P. 11. O. 157
		J Falardeau Lt.	Ass-Adj. 10th. Can. Res. Battn,		
8-7-18	To Res	T.O.S from 10 Res	B'shott	3/7/18	D.O. 189
5/9/18	To Res	T.O.S. to 2nd Reg Depot for Inv to Canada	B'shott	3/9/18	D.O. 248

Hutmore
LT. & ASST. ADJUTANT
20th CANADIAN RESERVE BN.

MILITARY DISTRICT No. 5 CENTRAL REGISTRY

(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				
		Discharged H.M. Service as medically unfit Daily Order. Part 11. No. 222. of 25-11-18 and Dist. Order No. 2601 of 28-11-18.			

J de G Audette Capt.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 4040689. (Rank) Private.

Name (in full) DREW. Wikliam John. enlisted in

the 1/2nd. QUEBEC REGIMENT.

CANADIAN EXPEDITIONARY FORCE at QUEBEC. P. Q. on the 22nd.

day of March. 1918.

HE served in ----------ENGLAND----------

and is now discharged from the service by reason of being medically unfit under

R.O. 237 of 22-2-18.

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

Age 23 yrs. 7 mons.

Height 5ft. 3 ins.

Complexion Meidum.

Eyes Blue.

Hair Brown.

Marks or Scars

Drew W.J.
Signature of Soldier

J de G Audette
Issuing Officer

Capt.
Rank

O. C. Discharge Sect. D. D. 5.
Appointment

Date of Discharge 25th. Nov. 1918.

Signed at QUEBEC. PQ. this 25th. day of NOVEMBER. 1918

in Military District No. 5

File Reference No.

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. 4040689 (Rank) Private Name DREW. William John.

Unit 1/2nd. Que. Rgt.

Address on Discharge 307. Champlain St. QUEBEC. PQ.

Character and Conduct Good –

Former Occupation Laborer.

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at QUEBEC. P. Q. this 25th. day of November. 1918

J.E.C. Gendette
Name of Officer

Capt.
Rank

O. C. Discharge Sect. D. D. 5.
Appointment

23

1st DEPOT BATTALION 2nd, QUEBEC REGIMENT

ORIGINAL

MILITARY SERVICE ACT, 1917.

4040689

MEDICAL HISTORY SHEET.

ORIGINAL

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Drew Christian name William

MK

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) 307 Champlain st Quebec

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23 day of March 1918 by the undersigned medical board sitting at Quebec Drill Hall

5. Age as stated 23 Years — Months. 6. Apparent age 23 Years — Months

7. Height 5 Feet 3 Inches. 8. Weight 119 Pounds.

9. Chest measurement { Minimum 33½ Ins. Maximum 35 Ins. 10. Complexion Medium { Eyes Blue Hair Brown

11. Physical development fair { Good Fair Poor 12. Smallpox marks —

13. Number of vaccination marks { Right arm — Left arm — 14. When vaccinated last never

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Undescended left testicule.

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A II

17. (a) Vision R. 15/15 L. 15/15

(b) Hearing. R. O.K. L. O.K.

J. Vaillancourt Capt. President.

Member. J. E. Bennett Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
3-4-18		M.O.	3-4-18	TA3 1	M.O.
		M.O.	10-4-18	TA3 2	M.O.
		M.O.	22-4-18	TA3 3	M.O.

Joined 22 day of March 1918 at Quebec

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st. Depot Bn. 2nd. Quebec Rg't.	4040689		22-3-18
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Bramshaw	29/8/18	Debility	Invalid to Canada

N. H. Lutton MAJOR C.A.M.C.

Signature of Man William Drew

MILITARY DISTRICT No. 5 CENTRAL REGISTRY DEC 3 1918

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

M. F. B. 313.
300M.—10-17.
1772-39-439.

Surname Christian Name

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.
No 12 CAN. GENERAL HOSPITAL.		9	7	18	30	9	18	Pneumonia Empyema Debility	84	admitted to Hosp complaining of chills fever and pain in left chest, sudden onset on previous day, Physical findings of Pneumonia in left base, on sixth day developed Empyema, operated on 14.7.18 patient very sick, slowly improved, being discharging for following month 17 Swritten, Disability, "Debility" caused from lung condition, Recommended to be "Invalided to Canada"	Kell Bane capt
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL		30 SEP 1918			14 OCT 1918			Do.		Awaiting sailing to Canada.	Manible Capt Cam
"ARAGUAYA."		14	10	18	27	10	18	Do		Condition unchanged	[illegible] Capt Cam
S P C H Sue		29	10	18	20	11	18	Empyema	23	Retd to Unit for desch Cat "E"	J A Key capt Ame

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER L. Drew William

DISTRICT 5

REGIMENT Tel. Depot Bn. 2nd. Quebec Rg'ts

RANK Private

No. 4040689

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

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	March 25/1918										10 1.2.4 10.16 17.20 28.30 31									B Buchlum Capt	#5	Regs. Oral Lower Car. #4
March 25/1918	1/14																			B J 10	#5	
April 4	1918																			B Lew	5	Completed 4/3/18

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE, CANADIAN MILITARY HOSPITAL, BRAMSHOTT

MILITARY DISTRICT No. 5 CENTRAL REGISTRY

D.D. No.

THE PENTAGON
WASHINGTON, D.C.

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

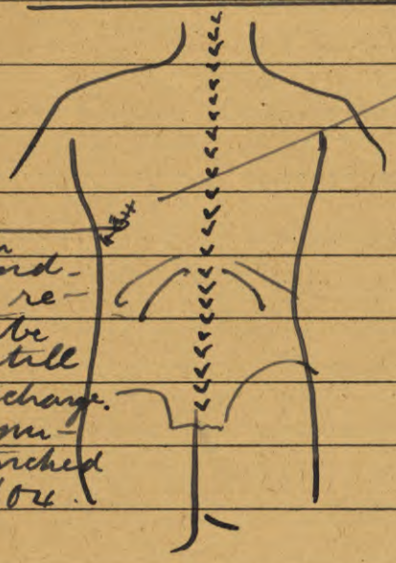
No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
5371	4040689	Pte	Drew	W

Year	Unit.	Age.	Service.
1918	20th Res Battn	23	3/12

Station and Date.

Disease Empyema (Debility) (page 2 — continued)

12 Cy Sty
15.8.18 Examn Chest —



Diminished Expansion
Respy murmur feeble but audible —
No adventitious sounds —
Left Chest resonant on percussion —
Tactile fremitus diminished but palpable.

15/8/18 Operation wound — no longer retains tube though still some discharge. Some granulations touched with CuSO4.

