160th O. S. Battalion, C. E. F.

TRIPLICATE

ATTESTATION PAPER.

No. 651190

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	Eyre,
1a. What are your Christian names?	Frank Henry.
1b. What is your present address?	Oliphant, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Oliphant, Ont.
3. What is the name of your next-of-kin?	Mrs. Catheline Eyre.
4. What is the address of your next-of-kin?	Oliphant, Ontario.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	July 24th, 1897.
6. What is your Trade or Calling?	Sailor.
7. Are you married ?	No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No.
10. Have you ever served in any Military Force? If so, state particulars of former service.	No.
11. Do you understand the nature and terms of your engagement?	Yes.
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Frank H. Eyre (Signature of Recruit)

Date January 6th 191 6. H. E. Hay (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Henry Eyre, 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.

Frank H. Eyre (Signature of Recruit)

Date January 6th 191 6. H. E. Hay (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 Wiarton, Ont. this 6th day of January, 191 6

A. D. Bauer (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Frank Henry Eyre. on Enlistment.

Apparent Age 28 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 10 ins.

Chest measurement.
- Girth when fully expanded ..... 38 ins.
- Range of expansion .. 5 ins.

Complexion ..... Dark,

Eyes ..... Blue.

Hair ..... Dark.

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

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

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

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 declares that he is not subject to fits of any description.

I consider him* fit. for the **Canadian Over-Seas Expeditionary Force.**

Date January 6th 191 5

Place Wiarton, Ont.

A. H. Smith
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.

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

A. Reid Lt.-Col. (Signature of Officer)

Date January 6th 1916.

REGIMENTAL DOCUMENTS

NAME Eyre, Frank Henry REGT. NO. 651190 UNIT 16th Bn. H. Q. FILE NO. 09866

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
						DEATH
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					Category
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					2
	PARTICULARS OF CHARACTER (A.F.W. 3226)					60
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					4 - 1
1	M.F.W. 192					4 - 1
1	M.F.W. 67					12 - 1
1	A.F.W. 3212					
2	Misc					
4	A.F.D. 1237					
2	A.F.B. 181					
2	A.F.W. 3172					
2	Medal					
1	[illegible]					
2	[illegible]					
1	[illegible]					

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

COPY ONLY

THIS IS TO CERTIFY that No. 651190 (Rank) PRIVATE CO

Name (in full) EYRE, Frank Henry enlisted in

the 160TH BATTALION, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at WIARTON, ONTARIO. on the SIXTH

day of JANUARY 16

HE served in CANADA, ENGLAND & FRANCE (WITH 1ST BATTALION)

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

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

Age 31 Years

Height 5' 9"

Complexion DARK

Eyes BLUE

Hair BLACK

Marks or Scars G.S.W. SHOULDER & BACK.

F H Eyre
Signature of Soldier

Date of Discharge

DISCHARGE SECTION
JUL 4 1919
No. 1 District Depot

J Schuch
Issuing Officer

LIEUT.
Rank

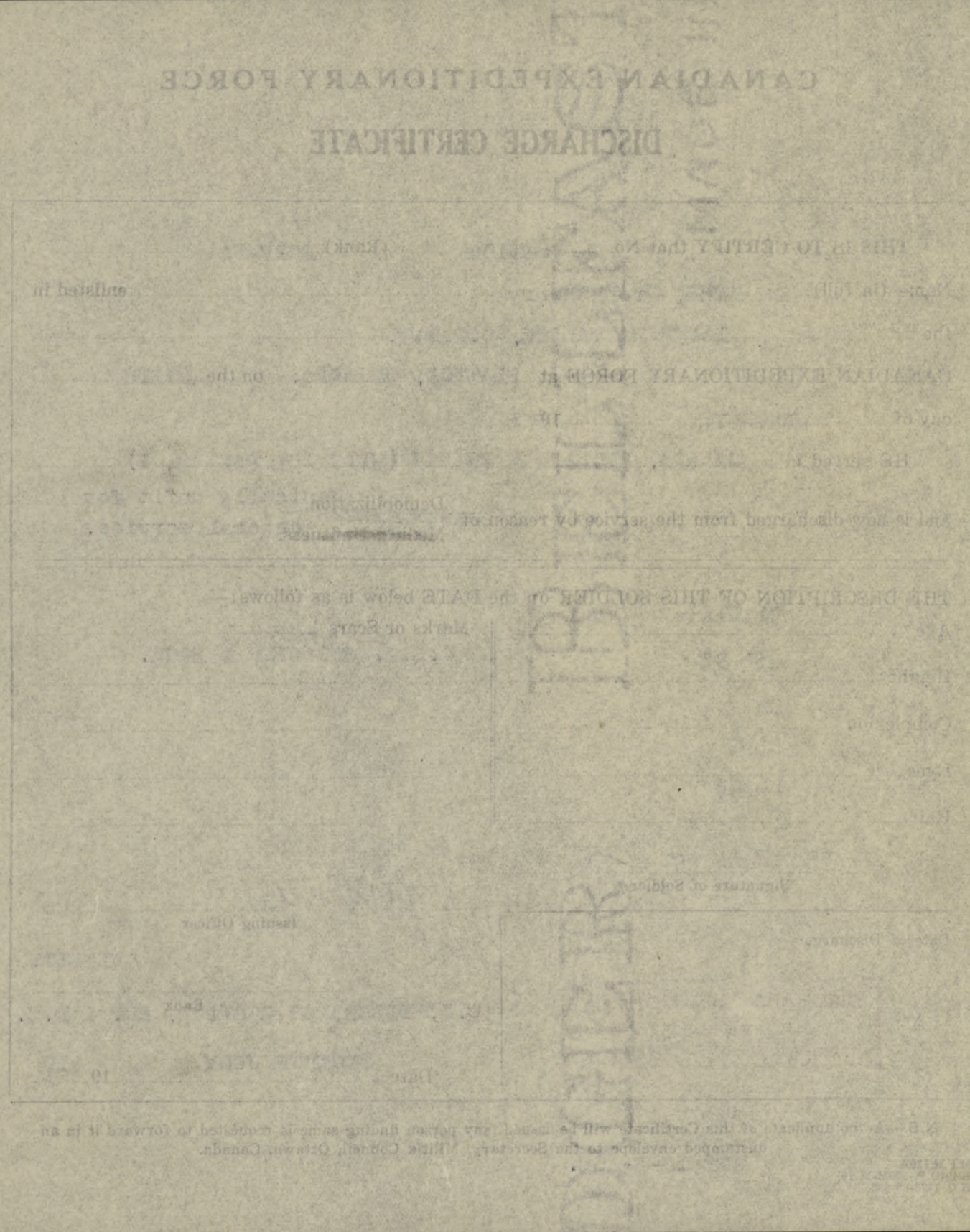
O.C. DISCHARGE SECTION, NO. I D.D.

Date FOURTH JULY 19 19

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

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

IDD 10-E-168.



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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. 651190 Rank Pte. Name Eyre. Frank Henry

Enlisted (a) 6-1-16 Terms of Service (a) ~~C. E. F.~~ Duration of War. Service reckons from (a) 6-1-16.

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

Extended | Re-engaged | Qualification (b) (Sailor)

CERTIFIED CORRECT. 7 MAR 1918 AN. LORDS, LONDON.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	17/10/16	
		Arrived - England	Liverpool	28/10/16	
1-3-18	O.C. 160th Bn.	C.O.S on proceeding OS to 1st Battalion.	Witley	28/2/18	D.O. part 2 #31. R. B. Whitehead CAPTAIN, ADJUTANT. FOR O.C. 160th CANADIAN INFANTRY BATTALION.
	C. B. D.	ARRIVED C. B. D. & SoS 1st Bn.	FRANCE	1/3/18	N. R. D 1/3/18 PART II ORDERS No 88 D 9.3.18
	C. B. D.	LEFT C. B. D. FOR	1st Bn	9/3/18	N. R. D 8/3/18
	O. C. ..... BN	ARRIVED 1st BN.	FIELD	11/3/18	B. 213 D 9/3/18
3.9.18	3 CFA.	Lw Back & Rt.	to CCS	2.9.18	H 5 of 33
3.9.18	JCCS	lw Shoulder & back.	to 12 Gen.	3.9.18	H 5674
4.9.18	1st Gen	Shoulder & Back	adm 1st Gen	4.9.18	H 5679
24.10.18	1st Gen.	"	to England.		L 9550.

(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.

