"E" 21 2nd Batt n

Duplicate

ATTESTATION PAPER.

No. 5092

Folio. 321

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Frank William Foster
2. In what Town, Township or Parish, and in what Country were you born? ..... City Exeter Devonshire Eng
3. What is the name of your next-of-kin? ..... Mrs E. Foster (Mother)
4. What is the address of your next-of-kin? ..... 8 Bartholomew W. West Exeter Devon. Eng
5. What is the date of your birth? ..... 25th Dec 1889
6. What is your Trade or Calling? ..... Laborer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... Yes
10. Have you ever served in any Military Force? ..... 3 Years 9 Mths R. Royal Engineers
    If so, state particulars of former Service.
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

Frank Foster (Signature of Man).

Calin W. Day (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

F. W. Foster. (Signature of Recruit)

Date. Valcartier, 22nd September 1914. Calin W Day (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank William Foster, 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.

F. W. Foster (Signature of Recruit)

Date Valcartier, 22nd September 1914. Edwd O'Brien Lt Col (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 ..... this 22 day of ..... 1914.

Valcartier, 22nd September (Signature of Justice)

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

..... (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

Description of Foster Frank W. on Enlistment.

Apparent Age 24 years 8 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 34 ins.; Range of expansion 1½ ins.

Complexion Dark.

Eyes Grey

Hair Black.

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

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

3 Vaccs left arm
Small mole back of neck.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date August 26 1914.

Place Val Cartier P.Q.

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

(Signature of Officer)

Date Valcartier 22nd September 1914.

"E" Coy 2nd Battn Copy

ATTESTATION PAPER.

No. 8092

Folio. 321

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Foster
1a. What are your Christian names? — Frank William
1b. What is your present address? —
2. In what Town, Township or Parish, and in what Country were you born? — City Exeter Devonshire Eng.
3. What is the name of your next-of kin? —
4. What is the address of your next-of-kin? — 8. Bartholomew St West Exeter Devon Eng.
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — 25th Dec 1889
6. What is your Trade or Calling? — Labourer
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? — Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. — 3 years 9 Mounted Royal Engineers
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? — Yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? —
14. If so, what was the nature of the disability? —
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? —
16. If so, what was the reason? —

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank William Foster, 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.

F. W. Foster (Signature of Recruit)

Date 22nd Sept 1914. Leslie W. Day (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank William Foster, 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.

F. W. Foster (Signature of Recruit)

Date 22nd Sept 1914. John E. O'Brien (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 Valcartier this 22nd day of Sept 1914

E. G. Nesbet (Signature of Justice)

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

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

Description of Frank W Foster on Enlistment.

Apparent Age 24 years 8 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 34 ins.
Range of expansion 1½ ins.

Complexion Dark

Eyes Grey

Hair Black

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).

3 Vacc. left arm.
Small Mole Back of neck.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date August 26th 1914.

Place Valcartier P.Q.

D Watson Lt. A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

D Watson Lt. Col. (Signature of Officer)

Date 2nd Sept. 1914.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Foster Frank W.

Regt. No. 8092 Rank Private 14968

Corps 12th Res. Battalion

Medically unfit

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 2

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate..... 1

Medical Report for Invalids..... 3

Medical History Sheet..... 4

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

2 Casbands

1 Pay book

1

9. 12

9. 12

2-12

M. F. W. 62.
25m.—11-15.
H. Q. 1772-39—935.

DEPARTMENT OF MILITIA AND DEFENCE.

30576/610

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian names Frank William 2. Surname Foster.
3. Rank Pte. 4. Original Unit 2 Batt. 5. Reg. No. 8092.
6. Address, in full, to which future payments of gratuity are to be forwarded 301 Collingwood Street Kingston Ont.
7. Date of enlistment in the C.E.F. 4/8/14.
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not Applicable
9. Relationship of such dependent Not Applicable
10. Address, in full, of such dependent Not Applicable
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No.
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:— 2nd Battalion England & France 22/10/14 to 15/11/15.
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No.
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service Not Applicable
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 2nd Batt. 4/8/14 to 22/6/16.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No.

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

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... Not Applicable .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ..Paymaster
#3 District Depot. Kingston Ont.
$33.00. $33.00 & $34.10. Total $100.10.

20. Have you been issued with a War Service Badge? If so, what class ? ..... A & B. .....

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

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled .....
Not Applicable.

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ..... No .....
(b) If so, was such reversion in consequence of misconduct or inefficiency ? .... No .....

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge June 15, 1916 ..... (b) Reason for discharge .....
Medically Unfit

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

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit .. 2 Batt. .....
4/2/15 to 17/6/15.

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ... No
(b) If so, are you in receipt of full pay and allowances from that Department ? ..... No ....

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

Signature of Applicant: Frank William Foster
Place of Residence: 301 Collingwood St Kingston
Declared before me at: Kingston
This 21st day of March 1919

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

---

POST DISCHARGE PAY.

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

No Record.

Certified Correct.

District Paymaster.

