

Duplicate

# ATTESTATION PAPER.

No. 101228

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Herbert A Funnell*
2. In what Town, Township or Parish, and in what Country were you born?..... *Epsom Surrey England*
3. What is the name of your next-of-kin?..... *Walter Father Thomas Funnell*
4. What is the address of your next-of-kin?..... *Halcourt Alta*
5. What is the date of your birth?..... *March 12<sup>th</sup> 1889*
6. What is your Trade or Calling?..... *Farmer*
7. Are you married?..... *no*
8. Are you willing to be vaccinated or re-vaccinated?..... *yes*
9. Do you now belong to the Active Militia?..... *no*
10. Have you ever served in any Military Force?..... *5<sup>th</sup> Can A Surrey Terris 1910-11*  
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*

*Herbert Funnell* (Signature of Man).  
*G.W. Owens* (Signature of Witness).

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Herbert A Funnell*, 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.

Date *7<sup>th</sup> Sept* 1915 *Herbert Funnell* (Signature of Recruit)  
*G.W. Owens* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Herbert A Funnell*, 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.

Date *7<sup>th</sup> Sept* 1915 *Herbert Funnell* (Signature of Recruit)  
*G.W. Owens* (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 *Edmonton* this *7<sup>th</sup>* day of *Sept* 1915

*A. E. Hopkins* (Signature of Justice)

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

*A. E. Hopkins* (Approving Officer)  
 MAJOR

66th, Overseas Bn., C. E. F.



Description of Herbert Gunnell on Enlistment.

Apparent Age 26 years 6 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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.)

Height 5 ft. 7 1/2 ins.  
 Chest measurement { Girth when fully expanded 35 1/2 ins.  
 Range of expansion 3 1/2 ins.  
 Complexion dark  
 Eyes blue  
 Hair dark brown  
 Religious denominations. { Church of England yes  
 Presbyterian .....  
 Wesleyan .....  
 Baptist or Congregationalist .....  
 Other Protestants (Denomination to be stated) .....  
 Roman Catholic .....  
 Jewish .....

*Cystic growth on right buttock  
 Scar on inside of left leg  
 between middle and upper thirds*

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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 Sept 13<sup>th</sup> 1915

Place Lake Saskatchewan  
Edmonton

*[Signature]*  
 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.

Herbert Gunnell 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.

Date Sept 13 1915 *[Signature]* (Signature of Officer)  
 Lieut. Col.  
 Commanding 86th Overseas Bn. C.E.F.











882  
 CANADIAN EXPEDITIONARY FORCE

War Service Badge

Class "A" No. ~~XXXXXXXXXXXX~~

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 101228 (Rank) Pfc

Name (in full) Herbert Funnell enlisted in  
 the 66th Can. Inf. Battn.

CANADIAN EXPEDITIONARY FORCE at Edmonton on the 7th  
 day of September 19 15

HE served in France with 49th Can. Inf. Battn.  
England with C.A.M.C.

and is now discharged from the service by reason of  
 Demobilization.  
 Medical Unfitness.

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

Age 32 years 3 months  
 Height 5 ft 7 1/2 in  
 Complexion Dark  
 Eyes Blue  
 Hair Dark Brown

Marks or Scars Cystic growth  
on right buttock scar  
on inside of left leg  
between middle &  
upper thirds

H. Funnell  
 Signature of Soldier.

J. Howland  
 Issuing Officer.

Date of Discharge



Major  
C. S. Dispersal Station "S"

Rank

Date JUL 8 1919 19.....

NB.- 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.



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J.P.

Rank

*Pte*

Name

FUNNELL, Herbert

Reg'l No.

101228. ✓

Unit

66th Bn.

If in perm. Corps,  
What Unit? }

Married or Single

Single. ✓

Place and Date of Enlistment

Edmonton. 7th Sept. 1915. ✓

Place of Birth

Epsom Surrey. ✓

Name and Address, Next-of-Kin

Thomas Funnell. ✓

England

Halcourt, Alberta. ✓

Relationship

Father. ✓

HALCOURT

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

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.				
		Arrived in England	S.S. Olympic	7 MAY 1916	R.O. 758 d. 8. 5. 16 AFB 103 Chester RTW
5. 6. 16.	O.C. 66th	Embarked for France.	49th Bn	4. 6. 16.	P. II O. 124
14. 6. 16	49th Bn	Taken on strength.	Field	8. 6. 16	do 24
24. 10. 16	Do.	Missing	Do.	4. 10. 16	C.L.A. 271
25. 10. 16	Do.	Previously reported missing Now rejoined unit	Do.	15. 10. 16	C.L.A. 272.
14. 11. 16	Do.	adm. No. 4 Can. Field amb	Do.	4. 10. 16	C.L.A. 283 Spr ankle
Do	Do.	Discharged from Hosp Adm from Base	Do.	5. 10. 16	Do.
19-6-17	✓	WOUNDED IN ACTION	✓	9-6-17	Ch <sup>a</sup> 437
20-6-17	✓	Adm #7 Can Gen Hosp	Staples	10-6-17	Ch <sup>a</sup> 438 (Buried) (Coat)
22-6-17	✓	TRANS #6 Bow Hosp	✓	13-6-17	Ch <sup>a</sup> 440 (✓)

base

67 MC

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R-122



101228

Funnell, H.