EYRE, F.H. 651190

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.
24.10.18.	1st Gen.	Invalided Wounded posted to W stern Ontario Regtl. Depot, Witley.	Field Ft. Jan Breydel.	24.10.18.	G3083/6322 Lt = o No 118 a/30.10.18
2.11.18.	W.O.R.D.	T.o.S. from 1st. Bn.	Witley	24.10.18.	P II No. 259.
21.5.19	O/S.	Taken on strength No. 1 District Depot	London	D.O. 157	

for Lieut
for Lt-Col.

L Lewis LIEUT:
FOR LT: COL: I/C RECORDS, C.O.M.F.

W. F. Spruce Capt.
for O.C. No. 1 DISTRICT DEPOT

LONDON, ONT. DISCHARGED JUL 4 1919 ON DEMOBILIZATION Medically unfit for general servi

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

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. FILE

Attention of

NAME EYRE, Frank H.

Dept. of Veterans Affairs
War Service Records
NOV 18 1963

Ottawa Ont
Date Nov 15/63

SERVICE NUMBER Changed to 651190 WW1 C.P.C. No. 146983 W.V.A. No.

NAVY
ARMY X
R.C.A.F.

The DEPARTMENT has received information from

EX P.M.E. TEL MEMO. London, Ont. Nov 14/63

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Nov 11/63
Cause of Death
Place of Death Not stated

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~PAY~~
~~D.V.O.~~
H.O.

Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

DVA 24

G.C.S.Buxton.

Jan 13th 1918.

651190 L/c Eyre F.H. 1st Canadians R.Chest.

Report on result of X-ray Examination.

Excursion of left diaphragm normal. R.diaphragm Nil. Whole of right lung dense. Absence of casts diaphragmatic angle upper and outer 2/3. Right lung shows a sharply defined dense area suggesting organisation or incapsulated fluid between.

Duplicate

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

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(1) Name of Overseas Unit which Soldier joins ..... 160th Bruce Battalion .....

(2) Regimental Number ..... 651190 .....

(3) Full Name of Soldier ..... EYRE, Frank Henry .....

(4) Place of Birth ..... Oliphant, Ont. .....

(5) Are you married, or not ? ..... No .....

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

(b) Present Postal Address .....

(7) Are you a widower ? ..... No .....

(8) Have you any children ? ..... no .....

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

Also their names and ages .....

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No

If so, state name and address

(10) Is your Mother alive ? Yes

If so, state name and address Catherine Eyre, Cliphant, Ont.

(11) If your Mother is a widow Yes

Are you her sole support, or not ? No

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

Nil.

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

Nil.

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

Nil.

(15) Are you insured ? No

If so, in what Company ?

Have you made arrangements for payment of your Insurance premium

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

C. Kreer Lt-Col.
Officer Commanding.

Date 6th June, 1916.

160th Os. Battalion. C. E. F.

1 P.M. 10-Ey-2

ORIGINAL

LAST PAY CERTIFICATE

Regt.No. 651190 Rank Pte Name Eyre Frank Henry.

Corps 1 Bn who was Discharged

on 4-7- 1919 to

The following is a statement of the account of the above named from 1-7-19 to 4-7-19

Bal Dr from mon. of from L.P.C.		Bal Cr from mon. of from L.P.C.	188.95
ASSIGNED PAY: $30.916:	2.00	Regt.Pay 4 dys. @ $1/10	4.40
SEPARATION ALLOWANCE:		F'ld All. 4 dys. @ $	
		SEPARATION ALLOWANCE:	
		OTHER CREDITS: WSS.	70.00
OTHER CHARGES:		Clothing Allowance	35.00
PAYMENTS: $30.916:	296.35	Subsistence @ 80¢ per day	
Bal.Credit (to be pd.)	298.35	Bal.Dr.(to be deducted) (from soldier $) (from Dependent $)	298.35

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BND
at $ per month has been to by this Unit Nil	at $15 per month has been paid to 4-7-19 by this Unit	Subcribed $ Pa.by $ other Units pd.by this Unit $ Nil

Dependent or Beneficiary : Mrs Catherine Eyre

Address: Olephant. Ontario

REMARKS: D.O. 184 Discharged 4-7-19 on Demobilization. Med Unfit

Date of Enlistment: 6-1-16 If married and if Separation Allowance card submitted. No No

Paymaster,

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

District Depot

JUL 4 - 1919

Date:: London, Ontario. No. 1

LONDON, ONT.

J D Patterson Captain.

Paymaster, No.1 District Depot.

M. F. B. 239.

1 million—10.16.
H.Q. 1772-39-194.

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

No......

.....

.....*191*....

From.....

.....

To.....

.....

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 1

NAME OF SOLDIER Evans Francis Stewart

REGIMENT 129 Battalion RANK Pte No. 6-5-1190

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 July 2										1-5-16 14-17-19 17-30									T. D. Campbell Capt.		~~Partuppers & Lowers~~ Complete on discharge

Original

651190

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Eyre. *Christian Name* Frank Henry.

Examined { on 6th day of January 1916
at Wiarton, Ont.

Birthplace { ~~City~~ or Town ship Amabel.
County Bruce, Ontario

Apparent age 28 Years.

Trade or occupation sailor.

Height 5 Feet 10 Inches.

Weight 170 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 38 inches.

Physical development First Class.

Small-Pox Marks No.

Vaccination Marks { Arm Right. No Left. No
Number None.

When Vaccinated last Never.

(*a*) Marks indicating congenital peculiarities or previous disease Congenital Murmur at Junction of Rib & Sternum.

(*b*) Slight defects but not sufficient to cause rejection Slight Varicocele on left side.. Teeth trifle fixing..

Approved by A. A. Howell
Rank Lt Col A.D.M.S. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		29 OCT 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
10/6/16	Pos	M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
22/8/16	1st Inj.	M.O.
30/8/16	2nd Inj.	M.O.
7/9/16	3rd Inj.	M.O.
24/8/17	Tab.	J. A. W. Lord Lieut.

Enlisted on 6th *day of* January, 1916 *at* Wiarton, Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	160th Os. B'n. C. E. F.	651190		
Transferred to	1st B'n			FEB 28 1918

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London Ont	4. X. 16	Med Board	Fit Lt Gilbert Capt A.S.C.
Kinmel Park Mil Hosp.	2-4-9	Fibrosis of Rt Lung	Cat D. for Invaliding to Canada
London. Ont.,	25- 6- 19.	Gun shot wound of right chest.	H Lougher Capt Canada

Fit for special duty CANADA

Major. Pres.

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-4-9.

Surname Christian Name

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital. Day	Month	Year	DATES OF Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Isolation Hut Brancheast		20	1	17	9	2	17	Mumps	20	Recovery.	H.W. Travis Capt RAMC
Northamptonshire War Hospital DUSTON		14	10	18	10	1	19	Lobr. chest R front:	78	Aspirated several times. B. tr. elect. aspirated B. (unintelligible) Aspirated several times. B. tr. elect. found in culture from fluid in France - not found on expn. after admission to this Hosp. General condition good	F.J. Stuart Major, R.A.M.C. Ramsgate
Granville Can. Spec. Hosp Buxton Derbyshire		10	5	19	19	3	19	— Do —	69	Shrap. removed R. middle lobe 14 G.H. France. Dyspnoea on exertion. all 5th R. rib resected. Dulness anteriorly to 2nd rib i about Br Sds & VF & VR all over anterior aspect R. chest & anterior 1/3 of axilla from apex to base. Posteriorly dulness to base. Resonance & vesicl breath Br Sds down to angle Scapula. Heart normal. 24-1-19 Dulness same. Pus encapsulated & localised along anterior & outer aspect R. chest. 6-3-19 area dulness & absent Br Sds now further up back but Oper not favored. Transfer 9 G.H. Rhyl	L.C. Lanchester Capt Can M.C.
MILITARY HOSPITAL KINMEL PARK, RHYL		19	3	19	8	5	19	Fibroid Lung	50	D.T.C	
NO. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL.		8 MAY 1919			21 MAY 1919			convalescent			E.T. Frenchley Capt CAMC
"ARAGUAYA"		21	5	19	31	5	19	do		do	T. S. Tupper, Capt. CA.M.C.

Number 651190

Name Pte. F.H.Eyre

Unit D.D.1

Symptoms Soreness in the right chest

History G.S.W. right chest

Exposure No

Examination Large linear scar lower right chest behind. RIght chest laggs. Impairment over the lower right chest, Left chest is hyper-Resonant and emphysematous. Diminution of the breath sounds over the right lung. H.B. on the left.