Patient sitting up and improving daily.
E L Pope
Capt

18.8.18 Granulations diminishing.

22.8.18 17 E written, disability, "Debility" Recommended "To be invalided to Canada"

6/9/18 Boarded and had three days leave

26/9/18 General condition improved, leaving for Canada

Kell & Bane Capt.

H S C G H Kirkdale

30/9/18. Awaiting sailing to Canada. Marrickle Capt Bank.

* 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 12/16v 5 89 Forms/I. 1237/12

P.T.O.

Station and Date.

Form R 122.
10287—65M—28-7-17.

LTR Rank Name DREW, William John Reg'l No. 4040689

Unit Dft. No 37. 1st Bn QUEBEC If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Quebec, March 22nd, 1918. Place of Birth Frampton Dorchester P.Q. Canada

Name and Address, Next-of-Kin David Drew

307 Champlain St. Quebec Canada Relationship Uncle

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 14839
File R.L.
Category M U CANADA

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
C		Arrived in England		24-5-18	S/S TIERESIAS
28-5-18	10 Res.	T. O. S.	Pte Bshott	24-5-18	D.O. 124.
5-7-18	"	S. O. S. to 20 Res.	" "	3-7-18	D.O. 189 of 8-7-18 " 157 20 Res.
5. 9. 18	20 Res	S.O.S. to Q.R.D	" "	3. 9. 18	Do #2180/7.9.18 QRD " 249
18. 10. 18	Q.M.	Invalided to Canada			
		Ex No 5 Cdn Gen Hpl.	Liverpool	14.10.18	CLC 346
22-10-18	Q.R.D.	S.O.S. on trans to Canada for further med treatment	Bshott	14-10-18	D.O. 256.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

4

Name Drew (Surname) William John. (Christian Name)

Regimental Number 4040689. Rank Pte. Address (in full)

Unit Q.R.D.

Original Unit

District where paid M.D.5.

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ per month.

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Remarks: List dated November 16th to 30th, 1918.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Dependent.....

Address.....

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

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

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

Less P, D. P. Credited $ .....

$

Less further debit balance $.....

Net due paid as below

Pay Dependent $.....

TO SOLDIER TO DEPENDENT

O	[illegible]	[illegible]	[illegible]	[illegible] No	Ch No	Amount
				Days	Rate	Due
				Less P.D.P. credited		
				Less further Dr. Bal. or overpayment.		
				Total		

Clerk .....

Net.....

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

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

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

M. F. W. 41
100M-1-18.
1772-39-889.

Name Pte. Drew. W.m John.

Regimental No. 404089

Unit C. R. T.

Date of enlistment ✓

Place of " ✓

Married (yes or no) Not mentioned.

Amount of pay assigned monthly $ 15.00

To whom payable Mrs. Patrick. Sullivan.

Name and address of next-of-kin

Mrs. Patrick Sullivan.
207 Champlain St.
Quebec.

Date and place discharged 25/11/18. Quebec.

Reason for discharge - Med. Unfit -

Character on discharge D.O. 2333 of 22/11/18.

A.P. paid by Otawa. —

1918	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.
															E.L.P.C.		
Nov.	1-10-18	25-11-18	56	1.00	56.00	56	10	5.60	35.00 11.20	107.80		2138 2196	5.00 52.95		15.00 34.85	107.80	Clothing.
			56.00					5.60	46.20	107.80	7		57.95		49.85	107.80	7 "Discharged" 25-11-18

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. N. 35.

Name Drew William John.

Regt'l No. 404609 Rank Private. File Numbers ✓ ✓

Former Units C.R.D. Original Unit ✓

Date of arrival in Canada 30-10-18 Boat Tregantle Port of Disembarkation Halifax.

Rates of Pay:—Regt'l. 1.00 Field 0.10 Date of arrival in M.D. 6. ✓

Separation Allowance. Date paid to Nil. Rate Nil. If continued by Chief Paymaster, England Nil.

Assigned Pay. Date paid to 31-10-18 Rate 15.00 If continued by Chief Paymaster, England no.

Name and address of Beneficiary Mrs. Patrick Sullivan 307 Champlain St. Quebec.

Pay claimed on English L.P.C. to 30-9-18 to be paid by new Unit from 1-10-18

Name of new Unit Demobilization Pay. Div. 5. Date L.P.C. forwarded to new Unit 6-11-18

Ass. Pay paid by Ottawa.

L.L. 34682—M. & D. 8645.

1918	Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out: On Boat		At Cl. Depot &c.		OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT: Credit		Debit		REMARKS
	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	
Nov.	$ 37.	58							(1) 2.	43									(1) 4-10-18 L'Pool. OR. 1203
									(2) 5.	00	(4) 15.	00							(2) 27-10-18 Halifax. -
	Dr. Ball.		34.	85					(3) 50.	00							34.	85	(3) 27-10-18 " CR. 1496
					$ 72.	43							$ 72.	43					(4) Ass. Pay. (Oct).

"Discharged"
23/11/18.

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers { .....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate..... If continued by Chief Paymaster, England

.....

Assigned Pay. Date paid to.....Rate..... If continued by Chief Paymaster, England

.....

Name and address of Beneficiary { .....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

C

649-D-12469.

~~5~~

CARD NO. 4

SURNAME. Drew.

CHRISTIAN NAMES William John.

REGL. NO. 4040689 RANK Pte.

UNIT 2nd Que. Regt. 1st Dpo. Bn.

FORMER CORPS Nil

S.O.S. 25-11-18 5
D.O. 22 FOLL. 25-11-18
On. U. #5 D.D.

T. O. S. Mar. 22 1918

D.O. Part II No 84

NEXT OF KIN.

NAMES IN FULL Drew David,

RELATIONSHIP TO SOLDIER Uncle,

ADDRESS 307 Champlain St., Quebec, P.Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Trampton Dorchester P.Q. DATE Mar 6th 1895.

PLACE OF ATTESTATION Quebec, P.Q. DATE Mar 22nd 1918.

O/S. 11-5-18 1241/6

RHC 27.10.18 222/19.

L. L 26989 M & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

LEDGER NO. 19. SERIAL NO.

REG. NUMBER 40440 689 NAME Drew W J

RANK Pte CORPS 20th R. Bn

AGE SERVICE

NAME OF HOSPITAL Savard Park Convt PLACE Quebec

DATE OF ADMISSION 30/10/18

DISEASE Empyema

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO IN CATEGORY

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

P. T. O.

REMARKS:

Form R. 149.

