10

ATTESTATION PAPER

No. 20/15741/40

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS)
1.	What is your name?	Goodwin Henry Richard
2.	In what Town, Township, or Parish, and in what Country were you born?	Yarmouth
3.	What is the name of your next-of-kin?	Mrs Margaret Goodwin Mother
4.	What is the address of your next-of-kin?	Argyle Sound Yarmouth Co.
5.	What is the date of your birth?	Dec 5th 1891
6.	What is your trade or calling?	Fisherman
7.	Are you married?	no
8.	Are you willing to be vaccinated or re-vaccinated?	Yes
9.	Do you now belong to the Active Militia?	No
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	no
11.	Do you understand the nature and terms of your engagement?	Yes
12.	Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

Harry R Goodwin (Signature of Man.)

A W Bennett Sgt (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Henry Goodwin, 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.

Harry R Goodwin (Signature of Recruit.)

Date July 29 1915 A W Bennett Sgt (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henry Goodwin, 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.

Harry R Goodwin (Signature of Recruit.)

Date July 29 1915 A W Bennett Sgt (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 Aldershot this 29 day of July 1915

G Dwyer Capt. J.P. (Signature of Justice.)

in and for County of Kings.

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

W Weeks Major LIEUT. COL. (Approving Officer.)

COM. 40th. BATT'N. C. E. F.

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

DESCRIPTION OF Goodwin Harry R. 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. 7½ ins.

Chest measurement
- Girth when fully expanded 37½ ins.
- Range of expansion 1½ ins.

Complexion Fresh

Eyes ~~Grey~~ Brown

Hair Brown

Religious Denominations
- Church of England
- Presbyterian
- Methodist
- Baptist ~~or Congregationalist~~ Yes
- 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.)

Scar on abdomen

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 July 29th 191 5 — Victor T. Common Capt A.M.S.

Place Aldershot [illegible] — 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

Henry Richard Goodwin 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 Aug 2nd 1915 — ~~LIEUT. COL.~~ Major COM. 46th. BATT'N. C. E. F. (Signature of Officer.)

Duplicate

ATTESTATION PAPER

No. 184740

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS)
1.	What is your name?	Goodwin Henry Richard
2.	In what Town, Township, or Parish, and in what Country were you born?	Fairmount
3.	What is the name of your next-of-kin?	Mrs Margaret Goodwin mother
4.	What is the address of your next-of-kin?	Aberdeen Fairmount Co
5.	What is the date of your birth?	December 5 1891
6.	What is your trade or calling?	Plasterer
7.	Are you married?	no
8.	Are you willing to be vaccinated or re-vaccinated?	Yes
9.	Do you now belong to the Active Militia?	no
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	no
11.	Do you understand the nature and terms of your engagement?	Yes
12.	Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

Harry R Goodwin (Signature of Man.)

A Bennett Sgt (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Goodwin Henry, 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.

Harry R Goodwin (Signature of Recruit.)

Date July 29 1915 A Bennett Sgt (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henry Goodwin, 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.

Harry R Goodwin (Signature of Recruit.)

Date July 29 1915 A Bennett Sgt (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 Aldershot this 29 day of July 1915

G. D Wyer Capt J.P. (Signature of Justice.)

in and for County of Kings

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

LIEUT.-COL. Major (Approving Officer.)

COM. 40th. BATT'N. C. E. F.

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

Ret. See 2-12-07 L.W.

DESCRIPTION OF Goodwin Harry M. ON ENLISTMENT.

Apparent Age 24 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7½ ins.

Chest measurement
- Girth when fully expanded 37½ ins.
- Range of expansion 1½ ins.

Complexion Fresh

Eyes ~~Grey~~ Brown

Hair Brown

Religious Denominations
- Church of England
- Presbyterian
- Methodist
- Baptist ~~or Congregationalist~~ Yes
- 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.)

one scar on abdomen

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 July 29th 1915 Victor F. Leonard

Place Aldershot U.K. Capt RAMC
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

Henry Richard Goodwin 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.

Major LIEUT.-COL. (Signature of Officer.)
COM. 40th. BATT'N. C. E. F.

Date Aug 2nd 1915

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Goodwin Henry Richard

Regt. No. 415740 Rank Pte

Corps C A S C for 40th Bn. 17849

Disability Pre enlistment

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate..... 2

Inventory of Kit.....