Note. Did not find evidence of a clinical T.B. lesion at the present time.

Diagnosis Pulm. Debility following wounds.

London, Ont., M.D. No.1.

Date 23/6/19

Age 32

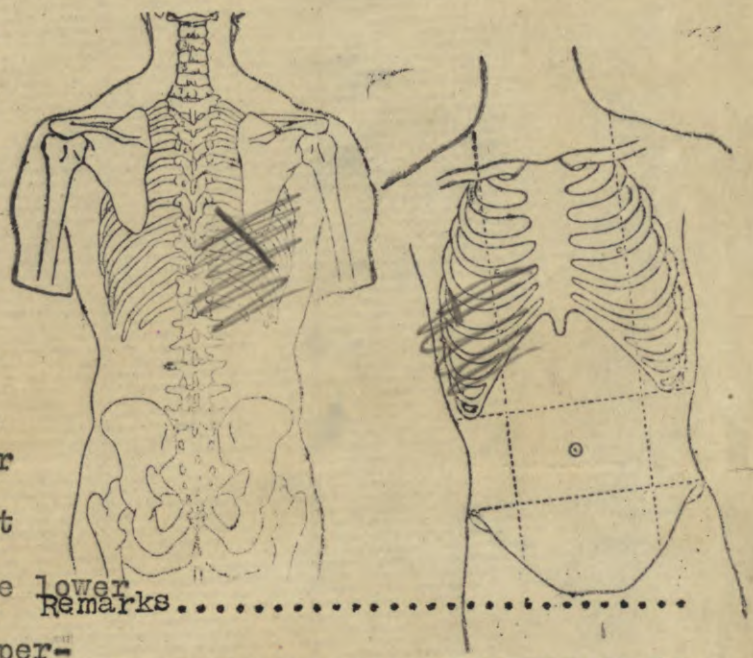
Temp

Pulse

Resp

Weight

Sputum



Remarks

Capt. C. A. M. C.

R—122
8,401—50,000—21-10-16.

LTR

Rank — Name EYRE, Frank Henry - Reg'l No. 651190 -

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

Place and Date of Enlistment Wiarton, Ont, January 6th, 1916. Place of Birth Oliphant, Ontario.

Name and Address, Next-of-Kin MRS. Catheline Eyre, -

Oliphant, Ontario, Canada. - Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 8423
File R.L.
Category CAN.MU
15

Report. Date.	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.
		ARRIVED IN ENGLAND S.S. LETAGAMA 28-10-16			
20-1-17	160 Bn	Admtd Isn. Hosp.	Bramshott	19-1-17	Pt II D.O. 20. Mumps
10.2.17	"	Duty " " "	"	9.2.17	" " 41.
1-3-18	160th Bn	S.O.S. to 1st Bn 9/s.	Witley	28.2.18	1st Bn No. 80 25.4/9.2.18. Pt II 80. 31.
7.9.18	WOR (1)	WOUNDED	field	Pte 5.9.18	C.L.A. 309
30.10.18	1st Bn	S O S to WORD	—	" 24 10/18	D O 118
2-11-18	H.C.R.D.	L.O.S. from 1st Bn.	Witley	" 24-10-18	" 259
27-5-19 ~~27-5-19~~	WOR.	Invalided to Canada.			
		S.C.G.H. L.L. 203 11/01	W. Dale	" 21-5-19	C.L.A. 317 7/ WORD P.O. 118 4/3.6.19

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.				

CASE HISTORY SHEET.

W.O.M.H. Hospital. London Station.

No. 651190 Rank Pte Name Eyre .F.H. Age 29

Unit # L.D.D. Completed years of service (Where and how long) C8 /12 E 7/12 F 6/12

Date of admission 2-6-19 Date of discharge 30-6-19

Diagnosis G.S.W. Rt Chest Place of origin France

CONDITION ON ADMISSION AND PROGRESS OF CASE

Wounded 2.9.18

Objective -

Long operation scar of rib resection on Rt side under angle of scapula (Apparently 9th rib) and about 8" in extent. Skin adherent to pleura

Subjective

Man's general condition good. Feels occasional pain in Rt side. Feels some weakness in R. side when carrying any weight or raising hand above head.

Movements of R. arm practically normal but lacking in power at shoulder 25%.

23/6/19 X-Ray report A 14"x17" plate was made of the chest. The dorsal spine shows a left lateral curve. 4" or 5" is missing from the right 9th rib behind. The bronchial tree throughout the whole chest is decidedly thickened. The right pleura is markedly thickened at the base and adhesions along the middle portion of the side. The lung is collapsed slightly along the entire length of the middle & lower lobes. The heart is displaced to the left. There is emphysema in the left lower lobe.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

TREATMENT (Especially any specific or special form)

CONDITION ON DISCHARGE, (and disposal made of case.) No fluid can be seen.

(Sigd) A.B. Kinnear Capt. R.A.M.C.

Boarded on 28.7.19 for Special duty - Command

Discharged

Date 30-6-19 Cat C

J. J. Walker Capt.
Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

(B.W.C.N.)

e 9.401.

23/6/19. Examination. Large linear scar lower right chest behind. Right chest laggs. Impairment over the lower right chest. Left chest is hyperresonant and emphysematous, Diminution of the breath sounds over the right lung.
N. B. on the left.

Note Did not find evidence of a clinical T. B. lesion at the present time. Pulm. debility following wounds.

(Sigd) D. Craig Capt.

London, Ont., June 23rd. 1919.

Capt. Chapman.

Pte. Eyre, F.H. # 651190.
X-Ray report No. 812. chest.

A 14" x 17" plate was made of the chest. The dorsal spine shows a left lateral curve. 4½" or 5" is missing from the right 9th. rib behind. The bronchial tree throughout the whole chest is decidedly thickened. The right pleura is markedly thickened at the base and slightly along the whole right side. The lung is collapsed slightly along the entire length of the right border. The heart is displaced to the left. There is emphysema in the left lower lobe. No fluid can be seen.

C. Clute

L. H. Swiomer Captain,
Officer i/c X-Ray.

PA, 147

Forms I. 1237 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T4959	65/1190	L/c	Eyre	J
Year	Unit.	Age.	Service.	
	1 Cons.	29	33/12	8/12

Station and Date.

Disease GSW Rt Chest

Occupation Sailor

19/1/19 Enlisted Jan 6 - 1916

England Oct 1916

France Apr 1918

Wounded Sept 2 - 1918

Returned to England Oct 24 - 1918

Hospitals. 7 C C S Camiers 14 Gen Imperial, 7 weeks. Wks Hospital Dublin 7 Hampton. 10 weeks. G C S Hr Buston 10/1/19.

Medical History

Went to France in Good condition was wounded Sept 2nd-18 on Arras Front from Shrapnel which struck Clin just below Rt Scapula and penetrated Rt Lung. At 14 Gen Imperial Hospital the wound was removed. from middle lobe of Lung. Man states he expectorated a little blood following the wound.

Present Condition.

Subjective- The man states he is troubled with Dyspnoea at times especially on exertion states he has a little pain at times over side of Rt Chest.

31/6 Objective- Scar on post surface of R. Chest

25/28/24/7 which extends obliquely downwards & outwards from a point about midway on the Inner border of scapula. parallel the Inf. angle of scapula to the axilla of chest scar is about 8½ inches long. Firm. On Examination just below scapula appears as though a portion

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

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

Station and Date.	
	n all y 5 Rt had been inserted.
	Expiration 34½ Respiration 38.
	Dullness over whole of anterior & lateral aspect of Rt Lung. Diminished Breath sounds. Diminished Expansion of Lung.
Medical History F.M.C.	Report from F.M.C. 23-9-18 - 24 sputum slightly blood stained fluid. Lab. Report Endroat B. Welch No organisms - Culture Pure albus.
	30-9-18. Resp. 26. Pure culture. B. Welch.
	3/10/18. - Dullness behind 5 Rt inst absent Breath sounds, - V.R.
	7/10/18. Respiration 17. Rt chest dilated - Lab Report. Pus organisms.
	22/10/18 - General condition improved no change in Physical condition (signs) No movement Lung sounds Heard - Chest. Circumference & Expansion much diminished & Temp. improved.
	X Ray of R Chest ordered. 13/1/19.
17 JAN. 1919	Wg. Cdr. Capt.
	For report & Exam by Col Thackray
	To Med Exam Room Dr Lee
20 JAN. 1919	Chest - Crepitations - Note is well below 3rd rib and flat below the 5th rib. & absent Breath sounds. V.R. & V.F. retained. This maintains about same as before as to dullness line. Posteriorly there is slight dullness at base but above the 8th rib note is resonant and Breath sounds well heard. Marked fibrosis of Rt Lung & pleura anteriorly. & good condition over front surf. There is very little limitation of Lung. Heart - normal. Lung in position & action