WILLIAM JOHN

Name DREW Rank Pte Reg. No. 4040689

Unit 20th Res

Next of Kin Canada

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13	7	12 C.G. Bramshott	Pneumonia	C	266		551
		PLACED ON SER ILL LIST				H212	
6.	8	Still Can Ill		do Lobar			881 (892)
10.8.	M	Still Sex Ill Can Hosp B'shot			C 288	Q 428	1048
13.	8	Off Seriously Ill list		do	C 289		1082
		Dlag charged to		Empyema	C 296		1123.
1	10	5 Can G.H.	Kirkdale	do.	C 334		27842.
14.	10	Invalided to Canada			C 346		3213.

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

Form DMS 1401.

A. & D. CARD

No 12 Can Sect HOSPITAL.

AT Bramshott

A. & D. No. 5370 PL. OF ACTION

RANK Pte REG. No. 404089 UNIT 20th Can Res Bn SICK OR WOUNDED

NAME Drew - W AGE 23 RELIGION R C

PLACE IN HOSPITAL Annexe

DIAGNOSIS Influenza

ADMITTED 9.7.18 FROM

DISCHARGED SEP 30 1918 TO

TRANSFERRED Kirkdale

SERVICE AT HOME 3½ IN FIELD 1

RESULTS 12 12

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

[illegible] P.T.O.

REMARKS.

M. F. W. 71—500M.—5-18.
1772—39—961.

NAME Drew William Thon

REGIMENTAL NO. 40.40689 RANK Private

ENLISTED AT

PROMOTIONS, &c. AND DATE

DATE

Occupation —

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY $ 15.00 C. TO Mrs. Patrick Sullivan

ADDRESS Champlain Ste P.Q.

SEPARATION ALLOWANCE, ENTITLED OR NOT Nil

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR Nil

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	No.	Date	

S.) A.) 7/17.

Separation Allowance and Assigned Pay

CANADIAN EXPEDITIONARY FORCE

A.) P.) 15.00

Surname first. Full Christian Names to be given in every instance

1. Name in full (Surname first) Drew. William John.
2. Regimental Number 400689 3. Rank Private
4. Reg't. or Unit Q.R.D.
5. Date of Enlistment 6. Date reported for duty
7. Name of Wife — or
   Widowed Mother — or
   Children's Guardian —
8. Address —
9. State ages of Children: Girls under 17 — Boys under 16 —
10. Amount of Assigned Pay 15.00 11. Date effective Date of enlistment
12. Name of Assignee Mrs. Patrick Sullivan
13. Address 307 Champlain. P.Q.

14. Date of Marriage? Nil

15. Date Marriage Certificate examined by Paymaster Nil

16. Have you made a previous Claim for Separation Allowance? Give particulars Nil

17. Is Separation Allowance being paid on your Account to any other person? Nil

18. Were you at the time of enlistment an employee of the Local or Dominion Government? In what capacity, and in what place?

19. Will you be in receipt of a salary as such, while serving? If so paid, how much per month?

20. Name of Corps prior to enlistment in the C.E.F.

21. Are you a member of the Permanent Force?

I hereby certify that the above is a true statement.

Name of Soldier.

Signature of officer forwarding this application.

Unit M. D. No.

Date

S. A. Paid by From To

Paid by From To

M. F. W. 130.—200M.—7-18. 1772 39-1147

No. 4040689 RANK Pte NAME Drew Wm John

T. O. S. 22-3-18
A.O. 84 of 25-3-18 UNIT 1st Depot Battalion, 2nd Quebec Regt

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Mar 22	1918 Mar 31	W		
Apr May 1	May 5	W	Transfd C/3 5-5-18	A.O. 126 of 5-18

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
4040689	PTE	Christian Names (1) William (2) John (3)	Date 5/3	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Quebec	22/3/18	10 Can Res	R. C.	22/4/18	H
Province: Que.	Age on 23.	Date 8/10/18		Vaccination 3/4/18.	

On Command	Hospital Can Mil Hosp Woodcote Rd Epsom Influenza	Permanent Cadre Date taken on	Employed as
Date Proceeding	Date Admitted		

Record of Overseas Service: Fit.

Reason for Return:

Profession or Trade (Civil) Laborer.

Transferred or Posted to Date.

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE

CANADIAN MILITARY HOSPITAL BRAMSHOTT

Married or Single Single

Address of Next of Kin Uncle

David Drew.

307 Champlain St.

Country Quebec.

LEAVE.			
No. of Pass Issued	From	To.	Free Transportation.

MILITARY DISTRICT No. 5 CANADA CENTRAL REGISTRY

OCT 30 1918

A.G. 10434

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
189	8/7/18	F.J.			
192	11/7/18	F.A.			
248	5.9.18	S.D			

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

NAME Drew William John

REGT'L. No. 4040689

H. Q. FILE No. 649

RANK AND CORPS Pte. 20th Res. Bn. Form

FOLLOWS 2nd Que Regt

No. 1st Dpo. Bn.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
N. of R.		David Drew. (uncle) 307 Champlain St. Quebec. P.Q.
H 212 (1-2)	18-7-18	Ser. ill Mil. Hosp. Bramshott. July 13-1918, Pneumonia
Q 428 8-1	11-8-18	Cond Still Ser. Mil H. Bramshott Aug 10th 1918
H 252. 22-5	14-8-18	Rem. from Ser. Ill List Mil Hosp. Bramshott Aug. 13th. 1918.

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

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C266	12 Can. Gen. Branshott Ser Ill	13-7-18	Pneumonia
C288 1	#12 Can. Gen. Bramshot	10-8-18	Still ser. ill Lobar Pneumonia
C289 1	#12 Can. Gen. Bramshott	13-8-18	Rem. from ser. ill list ~~Lobar~~ H.L.
C334 1	no 5 Can Gen H		Empyema as per C296
C334 1	no 5 Can Gen Kirkdale	Lvpl 1-10-18	Empyema
C346 2	Inval to Canada	14-10-18	"

Number 4040689 Rank C6

Surname DREW

Christian Name William John

Units Q R Theatre of War England

Date of Service 24-5-18

Remarks 352

Latest Address 307 Champlain St. Quebec P.Q.

Roll No A Page 3582

200m.-2-21.M.

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

..... .

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

l 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.....

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

tination.....

(Sgd.).....

DESP. REGN. NO. 9 MAR 23 1923

D.M.S. 1300 50M-21-1 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Drew.	W. J.	4040689.

RANK	UNIT	CO.	TROOP	BATTY.
Pte	Que (20 R)			

HOSPITAL	DATE OF ADMISSION
	12 C. Gen. Bramshott 13. 7. 18.
1.	5 C. G. Liverpool HOSP. 1-10-18
2.	HOSP.
3.	HOSP.
4.	HOSP.