Last Pay Certificate..... 1

A.F.B. 122-1

1 add

WILL BE DISPATCHED TO M. D. 6 JUN 4 1920

1R149

14 - 22
21 - 23
27 - 25

4
4

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

CANADIAN CONTINGENT EXPEDITIONARY FORCE

"B" UNIT M. H. C. COMMAND.

LAST PAY CERTIFICATE

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

Regimental No. 415740 Rank Pte Name Goodwin A R

Corps 40 Bn. 697 who was* Discharged

On 10-11-17 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-11-17 191..., to 10-11-17 191..., the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 10 days at $ 1 c	10	
No.			Field Allow. 10 days at $ c 10	1	
Assigned Pay No. 8597	2	67	Other Allowances* Clothing Allow. 1-11-17 to 10-11-17	1 3	67
Other Charges*			Subs 1-11-17 to 10-11-17	6	
Payment on transfer or discharge No. 8598	10		Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	36	67	Total	36	67

*Give Particulars.

A monthly stoppage of $ 20.00 (†) has not (‡) been paid on account of Assigned Pay for the month of November 1917 to (Assignee) Mrs M Goodwin

(Address) Argyle Sound Near Yarmouth NS

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

On Transfer of an Officer.

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

REMARKS:—

M.D. No. 6

State (1) date of enlistment.....

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

No. 13

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

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date .....

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

Date 24-11-17

Place Halifax NS

A Lucas CAPT.
Paymaster "B" Unit M. H. C. Command
Paymaster

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

M. F. W. 44.

150M.—4-17.
H. Q. 1772 39-903.

Office of the A.D.M.S., Canadians, Shorncliffe,
19 Westbourne Gardens,
Folkestone.

9th October, 1916.

The Officer i/c Records,
Canadian Record Office,
London.

Name Goodwin, H. R.

No. 415740 Rank Pte.

Unit. C.A.S.C.,C.E.F.

The above noted appeared before a Medical Board on 7th October, 1916 and the following entry has been made on the Medical History Sheet of this man.

Board recommends:-
Discharge unfit. (Signed) JAS. PULLAR, Capt., President, S.M.B.
9th October, Approved.
D. F. McIntyre, Capt. for A.D.M.S., Canadians, Shorncliffe.

Further entries are also contained in this Sheet which are herewith copied.

Moore Barracks Hospital, Shorncliffe. 5/9/16. 5/9/16 - 9/9/16. Adhesives of Peritoneum. 4. Appendicitus, say 2 years ago. O.K. until June last - dragging pains from old appendix scar adhesives - Sent to C.C.H. for convalescence 8/9/16. (Signed) H. H. HESSIN (?) Capt.

I hereby certify that the entries as above noted are true copies.

D.F. McIntyre

Captain C.A.M.C. for
A.D.M.S.,Canadians, Shorncliffe.

Ward 3

DEPT. MILITIA & DEFENCE DEC -7 1917 H.Q. CANADA

MEDICAL TRANSFER CERTIFICATE.

Army Book 172.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of M. Bks. Hospital at Shorncliffe Date

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of: Age last birthday.	Service.	Service in the command.	DATES: Admitted into Hospital.	Transferred.	Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
19104	CASC.	JP	415740	Pte Goodwin Harry R	24	18/12		5.9.16		Bapt.	Adhesions Peritoneum	

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

Op. patient – 3 weeks convalesc. Light phys. drill.
Bilateral – Supporting abdominal bandage
Convalesc – 3 weeks
Not Overseas –

History – Dragging pains region of old Operation scar. Desires Abdl Belt.

H A Dessain Capt.
Medical Officer in Charge.

MEDICAL CERTIFICATE BOOK.

London: Printed for H.M. Stationery Office by Henry Good & Son, Ltd.

Sue

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

265

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 40th Battalion C.E.F.

Regimental No. 415740 Rank private Name Goodwin, Henry Richard

Enlisted (a) 29/7/15 Terms of Service (a) Duration Service reckons from (a) July 29. 1915

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) Fisherman

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				
14.2.16		On draft ~~[illegible]~~			A. W. Sutton.
14.2.16		Taken on strength of Cadet D.	14.2.16		Part II, 49 July 18, 1916 O.C.-C.I.S.C.-T.D.
	7 JUL 1916	Temp. Lt. 4th Div'l Train			19. Major Sportsman Capt. O.C.-C.I.S.C.-T.D.

(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.

5-9-16

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				

265

R—122.

Rank Pte. Name GOODWIN, Harry Richard. Reg'l No. 415740.

If in perm. Corps, What Unit?

Unit 40th Bn. Married or Single Single.