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2

Mrs Catherine Eyre

Name of Soldier Eyre J H

657190 Pte 160 Batt

L. L. Job 4503. –Req. 6832.

15-00

OCT 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		Z 22822	15-	
Nov.		N 28398	15	
Dec.		R 33947	15	
Jan.	1917	037937	15	037937 Remitted. 15
Feb.		043927	15-	
March		R 47669	15	15
April		S 1510	15	15-15.
May		K 7662	15	
June		I 14403	15-	15-
July		Q 21430	15-	B.
Aug.		W 30449	15-	B
Sept.		V 34456	15-	B
Oct.		L 41553	15-	
Nov.		V 47034	15-	
Dec.		56939	15-	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

To Whom Mrs Catherine Eyre

Address Oliphant
Ont

OCT 1 1916

Rate 15.00

By Whom Assigned Eyre FH

Regtl. No. 651190

Rank Pte

Corps 160 Batt
6 Co

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 4 ACCOUNT

MILITIA AND DEFENCE 6-1-16

M. F. W. 11a.
5'm. 6-16.
1772—39—818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2. Mrs Catherine Eyre

Name of Soldier Eyre. F. H.

W. Mother

651190.

Pte. 160 Bn

L. L. Job 4503. Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		M25223, 236	736	Mailed 2/12/16
Jan.	1917	J28334	20	20
Feb.		J31576	20	20
March		J34789	20	20
April		K976	20	20
May		K4308	20	20
June		O7333	20	20
July		V10849	20	20
Aug.		S13846	20	R
Sept.		R17603	20	Bo
Oct.		W19622	20	M
Nov.		Z22207	20	M
Dec.		H26978	20	Hd
Jan.	1918			
Feb.			496	
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

6-1-16

L. L. Job 450 — M. & D. 6332.

MILITIA AND DEFENCE

80

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs Catherine Eyre

Address Oliphant
Ont.

Relation to Soldier wife, child or mother } W. Mother.

Name of Soldier Eyre F. H.

Regtl. No. 651190.

Rank Pte.

Corps 160 Bn.

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan. 16	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT 51

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

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Eyre	F H.	651190

RANK	UNIT	CO.	TROOP	BATTY.
Pte	W.O. 1.			

HOSPITAL — DATE OF ADMISSION

14 Gen W increm — 5-9-18.

1. Northamptonshire War. Granville Buxton. — Hosp. 24.10.18 — 11.1.19.
2. — Hosp.
3. 9 b/11 Kinmel Park. — Hosp. 20.3.19
4. 5 b/H Liverpool — Hosp. 9.5.19

DIAGNOSIS

1. Gsw Shldr + back. a.s. + Fibrosis Lt Lung
2
3.

DISPOSITION — DATE — REMARKS

(1) 7.9.18 R 30 9. Camp ill 5.9.18.
11-9-18. a/312-
14.9.18 C 3 19 "Approved" 14-9-18. Removed from Camp. ill - 18.9.18.
30.10.18 B 3250
14.1.19 B 412.
27.3.19 B 477.
14.5.19 B 519
24-5.19- B 517 Invalided to Canada 21.5.19.

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

EPITOME OF HOSPITAL TREATMENT

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

*Name EYRE, Frank Henry Rank Pte. Regtl. No. 651190

Fyle Depot IDD 10-E-168

Original unit 160th Bn Present unit 1st Bn M. or S. S Age 32 Religion C. of E. Ref. H.Q.

Port, ship, and date of arrival Portland, Maine. U.S.A Araguaya 30-5-19

Next of kin Mother - Mrs. Catheline Eyre, Oliphant, Ont.

Address on leave

Address on discharge P.O. Oliphant, Ont.

Transportation issued Yes / No Date Character on discharge

Previous occupation Sailor Date and place of enlistment January 6th, 1916, Wiarton, Ont.

Diagnosis GSW of right chest. Date of Medical Boards 25-6-19, London, Ont.

Date. T.O.S.	Remarks	Pt. 2 Order No.
21-5-19	No.1 D.D.	
2-6-19	Posted to Hosp. Sect. (WO.M.H) and granted furlough with subs. to 16-6-19	157

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

(over)

Date.	Remarks.	Pt. 2 Order No.
18-6-19.	ADMONISHED FOR A.W.L. from 12.01.a.m.17-6-19. to.	
	9.00.p.m. 17-6-19. I days pay R.E.W.	170.
JUN 20 1919	Posted to Casualty Coy.	182
4-7-19	Discharged from H.M.S. On demobilization Medically	
	unfit for general service. (P.D.P.)	184

M.F.W. 192
150M—6-18.
1772-39-1243.

No. 651190. Rank Pte. Name Eyre. F. H.

T. O. S. 6-7-16 (Bn 5-6-1-16) Unit 160th Battalion

M. D. 1,

PAID FROM 1916.	PAID TO 1916.	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
Jan 6.	Jan 31.	✓		
Feb.		✓		
Mar		✓		
Apr.		✓		
May		✓		
June		✓		
July		M.		
Aug.		✓		
Sept.		✓		
Oct.		M.		

UNIT SAILED
OCT 17 1916

Form R. 149.

Name EYRE Frank Henry

Rank Pte Reg. No. 651190

Unit 1st Bn

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
B 1918.						
5. 9	14 Gen Hosp Wimereux		G.S.W. shoulder + Back.	H309	H301	P 137551
	DANGEROUSLY ILL					
9. 9	IMPROVED		do	H312	H307	P 128519
18. 9	Removed from Danger List		do	H319	H328	Pte 741
24. 9	Wd. & Sick N'hampton.			B350		30068
11-1-19	Cram Camp Shr					
	Rustington		do	B412		W.D.
20-3	9 Can. Gen. Hosp. Kinmel Park		do.	B472		8893.
9-5	5 Can	Kirkdale	do		B357	10506
		Liverpool				
		Lusitania				
21-5	Invalid to Canada			B517		5996
	SL 503 to 101	do				

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

REGT'L. NO. 65-1190.

H. Q. FILE NO 649

NAME Eyre Frank. Henry.

RANK AND CORPS Pte. 1st. Bn. form. 160th

FOLLOWS NO.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
Nopx.		Catheline Eyre (Rus) Oliphant Ont
H 301	8-9-18	Dang. ill 14 Gen. H. Wimereux
HLa 309	7-9-18	Sept. 5th 1918. G.S.W. back, shldr.
H 307	13-9-18	
H. 307 11-6	13-9-18.	Cond. imprvd. 14 Gen. H. Wimereux Sept. 8th/18. G.S.W. Back. Shldr.
H. 328	21-9-18	Remvd. from dang. ill list No 14
H La 319	19-9-18	Gen. H. Wimereux Sept. 18. 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
A 312-1.	#14 Gen. Wimereux	9-9-18.	GSW shear of back improved (dysp ill)
B550	War Dublon Northampton	24-10-18	GSW. Shear of Back
B4124	Gran. Can. Spec.	11-1-19	" " "
B4729	Gen. Gen. Eastan	20-8-19	" " "
B5099	Can. Gen. Liverpool	9-5-19	" " "
B5179	Invalided Toledana	21-8-19	Fibrosis L. Lung
	D.S. 5-03 M.D. 1.		

C/

SOS Demob 4-7-19 Med Unfit
No. 184-3-7-19 188

NAME Eyre Frank Henry.

RANK & No. Pte 651190.

CORPS 160th. Batt.

ENLISTMENT, PLACE Wiarton Ont. DATE Jan. 6th. 1916.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada, Oliphant Ont.

NEXT OF KIN Eyre Catheline

ADDRESS OF NEXT OF KIN Oliphant Ont.

DISCHARGE, PLACE DATE

RIC 30-5-19 338/4. Pte.

M. F. W. 22. 100 m.—9-15.

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

REMARKS:

Form DMS 1401.

A. & D. CARD

HOSPITAL.