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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.				
25-6-17	49 <sup>th</sup> Bn.	Disch'd to Base Details		15-6-17	CL <sup>a</sup> 442. (Bureau Court)
20-3-18	"	SOS to Can Lab. Pool.	Dills, Pi.	9-3-18	R-0.20. <i>Can Lab Pool No 37/22-3/18</i>
27-3-18	<i>Can Lab Pool</i>	S.O.S to 3 <sup>rd</sup> C.I.B.D.	✓	24-3-18	- 39.
20-10-17	30 <sup>th</sup> B.N.	Att in. w E	El. Opie ✓	6-9-17	PT-2019.
30-3-18	Gen. Depot	T.O.S from Lab. Pool	S. Cliffe Pte	27-3-18	D.O. 76
31-8-18	30 <sup>th</sup> B.N.	T.O.S from C Lab Pool.	El. Opie ✓	25-8-18	PT-2005.
3-4-18	30 <sup>th</sup> B.N.	SOS to Gen Depot Farmer	✓	26-3-18	PT-2006
27-4-18	Gen Depot	SOS transferred to SB. R.D. Dept	Shandliffe Pte	26-4-18	- 100 R.D.D. PT-100
8-7-18	Base. S. Cliffe	S.O.S to Corps Depot	-	8-7-18	- 157. B. 180. d/10.7.18. <i>ca. 10.7.18. ca. 180</i>
15-7-18	Came. Cd.	S.O.S to Came. Depot.	-	13-7-18	- 184
16-7-18	Came. Depot	T.O.S. from Came. Cd.	"	10-7-18	- 197
14-9-18	Came. Depot	S.O.S to No 9 G. H. <i>for #12 C.I.B.D. (Came. Est. Pool) for command est duty to Can on posting from #9 C.I.B.D. (Kimmel) back.</i>	"	13-9-18	- 257. <i>No 9 G. H. Pte II 158 d/16-9-18.</i>
5-6-19	12 <sup>th</sup> C.I.B.D.		✓	3-6-19	- 131 <i>9.6.314 R-IDD 40/4-6-19</i>
19-6-19	12 <sup>th</sup> C.I.B.D.	of com			<i>84 - 11 - date 25/6/19</i>
19-6-19	12 <sup>th</sup> C.I.B.D.	of com	Escort duty to Canada	19-6-19	- 143
			SOS TO CAN. CAMO. After. O, I		<i>25-6-19</i>
2-7-19	✓	SOS to Canada	✓	25 <sup>th</sup> 19	D.O. 154
24-7-19	Came. Dep.	SOS of com. & e. on pro. to Canada	London	25-6-19	a. o. i.







Date	Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
	From whom received	Record of promotions, reductions, transfers, casualties, &c., 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.			
29-4-18	Case R+D	TOS from Genl. Depot	Seliffe	26-4-18	Part II 100
JUL 8 1918	do	S.O.S. to case Corps report	do.	JUL 8 1918	PART II ORDER NO. 157 W.D. Wilson C.C., C.A.S.O.
10-7-18	Case to CasDep.	3.O.S of Case to Cas Depot.	do.	8-7-18	P.O. 180 <sup>d</sup> 10-7-18
15-7-18	-	3.O.S To Cas Depot	do.	13-7-18	184 <sup>d</sup> 15-7-18 Robertson LIEUT
			OFFICE RECORDS	20366.D	
16-7-18	Case R+D	Taken on Strength	Seliffe	13-7-18	P.O. 197
14-9-18	-	SOS to 9 C.G. Hq. Seliffe	-	13-9-18	P.O. 257
			At Camp		Capt. Asst. For O.C. C.A.M.C. Reserve Unit
16-9-18	No 9 C.G. Hq. Seliffe	TOS from Genl. Depot	Monchiff	13-9-18	P.O. 158
4/6/19	9 C.G. Hq. Seliffe	S.O.S. on pooling to Local pool 12 C.G. Hq. Seliffe Bramshott	Kennel Park	3/6/19	P.O. 2 N-40
5-6-19	12 C.G.H	TOS from 9 C.G.H.	Bramshott	3/6/19	P.O. 131 4/5-6-19
19-6-19	"	On Command Escort Duty to Canada	"	19/6/19	P.O. 143 12 C.G.H.
28-6-19	12 C.G.H	S.O.S. On C. on proceeding to Canada.	J. Maszard		Capt. Asst. P.O. 143 12 C.G.H.



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

M. F. W. 54. (A. F. B. 10s.  
500M.—9-16  
H. Q. 1772-39-9 0.

# Casualty Form—Active Service.

Unit, Regiment or Corps 66<sup>th</sup> O. Battalion

Regimental No. 101228 Rank Pte Name Fennell, Herbert  
C. E. F.

Enlisted (a) 7.9.15 Terms of Service (a) ..... Service reckons from (a) 7.9.15

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. 38, 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. 38, or other official documents
Date	From whom received				
<u>25.6.19</u>					
<u>8.7.19</u>					
<u>24-7-19</u>	<u>came pers.</u>				

25.6.19 TAKEN ON STRENGTH OF NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 193 DATED 12.7.19  
8.7.19 DISCHARGED FROM H. M. SERVICE BY NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 193 DATED 12.7.19  
 AUTH. RD. 1420

A. G. Baker Lieut.-Col.  
 for Officer Commanding No. 13 District Depot

Sos. of Am & C. on pro. London 25-6-19 a.o.i.  
to Canada. D. P. Smith  
 capt. for head R.

(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, Shoering 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				



Original 882

# ORIGINAL

## MEDICAL HISTORY SHEET.

Surname Kimmel Christian Name Herbert

Examined { on 13<sup>th</sup> day of Sep 1915  
at Edmonton

Approved by [Signature]

Birthplace { City or Town Lepson  
County Surrey England

Rank Capt M.O. 4 APR 1918

Apparent age 26 yrs 6 mo

Trade or occupation Farmer

Height 5 Feet 7 1/2 Inches

Weight 135 Lbs.