649-Fr-495

CARD NO.

SURNAME. Fosters.

CHRISTIAN NAMES Frank William

REGL. No. 8092 RANK Pte.

UNIT 2nd

FORMER CORPS Royal Eng (3 yrs 9 mos)

S.O.S. Dec 29.2.16.3
FOLL.

C. Mch
Bn

NEXT OF KIN.

NAMES IN FULL Foster. Mrs. E.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 8 Bartholomew West. Exeter, Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England. Exeter. Devon DATE Sep. 25th 1889.

PLACE OF ATTESTATION Valcartier, P.Q. DATE Sept. 22nd 1914.

0/S - 10-14, N/13.

R.L. 5.12.15

L L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

Sailed from Quebec per S.S. Cassandra, Oct. 4/14.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer, RELIGION Church of England

DESCRIPTION.

APPARENT AGE 24 YEARS 8 MONTHS

HEIGHT 5 FEET 10. INCHES

CHEST MEASUREMENT 34. INCHES EXPANSION 1 1/2 INCHES

COMPLEXION Dark. EYES Grey. HAIR Black.

DISTINGUISHING MARKS 3 Vacc left arm. Small mole back of neck.

MEDICAL EXAMINATION. PLACE Valcartier, P.Q. DATE Aug. 26th, 1914.

Present Address, Not Stated.

No. 8092. RANK Pte NAME Foster. F. W.

T. O. S. UNIT Casualties.

M. D. H.Q

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915.	1916.			
Nov. 26	Jan. 31	N.	From 12th Bn.	
1916	Feb.	N.		

No. 8092 RANK Pte. NAME Foster, F.

T. O. S. UNIT 14th Regt.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Aug. 7	Aug. 12	✓		
(5 unspecified days)				
Aug. 13	Aug. 22	✓		
Aug. 23	Sep. 21	✓	now shown on 2nd Bn paylist	
~~Sep. 22~~	Oct. 31	✓		

UNIT SAILED OCT 3 1914

No. 8092. RANK Pte. (12 Bn.) NAME Foster F. W.

T. O. S. UNIT Discharge Depot (Quebec.)

M. D. 5.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec.	1915 Dec.	✓	Dates not stated.	

CANADIAN CONVALESCENT HOSPITAL, MONKS HORTON.

ADMISSION CARD.

Regt. No. 8092 A. & D. No. 3-492

Rank Pte.

Name Foster.Frank.W.

Corps 2nd.Bn.

Religion C of E. Service 9/12 3/12 Age 24

Disease GSW.R.Hand.

Admitted 19-10-15 V.A.D.Hosp.Exeter.

Discharged

Place in Hospital

M. H. Rec'd M. H. Requested M. H. Ret'd

Transferred 20-10-15 Pharmcliffe Mil Hospital

Results

REMARKS:

June 11 Wounded while in trenches Ecuancby - June 13 " " Genl Hospital Rouen - June 17 " " V.A.D. Hospital Exeter Oct 19 Monks Horton Conv. Hosp. Oct 20 Trans to Shorncliffe Mil Hospital

Name Foster F.W. Rank Pte. Reg. No. 8092

Unit 2nd Batt.

Next of Kin Mrs. E. Foster 8 Bartholomew St. Exeter Devonshire Eng.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-6-15	V.A. Hosp. NO.V	Exeter	B.W. Rt. Hand	125		
19-10-15.	Convl. Conv. Ho.	Monks Horton	Lys. W. R. Hand	192.		
20-10-15	— Do. to Mil. Hosp.	Shornclife	— Do —	193.		
25/10/15.	—	-do- discharged	-do-	B145		

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

No. 8092 RANK Pte. 12th Bn. NAME Foster F. H.

T. O. S. UNIT Casualties C. E. F.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Mar. 1	Apr. 30	✓		
May		✓		
June	June	N.	dates not stated	(June paylist.)

Reg. No. 8092 Name Foster Frank

Rank Pte Corps 2 Bn Age 26 Service E 9/12 E 4/12 F 4/12

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Elmhurst Kingston	10.12.16	GSW Rt Hand Shell Wd
Buchanan Canad	6.1.16	
Do	1.6.16	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

NAME Foster. Frank. Wm.

H. Q. FILE No. 649-

REGT'L. No. 8092

RANK AND CORPS Pte. 2nd Batt.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
C. 2451	21/6/15	Wounded. June 12. 1915.

NO. 863.

XFOLL.

L. L. Job 83225 —M. & D. 5842.

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
89.	No. 3. Can. Field. Amb. Trans. to No. 4. Cas. Clear. Station.	12/6/15.	G. S. W. Hand & Chest. ✓
90	No. 3. Gen. Hosp. Le Treport.	14/6/15.	G. S. W. Slt.
92.	No. 5 Temporary Hosp., Exeter.	17/6/15	B. W. Hand. ✓
125.	V. A. Hosp. No. V. Exeter	17/5/15.	B. W. R. Hand ✓
192(2)	Can. Convt. Monks Horton	19/10/15	G. S W. R. Hand. ✓
193(2)	Can. Convt. Monks Horton		
	2a Mil. Shorncliffe	20/10/15	G. S. W. R. Hand. ✓
B145	" "	25-10-15	" " " " Discharged

R.B.