DIAGNOSIS

1. Pneumonia. a.t.
Sobar Pneumonia. [illegible]

2. Empyema. a.t. add

3.

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

DISPOSITION

Cl. ~~13.7.~~ 17.7.18 C266 Ser. ill 13.7.18.
" 12-8-18 C288 ① Still ser. ill. 10-8-18
13-8-18 C289 removed from Ser. ill 13-8-18
21. 8. 18 C296 - 2. Note. Diag of C289 now
4-10-18 C334 asc to be Empyema.
18.10.18 C346 ②
Inv. to Canada 14-10-18

REMARKS

DATE

EPITOME OF HOSPITAL TREATMENT

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

P 820
12474—375M—13-2-18.

* Strike out whichever is not applicable.

ASSIGNED PAY * ENGLAND OR CANADA.	SEPARATION ALLOWANCE * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.5.18	EFFECTIVE DATE:-
AMOUNT:- N.Y.R. Stop. Eff 7/10/18	AMOUNT:-

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

Mrs. Patrick Sullivan
307 Champlain St.
Quebec, Que
Can.

NAME:- DREW, William John

NUMBER:- 4040689

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.C. Canada		Private

UNIT AND TRANSFERS Draft to 37

ORIGINAL UNIT:- 1st. Depot Bn, 2nd. Quebec Rgt.

DATE ACCOUNT FIRST OPENED:- 6.5.18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
D.O. 1st	7.5.18		10th Can. Res. Bn
	1.10.18		H.E. "D"

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
~~S.F. 10~~	~~D41. 3/9~~	~~13/9~~	~~7 30~~				
~~28/8/18~~	~~3071~~	~~12 G.H.~~	~~£1 4 87~~				
~~3/9/18~~	~~3111~~	~~" "~~	~~£10 4 8 67~~				
~~L.P.C. 8.~~	~~37~~	~~58~~	~~30 9/18~~				
			53 5.4				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.C. from Canada	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada 7/10/18 auth 11/95. 2/18. Invalided

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
5.5.18	Balance from Canada								1 5 5 0		
June	P.P. 6/5/18 to 30/6/18	6 1 60							7 7 10		
				A.P. Can. May & June				30	4 7 10		
				AR 490. 10 Res Bn 13/6/18.	4 87				3 7 36		
				" 359. " 26/5/18	4 87				3 2 49		
				" 682 " 26/6/18	4 87						
		6 1 60			14 61			30			
July	P & A	34 10		C & P.				15	5 1 59		
				AR 2521. 12 Gen Hos. 29.7.18.	4 87				4 6 72		
		34 10			4 87			15			
Aug.	P.P.	34 10		a.p.				15	6 5 82		
				AR 3071 #12 Gen Hosp. 28/8/18	4 87				6 0 95		
		34 10			4 87			15			
Sept.	P.P.	33.		A.P. Sept.				15	7 8 95		
	S.F. 3/9/18 to 13/9/18. 10 dys 12 C&H	7 30							8 6 25		
	B 6248. 20 Res 5/9/18.			AR 3111. #12 b. Gen Hosp. 14/9/18	4 8 67				3 7 58		
		40 30			4 8 67			15			
Oct-Nov				AR 1202 5 C.G.H 4/10/18. Expd.	2 43				3 5 15		
				AB 57. B'thod 19/1/18. Basin 12 Gen H.	2 43 11 11				3 5 04		

CANADIAN
ASSIGNED PAY AUDITED
A.R.H. Smith
ACCT. CLERK
DATE 15/1/19

NUMBER 4040689. RANK NAME DREW. W. J.

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION

Pend. Card made 9-12-18 a.k. 17-D-883
9-11-34

This space to be for numbers

Proceedings on Discharge.

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

No.	4040689.
Rank	Private.
Surname	DREW.
Christian Name	William John.

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

Corps (Squadron, Battery or Company)	20th. Reserve.
Date of Discharge	25-11-18.
Place of Discharge	QUEBEC. P. Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 23 years 7 months.
Height 5 feet 3 inches.
Complexion Medium
Eyes Blue.
Hair Brown.
Trade Laborer.
Intended place of residence (To be given as fully as practicable.) 307. Champlain St. QUEBEC. P. Q.

Descriptive Marks

Deceased Sept. 8. 34 6+9 D 12469

2. The above-named man is discharged in consequence of being medically unfit under R.O. 237 of 22-2-18.

AUTHORITY.
D.O. 2601 of 28-11-18.
M.D. No.5. 17-D-883.

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

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

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

— Good —

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

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

M. F. B. 218.
100M.—1-17.
H. Q. 1772-39-113.

(OVER)

KeD. 23.1.20 S.

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

N I L.

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

6. Medals and Decorations..... N I L.

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

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

(Place) QUEBEC. P. Q.

(Date) 25th. Nov. 1918.

J de G Audette Capt

O. C. Discharge Sect. D. D. 5.

Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) QUEBEC. P. Q. Drew W. J. ..... (*Signature of Soldier.*)

(Date) 25th. Nov. 1918. Robert Beard ..... (*Signature of Witness.*)

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

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

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

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

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) -- years 248 days.

Total -- years 248 days.

11. **Confirmation of Discharge.**

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

(Place) Quebec. P.Q.

(Date) 25/11/18

M H Rabbe Major

Commanding District Depot No. 5.

(*Signature*) .....

Reservations referred to at Para. 8.

S. D. No.

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

Nil.

Drew W. J.

Robert Beard. witness,

MILITARY DISTRICT No. 5 CENTRAL REGISTRY DEC

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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

Date of Enlistment 22-3-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

D

6836

Date of Assignment May 1/18

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

$15.00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion 1st Depot Bn 2nd Quebec Regt 37 Dft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.PATRICK SULLIVAN,
307 CHAMPLAIN ST.,
2 QUEBEC,P.Q. 15 15.00
A-C 4040639 PTE WILLIAM JOHN DREW
3 FIFTEEN DOLLARS
4

	Date 1918	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS 4999-W-2.
9032	May	J. 1858		15	15		R wjb Mailed 25/6/18
~~9032~~	June	K 21683		15	15		R wj.
	July	Q. 34147.		15	15		
	Aug	K 36208		15	15		
	Sept	N. 46723		15	15		
	Oct.	O 55819		15	15	C	
	Nov.	K 58366		15	15	C	
	Dec.			15	15	C	

A/c ~~Closed~~ open

Ret'd per Araguaya

Date 30-10-18 F.X. 2-11-18

Clerk M. Cameron

Acct. Closed 30-11-18. Soldier Disc. 25-11-18. (Spec. Message MD 5)

M.R.O. Des. 22576 rendered 29-11-18. C.