Chest measurement { Minimum 32 inches  
Maximum expansion 35 1/2 inches

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right Left  
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease Cystic growth on right side of Buttock  
Scar on inside of left leg between middle &

(b) Slight defects but not sufficient to cause rejection upper third

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
<u>Sept 5</u>		<u>[Signature]</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Sept 15</u>		<u>[Signature]</u> M.O.
<u>25</u>		<u>[Signature]</u> M.O.
		M.O.

Enlisted on 7<sup>th</sup> day of September 1915 at Edmonton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>66<sup>th</sup> O.B.A.H. Bt. Lt.</u> <u>49th. Bn.</u>	<u>101228</u>		<u>7<sup>th</sup> Sep. 1915</u>
Transferred to..				

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Edmonton B.H.</u> <u>9 Oct</u>	<u>11/24/18</u> <u>15/9/14</u>	<u>Varicose Vein</u>	<u>Fit for service</u> <u>Fit for service</u> <u>admitted</u>
<u>2096 G. H. Kimmel Park</u>	<u>27-2-19</u>	<u>Varicose Vein</u>	<u>Fit</u> By <u>Blending Medical Board</u> <u>At Longherbapt</u>

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.

CANADIAN



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101228

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>Edmonton</i>	<i>1 11 15</i>	<i>14</i>	<i>10</i>	<i>15</i>	<i>10</i>	<i>16</i>	<i>L. S. S.</i>	<i>8</i>	<i>Complete recovery</i>	<i>W. S. Jones</i>	
<i>Missing</i>		<i>4</i>	<i>10</i>	<i>16</i>	<i>15</i>	<i>10</i>		<i>11</i>	<i>Prev. Rep. missing after action. Now rep. unit</i>	<i>A 271. 4272</i>	



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) FUNNELL, H.  
 REGIMENT C.A.M.C. RANK Pvt No. 101228  
 Date of Examination in England H-6-19 Date of Examination in France \_\_\_\_\_

DIRECTIONS TO DENTAL OFFICERS

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

*C.C.C.*  
*POOL*



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

12 & 14, 19, 20, 21, 28-30

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

- 17, 20, 21, 28, 30,

HAS HE EVER REFUSED DENTAL TREATMENT?

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

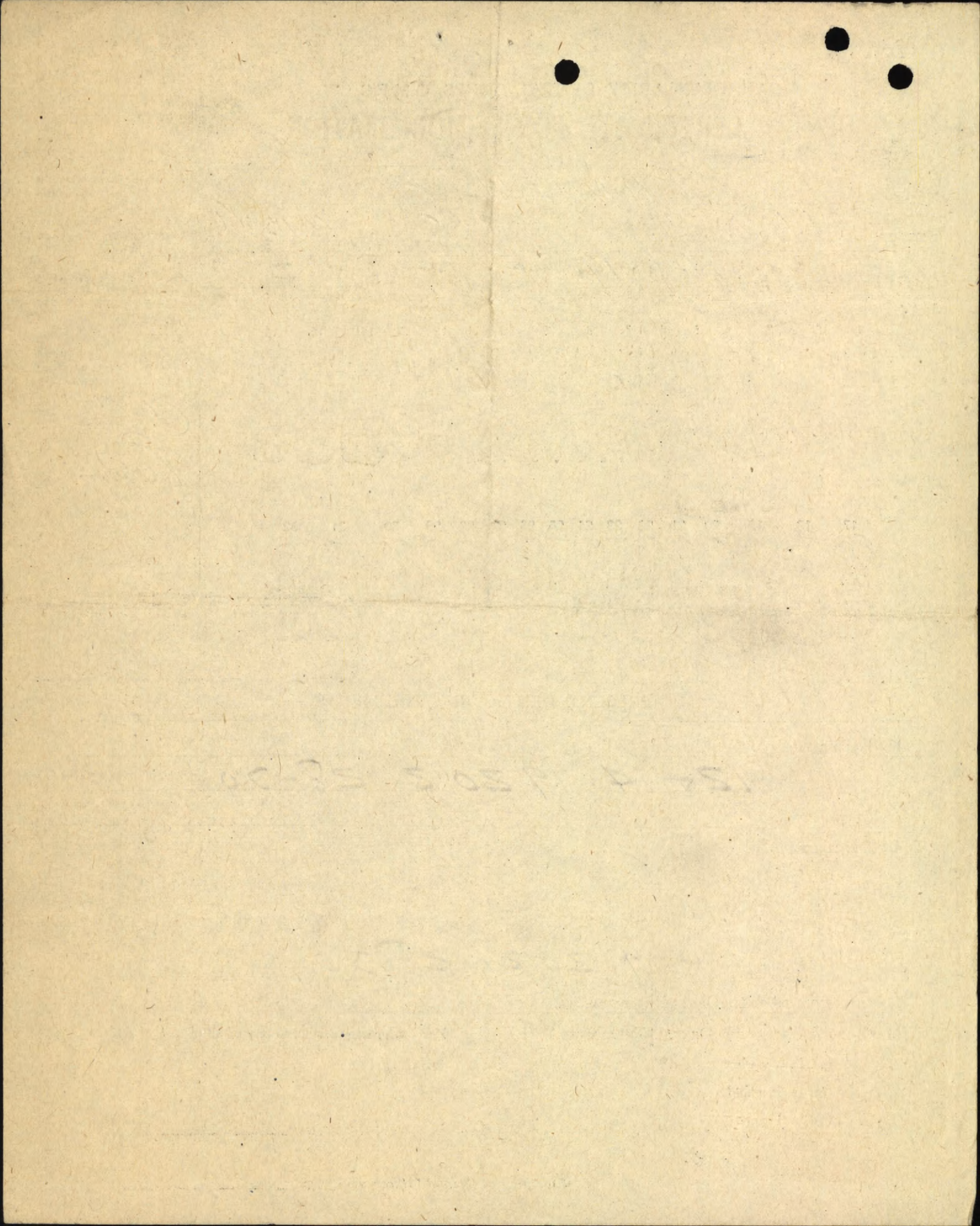
- (a) ~~In Canada~~
- (b) ~~In England~~
- (c) ~~In France~~