Place and Date of Enlistment Aldershot, July 29th 1915. Place of Birth Yarmouth.

Name and Address, Next-of-Kin Mrs Margaret Goodwin,

P.O. Argyle Sound, Yarmouth. Co. N.S. Canada Relationship Wife

C.C.A.C.
N/E. R.B. No. 2869
File R.L.
Category M U Can

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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
		Arrived in England.		28 OCT. 1915	
30-11-15	W.O. No 11	Admitted to Hospital Bronchitis	Can Con Hosp Bearwood Berks	20-11-15	
30-11-15	W.O. No 11	Discharged from Hosp.	" "	23-11-15.	
25-11-15	C.C. 40th	Admitted to Frensham Hospt. Transferred to Can Conv. Hospt Wokingham.	" "	4-11-15	
		Discharged from Hospital	" "	20-11-15.	Part II Daily Orders 223.
14. 2. 16	"	Attached B the C.H.S.C.T.D. & will be Thorn on Command till further orders.	East-Sandling	14.2.16	" " " " 42.
19.2.16	"	Trans. to C.H.S.C.T.D.	"	14.2.16	" " " " 47
18-2-16	O/C case To S. Dis Cas. Sta.		Shoreham	14-2-16	" " " 49
25.3.16	C.C. Cas C To	Adm Dover Bks Can Hosp.	"	19.3.16	C.C. 186 Vertigo.

265

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				
29. 3. 16	C2 CASC TD	Disc. Moore Bks. Can Hosp	Shorncliffe	24.3.16	C2 189 Vertigo
19. 4. 16	C2. CASC TD	Adm Moore Bks Con Hosp	— " —	27.3.16	C2 207 Bronchitis
19. 4. 16	C2 CASC.	Disc: Moore Bks Hosp"	— " —	11-4-16	C2 207
9. 9. 16	C2 CASC	Adm. Grimsdyke.	"	6. 9. 16	" 314 also Pt II 250 & 6.9.16 adhesions
14. 9. 16	"	Trans. ~~Military~~ Hosp.	Hastings	9. 9. 16	C2. 322 Pentrotes.
18. 10. 16	C2 CASC.	Disc: Military Hosp	Shcliffe.	13. 10. 16	C2 342
16. 10. "	C2 CASC	Struck off Strength Local Can	"	14. 10. 16	Pt II 290
14. 10 16	C C A C.	Taken on Strength Local Can	Folkestone	14. 10 16	Pt II 452.
13. 11. 16.	C C A C	S. O. S on proceeding to Can for Dis	Shoreham	4. 11. 16	Pt II 499.
		CHECKED. 5th Dec, 1916.			
	Dis Depot	To Convalescent Home.	M D No 6 Halifax	14-11-16	NR No 94

415740
265

MEDICAL HISTORY SHEET.

Surname Goodwin Christian Name Henry R.

Examined { on 29 day of July 1915
at Aldershot N.S.

Birthplace { City or Town Yarmouth
County N.S.

Apparent age 24

Trade or occupation Fisherman

Height 5 Feet 7 1/2 Inches.

Weight Lbs.

Chest measurement { Minimum 36 1/2 inches.
Maximum expansion 37 1/4 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by
L Douglas
Rank Capt. M.O

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

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
2/9/15		L Douglas M.O.
11/9/15		L Douglas M.O.
		M.O.

Enlisted on 27 day of July 1915 at Aldershot N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	40 Bn. C.E.F.	415740		27/7/15
Transferred to	Casc - 2			

APPROVED
CAPTAIN, C.A.M.C. SECRETARY BOARD OF R. & O. FOR
BRIGADIER-GENERAL
COMMANDING
CANADIAN TRAINING DIVISION,

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station.	Date.	Disease.	Result.
Hastings	7 Oct 16	Chronic appendicitis - Debility - Neurasthenia -	Discharge unfit Jas Cullen Capt
9 OCT 1916	Approved D.T. McTaggart CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE		PRESIDENT, STANDING MEDICAL BOARD

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

M. F. B. 313.
150M.—8-15.
H. Q. 1772-39-439.

Surname

Christian Name

265-592

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Moore Barracks Hpl, Shorncliffe.	7/9/16	5	9	16	7	9	16	Adhesions & Peritonitis	4	Appendicectomy 2 yrs ago. Ht unfit Inde Coat - discharge passing from old appendix scar. adhesions - Sent to 66 G.H. for Convalescence 7/9/16	H Allessin Capt
Pine Hill Halifax N.S.		10	7	17	10	11	17	Deficient Mentality	122	No special treatment. Boarded E.	John Cameron Capt. A.M.C

9.9.16.