CANADIAN
ASSIGNED PAY AUDITED

W Blair
AUDIT CLERK

DATE 15-5-19

AUTHORITY FOR NEW ACC'T. N.R. MD5 B2
N Gagné 21-5-18.

M. F. W. 128.
4COM. 6-7—1772-39-1141
1. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M.-F. W. 128.
400m.-1-17—1772 59-1141
L. L. 22320—M. & D. 7993.

Report No. _____ Army Form W. 3212.
(In books of 100.)

Regtl. No., Rank and Name } L-6 Drew 4040689 Age _____ Corps 20 Res

Disease _____ Hospital No 12 Can. Gen. Hosp

To Officer i/c Laboratory. Ward B Block Annex

Please carry out an examination of the accompanying specimen of urine

with special regard to Albumen - Sugar

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date Aug 27th 1918 Capt McBain
O. i/c Ward.

LABORATORY REPORT.

React acid
Alb neg

Sp gr 1014
Sugar neg

Uric Acid Crystals

Date of Examination 27/8/18 1918 A Montgomery capt
O. i/c Laboratory.

(S.O. 1452.) W. 5750/P821. 6,000 Bks. 3/18.—McC. & Co., Ltd., Ldn.—

LABORATORY REPORT.

D43

AUDITOR | PAYMASTER

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

M. OR S. S.

REGT. No. 4040689 RANK Pte NAME (IN FULL) Drew William John. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
✓		✓

ORIGINAL UNIT C.E.F. 1st 2nd Qué

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Qué TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 22.3-18 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY, $ 15.00 — DATE EFFECTIVE

PAYABLE TO Mrs. Patrick Sullivan RELATIONSHIP

ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 307 Champlain. Quebec

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Qué DATE 25-11-18 REASON Med. Unf. AUTHORITY D.02553. 22-11-18 IF ENTITLED TO POST DISCHARGE PAY yes.

D403

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																					
																																					Address. 307 Champlain Str. Quebec
																																					444 = 30 11/18
																																					445 = 27 12/18
																																					436 = 27 1/19
																																					50447 28/2/19

WAR SERVICE GRATUITY

	W.S.G.	S.A.	Total		W.S.G.	S.A.	Total	Soldier	Dependents
92 Days minimum	210.00 ✓	—	210.00 ✓		33.00 ✓	—	33.00 ✓	177.00	
					33.00 ✓	—	66.00 ✓	144.00	
				✓	34.10 ✓	—	100.10 ✓	109.90	
				✓	109.90 ✓		210.00 ✓	—	
	210.- ✓		210.- ✓		210.- ✓		210.- ✓		

27/2/19.

60m.-11-18 L. L. 51777. M. & D. 9585.

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

MEDICAL HISTORY OF AN INVALID.

S. D. No.

MILITARY DISTRICT No. 5 CENTRAL REGISTRY NOV 20

1. Station. Quebec
2. Regiment or Corps. 20th Res. Batt.
3. Regimental No. and Rank. 4040689 Pte
4. Name. DREW. WILLIAM.
5. Age last Birthday. 23
6. Enlisted on March 22nd 1918. at Quebec.
7. Former Trade or Occupation. Laborer.

8. General remarks on his :—
   (a) Conduct. Good.
   (b) Habits. Good
   (c) Temperance. Temperate

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date. 19/11/18

3D 7 Champlain St., Quebec

9. Service.	Years.	Days.	PERIODS. From.	PERIODS. To.
Canada				
1st Depot. Batt. 2nd D. R.			Mar. 22/18	Date

10. (a) Disease or disability. I- 2d Empyema — II - Undescended left testicle.
    (b) Date of origin. I- July-1918- — II - Congenital.
    (c) Place of origin. I- England — II - Canada
    (d) Cause. I- Foll. Pneumonia - II - Congenital.

11. Present Condition. (Most Important). (To include full description of present disabling condition or conditions.)
I- On July 1918 following Pneumonia developed an empyema for which he was operated in Brantford. Has just returned from overseas and is still weak. Present condition. Shows thickening of pleura (left) with diminished respiration at base and slight dulness. No cough, no expectoration.

II - Undescended, atrophied left testicle, causing pain on physical drill and bayonet exercise.
Unfit for Gen. Service

12. (a) Is the disability the result of service or climate? I- yes - II - yes
    (b) Has it been aggravated by intemperance, vice or misconduct? I - no - II - no

M. F. B. 227.

150 M—5-16.
1772-39-117.

1-D-182

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.) Scar over base of left lung - operation for empyema.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? 1- On duty 2. Off. 4.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. 1- yes 2. No guard in rain etc.

14. Treatment

Hospital in England.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? 1- No. 2- no

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? 1- 2 Permanent

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. —

18. State if for discharge on account of unfitness for Service.

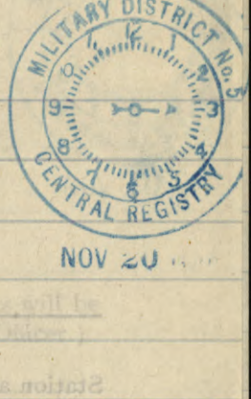
Yes

J. Dobbin Capt

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

S. D. No.



Does the Board concur with the preceding report? If not, give differing opinion.

10.

11.

12.

15. Yes

16.

17.

18 Is he unfit for Military Service. Yes

Recommendations :

Discharge as medically unfit for further military service

Signatures :— H T Chisholm Capt. President.

Members.

Station. Quebec

Date. 19/11/18

Date. 20-11-18

G. A. Brown Capt A.M.C.
for Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

.....

.....

.....

.....

.....

.....

.....

.....

.....

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.

150 m—5-16.
H. Q. 1772—93—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station .....

Corps .....

Regimental No. ..... Rank .....

Name .....

Disability .....

Date .....

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

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

Reserved for M.H.C.

Regt. No. 4040689 Rank Pte Surname DREW Christian Name WILLIAM John

Unit or Corps—(a) Overseas from United Kingdom — (b) In United Kingdom 20 Res. Batt.

Born at—Town Frampton County or Province Quebec Country Canada

Date of Birth—Day 6th Month March Year 1895 Age 23 yrs 5 months.

Joined at Quebec city, Date Mar 22nd 1918

Former Trade or Occupation Labourer

Permanent marks or peculiarities that will serve for future identification:

Scar over 9th left rib Posterior

MILITARY DISTRICT No. 3 CENTRAL REGISTRY DEC 3 1918

Height—feet 5 inches 3 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) William John Drew

Medical Report.