BRAMSHOTT CAMP  
HANTS.

Signature of Dental Officer

*[Handwritten Signature]*







F 975

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names Herbert 2. Surname Funnell
- 3. Rank Pte. 4. Original Unit 66 Batta. 5. Reg. No. 101228.
- 6. Address, in full, to which future payments of gratuity are to be forwarded  
The Bank of Commerce  
Lake Parkaton Grand Prairie  
Alta.
- 7. Date of enlistment in the C.E.F. 7 Sept 1915
- 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? Not applicable
- 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:—~~
- 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?~~
- 14. ~~Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.~~
- 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 Three years, nine months  
66 Batta, Can. Eng, 49 Batta Franca, Gen. Depot Shorncliffe  
C.A.S.C. Shorncliffe, C.A.M.C. depot Shorncliffe, G.C.G.H. Shorncliffe, & Kinnel Park.
- 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

5434. Wt. /P30. 250,000(3). 2/19. S.O., F.Ed.  
6421. Wt. /P51. 35,000(4). 5/19. S.O., F.Ed.

S. 77 70  
Or 100

Carsonia



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

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

~~20. Have you been issued with a War Service Badge? If so what class?~~

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

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

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

(b) If so, was such reversion in consequence of misconduct or inefficiency? *No*

~~24. Are you now serving in the C.E.F.? If not, give: (a) Date of discharge~~

*8.7.19*  
*C.E.F.*

(b) Reason for discharge

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.

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

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

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

EXAMINED BY *[Signature]*  
REMARKS  
ESTIMATED DISCHARGED *8.7.19*  
PUT ON PAY *8/8/19*  
INITIALS *[Signature]*

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: *Herbert Funnell*  
Place of Residence: *"Bobbisham" Farm Halcourt P.O. Grande Prairie Alberta*  
Declared before me at: *C.A.M.C. Escort Pool Bramshott Hants*

This.....day of *June* 19*19*.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

*Questions 12, 13, 14, 20, 24, 25, 26, 27 not answered*  
*June 7/19* Major *C.A.M.C.*

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
	<i>nil</i>		<i>\$2000</i>	<i>\$2000</i>

Certified Correct.

*G. Edwards Major*

GENERAL AUDITORS  
AUDITED  
*[Signature]*  
687 1 1919  
District Paymaster.  
DISTRICT AUDITOR M. D. 13

*RBR*



882

Surname *Funnell* Christian Name or Names *H.* Reg. No. *101228*

Rank *Pte* Unit *49th Batt.* Co. Troop Batty.

Hospital *no 4 Gen. Fld. Amb.* Date of Admission *4.10.16*

Transferred *7. Ban Gen Enghes* Hosp. *10.6.17*

*#6 Convo Depot Etaples* Hosp. *13.6.17*

Hosp.

Hosp.

Diagnosis

*Spr. Ankle*  
*Burred Cont R*

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

DISPOSITION	REMARKS	Date
<i>6.11.16 A283.</i>	<i>Sick B. Details</i>	<i>Disch. 5.10.16</i>
<i>19.6.17 A437.</i>	<i>R. F. B. Wd. in Action</i>	<i>15.6.17</i>
<i>20.6.17 A438.</i>		
<i>22.6.17 A440</i>		
<i>25.6.17 A442</i>		

A.M.D. 2 Dept.



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



*[Handwritten initials]*

Number 101228 Rank Pte

Surname FUNNELL

*[Handwritten initials]*

Christian Name Berbert

Units 49th Bn Can Inf Theatre of War France

Date of Service 4-6-16

Remarks

Latest Address Halcourt P.O.

Grand Prairie, Alta

Roll No. B. Page 16026

200m.-2-21.M.



NUMPDEL

NUMPDEL

RAUK

DESP AUG 21 1922

REGN. NO. BY 2116.



Name FUNNELL, Herbert Rank Private

Reg. No. 882

101228

Unit 49th Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
4-10	Reported from Base	MISSING.		A 271	3506	24/10
15-10	Prev. Reptd. MISSING	now Rejoined Unit		A 272	03548	25/10
4-10	to 4. Can Field Amb.		Sp. R. Amble	A 283		
5-10	Discharged			A 283		
9-6-17	Reptd. from Base.	Wounded.		A 437	M. 5595	19/6.
10-6-190.	17. Can. Gen. H.Q.	Etaples	Buried. Cont.	A 438.		
13-6-190.	6. Can. Depot.	"	"	A 440.		
15-6-190.	Discharged			A 442.		