Number 4092 Rank Pte

Surname F.O.S.T.E.R. Disp FEB 26 1921 9.1084

Christian Names Frank Wilson

Unit 2nd Bn. Can Inf. Theatre of War France

Dates of Service

Remarks 315 Creighton St Ottawa Ont

Latest Address ~~C/O Mrs. Spencer~~ ~~259 King St~~ Kingston Ont

Page 511

Roll No. B

G.2807.5 Kleaps
JUN-1 5

Surname	Christian Name	Reg. No.
FOSTER	F.W.	8092

Rank	Unit	Co.	Troop	Batty.
Pte.	2nd Bn.			

MEDICAL BOARD held at — Date — Serial No.

(1) Shorncliffe 25.10.15

Other Medical Boards at — Date — Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

G.S.W. right hand producing fracture and ankylosis of 2nd and 3rd and 4th metacarpo-phlangeal joints.

Disposition Recommended

(1) Temporarily unfit for Home service -3 mths.

(2) A.D.M.S. rec. return to Canada; further disposal to be dealt with by Militia Authorities there.

(3)

(4)

(5)

CASUALTY BOARD held at — Date.....

Disposition

Remarks

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

Indicate by a P.T.O. if continued on other side.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Foster.	F. W.	8092

Rank	Unit	Co.	Troop	Batty.
Pte	2nd Bn			

Hospital	Date of Admission
#4 Gas Clg Stn	12. 6. 15
Transferred # 3 Gen. Le Treport	Hosp. 14. 6. 15
#5 Temp. Exeter	Hosp. 17. 6. 15
Shorncliffe Milly	Hosp.
Monks Horton	Hosp. 19. 10. 15

Diagnosis G. S. W. Hand & Chest

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION Dis. Date 25-10-15

	REMARKS
GZ 21. 6. 15.	89
" 22. 6. 15.	90
" 24. 6. 15.	92(2)
WHR 2-23-7-15	
GZ 21. 10. 15.	192(2)
" 22. 10. 15.	193(2)
C.L. 19-8-16	B145

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	# 3 Base Fld Amb	
2.		
3.		
4.		
5.		
6.		
7.		

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 2nd Bn To 12th Bn.

Regimental No. 8092 Rank Pte Name Foster. Frank. W.

Enlisted (a) 22/9/14 Terms of Service (a) Period of War Service reckons from (a) 22-9-14

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

Extended ✓ Re-engaged ✓ Qualification (b)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
13-6-15	36th Inf Bde	G.S.W. hand + chest To	4 B.G. Hosp	12-6-15	A 36.
15-6-15	5 Gen.	G.S.W. Slight	5 General	14-6-15	E. 92.
17-6-15	—	— VIII-1 (SW)	To England	16-6-15	E 94
16-6-15	St. Andrew	G.S.W. R. Hand	To Eng:	16-6-15	A.F. 3083 (Naval)
24-6-15	W.O.	B.W. Hand.	Hosp: Exeter	17-6-15	C.D 92 + Pt II Order
10-10-15	66 12th	On Strength 12th Bn No 66	S'cliffe	10-10-15	Pte No. 1530
25-11-15	do	Struck off Proceeded to Canada 2nd	do	25-11-15	" 1980

Lt Capt
for, Colonel i/c Records, OMFC

Certified true copy. Lt Col Capt
for Colonel i/c Records, O.M.F.C.

J. Shaw 12th Bn. 22-11-15.

(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				

2ND CANADIAN INF. BATTALION

(8915)—Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 2nd Bn. C.E.F.

Regimental No. 8092 Rank Pte Name Foster ~~John~~, Frank W.

Enlisted (a) 22/9/14 Terms of Service (a) Period of War. Service reckons from (a) 22/9/14

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

Extended ✓ Re-engaged ✓ Qualification (b) ____

Report		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				
13/6/15	3.6 Fd Amb	G.S.W. hand & Chest	To 4 C.C.S.	12/6/15	A 36
15/6/15	5 General	G.S.W. Slight	5 General	14/6/15	C.92.
17/6/15	5 General	G.S.W. VIII-1. (Rev)	To England	16/6/15	C.94
16/6/15	St Andrew.	G.S.W. R hand	To Eng.	16/6/15	AF 3083. (Havre)
~~16/6/15~~	~~Hosp~~				
24.6.15	W.O.	B.W. Hand	Hosp. Exeter	17/6/15	C.R. 92 of Pt II orders.

CAPT
OFFICER i/c RECORDS
CANADIAN SECTION G. H. Q.

(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				

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 12th Reserve Battn

Regimental No. 8092 Rank Private Name Foster Frank W.