AT

A. & D. No. T/4959 Pl. of Action

Rank L/c Reg. No. 651190 Unit 1 Cans. Sick or Wounded

Name Eyre. H. Age 29 Religion C of E

Place in Hospital B

Diagnosis G.S.W. Rt Chest

Admitted 10 JAN 1919 From War Hosp Duston

Discharged 19-3-19 To

Transferred 9th Can. Gen. Rhyll

Service at Home 5 1/2 In Field 6 1/2

Results

69 days

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

P.T.O.

REMARKS.

Form DMS 1401.

HOSPITAL ✓

A. & D. CARD

AT France T51

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

RANK L/Cpl. REG. No. 651190 UNIT 1st Battn. SICK OR WOUNDED

NAME Eyre F. St. AGE 29 RELIGION C.E.

PLACE IN HOSPITAL Ward 4

DIAGNOSIS G.S.W. Rt. Chest. (Fibrosis)

ADMITTED 19-3-19 FROM Granville - Buxton

DISCHARGED ..... TO .....

TRANSFERRED 8.5.19. To 105 Can Gen. Hosp Kirkdale

SERVICE AT HOME 3y 12 IN FIELD 2y 12

RESULTS .....

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

Init.

REMARKS.

1 Orig MH3, DOS2, 31237's 2-1815's to board 4 20-3-19

Orig MH3, 3MCS, 2(181) DOS2 3MFB 2275 AP 122, 103 LHC to No 5 Can Gen Hosp Kirkdale 8/5/19 Jr.

3243 A to board 4 for Completion 13.5.19.

LEDGER No. 501 SERIAL No. eg.401

REG. No. 651190 NAME Eyre. F. St.

RANK Pte CORPS # 1. W. R. AGE 29 SERVICE CE 7/12 E 7/12 7/12

	HOSPITALS	DATE OF ADMISSION
1	O.S. W. O. M. H.	London. 24-6-19
2		
3		

DIAGNOSIS G.S.W. Lt Chest

TRANSFERRED TO

DISPOSITION 30-6-19 Dis CATEGORY

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

P.T.O.

REMARKS:

HISTORY

DATE

Number 651190 Rank Pte

Surname EYRE

Christian Name Frank Henry

1st Bn C Inf Theatre of War France

Date of Service 28-2-18

Remarks

Latest Address ~~Clapham, Ont.~~ RR No 3 Kinsten

Roll No. B Page 1636

200m.-2-21.M.

CASUALTY BRANCH

(FILES)

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

HISTORY	DATE

DESP. SEP 2 1922
REGN. NO. 3578[illegible]
B+V RETD 15-4-22
DESP. JUL 29 1933
REGN. NO. 68[illegible]

M. F. W. 2536
100m 5-28. 1772-39-1311

P. 559

MARRIED OR SINGLE S

PLACE OF BIRTH Amabel Bruce Co Ont

NAME AND ADDRESS OF NEXT OF KIN Catheline Eyre
Oliphant Ont

RELATIONSHIP OF NEXT OF KIN mother

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	AUTHO

ADMISSIONS TO HOSPITAL, &c.

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

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
Nov 1-30 16	30	1.00	30		30	10	3							12 95	12 95						
Dec 1-31-16	31	1.00	31		31	10	3	10							34 10						
1917 Jan	31	1.00	31		31	10	3	10							34 10						
Retired Feb	28	1.10	30	80											30 80			310	2/2/17		
Mch	31	1.10	34	10										12 95	14 4 95						
Apl	30		33												33.						
May	31		34	10											34 10						
June	30		33	.											33						
July	31		34	10											34 10						
Aug	31		34	10											34 10	226	17/6				
Sept	20		22	—											22	295	30/6				
																376	19/7	573	31/8		
																443	31/7	505	14/9		

OTIONS, &c.

EFFECTIVE DATE	AUTHORITY

REG'L NO. 651190 RANK Private NAME Eyre Frank Henry ✓

IF IN PERMT. CORPS WHAT UNIT } UNIT 160th Bn TRANSFERRED TO ~~1st Bn~~ DATE AUTHORITY ~~B03 1/3/18~~

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Wiarton Ont TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 6/1/16 TRANSFERRED TO DATE AUTHORITY

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

PAYABLE TO Mrs. Catharine Eyre Oliphant Ont RELATIONSHIP mother

OSPITAL, &c.

NAME OF HOSPITAL

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)

C1 C.

QUITTANCE ROLLS 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
													12 95				ass'd pay paid by A P Branch for Oct and recovered on Oct pay list (Canada)
730 11-16						19 47	4 87			15		39 34	6 61		6 61		Balance from Canada
										15		15	25 71		15 50	10 21	
										15		15	44 81		16 00	28 81	
0 29/2/17							43 80			15		58 80	16 81		16 00	81	
						19 47	48 67			15		12 8 14 15	35 91		Nil	35 91	
										15		15	53 91				
										15		15	73 01				
										15		15	91 01				
										15	67	15 67	109 44				q#005-1665-15/6/17.
						7 30											
						14 60				15		36 90	106 64				
3 31/8						7 30	14 60										
5 14/9						12 17	7 30			18		56 37	82 27				

651190 Pt. Eyre F H.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3
MONTH	PARTICULARS		CR. 1	CR. 2	PARTICULARS						DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.									
Sept	Bal Bot		~~83 27~~																							
															83 27											
Oct	31 dy Pt Pay @ 1/10		34 10			Can a/c											15									
						7 dys SP 2 Do 2 HG 4/10/17									7 70												
						a/R 650 160 Bn 17/9									730												
						a/R 721 160 Bn 30/9									1947												
			34 10												2677	7 70		15		67 90						
Nov	30	P P	32	-														15								
						a/R 6H 160 Bn 31/10									3407												
						a/ 797 do 16/10									730												
						a/R 930 do 15/11									730												
															4867											
Dec	31	P P	34 10			Can a/Pay									4867			15	56 33							
1918			67 10															30								
Jan		PP	34 10			Do.												15								
						a/R 1068 160 Bn 5/12									484												
						" 999 " " 30/11									1944												
															2434											
						1102 Do 17/1									1885												
			34 10												4881			15		3162						
Feb	28	P P	30 80			Can												15	47 42							
			30 80															15								
March	31		34 10			C a P												15								
						1302 28/2 160 Bn									(10) 973												
						1776 5/3 1 Bn									(28) 535												
															1508											
						1862 17/3 -									446					4698						
			34 10												1954			15								

H PAYMENTS			Assigned Pay	Other Charges	Total Debits	BALANCE		Pay Withheld or Deferred	Pay Available for Issue	REMARKS	
	3	4				Credit	Debit				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

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

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

Mrs Catherine Eyre (mother)
Oliphant Ont.

Stopped eff. 1/5/19

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
~~21/4/19~~	~~V 89~~	~~9 Cdn Hosp £5.~~	~~24 33~~				

PARTICULARS OF RENDERING NON-EFFECTIVE: ~~Transferred~~ Invalided to Canada 1/5/19 per List K.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
March	Bal Fwd			
April	30 P.P.	33 -		AR 39 D 4116 18 V
				Can AP.
				✓ 129. 29.4.18 ✓
May	31 P.P.	33 34 10		Can a.
				✓ 182 7.5.18 -
				AR. 226 18-5-18 1st
June	30 -	34 10 33 -		Can A P
				AR 344 4.6.18 Sn
				43x 17.6.18 ✓
July	31 -	33 34 10		Can AP.
				✓ 68 2.7.18 ✓
				✓ 203. 21.7.18 ✓
Aug	"	34 10 34 10		CAP
Sept	✓	34 10 33 -		CAP
Oct	✓	33 34 10		C.A.P.
				Hosp Rem 48375 31-10-18
Nov	✓	34 10 33 -		C.A.P.
Dec	✓	34 10		C.A.P.
Jan	-	34 10		C.A.P.
		101 90		
Feb	.	30 80		AR 13878 21-1-19 Sp
				✓ 14782 12-2-19
				C.O.P.
March	"	34 10		C.O.P.
				AR 16315 12-3-19
		644 90		
				Toro

ED * ~~ENGLAND OR~~ CANADA.

VE 1-10-16

T:- #15.00

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- EYRE Frank Henry

NUMBER:- 651190

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

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.

Catherine Eyre (mother)
Elphant Ont.

Ceased-eff. 1/5/19

UNIT AND TRANSFERS

ORIGINAL UNIT:- 160th Batt.

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
NR.	28/2/18	25/4/18	1 Bn Can Sec
	1/8/19		

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

NUMBER A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
181	~~G.C.G.H.Q. 1. £5.~~	~~24 33~~				
					Invalided	

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		
	L.P.& Bal. 210.			