No. 101228 RANK *Pvt.*

NAME *Funnell, J. B.*

T. O. S. *7-9-15* UNIT *66<sup>th</sup> Battalion*  
*(D.O. 917 15-9-15)*

M. D. *13*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Sept 7</i>	<i>Sept 30</i>	<i>L</i>		
<i>Oct. 1</i>	<i>Oct. 31</i>	<i>L</i>		
<i>Nov.</i>		<i>L</i>		
<i>Dec.</i>		<i>L</i>		
<i>1916</i>				
<i>Jan.</i>		<i>L</i>		
<i>Feb.</i>		<i>L</i>		
<i>Mar.</i>		<i>L</i>		
<i>Apr.</i>		<i>L</i>		
<i>May.</i>		<i>L</i>		

UNIT SAILED  
 APR 28 1916







NAME

~~Funnell, Herbert~~

649-7-3009 S. 13

Sosdemob 8-7-19  
Do 193 12-7-19

RANK & No.

~~Pte~~

151228

CORPS

~~66th~~ 13. D. D.

Batt.

ENLISTMENT, PLACE

Edmonton

DATE

Sept. 4th. 1915.

FORMER CORPS

5th. East Surrey Regt. 1910-11

COUNTRY OF BIRTH

England, Epsom Surrey.

NEXT OF KIN

Funnell, Thomas (father)

ADDRESS OF NEXT OF KIN

Halcourt, Alta.

DISCHARGE, PLACE


DATE

o/s. 28-4-16.  $\frac{406}{9}$

PR. 2. 7-19  $\frac{360}{152}$  Pte

M. F. W. 22. 100 m.-9-15.



Sailed from Halifax  Per S.S. Olympic 28/4/16

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

farmer

RELIGION

C. of E.

DESCRIPTION.

APPARENT AGE

26 YEARS

6 MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

35 1/2 INCHES

EXPANSION 3 1/2 INCHES

COMPLEXION

dark

EYES

blue

HAIR

dk brown

DISTINGUISHING MARKS

Cystic growth on right side of buttock. Scar on inside of left leg, between middle & upper thirds.

MEDICAL EXAMINATION.

PLACE

Edmonton.

DATE

Sept. 17th. 1915.

REMARKS:



882

REGT'L No 101228

NAME Funnell Herbert

H. Q. FILE NO. 649-

RANK AND CORPS Pte 49<sup>th</sup> Bn form 66<sup>th</sup> Bn

FOLLOWS

No.

CABLE

NATURE OF CASUALTY

FOLLOWS

No.

DATE

C

No.	DATE	NATURE OF CASUALTY
03506	24-10-16	Reported missing between Sept 15 <sup>th</sup> & Oct 4 <sup>th</sup> /16 ✓
03548	24-10-16	prev reported missing Oct 4 <sup>th</sup> now returned to regimental duties Oct 15 <sup>th</sup> 1916 ✓
M5595	19617	Rep. Wounded June 8/17 ✓



LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 271	Rept from Base	4-10-16	Missing
a 272	Crew rept Missing after action	15-10-16	Now Rejoined Unit
a 283	No 4 Can 7 lbd Ambr	4-10-16	Spr ankle
a 283	" " " " "	5-10-16	" " Disc
A437	Rep from Base Wounded in action	9-6-17	(not stated)
A438 <sup>2</sup>	No 7 fan Gen Staples	10-6-17	Buried Cont. R. 12-7-17
A440	#6 Conv. Depot Staples	13-6-17	" " 16-7-17
A442	Orsch to Base Details	15-6-17	" " 17-7-17



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

To Whom *T. Funnell*  
 Address *Walcourt*  
*Grande Prairie*  
*Alto*  
 Rate \$ *50 00*

By Whom Assigned *Funnell. H*  
 Regtl. No. *101228*  
 Rank *Plt*  
 Corps *49<sup>th</sup> Bu*

SPECIAL REMITTANCE

*Schedule 263. 11.12.16*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915	<i>37570</i>	<i>50</i>	
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				









\* Strike out wherever inapplicable.

ASSIGNED PAY: ENGLAND or CANADA. SEPARATION ALLOWANCE: ENGLAND or CANADA.

NAME: FUNNELL, Robert.  
NUMBER: 101228

EFFECTIVE DATE: 1-1-18 1-10-18  
EFFECTIVE DATE:

AMOUNT: 20<sup>00</sup> 15<sup>00</sup>  
AMOUNT:

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pvt.

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.

Thos. Funnell, (Father)  
Kaleont P.O. Grand Prairie  
atm #7/8/18. Alta.

Stopped effect 1.8.19.

UNIT AND TRANSFERS  
ORIGINAL UNIT: 66<sup>th</sup> Bn.  
DATE ACCOUNT FIRST OPENED: 1-5-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
5	31-3-18	25-3-18	Hq Bn
100	26/4/18	20/5/18	3 <sup>rd</sup> G.B.D. "L"
			C. A. MCG

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
20/3.	1017	9 Can Gen Hoop	9.30				
17/4.	86		48.67				
			55.97				
			356.55				
			300.58				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	100	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Transf. to Canada 1.5.19. N.F. 46665. R. P. 4.4.19 R.P. 11.2.13.