Enlisted (*a*)_____ Terms of Service (*a*) Period of War Service reckons from (*a*)_____

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

Extended_____ Re-engaged_____ Qualification (*b*)_____

Report		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				
		Discharge in Canada, being medically unfit.			

(*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				

O. C. 12th Battalion Canadians

Certificate of Service

(Issued following loss of Permanent Discharge Certificate M. F. W. 39)

3092 Private

This is to Certify *that No.* FOSTER, Frank William *(Rank)*

2nd Battalion

(Name in full) 22nd

Enlisted in September 14

Canadian Expeditionary Force, on the CANADA ENGLAND & FRANCE *day*

2nd Battalion

of 19 Kingston., Ont.

He served in 29th February 15

and was discharged at MEDICALLY UNFIT *on*

the *day of* 19

Good

by reason of

1914-15 STAR

BRITISH WAR & VICTORY MEDALS

His conduct and character while in the Service were

27 Years

5'10½"

Dark

Address Grey

Black

(Clyde R.Scott),
Major,
Assistant
Director of Records

Ottawa 10th *day of* December 1930

H. Q.

M. F. W. 39d.
5M.—4-23
1772-39-882

30576/610
J.H

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

062544-F-1.

Name **Foster, Frank William**
Surname Christian Name

Regimental Number **8092** Rank **Pte.**

Address (in full) **Kingston, Ont.**

Unit **12th Res.Bn.**

Original Unit **2nd Bn.**

District where paid **Ottawa**

Date of Discharge **29-2-16.**

P. D. P. Filing Number 19F5.

Rates:—Regimental pay $ **1.00** per diem: Field Allowance $ **.10** per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

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		
100 10	3464	28/8/17	33 00	3417	28/9/17	33 00	2950	24/10/17	34 10		100 10

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

Dec'n No 305764/610 W. S. G. File No 062544 24

Award 122 days at $ 70 00/100 per day $ 2500 00

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

Less P. D. P. Credited $ 100 10

$

Less further debit balance $ .....

Net due paid as below 179 90

TO SOLDIER TO DEPENDENT

O	Ag. No	Ch No	Amount		Ch No	Amount
1	3073	452156	179 90			
2	—	—	—			
3	—	—	—			
4						
5						
6						
—			179 90	Total		

7·5·19.

GEN'L AUDITOR
Posting checked by
A. Holbrook
Date 29/9/19

301 Collingwood St.
Kingston Ont.

Name Hosters Pte. F.W.

M. F. W. 41.
10m.—11-15.
1772-39-889.

112

Regimental No. 8092

Unit 12th (2nd Bn.)

Date of enlistment

Place of "

Married (yes or no) No.

Amount of pay assigned monthly $ Engd. 4/-.

To whom payable

S.S. Scandinavian 6/12/15

Home
~~Name and~~ address ~~of next of kin~~

Hartington, Ont.

Med. Board Recmdtd
Ent. Elmhurst Con. Home 10/12/15

Date and place discharged

Reason for discharge

Character on discharge

Class II

649-F-495

L. [illegible] 87694. M. & D. 6128.

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 sheets No.	Voucher sheets Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
																~~T. to 3 Div. from 1/2/16~~
												P.O. notified pd to				29/2/16
	26/11/15							102 90								L.P.C. Eng.
27/11/15	31/1/16	66	1.00	66 00	66	10	660		175 50	A-40	15/1/16	125 50	✓	50 00 ✓	175 50	due pd.
									150 ✓	A.671	21/2/16	150	✓		150	✓subs. 8/12/15 to 9/12/15 @ 75 per diem
1/2/16	29/2/16	29	1/-	29 00	29	10	290	+1 50 ✓	8 00			41 40			41 40	+ H.Q. credit ✓ Pd by M.D. III, Clothing

Pensioned
from 1/3/16 P.C. 45/624

* 1.50, overpaid. Cannot be recovered by [illegible] 3.

P.D.P. 9/8/17

No re-adjustment necessary R.P.

C. 15.00 Nov/16

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					

MILITIA AND DEFENCE

ASSIGNED PAY.

To whom Mrs E. Foster,

Address 8 Bartholemew St. W.,
Exeter
Devon.

Rate 15oo

Date to Commence 10 Oct 14

By whom assigned Foster F.C.

Regtl. No. 8092

Rank Private

Corps, &c. E Co - 2nd Batt.

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.		4231	45	
Jan.	1915	6816	15	
Feb.		10445	15	
March		15660	15	
Apl.		17918	15	
May		19980	15	
June		21059	15	
July		16214	15	
Aug.		26751	15	
Sept.		39652	15	
Oct.		50329	15	
Nov.		67672	15 -	
Dec.				
Jan.	1916		$210-	
Feb.				
March				

FILE

Payment Stopped
Officers' Form.

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month	Year	Cheque No.	Amt.		Pay Sheet		REMARKS.
Jan.	1916						
Feb.							
March							
Apl.							
May.							
June							
July							
Aug.							
Sept.							
Oct.							
Nov.							
Dec.							
Jan.	1917						
Feb.							
March							
Apl.							
May							
June							
July							
Aug.							
Sept.							
Oct.							
Nov.							
Dec.							