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

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

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

Disabilities Group (a): Debility

Disabilities Group (b): —

Disabilities Group (c): —

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT

H Lehman Pres

HOSPITAL REPRESENTATIVE, CANADIAN MILITARY HOSPITAL, BRAMSHOTT

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.	Empyema following Pneumonia	Bramshott Eng.	9.7.18
(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? no

(i.) As to Group (a) above? — 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— yes

(i.) As to Group (a) above? —

(ii.) As to Group (b) above? —

(iii.) As to Group (c) above? —

5. If a cause of disability was an injury received on Active Service, was it received— not applicable

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

(*iii.*) Was a Court of Inquiry held? (*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*).

Soldier arrived in England 24. 5. 18 on parade every day, until the day prior to Admission to No 12. Can. Gen. Hosp. on 9. 7. 18, sudden onset with chills, fever and Pain in left chest. Physical findings of Pneumonia at left base, on sixth day developed Empyema, operated on 14. 7. 18. Soldier very ill, slowly improved, ~~lung~~ abscess discharging for following month

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

Soldier not very well developed, fairly well nourished Respiratory System - Small amount of Expansion 32½ to 33½, Left lung Resonant on percussion, Tactile Fomitus diminished but palpable around scar, normal breath sounds through the rest of lung, some granulation around scar. Rt lung apparently normal breath sounds, no T.B. in Sputum Cardiac System normal, urinary System normal nervous System normal locomotory System normal.

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

(*ii.*) If so, state what. Left lung drained for Empyema.

(*iii*). Was one advised and declined? —

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

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? 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 27/8/18 191

Signed J. K. McBane Capt.
Officer in medical charge of case.

Station No 12 Can. Gen Hosp. Bramshott.

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

C. E. Cooper Cole Lt. Col. Comg. } Officer i/c Hospital } Strike out one of these.
~~S.M.O. Brigade~~

Dated at Bramshott Station, on 28. 8. 1918

* Delete if inapplicable.

PART II.

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

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

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

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

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

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
not applicable

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
not applicable

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

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

18. Remarks.
not July confirmed

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.

Date of Board 29 AUG 1918

Signatures of the Board. [signature] MAJOR C.A.M.C. *President.*
[signature] Capt
H. McKenzie Capt. C.A.M.C.

Station Bramshott.

Approved [signature] Major, D.A.D.M.S. for A.D.M.S., Canadian Troops, Bramshott Camp

A.D.M.S.

Dated at Bramshott. Station 29 AUG 1918

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.

53

Forms I. 1237/12

Synopsis

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	4040689	Pte	Drew	W. J.

Year	Unit.	Age.	Service.
1918	T.O. Res.	23	7/12

MILITARY DISTRICT CENTRAL REGISTRY DEC 3 1918

Station and Date.

No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

Disease Empyema Lt.

Enlisted 23-3-18

30/9/18 Arr in England 23/5/18

Rep. Sick 9/7/18

Hospital—

#12 C.G.H. 9/17/18

#5 C.G.H. 30/9/18.

Occupation: Laborer

History.

Had pneumonia left side followed by empyema - Drained by Opn 14/7/18. Recovery slow. Discharging for a month. Now debilitated. Short of breath on exertion - tires easily - Opn wound healed. Awaiting Sailing to Canada.

Manichle.
Capt Camc.

July 12-1918. Laboratory report Urine.

React: Neg Sp. gra- 1020
alb- Pos. Sugar- neg.

Microscopic-
Granula casts.
Epithelial casts
Pus cells
Epithelial cells.

A. Montgomery
M.O. I/C. Lab.

Aug 21-1918. Laboratory Report Urine.

React- acid Sp. gr- 1017
alb- neg. Sugar neg.
Uric acid crystals.

Sgn. A. Montgomery Capt.
M.O. I/C. Lab.

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

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

Station and Date.

July 12 - 1918 Laborary Report Sputum.

No T. B. Found.

Sgnd - A Montgomery
Capt I/C Lab.

July 13 - 18. Laborary Report -
Fluid from chest.

Polymorphia velear abundant.
Culture shows Pneumococci.

Sgd. A. Montgomery
Capt - I/C Lab.

Manickle Capt Came

Report No. _____ Army Form W. 3212.
(In books of 100.)

Regtl. No., Rank and Name } Drew Pte. 40400 [illegible]ge 23 Corps 20th Can.

Disease Influenza - Hospital Can. Genl. No. 12.

To Officer i/c Laboratory. Ward "A" Chest Annex.

Please carry out an examination of the accompanying specimen of Sputum -

with special regard to T. B.

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date July. 12-18. Capt. McVain
O. i/c Ward.

LABORATORY REPORT.

No T. B. found

Date of Examination 12/7/18 A. Montgomery Capt
O. i/c Laboratory.

(S.O. 1452.) W. 5750/P821. 6,000 Bks. 3/18.—McC. & Co., Ltd., Ldn.

2

LABORATORY SUPPORT

Report No. _____ Army Form W. 3212.

(In books of 100.)

Regtl. No., Rank and Name. Drew Pte. 40[illegible]0081 Age 23 Corps 20th Res.

Disease Influenza. Hospital Can. Genl. No. 12.

To Officer i/c Laboratory. Ward A^n Chest Annex.

Please carry out an examination of the accompanying specimen of Urine.

with special regard to General.

Nos. of previous Reports (if any) _____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date July 12-18. Capt. McDain.

O. i/c Ward.

LABORATORY REPORT.

React: ng Sp Gr - 1020.

Alb. - P.O.s. Sugar ng

Microscopic Granular Casts

Epithelial Casts.

Pus Cells.

Epithelial Cells.

Date of Examination 12/7/18 30 A. Montgomery

O. i/c Laboratory.

(S.O. 1452.) W. 5750/P821. 6,000 Bks. 3/18.—MoC. & Co., Ltd., Ldn.—

LABORATORY REPORT.

Report No.

Army Form W. 3212.
(In books of 100.)

Regtl. No., Rank and Name } 404008 Pte Drew Age 23 Corps 20 Res

Disease Pneumonia Hospital

To Officer i/c Laboratory. Ward Chest Army

Please carry out an examination of the accompanying specimen of fluid from chest

with special regard to ~~[illegible]~~ cells & culture

Nos. of previous Reports (if any) none

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 13/7/18 [illegible] Capt

O. i/c Ward.

LABORATORY REPORT.

Polymorphonuclear Abundant.