MONTH 1914	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Balance Forward								308.41	300	
April	P.P.	33		Can. A.P.				20			
				489. 15/4 Deb off	9.73						
		33			9.73			20	311.98		
May	P.P.	34.10		Can. A.P.				20	326.08		
				AR 505. 30/4/18. C.A.S.C. (F20)	4.87				321.21		
				" 664-13/5/18. " (F20)	4.87				316.34		
				200934-24/5/18. " (F20)	4.87				311.47	300	
June	P.P.	34.10		Can. A.P.				20	324.47		
		33		Ln 1191. 6/26 5/6 off 13/6 C 11	9.73				314.74		
				Ln 1423 " 24/6 C B	4.87				309.87		
July	P.P.	34.10		C.A.P.				20	323.97		
				Q4005. 4/7/18. 1/2 loss 5/6 off	7.11				323.20		
				AR 133. 1/2 loss 20-7 C 10	4.99				318.21		
				Ln 1572 4/2/18 1/2 C 11	7.30				310.91	300	
		34.10			13.06			20			
Aug	P.P.	34.10		C.A.P.				20	325.01		
				1655. 6/26 13/8	3.14	7.2			310.29		
				1776 " 29/8	10.73				307.99		
		34.10			27.07			20			
Sept	P.P.	33		Can. A.P.				20	315.99		
				1053 Hq. Gen Hos. 10/9	5.87				311.12		
				1088 " 24/9	12.48				306.25		
		33			9.73			20			

*Chief*

COMPILED BY: *Shywood*  
CHECKED BY: *Shywood*

*Gen A.P. 15*



NUMBER 101228 RANK

NAME FUNNELL H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918									306 25	✓	
Dec	P.P.	34 10		b.a.p.				15	325 35		
				1206 9/10	14/10	15	4 87		320 46		
				1535	30/10	39	4 87		315 61	✓	
		34 10						15			
Nov	P.P.	33 00		b.a.p.				15	333 61		
				1600.	11/11	9.	4 87		328 74		
				1789.	28/11	29.	9 73		319 01		
				1836.	2/12	28	29 20		289 81		
Dec.	P.P.	31 10		b.a.p.				15	308 91		
Jan 19		34 10		b.a.p.				15	328 01		
		101 20					43 80	45			
Feb.	P.P.	30 80		b.a.p.				15	343 81		
				4270.	28/1	58	7 30		335 51		
				4430	13/2	91	9 73		325 78	300	
Mar	✓	34 10		b.a.p.				15	344 89		
				623	26/2	119.	9 73.		335 15		
				51, 148	9/1	122	9 73		325 42		
				847	12/3.	149.	9 73		316 69		
		64 90					46 22	30			
April	✓	33.		b.a.p.				15	334 69		
	Int on def pay	21 86							356 55		
				AR 1017 20/3 9911 E 2			7 30		349 25		
				" 86 2/4 " E 9			48 67		300 58		
		54 86					58 97	15			
				AR 1221 28/5 9911 E 2			9 73		290 85		
				" 693 1/5 " E 26			9 73		281 12		
				E.P. 75362 20/6 Lon 27			24 33		256 79		
				AR 389 13/6 (E) 29			9 73		247 06		
				" 463 18/6 12911 (E) 30			9 73		237 33		
				" 948 15/5 KP (E) 60			4 87		232 46		
							68 12				

Sol to Can 25/1/19  
St 84 cane











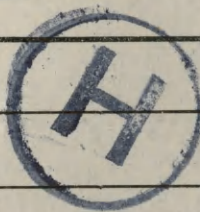
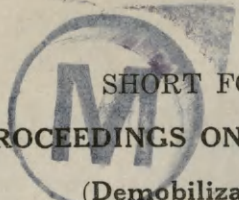
882

W.S.B. CLASS A 253624

OCCP G. 1  
DISP A. S

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

24/11/39



H.M.T. CARONIA  
SAILING. No 04  
Embarked 25. 6. 19.

1. No.	101228
2. Rank.	Private
3. Name.	FUNNELL, Herbert
4. Unit.	C.A.M.C.
5. Date of Discharge	JUL 8 1919
Place	EDMONTON, ALTA.
6. Reason for Discharge	Demobilization
7. Authority.	DDO 193
8. Proposed Residence after Discharge	Halcourt P.O. Grand Prairie, Alta
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.?	B. 39.
<i>Decreased 9-2-39</i>	
H. Funnell	
Signature of Soldier.	
10. CONFIRMATION.	
The discharge of the above named man is hereby confirmed.	
Place	EDMONTON, ALTA,
Date	JUL 8 1919
<div data-bbox="960 1781 1345 2006" data-label="Text"> <p>MEDICAL DOCUMENTS FORWARDED TO S.C.R. OR B. P. C. ON 12 7-19</p> </div>	
Signature.....	
G. Howland	
(O. C. Discharging Unit.)	



WILLIAM

MONDAY

WILLIAM

WILLIAM



Содержание

Введение

Глава I

Глава II

Глава III

Глава IV

Глава V

Глава VI

Глава VII

Глава VIII

Глава IX

Глава X

Глава XI

Глава XII

Глава XIII

Глава XIV

Глава XV

Глава XVI

Глава XVII

Глава XVIII

Глава XIX

Глава XX

Глава XXI

Глава XXII



**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 unobt: inable.....	
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

- ✓ 1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
- ✓ 2. Casualty Form (A.F.B. 103).
- ✓ 3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
- ✓ 4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
- ✓ 5. Dental Certificate (D.A.D. 2009a).
- ✓ 6. Field Conduct Sheet (A.F.B. 122)
- ✓ 7. Proceedings of Discharge (M.F.B. 218a)
- ✓ 8. Discharge Certificate (M.F.W. 44) (Enclosed in special envelope (260M)).
- ✓ 9. Copy of Discharge Certificate (M.F.W. 39a).
- ✓ 10. Discharge Certificate (D.D. 3).
- ✓ 11. Receipt of Statement Q.M.G. Form (D.O.S. 2).
- ✓ 12. Last Pay Certificate (P. 231).
- ✓ 13. Medical Certificate (M.F.W. 2595).
- ✓ 14. Missing Documents.