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME FOSTER, Frank William

66

PAY OFFICE, N. E. BRANCH
CANADIAN CONTINGENT
JAN 25 19

Regimental No. 8092

Unit 2nd Bat'n

Date of enlistment 22nd Sept., 1914

Place of birth, England

Married (yes or no) No

Amount of pay assigned monthly $ 15.00

To whom payable next of kin

Name and address of next-of-kin Mrs E. Foster,
8 Bartholomew West, Exeter, Devonshire, Eng.

Date and place discharged 26/11/15. To Canada

Reason for discharge AO Rus letter 12/25 22/11/15.

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
22/9/14	31/10/14	40	1.00	40	40	10	4		44			27 50	15		42 50	
1/11/14	29/11/14	30	1.00	30	30	10	3	1 50	24 50			10	15		25	
Dec	1-31	31	1.00	31.	31	10	3.10	9 50	43.60			17.50	15-		32 50	
Jan 1915	1-31	31	1.00	31-	31	10	3.10	11 10	45 20			15-	15-	1.10	31.10	Duppay 30/1/15.
Feb 1.	Feb 28	28	1.00	28	28	.10	2.80	14.10	44 90			5.	15		20 .	
Mar 1	Mar 31.	31.	1.00	31.	31.	.10	3.10	24 90	59 .			5	15		20 .	
Apl 1.	Apl 30	30	1.00	30	30	.10	3	39.	72.			3.	15		18 .	
May 1	May 31	31.	1.00	31.	31.	.10	3.10	54.	88 10			6			6 .	
June 1	June 30	30	.	30	30	.	2.82	10	115 10			3	15 15		33	May assig debited here.
July 1	July 31	31	.	31	31	.	3.10	82 10	116 20			5	15		20 .	
								2 59	Exchange adjust.							
								96 20				97 00				
Aug 1	Aug 31	31	1.00	31 00	31	10	3 10	98 79	132 89			9 73	15 00		24 73	
Sep 1	Sep 30	30	1.00	30 00	30	10	3 00	108 16	141 16			9 73	15 00		24 73	
Oct 1	Oct 31	31	✓	31 00	31	10	3 10	116 43	150 53				15 00		15 00	Aff to 12th Reo Battn 30/10/15
1/11	26/11	26		26	26		2 60	135 63	164 13			36 50	15		51 50	Disc to Canada 26/11/15 AO Pmgbay 12/25 22/11/15 Ltop asarend 26/11/15.
N.E. Branch Feb		43 1						112 63	✓			52 96		112 63	112 63	

$112 63 Transferred to acct of pm Genl Genl liability can disc

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					

29370 THE MORTIMER SYSTEMS
OTTAWA, CANADA

6-87

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M.C.S.

To Whom Mrs. E. Foster

Address 8 Bartholomew St-Exeter Devonshire Eng.

Rate $15.00 per mth

By Whom Assigned Foster F. W.

Regtl. No. 8092

Rank Pte

Corps E Co 2nd Battn.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				Duplicate sent to England for future payments
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				Stop Pay. 16/1/15
Jan.	1916			Pension granted from March 1/16 Sgd
Feb.				
March				

142646

Forms
I. 1237.
3

Army Form I.1237.

MEDICAL CASE SHEET.

No. in Admission and Discharge Book.	Regimental No.	Surname.	Christian Name.	Age.
188	8092.	Foster.	F. W.	24

Year	Rank.	Unit.	Service.
1915.	Pte.	2nd Canadians.	9 mths

Date and Station. June 17th Exeter.

Disease. B.W. R. Hand.

Bullet through hand fracturing metacarpal & causing adhesions & callus around. The former broken down several times under gas but grip of fingers much impaired

Transferred 8 Canadian Con. Hospital

19th Oct. 1915.

Arthur Foster

VOLUNTARY AID ORGANISATION
TEMPORARY HOSPITAL
No. 5
EXETER

601

EXTRACT FROM MEDICAL BOARD

SOLDIERS RETURNED FROM OVERSEAS

DEPT MILITIA & DEFENCE
JAN 19 1916
CANADA

Station Quebec, Date Dec. 8th 1915

No. 8092 Age 25 Height 5'10-1/2"

Rank Pte., Complexion Dark

Name Foster, F.W., Eyes Grey Hair Black

Unit 12th R.B.,

Address Harlington, Ont., Former Trade Farmer.

Enlisted at Kingston, Ont. on Aug. 7th 1914

Disease or disability G.S.W. right hand producing fracture and ankylosis of 2nd, 3rd and 4th metacarpo phalangeal joints.