Culture shows Pneumococci

Date of Examination 14/7/18 A. Montgomery Capt

O. i/c Laboratory.

(S.O. 1452.) W. 5750/P821. 6,000 Bks. 3/18.—McC. & Co., Ltd., Ldn.—

20TH CANADIAN RESERVE BATTALION
ROYAL HIGHLANDERS OF CANADA

Bramshott, Hants,
9-7-1918.

No. 4040081

Rank Pte

Name Drew. W. J

I hereby certify I have examined the marginally noted ~~M.C.O.~~ MAN and placed him in Category.....D.III.

Previous Category.....A.II...

G S Powers Captain C.A.M.C.
M.O. 20th Canadian Reserve Battalion,
ROYAL HIGHLANDERS OF CANADA

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

D. CAN GEN M.B. LIVERPOOL

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
5371	~~4040081~~	Pte	Drew	W
Year	4040689	Unit.	Age.	Service.
1918	20 Res		23	42/12 3/12

Pte James Drew 4040170
Valcartier Camp Staff
1st Depot Batt
2nd Quebec Regt
Quebec Canada.

Station and Date.	Disease Influenza
Bramshott	
9.7.18	Complaint Cough, Pain in L. Chest 2 days.
P.H.	Mumps & measles. Scarlet fever at age of 18 yrs. No known Complications or Sequalae.
P.I.	Felt slightly below par upon retiring night 7th inst. Next day went on parade but was very weak & had a severe cough. Was "staggering" Sent off duty. Reported sick & was sent to Sick Detention Unit. Admitted to Hosp. c̄ diag "Influenza". Noticed blood in Sputum today.
P.E.	W.D. & N. flushed. Looks sick. Resp. rapid. Conscious & rational. Tongue heavy white coat Throat reddened. Left chest Excursion limited, dullness over left lwr. lobe. Breath sounds diminished & doubt come through at base posteriorly. Distant bronchial breathing at angle of L. Scapula. T.F. last & Vocal Fremitus plus. Abd negative. L. testis undescended. Ing. ring large. Extremities & reflexes normal.

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

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[1185] W11203/M1150 50m 12/16v 5 89 Forms/I. 1237/12

P.T.O.

12/7/18. Patient fairly well nourished, face flushed, cheeks partly cyanosed, breathing laboured & shallow, lips dry, tongue coated, partly delirious

Lungs - very limited expansion to ~~left~~ base of left lung, impaired resonance and increased tactile Fremitus over that area, whisper pectoriloquy point, with a friction rub external to the nipple, normal breath sounds in other lung

Heart - both sounds normal, apex in normal place

Temp 104 Resp 32 Pulse 120

13/7/18 Patient has taken a very sudden turn for the worse this am, Pulse very poor quality, given stimulants, moist râles and friction rub around the cardiac area, are very ~~large~~ loud, unable to hear the heart sounds, Large area of dullness with moist râles Point, left. needle inserted and small ~~area~~ amount of fluid obtained sent to Lab, base of other lung involved given ~~intrav~~ subcutaneous saline this am.

Needle inserted and fluid obtain - lab report loaded with Pus cells, Pneumococcus, operated on for empyema quite cyanosed, pulse poor quality after operation, given stimulants & subcutaneous saline.

14/7/18 Patient in a very critical condition, very little discharge from tube, cyanosed

15/7/18 Patient general condition much improved, friction rub between nipple and costal margin on Rt side

17/7/18 Improving, Physical finding of Pneumonia throughout base of Rt lung, very little discharge

21/7/18, Tube shorten previous day, considerable discharge from tube, patient somewhat cyanosed.

23/7/18 Condition improved, considerable discharge from tube, large area of dullness at base of other lung with diminished breath sounds.

Station and Date.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 20 Res

Military Hospital Bramshott

No. 4040689 Rank and Name Pte Drew W Age _____ Service _____

Disease Influenza Date of admission 9.7.18 Date of discharge _____ Result _____

Dates of Observation																																
Days of Disease	11.7.18		11.7.18																													
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	6 10	2 6	10 6	2 10	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																																
106°																																
105°																																
104°																																
103°																																
102°																																
101°																																
100°																																
99°																																
98°																																
97°																																
Pulse per minute							92		96		96		92	92	96																	
Respirations per Minute							24		28				28	24	28																	
Motions per 24 Hours																																

Sponge

Sponging

17 4 8 12 10 2

10 11½

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181. (373)

Signature _____ In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 20 Res 4040689

Military Hospital Bramshott

No. 404004 Rank and Name Pte Drew W Age 23 Service 4/12 3/12

Disease Influenza Date of admission 9.7.18 Date of discharge ______ Result [illegible]

Dates of Observation	9	10	11	12	13	14	15	16	17	18	19	20	21	22
Days of Disease	2	3	4	5	6	7	8	9	10	11	12	13	14	15

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

Pulse per minute	118, 114, 116, 100, 100, 116, 120, 118, 116, 108, 118, 112, 132, 132, 104, 104, 138, 112, 104, 120, 112, 112, 104, 110, 100, 106, 100, 112, 100, 108, 90, 100, 128, 104, 100, 88, 106, 106, 108, 110, 110, 108, 108, 108, 98, 100, 100, 108, 108, 106, 108, 110, 116, 120, 96, 122, 100, 98
Respirations per Minute	24, 24, 26, 28, 28, 32, 26, 22, 28, 36, 42, 40, 48, 60, 48, 44, 44, 56, 60, 44, 48, 48, 44, 52, 48, 46, 52, 48, 64, 56, 56, 40, 64, 38, 48, 44, 56, 52, 68, 60, 60, 48, 48, 56, 56, 48, 42, 42, 38, 48, 42, 36, 48, 88, 44, 38, 42, 36
Motions per 24 Hours	

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181. (373)

Signature [illegible signature] In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 20th Can Res