Group KB  
 Checked by No. 43  
 Date 25/6/49



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

6260 F  
6333  
6272

Jan'y 18

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

2000	15		
------	----	--	--

1-16-18

## PARTICULARS OF SEPARATION ALLOWANCE

No. 101228  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name Herbert Funnell  
 Battalion 66th Bn  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name Thomas Funnell  
 Address Halcourt P.O.  
 Change of Address Grand Prairie Alberta  
 1 THOMAS TUNNELL,  
HALCOURT P.O.,  
 2 GRAND PRAIRIE, ALTA.  
 3 % 101228 PTE HERBERT TUNNELL  
TWENTY DOLLARS  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Feb. 15	U 72259		20	20
	U 85919	20	20	20
March	W 91910		20	20
April	X 14207		20	20
May	S 13800		20	20
June	M 24245		20	20
July	M 31618		20	20
Aug	M 39698		20	20
Sept	T 42373		20	20
Oct	R 56028		15	15
Nov	N 58828		15	15
Dec	V 68026		15	15
Jan	T 69960		15	15
Feb	Y 74098		15	15
MAR	2 86675		15	15
Apr 2	1088		15	15
May	M 713		15	15
June	M 10577		15	15
July	M 12800		15	15
			330	330

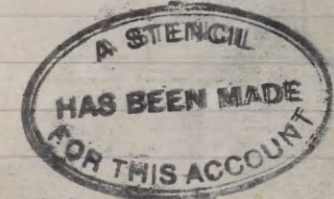
MR01 B. 27-3-18 REMARKS 6535-H-4

27M 30/18  
 mailed 62 430 18, mailed 28-3-18.  
 W 91910 issued under Funnell in error. should have been Funnell  
 Saved 27-3-18  
 A.P reduced to 15<sup>00</sup> effective 1-10-18.  
 Authy 2m on file 6535-H-4.  
 MR0 13-9-18.

A/c Closed 31-7-19  
 Ret'd per... Coronia ...  
 Date 2-7-19 M.F.W.187 M.D.12  
 Clerk A.J.B. 11-7-19  
 M.R.O. 93487

M. F. W. 128.  
 400M. 6-17-1772-39-1141  
 L. L. 22320-M. & D. 7893.

AUDITED.

















W.S.B. CLASS A

Sheet No 1 892  
 Fill in Only.—Unit, Number, Rank and Name.

CERTIFIED CORRECT  
 Canadian Record Office,  
 Westminster House,  
 M. P. W. 54,  
 7, MILL LANE, S. W.  
 H. Q. 172-38-920

Casualty Form—Active Service.

66th. O. BATTALION C. E. F.

W.S.B. CLASS A

101228 Unit, Regiment or Corps

Regimental No. ~~101176~~ Rank *Private* Name *Herbert Jurnell*  
 C. E. F.

Enlisted (a) *7/9/15* Terms of Service (a) *Duration of War* Service reckons from (a) *7/9/15*

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) *Farmer*

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.
--------	--	-------	------	--

*Embarked. Canada Apr. 28th. 1916. (Disemb. May 1st. 1916).  
 Disembarked. England May 7th. 1916.  
 Transferred Hqth. Bn. 6th June 1916.*

*S. Bothwell* ..... Captain and Adj. 66th. Overseas Batn. C. E. F.

O. C. C. B. D.	Landed in France. Taken on strength 49th Cdn. Bn	8/6/16	Nom. Roll d/ 8/6/16 P. H. D. O. d/ 14/6/16 Name. d/ 9/6/16
— do —	Left for Unit.	9/6/16	18/6/16.
O. C. 49 Bn.	Arrived Unit for duty.	11/6/16	4-10-16. <i>KD 137/1661</i> <i>Cancelled Det 233</i>
7-10-16	UNIT MISSING AFTER BATTLE.		11-10-16. <i>B 213 Det 233 of 21.10.16</i>
15-10-16	do. Rejoined Unit from Hosp.		do
7-10-16	4 CFA sprained rt. ankle	eam dis	4-10-16 4 CFA Duties
11-6-17	Ob. Hq. Wounded to hospital		5-10-16 <i>JA 36 Det 240 of 8.11.16</i>
16-6-17	" l. B.D. Arrived at 3rd l. B.D.		9-6-17 <i>KD. 16/10/13. Det 324</i>
19-6-17	" classified "PB" by a medical Board		16-6-17 N.R.
10-6-17	7 banken contusions buried alt	eam	19-6-17 <i>W 3339-124-</i>
15-6-17	6 banken Class. "A"	20	10-6-17 <i>W 3034 W 667</i>
			15-6-17 " - <i>W 3031-</i>