Present condition General condition, fair. He is not so nervous as when last Board was held six weeks ago. There is a scar of bullet wound on dorsum, of right hand over the 4th metacarpal phalangeal joint and scar of exit over metacarpal phalangeal joint of index finger, on dorsum of hand. The bullet fractured the 2nd, 3rd and 4th metacarpal bones leaving considerable callus on back of hand. Thumb is O.K. Index finger has half normal flexion and extension. Other fingers have no movement Extension tendons are bound down over dorsum of hand. There is a scar of superficial wound in right chest 2" long below rt. clavicle.

Estimated disability

Permanent, 1/4 disability.

Recommendation of Medical Board

Treatment and Massage in Convalescent Home.

9

Class 11

Members of Board

W.M.CARRICK CAPT A.M.C.

C.G.GEGGIE CAPT A.M.C.

R.M.NEILSON LT., A.M.C.

Approving Medical Officer.

W.H.DELANEY LT. COL. A.M.C.

Civilian Clerk in MD #3

3-856.

ORIGINAL

This space to be for numbers.

DEPT. MILITIA & DEFENCE JUN 22 1916 H.Q. 49-21-498 CANADA

Proceedings on Discharge.

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

No.	8092
Rank	Private
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Frank William Foster
Corps (Squadron, Battery or Company)	2nd Battalion
Date of Discharge	February 29. 1916
Place of Discharge	KINGSTON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	27 years 10½ months.	Small round scar right 2nd & 3rd 4th Metacarpal.
Height	5 feet inches.	P.P.H. scar about ½" long 2" below right clavicle
Complexion	Dark.	
Eyes	Grey	
Hair	Black	
Trade	Farmer	
Intended place of residence (To be given as fully as practicable.)	Kingston Ont.	

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

Deceased 25.3.59

Medically Unfit

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

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

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

Good

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

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

Farmer

M. F. B. 218.

15m.—10-15.
H. Q. 1772-39-113.

(OVER)

Can Des A. G. 24-6-16

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

/

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

6. Medals and Decorations.....

/

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

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

(Place) KINGSTON, ONT.

(Date) June 15. 1916

G Hunter Gibbs Colonel

A. A. G. Military District, No. 3

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) KINGSTON ONT J W Foster *(Signature of Soldier.)*

(Date) June 15. 16. B Smith Sgt Pde *(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.

J W Foster *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 1 years 207 days.

Total 1 years 207 days.

11. **Confirmation of Discharge.**

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

(Place) KINGSTON, ONT.

(Date) June. 15 1916

(Signature) G Hunter Gibbs Colonel

A. A. G. Military District, No. 3

Reservations referred to at Para. 8.

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

None

F. W. Foster.

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.
Copies of Convictions, by C. P.	in MS.
Med. Hist. Sheet,	Militia Form B. 313
Medical Report for Invalid*	" B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

Rank and Name	FOSTER, Frank William
Regimental No.	8092
Unit	2nd Battn.
Date of enlistment	Sept. 22, 1914
Place of birth	England
Married (Yes or No)	No
If in Permanent Force	
Promotions or appointments	

Name and Address of Next-of-kin
Mrs. E. Foster
8 Bartholomew St. W.,
Exeter, Devonshire, Eng.

Date and place of discharge

Reason for discharge

Character on discharge

6.
Lm 27588

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
30.12.14	PC. 2nd	Absent: 1 days pay	Salisbury	30.12.14	Pt II - 37
					89
			#3 Can.		
21 6/15	w.o.	G.S.W. Hand & Chest.	Fld. Amb.	12 6/15	C.D. 89 / trans to #4 C.C.S.
22 6/15	"	" Left.	#3 Can. Hosp. Let report.	14 6/15	C.D. 90
24 6/15	"	B. W. Hand.	#5 Temporary H. Exeter	17 6/15	" 92. 99 II 18 Sept 1-27 6/15
4.8.15	CD 125	2nd " Rt. "	" "	17.6.15	
10.10.15	OC.	12th On Strength 12th Bn. S/No 666	Shorncliffe	10-10-15	Pt II - 1530
21.10.15	CD 192	2nd G.S.W. R. Hand	Can. Conv. Hosp. Monks Horton	19.10.15	
22.10.15-193	"	Trans from Monks Horton To	Mil. Hosp. Shorncliffe	20.10.15	G.S.W. R. Hand.

Foster. W.

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				
26.10.15	OC. 12th Bn	Joined from Hptl: To:	Shorncliffe	26.10.15	P II O 1679.
25.11.15	"	Struck off. Proceeded to Canada. M.U.	"	25.11.15	P II 1980
29-11-15	DR&O.	Pens: 16 claims recommend, Invalided to Canada for med Observation final disposition of his Case.	"	24-11-15.	Can. Reg: 89-1 29-11-15.
7.12.15	D.J.R.O	before P.M.O. recommends unfit for duty 3 months. Disposal by Mil auth in Canada.	Schiffe	25.10.12	Ref. 22-7-92.

1347

H22-F-92

COPY VERIFIED

Army Form B. 179.

Medical Report on an Invalid.

DEPT. MILITIA & DEFENCE
FEB -7 1918
H.Q. CANADA

C.E.F. FEB 1918

Station Shorncliffe Mil. Hosp.