ULARS OF RENDERING NON-EFFECTIVE: ~~Transferred~~ to Canada 1/5/19 per List K.P.A.9. 105 Can Gen Hosp Kinmel Pk to Rhyl 25/4/19 ~~Medical~~ M.D.2.

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Bal Fwd								46 98		
30 P.P.	33		AR 39 2/4/18 1st Bn	4 46						
			Can AP.				15			
			" 129 29.4.18 "	3 57				56 95		
31 P.P.	33 34 10		Can AP.	8 03			15 15			
			" 182 7.5.18 "	4 46						
			AR 236 18-5-18 1st Bn.	3 57				68 02		
30 "	34 10 33 "		Can A P	8 03			15 15			
			AR 34 4.6.18 Bn	4 46						
			" 33x 17.6.18 "	3 57				77 99		
31 "	33 34 10		Can AP.	8 03			15 15			
			" 68 2.7.18 "	3 57						
			" 203 21.7.18 "	4 46				89 06		
"	34 10 34 10		CAP	8 03			15 15	108 96		
"	34 10 33 "		CAP				15 15	126 16		
"	33 34 10		C.A.P.				15 15			
			Hosp Rem 48375 31-10-18	4 87				140 39		
"	34 10 33 "		C.A.P.	4 87			15 15			
"	34 10		C.A.P.				15	177 49		
"	34 10		C.A.P.				15	196 59		
	101 20						45			
"	30 80		AR 13828 21-1-19 Eng Hosp	4 87						
			" 14782 12-2-19 "	4 87						
			C.O.P.				15			
"	34 10		C.O.P.	9 74			15			
			AR 16315 12-3-19 "	4 87				216 88		
	64 90			14 61			30			
			Forward							

NUMBER 651190. RANK Pte. NAME EYRE. F. H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE
				Bal Brot Forid.					216 88
Apl. 30	P. P.	33 -		Cash.				15 -	
				AR 481. 23-4-19. Kinmel Hosp.	24 33				
				✓ 3491 19-5-19 ✓ Enad 11	9 73				
				✓ 3047 13-5-19 ✓ ✓ 11	4 87				195 95
		33			38 93			15	
				505 Bk Cam Bk 21/5/19 Bk	503	160	BN		

RANK Pte. NAME EYRE. F.N.

Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
		Bal Brot Fwd.					216 88		
33 -		Cash				15 -			
		AR 481. 23-4-19. Pymt of Hosp.	24 33						
		✓ 3491 19-5-19 ✓ Encl 11	9 73						
		✓ 3047 13-5-19 ✓ ✓ 11	4 87				195 95		
33			38 93			15			
		505 Bk Cam Sk 21/5/19 Sk	503	160	BN				

Jmouney 25/4/19

216.88.

C. 33. 38.00

249.88

Dr
AR. 15 =
Cost 24 33

39.33

C. Bal. 210.55

Date of Enlistment

6/1/16

RATE OF SEPARATION ALLOWANCE

~~20~~	25	~~30~~	
	1-12-7	1918	
	Pte 3257	Pte 2763	
		Mo 37208	

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

E 2972

Date of Assignment

Oct 1/16

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 651190

Rank Pte Promoted Reverted Discharge

Soldier's Name F. H. Eyre.

Battalion 160 Batt. C. Co.

Beneficiary Mrs Catherine Eyre

Relationship M. Mother

Address

~~MFW 2554 8-8-18~~

PARTICULARS OF ASSIGNMENT

Name Mrs. Catherine Eyre.

Address Oliphant Ont.

Change of Address

1

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total	
Dec 31-17			476	225	701	
Jany	67589	R	30	15	45	S
Feb	91880		25	15	40	
March.	131764		25.	15.	40	
apr	13754	X		15	15	P.M.O.
May	15541	Q		15	15	P
June	26317	K		15	15	P
July	32299	O		15	15	P
Aug	41075	K		15	15	P
Sept	48091	R		15	15	P
Oct	55352	Q		15	15	S
Nov	57955	L		15	15	S
Dec	6238	N		15	15	S
Jan	71360	Q	~~30~~	15	~~45~~ 45	S
Jan	4338	O		15	15	T
Feb	78601	Q		15	15	T
mar	91566	J		15	15	T
apr	21822	O		15	15	T
May	7574	L		15	15	
			556	480	1036	

REMARKS Fyle 5664-F-1

5664-F-8

SA. suspended Mar 31/18 Woman refuse to furnish S.D. File 546 4-F-1. 28-5-18

SA Closed 31-3-18 21-3-19 as per Ruling S.B. P.M.C.

, M.R.O. 6129 rend. 30. 1. 19

13315 N 6238 mailed 14/1/18

cand. 7368 18. 1. 19

16915 mailed 23. 1. 19

A/c Closed 31/5/19

Ret'd per Araguaya

Date 30/5/19 M.F.W. 187 11/6/19

Clerk E. Boyd

AUDITED. 4/9/19

#1 MRO 12300 8

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22920—M. & D. 1983.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 7688.

880. CS 186. W.503/P.36. 20,000 Pads. 10/17. N.P.A. Ltd. E. 1955.

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

Y.C.S. Burton. Hospital.

Ward 17. No. of Bed 632 Date Jan 13-18

Reg. No.	Rank and Name.	Corps.	Part to be X-Rayed.
65190.	L/C. Eyre F. H.	1st Canadians	R Chest.

Short History of Case.
(To be completed by M.O. i/c case.)

Wounded Sept 1918.
Resection of 5th rib for foreign body removed. Shrapnel.
23/9/18. Aspiration 24 oz.
30/9/18. Aspiration 6 oz.
7/10/18 aspiration 17 oz.
Dullness over axilla + bronchial area of lung.

15+12

Signature of M.O. W. Cardcapt

Date Jan 13-18

age 29

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate 8114

Excursion of left diaphragm normal - Right diaphragm nil - Whole of right lung dense - absence of costo diaphragmatic angle - upper & centre 1/3 right lung shows a sharply defined dense area suggesting organisation of encapsulated fluid between

Signature of Radiographer

Date

Lung and chest wall extending
to apex – resection of 9th rib –

Capt C.A.M.C.

000. CS 186. W.503/P.36. 20,000 Pads 10/17. N.P.A. Ltd. [illegible] 1955.

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

_____ Hospital.

Ward. H No. of Bed _____ Date _____

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
651179.0.	Sgt Kyle.	1st Cam.	Thorax.

Short History of Case.
(To be completed by M.O. i/c case.)

Pyopneumothorax
Cond.

W.

Signature of M.O. Major Robson.

Date 23/11/18.

Report on Result of X-Ray Examination.
(To be completed by Radiographer.)

No. of Plate _____

Fluid to level of 2 R. costal cartilage.

Signature of Radiographer [signature]

Date 25/11/18.

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

Regtl. No., Rank and Name } Cpns. L/ Corp Age _____ Corps Canad

Disease G S W Chest. Hospital Duston

To Officer i/c Laboratory. Ward H

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

with special regard to Organisms.

Nos. of previous Reports (if any) Colonied Bac. Welch. in Broth.

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

Date Oct 26. 18 L-h. Robson Major RAMC
O. i/c Ward.

LABORATORY REPORT.

Only organism isolated: Streptococcus
Bac. Welchii was examined for by anaerobic cultures
but not found
No anaerobic organisms isolated

CENTRAL MILITARY LABORATORY
No. 8115
Date 30 OCT 1918
MEDICAL SCHOOL, CAMBRIDGE

Date of Examination 5 NOV 1918

A. Woodhead
O. i/c Laboratory.
Capt. R.A.M.C.
O i/c Central Military Laboratory
Cambridge

(S.O. 1452) W. 5760/P821. 6,000 Bks. 3/18.—McC. & Co., Ltd., Ldn.—

H

Army Form B 131.

CLINI[illegible] CHART.

(To be attached to Case Sheet.)

Corps 1st Canadians — Military ~~Hospital~~ Hospital Duston Northants

No. 651190 — Rank and Name Lce-Cpl. F. Eyre — Age 29 — Service 2 yr

Disease _____ — Date of admission 24/10/18 — Date of discharge _____ — Result _____

Dates of Observation	24	25	26	27	28	29	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Days of Disease																															
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.	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.
Pulse per Minute	84 92 84 80	80	80	96 88	84	84	102	100	86	104	100	96	70	96	92	88	96	92	96	100	104	96	108	88	92	104	96	84	112	84 76	88	84	76	96	68	92 88	84	84 92	92	96	92	96
Respirations per Minute																															
Motions per 24 hours	1 1	1	1	1	1	1	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

Admitted 3 VII.