(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, Shoing 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				
26-6-17	36 B.D.	To School of Cookery. "PB"	27th IBD.	26-6-17	nA.
13-6-17	6. Com Dep	Contusion buried adm	6 Com Dep	13-6-17	W3034-11299-
13-6-17	7 Banken.	Contusion buried 20	"	13-6-17	" - W2898-
22-7-17	3rd IBD	Arrived at 6 B.D.	Field	22-7-17	nA.
16-8-17	"	Classified "P.B."	"	16-8-17	WB339
8-9-17	"	" " with for duty.	"	8-9-17	B.213.
29-9-17	"	Granted 10 days leave to England.	"	29-9-17	" D.O. II. 1184/22.10.17.
13-10-17	"	Returned from leave	"	11-10-17	B.213.
8-12-17	"	Classified "B.2"	Field	8-12-17	W3339 Ask 270.
28-11-17	"	" " (Warreni Paris) "	"	12-1-17	" 1314.
12-1-18	"	" " ( " " )	"	9-2-18	" 1353
9-2-18	"	" " ( " " )	"	9-3-18	" 1408.
9-3-18	"	B.2. ( " " )	"	9-3-18	File K. 22960/272.
9-3-18	AAG.	S.O.S. on transfer to Canadian labour Pool. x 49th Bn	"	9-3-18	D.O. II 20, d 20/3/18.
10-3-18	"	S.O.S. of Cdn Div Pool from 49th Bn	"	10-3-18	PTI 0 37 d/22-3-18.
25-3-18	a a b	Transferred to 3rd C.I. B.D.	"	24-3-18	K.9. 18/2056. Rto No-39. 27.3.18
25-3-18	AAG	S.O.S. 3rd C.I. B.D. on transfer from. Can Lab. Pool.	Etaples	25-3-18	" " Part II 5. 3/3/18.
29-3-18	5/1/33	S.O.S. 3rd C.I. B.D. posted to Can for depot. (Experienced Farmer)	Shoncliffe	26-3-18	K. 22960/272. Part II 6. 3/4/18.
		A. J. Caw; a. J. 3a(1) 5-1-33			
		B. J. Johnson			
		Captain for Lieut. Col. a a J Can Section.			



*File copy 7-1-X 882*

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 initialed 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 Hosp. DATE 26-2-19

1. 1 (a) Unit C.A.M.C. (b) Regimental No. 101228 (c) Rank Pte  
 (d) Surname Herbert Funnell (e) Christian name Herbert  
 (f) Home address Halcourt P.O. Grande Prairie, Alta  
 (g) Next of Kin Thomas Funnell (h) Relationship Father  
 (i) Address of Next of Kin Halcourt P.O. Grande Prairie Alta

2. Age last birthday 31 Date of birth Mar. 12th 1887

3. Enlistment, or Appointment (if an Officer) (a) Place Edmonton, Alta (b) Date Sept. 13th 1915

4. Personal description:

(a) Height 5' 7 1/2" (b) Weight 130 (c) Complexion Dark  
(stripped)

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Cystic growth on right side of bullock. Scar on inside left leg between middle upper third  
2 vaccination marks left arm.

5. Former trade or occupation Farmer

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 years	166

	PERIODS	
	From	To
Canada <u>66th Batt.</u>	<u>Sept. 7. 15</u>	<u>May 1. 1916</u>
England <u>66th Btn.</u>	<u>May 1. 1916</u>	<u>June 7. 1916</u>
France or other theatres of War <u>49th Btn.</u>	<u>June 7. 1916</u>	<u>March 28. 1918</u>
<u>Eng. CASC &amp; C.A.M.C.</u>	<u>Mar. 28. 1918</u>	<u>Feb. 26. 1919</u>

7. Original disease, or injury Varicose Veins

(a) Date of origin 1910 (b) Place of origin England  
 (c) Cause standing while in printing trade



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.)

**Varicose Veins**

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.)

**Obj. Symptoms.** Right leg shows a very marked varicose condition of the veins in calf of leg. There is tenderness on pressure and thickening throughout but no discoloration or signs of breaking down. The leg is not at present swollen. There are very small varicose veins of left leg but cause no disability subjective symptoms:- states that if he walks over 4 or 5 miles he has pain throughout the whole right leg and he begins to limp and leg will swell. Has no complaints under ordinary conditions.

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

- Nervous System... **NO** Cardio-Vascular System... **NO** Genito-Urinary System... **NO**  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
- Special Senses... **NO** Respiratory System... **NO** Integumentary System... **NO**
- Disturbances of Mentality... **NO** Digestive System... **NO** Muscular System... **NO**
- Osseous and Joint Systems... **NO** Any other general condition... **Yes**

**He has a somewhat debilitated appearance. Color poor.**

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

Man states that he ~~first~~ first noticed varicose veins in 1910 but suffered no disability from them until 1917 when in France long marches would cause pain and swelling of right leg and he would have to fall out. He was boarded in France on account of varicose veins and marked "B.11." A.F.B. 179 of 11-4-18 states Cat. B.11. for varicose veins.



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).)

pleurisy left side when 14 yrs old in bed 1 month, fluid withdrawn.  
M.H.S. States La Grippe, Edmonton 14-12-15 to 21-12-15. O.R. states he was wounded June 9. 1916 Shrapnel face & concussion. (No record obtainable)

(c) (Here give a description of wounds, scars, and deformities. Admitted to No. 7. Can. Gen. Hosp.

Small linear scar on left side of face.

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

(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.)

Yes. Man states that the veins were but slightly enlarged at time of enlistment and caused no trouble.

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.)

No record of treatment. O.R. states he has been using a bandage since Aug. 1918.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? NO (If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes (If not, briefly state why)

17. Recommendations. Cat. B. 11.

J. J. Seabrook Capt Comm  
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, Herbert Funnell 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

*[Handwritten signature]*

Herbert Funnell Pte Rank.  
Signature of invalid examined.



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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.

- We Concur -

19. Is the invalid fit for

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

- (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.)

No Cat. B.ii. Boarded for return to Canada

Auth. A.D.M.S. Canadians Buxton Area Wire B.A. 129 of 24-2-19.

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

PLACE No. 9. C.G.H. Kimmel Park

DATE 27-2-19

*W. Taylor Maj. Gen. President.*  
*A. Houghes Capt. Gen. 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 *aa* Assistant Director of Medical Services. DATE 27-2-19  
 APPROVED BY ..... Director-General of Medical Services. DATE.....