Date October 21st 1915.

649 F1-495

1. Unit 2nd Bn. C.E.F.

2. Regimental No. 8092.

3. Rank Private

4. Name Foster, Frank. W.

5. Age last birthday 25.

6. Enlisted { on August 7th 1915.
at Kingston. Ont.

7. Former Trade or Occupation { Farmer.

8. Disability.

G.S.W. of right hand producing fracture and ankylosis of 2nd, 3rd and 4th metacarpo-phalanged joints.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. June 11th 1915.

10. Place of origin of disability. Givenchy.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

At Givenchy while fixing his sniping plate hereceived a bullet wound in the right hand, entering the dorsum of hand at 4th knuckle, fracturing the 4th, 3rd and 2nd carpal bones and making its exist over the 2nd metacarpal phalanged joints. Wounds discharged pus for about three weeks. A small piece of bone came out of entrance wound at Rouen and Exeter Hospitals. Also received bullet wound (same bullet) in chest 2¼" below right clavicle. Entering quite superficially - bullet removed without anaesthetic. X ray of hand was taken at Exeter.

12. (*a*) Give your opinion as to the causation of the disability.

G.S.W.

(*b*) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (*See notes on page* 3).

Active service.

N.S.

Note 4
6-2-18
M.M.

13. What is his present condition ?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

His physical condition is fair. Feels strong but upon being spoken to he getsquite nervous and all of a tremor, both hands especially knee jerks increased, sleeps well appetite poor. Says lost about 30 lbs, but seems very well nourished. Heart and lungs normal. Is suffering from conjuctivitis more or less chronic, having existed since being gassed at St. Julien.

14. If the disability is an injury, was it caused

(*a*) In action ? Yes

(*b*) On field service ? Yes

(*c*) On duty ? Yes

(*d*) Off duty ? No.

15. Was a Court of Inquiry held on the injury ?

If so—(*a*) When ? Not applicable.

(*b*) Where ?

(*c*) Opinion ?

16. Was an operation performed ? If so, what ? No.

17. If not, was an operation advised and declined ? Not applicable.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service ? Not applicable.

19. Do you recommend

(*a*) Discharge as permanently unfit, or

(*b*) Change to England ? No.

Change to Canada. Home Service.

A. C. Frost. Capt. C.A.M.C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station Shorncliffe Mil. Hospital S. E. Hart. Lt.Col.

Officer in charge of Hospital.

Date October 22nd 1915.

*Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (*a*) active service, (*b*) climate, or (*c*) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165, Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (*a*) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service. — Active Service.

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it? — Bullet wound.

Temporarily unfit for home Service or light duty (stating probable period. Yes. three months.

Since the above recommendation it is recommended that this patient be sent to Canada and retained in the Service until his Depot is reached, when his further disposal either for service in Canada, or for discharge as unfit should be decided by Militia Authorities there.

J. W. Ernest Wilson Major
for Lt. Col.
A.D.M.S. Canadians
Shorncliffe.

21. Has the disability been aggravated by

(*a*) Intemperance? — No.

(*b*) Misconduct? — No.

(*c*) Any of the conditions mentioned in question 20, and if so, which?

22. Is the disability permanent? — Yes, Some limitation of movement in fingers affected.

23. If not permanent, what is its probable minimum duration?

To be stated in months. — Not applicable.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

¾ at present.

Approved
T.T. Kirkby.
Capt. A.D.A.A.G.
for Brig. Gen.
Comdg. C.T.D. Shorncliffe

24A. Is the man suffering from a disability which would *obviously*, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

25. If an operation was advised and declined, was the refusal unreasonable? — Not applicable.

26. Do the Board recommend

(*a*) Discharge as permanently unfit, — No.

or

(*b*) Change to England? — Not applicable.

Signatures :—

A. B. Schinbein. Capt. — President.

D. A. Dunbar. Capt.

Darrell P. Hanington. Capt. — Members.

Station Shorncliffe Mil. Hosp.

Date October 25th 1915.

Approved.

Station Shorncliffe.

Date 26.10.15.

W. G. Dalpe. Capt. A.D.A.D.M.S.

Administrative Medical Officer.
Canadian Training Division.
Shorncliffe.

(On leaving Corps or Station where invalided.)

Transfer { Date ____ / Station ____ } or Embarkation { Date ____ / Port ____ }

Name of { Conveyance ____ / Vessel ____ / Officer in medical charge ____ }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date ____ / Hospital or Station ____ }

Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital ____

Arrived from ____ Date ____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
Date	From	To			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN 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.

Forms B. 179. 34

Wt. W8530/2774 500M 9-15 M.&C.Ld.

3.D.88-F-3.

MEDICAL HISTORY OF AN INVALID.

1.– Station. Kingston, Ontario.

2.—Regiment of Corps. 2nd.,Battalion,C.E.F/ 12th.,Reserve Battalion.

3.—Regimental No. and Rank. No.8092. Private.