(6378) Wt. W4612/P566 2,000 [illegible] 2565)

Signature _____ In charge of case.

Army Form B 131.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps. _____ Military Hospital _____

No. _____ Rank and Name _____ Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

Dates of Observation	25	26	27	28	29	30	31	Jan. 1919 1	2	3	4
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

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

S[illegible] In charge of ca[illegible]

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

THIS FORM WILL BE USED FOR ALL RANKS

18.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION London. Ont. DATE 24. 6. 19.

1. 1 (a) Unit No. 1 D.D. (b) Regimental No. 651100. (c) Rank Pte.

(d) Surname EYRE. (e) Christian name Frank Henry.

(f) Home address Oliphant Ont.,

(g) Next of Kin Mrs. Catherine Eyre. (h) Relationship Mother.

(i) Address of Next of Kin Oliphant. Ont.,

2. Age last birthday 29. Date of birth 24. July 1891.

3. Enlistment, or Appointment (if an Officer) (a) Place Wiarton. (b) Date Jan. 16.

4. Personal description:

(a) Height 5' 9" (b) Weight 115 (stripped) Lbs. (c) Complexion Dark.

(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

5. Former trade or occupation Sailor.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3 5/12.	18

	Periods	
	From	To
Canada	21- 5- 19	4- 6- 19
	6- 1- 16	14- 10- 16
England	24- 10- 18	21- 5- 19
	14- 10 16	1- 3- 18.
France or other theatres of War	1- 3- 18	24- 10- 18.

7. Original disease, or injury Gun shot wound of right chest.

(a) Date of origin Sept. 2nd. 1918. (b) Place of origin ARRAS. FRANCE.

(c) Cause Shrapnel.

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.)

Weakness and necessity for rest due to Pulmonary Debility.

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

OBJECTIVE;- See Specialist's Report attached. Attachments of 4th portion of Trapizius and rhomboies partially severed.

SUBJECTIVE;- Complains of pain and soreness right chest also shortness of breath after slight exertion. Lifting power of left arm markedly decreased.

Specialist's report. June 23- 19.

A. 14 X 17" plate was made of the chest The dorsal spine shows a left lateral curve. 4" or 5" is missing from the right 9th rib behind. The breast tree thorughout the whole chest is decidely thickened. The right pleura is markedly thickened at the base and slightly along the whole right side. The lung is collapsed slightly along the entire length of the right border The heart is displaced to the left. There is emphysema in the left lower lobe. (Sgd) H. S. Wismer. Capt. Officer I/c.

Chest Report. Soreness in the right chest. HISTORY. Gun shot wound right chest. EXPOSURE. No. EXAMINATION. Large linear scar lower right chest behind. Right chest laggs. Impairment over the lower right chest left chest is hyper-resonant and emphysematous. Diminutuion of the breath sounds over the right lung. H.B. on the left. NOTE;- Did not find evidence of clinical T.B. lesion at the present time. DIAGNOSIS.

(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.)

Pulm. Debility following wounds.

D. A. Craig. Capt. A.M.C.

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

Was wounded Sept. 2nd. 1918 by shrapnel.

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*).)

Had Mumps 20- 1- 17 to 9- 2- 17.

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

Small scar on left malar protuberance.

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

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

Not applicable.

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

The regimental documents will be referred to.

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

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

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

Was aspirated several times. Foreign body removed dressings applied. No massage or electrical treatment.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? no.

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

16. Can the former trade or occupation be resumed? No.

(If not, briefly state why)

17. Recommendations MEDICALLY UNFIT. Discharge.

R. C. Brain 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 E. H. Eyre Pte. 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

E. H. Eyre Rank. Pte

Signature of invalid examined.

Clare

OPINION OF THE MEDICAL BOARD

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

The Board agrees with specialist's Report, except 16. Yes with lessen efficiency. (17) Fit for Special Duty CANADA.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

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

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

Fit for Special Duty CANADA.

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

Major. C.A.M.C. *President.*

Capt. C.A.M.C. } Members

PLACE London. Ont.,

DATE 25. 6. 19.

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..... } Members

DATE.....

APPROVED BY

Assistant Director of Medical Services.

for

DATE Nov 19.

APPROVED BY

Director-General of Medical Services.

DATE.....

File Copy

6-1-x-7

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 Kinmel Park Mil.Hos. DATE 2.4.19

1. 1 (a) Unit 1st Batt. (b) Regimental No. 651190 (c) Rank L/Cpl.

(d) Surname Eyre (e) Christian name Frank Henry

(f) Home address Elkiphant, Ont.

(g) Next of Kin Mrs. E. Eyre (h) Relationship mother

(i) Address of Next of Kin Elkiphant, Ont.

2. Age last birthday 29 Date of birth July 24th 1889

3. Enlistment, or Appointment (if an Officer) (a) Place Pearton, Ont. (b) Date 6.1.15

4. Personal description:

(a) Height 5' 9" (b) Weight (Est.) 172 (stripped) (c) Complexion Dark

(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Scar on left side of face

5. Former trade or occupation Sailor

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	77

	Periods	
	From	To
Canada 160th Btn.	6.1.16	28.10.16
England 160th and 1st Btns.	29.10.16	1.3.18
France or other theatres of War 1st Btn.	1.3.18	24.10.19

7. Original disease, or injury Partial destruction middle lobe R. lung

(a) Date of origin 2.9.18 (b) Place of origin France, France

(c) Cause G.S.W. in action.

M. F. B. 227.

400M.—11-18.
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.)

(Fibrosis R. lung) Partial loss of function R. lung.

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

Objective symptoms - Scar 10" long with suture marks along inner and lower border of R. scapula; wound healed. Part of 5th rib resected. Exam. shows a much diminished expansion R. chest; impaired resonance on percussion, distant breath sounds and slightly increased vocal fresnitus over upper 2/3rds R. lung post. X-Ray report dated 13.1.19 signed Cook, Capt. states excursion L. diaphragm normal; R. diaphragm Nil; whole of R. lung dense; absence of costo diaphragmatic angle upper and outer 2/3rds R. lung shows a sharply defined dense area suggesting organization or encapsulated fluid between.

Subjective symptoms. States he has moderate weakness and slight pain in R. chest when carrying anything in R. hand. He tires easily and is short of breath.

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

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

Special Senses..No..Respiratory System..No..Integumentary System..No..

Disturbances of Mentality..No..Digestive System..No..Muscular System..No..

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

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

M.C.S. states: Wounded Sept. 8, 1918; No. 7 C.C.S. 1 day and No. 14 Gen. Imperial 7 weeks; G.S.W. right chest.

M.H.S. states Duston War Hospital 24.10.18 to 10.1.19. G.S.W. right chest aspirated several times.

Granville Can. Spec. Hosp. Buxton, 10.1.19 to 19.3.19 G.S.W. Chest.

Mil. Hosp. Kinmel Park, 19.3.19 to date, G.S.W. chest.

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*).)

O.R. states No illnesses prior to enlistment.

M.H.S. states Isolation Hut, Brewshot, 20.1.17 to 9.2.17 Mumps - recovered

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

Large scar post surface right chest, resection right rib.

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

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

Not applicable

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

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

M.H.S. states, Shrapnel removed R. middle lobe 14 C.H. France, all 5th R. rib resected. Aspirated several times at Duston War Hospital.

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)

Hospital treatment for observation, etc.

16. Can the former trade or occupation be resumed? No.
(If not, briefly state why)

17. Recommendations Cat. "D" for Invaliding to Canada.

T. W. Leeke Capt CAMC
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 F.H. Eade 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 Nothing F.H.E.

F. Eade Pte
Signature of invalid examined. Rank.

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.

Yes, we concur.

19. Is the invalid fit for

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

Hospital treatment for observation (fibrosis of lung) 3 months

(*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.)

that the patient be invalided to Canada - can travel by ordinary transport

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.

Soldier satisfied

Certified true copy

President.

PLACE Kinmel Park Mil.Hosp.

DATE 3.4.19

} Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President

PLACE.....

DATE.....

} Members

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

SHORT FORM.

PROCEEDINGS ON DISCHARGE. 256638

(Demobilization.)

War Service Badge
Class A Issued

1 / 28 / 19

1. No.	651190		
2 Rank.	PRIVATE		
3. Name.	EYRE, Frank Henry		
4. Unit.	160TH BATTALION, C.O.M.F.		
5 Date of Discharge	JUL 4 1919	Place	LONDON, ONT.