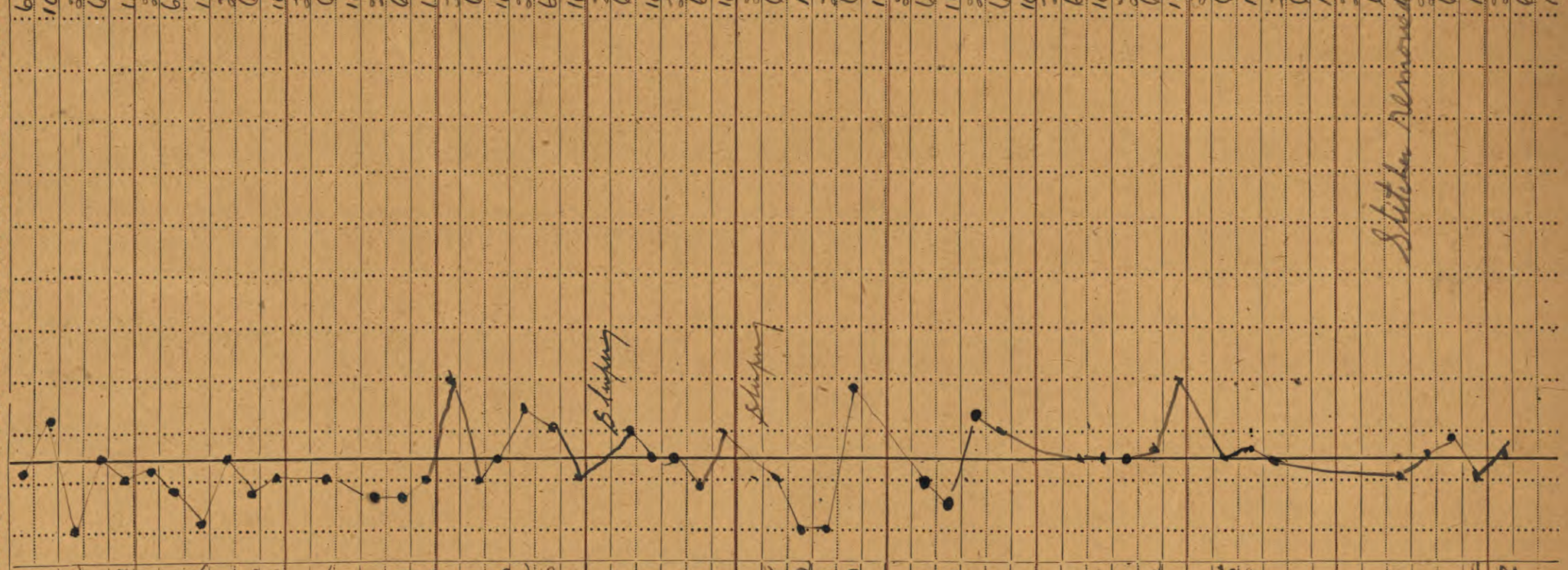
Military Hospital 12th C. G. H.

No. 40H069 Rank and Name Drew Rie W. Age 23 Service 4 2/12

Disease Empyema Date of admission 9-7-18 Date of discharge Result Improved

Dates of Observation	July 23rd	24th	25th	26th	27th	28th	29th	30th	31st	Aug. 1	2
Days of Disease	16	17	18	19	20	21	22	23	24	25	26

Temperature, Fahrenheit: 107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°



Pulse per Minute	Respirations per Minute	Motions per 24 Hours
78 96	42 32	
114 116	40 40	
94	26	
78	28	
74 92	28 20	
86 82	20 36	
100	42	
92	24	
90 80 96	20 26 36	
94 84 86	24 32 28	
82 86 88	46 36 33	
86 80 90 90	22 24 22 28 24	
88 82 90 102	22 24 38 22	
88 96 80 80	24 38 28 22	
80 82 96 102 92	22 32 24 24 24	
86 88 81	22 32 30	
88 98 88 88 82	28 36 24 24 24	

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 725)

Signature Kell Bane Capt. In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit — Time A.M. P.M.

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

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3726/M2818—2,000,000—4/17—H. & Sp. (16000)—A.F.B. 181/5 (E. 702)

Signature_____ In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps _____ Military Hospital _____

No. _____ Rank and Name _____ Age _____ Service _____

Disease Debility Date of admission _____ Date of discharge _____ Result Invalided

Dates of Observation	Aug. 20	21	22	23	24	25	26	27	28	29	31	Sept. 1	2	3	6	7	8	9	10	11	12	13	13	14	15	16	17	18	19	20
Days of Disease																														
Temperature, Fahrenheit	Time A.M. P.M.																													
107°															10 am 4 pm	1 am														
106°																														
105°																														
104°																														
103°																														
102°															Loraine.															
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute	72	86	72	84	82	88	72	76	76	84	86	48	78	48	76	80	72	74	76	72	88	64		80	72	80	88	84	72	80	86	76	80	86	68	84	88	90	72	80	72	74	80	78	82	82	84
Respirations per Minute	24	28	30	28	24	22	20	20	20	28	20	20	24	20	20	20	20	20	20	20	20	20		20	22	22	20	20	20	24	24	20	20	20	20	20	22	22	20	22	20	24	20	20	22	22	22
Motions per 24 Hours																														

Weight 124 lbs.

Weight 130 lbs.

Wt. W2788/M3813—2,000,000—4/17—H. & Sp. (10666)—A.F.B. 181/5 (H. 782)

Signature Kellaway Capt. — In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 1

Corps 20th Canadian. Military Hospital 12th

No. 404008 Rank and Name Unw Pte. W. Age 23. Service 4 2/12.

Disease Empyema Date of admission 9.7.18. Date of discharge Result

Dates of Observation	2.	3.	4.	5.	6.	7.	8	9	10	11	12	13	14	15	16	17	18	19
Days of Disease	10 2 6 10	2 6 10 2	6 10 2 6	10 2 6 10	2 6 10 2	6 10 2 6	10 2 6 10	10 a.m. 6 p.m.	10 a.m.									
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																		
106°																		
105°																		
104°																		
103°																		
102°																		
101°																		
100°																		
99°																		
98°																		
97°																		
Pulse per Minute	92 80 88	88 72 82	98 72 96	88 72 88	84 88 80	80 88 72	76 84 84	86 84 88	84 84 80	84 96 84	86 88	88	80	80	84	84	72	72
Respirations per Minute	22 22 22	22 20 20	24 38 22	22 24 20	20 22 24	24 24 22	24 24 22	24 24 22	24 24 22	24 24 22	24 24 22	22	18	20	24	22	22	20
Motions per 24 Hours																		

Dr Hart dismissed

Asprin & chain

Wt. W2728/M2213—2,000,000—4/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 738)

Signature In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps 20th Res — Military Hospital Nor 2 C & A.

No. 4040659 Rank and Name Pte Drew W. — Age 23 yrs — Service 6/12

Disease Emphysema Debility — Date of admission 9/7/18 — Date of discharge — Result Improved

Dates of Observation	Sept 21	22	23	24	25
Days of Disease	21	22	23	24	25
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
Pulse per Minute	84	88	48	84	80	84	88	92	78	48	46
Respirations per Minute	20	20	20	20	20	20	20	20	20	20	20
Motions per 24 hours											

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

Signature Kelly Bam Capt In charge of case.