4.—Name. Frank William Foster.

5.—Age last Birthday. 25 years.

6.—Enlisted on 7/8/14. at Kingston, Ontario.

7.—Former Trade or Occupation. Laborer

8.—General remarks on his :—

(a) Conduct.

(b) Habits.

(c) Temperance.

MILITIA & DEFENCE FEB 16 1916 H.Q. CANADA

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

Date February 7.1916.

9.–Service. 1 Years. 160 Days.

	PERIODS. From	To
2nd.,Battalion,C.E.F.	Aug.7th,1914	
12th.,Reserve Battalion.		Feb.7th,1916.

10.—Disease or Disability. Gun Shot Wound left shoulder - no disability. Gun Shot Wound producing ankylosis, metacarpal joints. Principally 1-2-3 metacarpal joints, right hand.

11.—Date of origin, cause, present condition and whether the same is the result of service or climate. Givinchy 17-6-15. G.S.W. - permanent ankylosis. Unable to close hand-little power in grip. Tendons bound down. Occurred inservice further treatment not recommended.

Has it been aggravated by intemperance, vice or misconduct? No.

18

M. F. B. 227.
20m.—10-15.
H. Q. 1772-39-117.

[OVER]

12.—In gunshot wounds, or other injuries, state how caused ; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held ?

Occurred at Givinchy 17.6.15.

13.—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.

No.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

No.

15.—Is the disability permanent ? If not, state its probable duration. To what extent will it prevent his earning a full livelihood ?

Yes.

One third total disability.

16.—Full particulars of medical treatment of case up to date of invaliding.

Admitted to Convalescent Home, Dec.10.15
Rest.

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

No.

18—State if for discharge on account of unfitness for service.

Yes.

A D Proctor

Captain A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

The Board having assembled pursutnt to order proceed to examine and report on the present physical condition of Pte. No.8092, Frank Wm. Foster, 2nd.,Battalion C.E.F.,concur fully in the above report.

Find man unfit for service due topermanent ankylosisx of metacarpal joints right hand, producing inability to close hand and atrphy of muscles of hand, otherwise no disability from previous injuries.

Recommend his discharge at once from the Convalescent Home and from the service, with i/3.disability.

Signatures :— R Gardiner Capt. A.M.C. President.

W Hale Jr. capt.A.M.C.

Station Kingston, Ontario.

Members.

Date February 7.16. L L Stauffer Capt.A.M.C.

Date February 7.16. R Gardiner Major A.M.C.

Assistant Director of Medical Services.

3rd.,Division.

Approved.

Date Feb. 17. 16 W Bruce Easton Major

for Director of Medical Services.

[OVER]

(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.
20m.—10-15.
H. Q. 1772-38-117.

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.

DUPLICATE. 8092

ARMY FORM B. 178.

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

MEDICAL HISTORY of

Surname FOSTER *Christian Name* Frank William

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Exeter, Devonshire County Eng

Examined ... ... on 22nd day of Sept 191 4, at Valcartier

Declared Age ... ... 24-8 years days.

Trade or Occupation ... Labourer

Height ... ... 5 feet 10 inches.

Weight ... ... lbs.

Chest Measurement — Girth when fully Expanded ~~32½~~ 34. inches.

Chest Measurement — Range of Expansion 1½ inches.

Physical Development ...

Vaccination Marks — Arm ... Right Left

Vaccination Marks — Number 3

When Vaccinated ... ...

Vision ... ... R.E.—V=

L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a) Small mole back of neck

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

Approved by (*Signature*) G.G. Green

(*Rank*) Capt A.M.C *Medical Officer.*

Enlisted ... ... at Valcartier on 22nd day of Sept 191 4.

Joined on Enlistment ... / Transferred to	Corps.	Regtl. No.
	2nd Batt	8092

Became non-effective by ...

on day of 191

(*Signature*)

(*Rank*)

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

W.R. WARD,
Colonel in Charge of Records,
Canadian Contingents.

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

Forms B. 178 39

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remark
	Day	Month	Year	Day	Month	Year			
Vol. Aid Organisation. EXETER.	17	6	15	19	10	15	B.W.Hand right	125	Bul res to occ

List in the case of Warrant Officers treated in quarters.

s bearing on the cause, nature, or treatment of the case, likely to be of interest or of future se. In cases of syphilis, admissions and re-admissions to hospital will be shown. The ubsequent progress, including particulars of treatment out of hospital, transfers, &c., will e given in the special syphilis case sheet.	Signature of Medical Officer
let has passed through hand fracturing metacarpal with	
lting callus and adhesions. Under gas attempts	
break down the latter have been made on several	Arthur Robin. M.D.
asions but grip of finger much impaired.	

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

Date	Brief details, and signature
Oct 1914	Vaccination G.G.G
Sept 1914	Anti-typhoid inoculations

I certify that the foregoing is an original entry on a Medical History Sheet of the Canadian Contingents.

C.A.M.C.
for the Officer in Charge of Records

Table IV.—Service Table.

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