6 Reason for Discharge ON DEMOBILIZATION "Medically unfit for general service"

7. Authority. R. O. 1894 DO 184 3/7/19

8. Proposed Residence after Discharge OLIPHANT, P.O. ONtario.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.? 39

F H Eyre
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date JULY 4th 1919.

RCD 9E 4/8/19

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

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

Forms I. 1237 14

rmy Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 4959	651190	L/C	Eyre	H
Year.	Unit.		Age.	Service.
	1 Canu		29	3 3/12 8/12

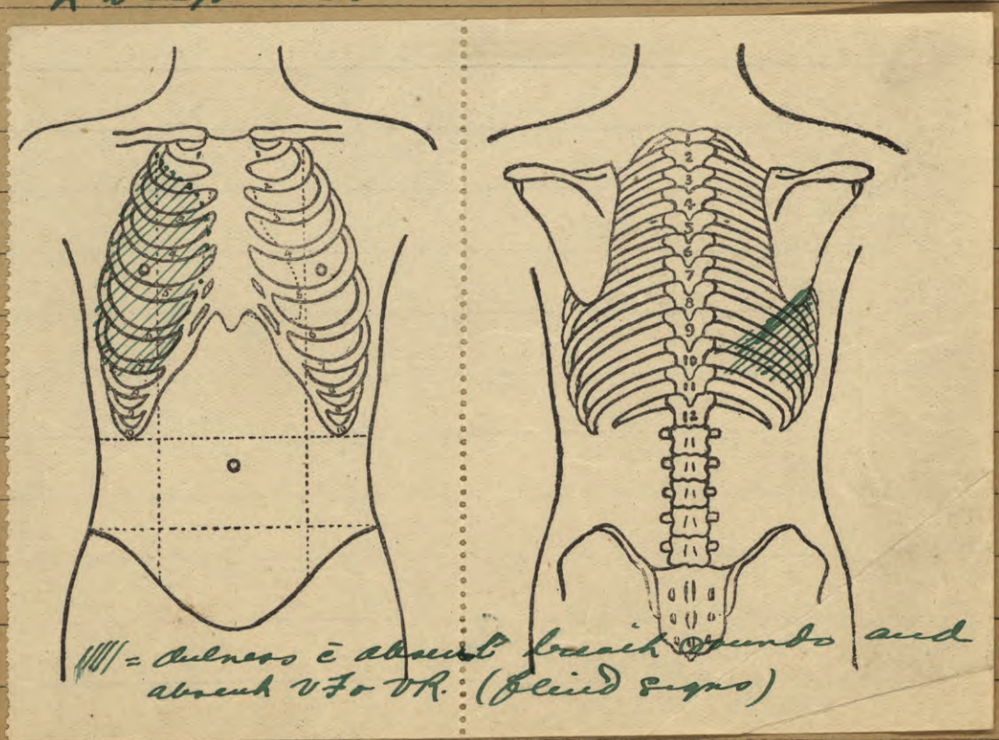
Station and Date.

Disease Gsw R Chest

13-1-19. X Ray report 8/1/19 — Excursion of left diaphragm normal — Right diaphragm incl — whole of right lung dense — absence of costo diaphragmatic angle — upper & outer 2/3 right lung shows a sharply defined dense area suggesting organisation or encapsulated fluid between lung and chest wall extending to upper reduction of 9th rib —

24 JAN. 1919

Area of dulness as before & absent Breath sounds & V Fo & R all over the anterior aspect of chest and back ½ of scapula from apex to base.
Posteriorly as before resonance and well heard breath sounds down to ang. of scapula.



//// = dulness & absent breath sounds and absent V Fo & R. (Fluid signs)

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

(A 1014) W3081/P/1296 3,450m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420)

[P.T

Station and Date.	
	Morocco found in 4th space just external to middle quite a hard layer of fibrous tissue under which fluid is encapsulated 2c lab. for examn of fluid.
	To Surgical ward for operation Pus encapsulated, and lies along anterior and axillary aspects of chest
7 JAN 1919	To. A Section for operation.
13.2.19	Transfd to B as soon as possible
23-2-19	To. see Opg Tues. (14 out)
Wards 3/19.	Fluid fine. Referred to Hlol Dept for fourth Opinion. WB Veale.
AR. 1919	Area of dulness & absent breath sounds now extends further up the back, almost to apex. In axillary line the lung is resonant almost to the base.
Wards 10/19	Referred to Surgl Tues. for opn as treated & disposed [illegible]
15 MAR. 1919	17 MAR. 1919
	Transfer 9 Gen Hosp Rhyl
Kirkdale	10/3/19 Convalescent.

Forms I. 1237 12

Northamptonshire War Hospital, Duston, Northampton. 147/632 Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1425 Year	65196	L/Cpl.	Eyre.	Frank Henry.
	Unit.		Age.	Service.
	1st Batt. Canadians.		29	2 9/12 yrs.

Station and Date.

Disease G S W. R. Chest pen.

War Hospital, Duston.

24 OCT 1918

Admitted this day from Convoy from Overseas E. F. France.

N.D. Sep. 2. 18.

Op. in France. Shrapl. casing taken fr mouth Rt. lung. W. sutured Aspirated later on 3 occasions on which B. Welch. was found in culture

C.O.A. T. 99.

Looks pulled down.

Rt side of chest. long scar over back just level c angle of scapula.

Side does not move much c respiration.

Dull & succussion up to spine of scapula + in axilla

Breath sounds absent.

V. R. absent. W. L. Robb.

Oct. 26 Succussion splash heard in Chest.

Aspirated ℥xvi purulent fluid from Rt thorax.

Bact. Report. No anaerobic Organisms but a streptococcus present.

Nov. 9 Aspirated ℥xx much clearer fluid than on Oct 26th.

1/7/18. Aspirated ℥vij.

20/7/18. Succussion splash still present.

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

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

Station and Date.	

10-EY-2

3 EYRE 3

AUDITOR | PAYMASTER

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

M. OR S. S. | REGT. No. 65190 | RANK Pte | NAME (IN FULL) RYRE Frank Henry (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP | PARTICULARS | EFFECTIVE DATE | AUTHORITY

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

ORIGINAL UNIT C.E.F. 1st Batt. | IF IN P.F. WHAT UNIT? Elephant P.O. Ontario

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 6-1-16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15' | DATE EFFECTIVE 31/5/19

PAYABLE TO Mrs Catherine Eyre | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Elephant Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE LONDON, ONT. | DATE 4-7-19 | REASON Demob M.D. | AUTHORITY D.O. 184 | IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. 1/10 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 E.L.P.C.							210	55	210	55							487	93									50 00 / 50 00			69	60			140	95	295 21/5/19 Regt 3/6/19 Leds 1/6/19 Adv Kennedy Boyd + Train Journey ex Regt
11/5/19																																			
31/5/19	31	1/10 XX	34 10		12 00		140	95	187	05																									
11/6/19																									306 25		15 00								
30-6-19	30	1/10	33 00				187	05	220	05															15 00		20 00				31	10		188	95	a Cpl may claim for Clothing & pay by Comm Int Ltr 184 Enquire J. Clay under B.W. 200170
																											1 10								
4-7-19	4	1/10	4 40		35 00 / 70 00		188	95	298	35							$338 55				29 35		200							298	35	TW			Wdg Cheque
																											70 00		70	00	70	00			

WAR SERVICE GRATUITY

			WSG	SA		WSG	SA			
183 Days			420 00		420 00	70 00		Soldiers Dependents		First Pay WSG as above
						70 00		350 00		111084 7/8/19
						70 00		280 00		7/9/19 116328
						70		210 00		SEP 30 1919 117274
						70		140		NOV 1 1919 118143
						70 00		70 00		DEC 2 1919 118744
						70 00				
			420		420	420		420		Gds Discharged

M R Mortimer Major

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-89-1890.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 1st Canadians — War Military Hospital Bridlington Northampton

No. 65196 Rank and Name L/Cpl. E. Yps. I. H. Age 29 Service 2 9/12 yrs

Disease _____ Date of admission October 24th 1918 Date of discharge _____ Result _____

Dates of Observation: October — Nov.

Days of Disease: 24 25 26 27 28 29 30 31 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23

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

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

On admission

Catheterised Oz

Pulse per minute

Respirations per Minute

Motions per 24 Hours

(42) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181/4. (373)

Signature _____ In charge of case.