Forms
1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
683	415740	Pte	Goodman (Goodwin)	H.

Year	Unit.	Age.	Service.
1916	C.A.S.C.	24	1 6/12 -

Station and Date.
Hastings

Disease Adhesion Peritonium

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Corps C.A.S.C. Military Hospital MOORE BARRACKS. CANADIAN HOSPITAL, SHORNCLIFFE.

No. 415740 Rank and Name Pte Goodwin H. Age 34 yrs. Service 1912

Disease Adhesions Peritoneum Date of admission 5/2/16 Date of discharge 9/9/16 Result

| | | |

CLINICAL CHART

A+D
12494

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps C.A.S.C. Military Hospital Moore Barracks.

No. 415740 Rank and Name Pte Harry R. Goodwin Age 24 Service 8/12.

Disease Bronchitis Date of admission 24-3-16. Date of discharge 11/4/16 Result Cured

Dates of Observation	27	28	29	30																												
Days of Disease																																
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																																
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100°																																
99°	•																															
98°																																
97°																																
Pulse per Minute	88	84																														
Respirations per Minute	20	20																														
Motions per 24 hours																																

(3253) W7204—1542. 750,000. 8/15. McA. & W. Ltd. Forms/B. 181/3.

Signature R. J. Thom Capt RAMC In charge of case.

265

(H)

Moore Barracks Hospital,

REQUISITION.

Date 19. 3. 16.

Name Goodwin H. Pte.

Reg. No. 415740

Unit C.A.S.C.

Ward XII

Diagnosis Vertigo.

Examination Required. urine.

REPORT.

Urinalysis

Color amber

S.G. 1025

Reaction acid

Sugar neg.

Albumin neg.

Microscopic.

L. Hemsley Capt.
i/c.

W. E. Sinclair
Captain C.A.M.C.
for O. i/c Laboratory.

Forms
I. 1237
10

12494

(G) 265

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
12494	15740	Pte	Godwin	Henry P.
Year 1916	Unit. C.A.A.C. 2 D	Age. 24	Service. 8/12	

Station and Date. W. Camp 27/3/16

Disease Bronchitis

Complaint: Pains in rt + left chest

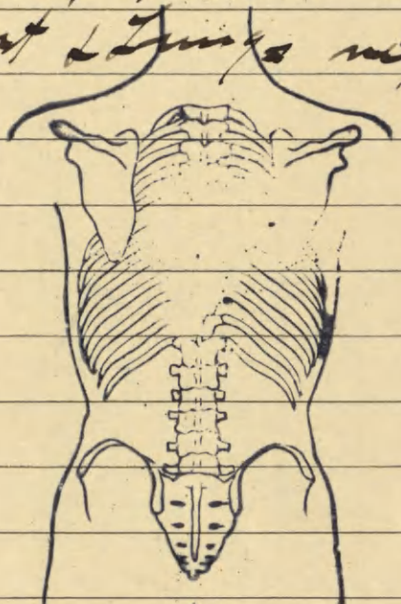
Duration: Began 2 wks ago. Chill. Worse on deep breathing

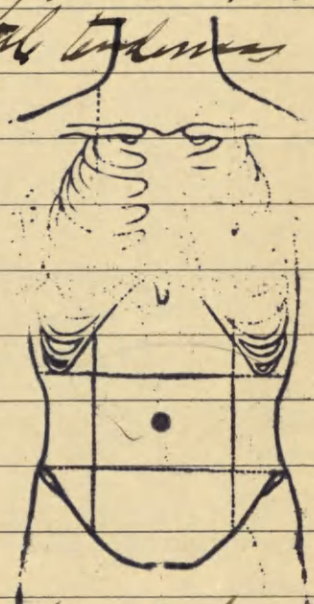
Personal history: Measles. Appendicitis operation. Pneum. Not overseas. Denies Venereal

Family history: negative

History of present illness: Slight cough on exert. Headache. Vomited 1 a. No weight amount. Has been working last two wks. Pain in chest is sharp & runs into back also runs

PHYSICAL EXAMINATION: Face slightly flushed. Pupils equal + react to L + C. Post cervical glands palp. Throat clean. Heart + Lungs negative. Teeth defective





Ears, Abd append. scar. Reflexes plantar present.

9/4/16 Lungs negative. Discharged to duty.

P.S. Wilson
Capt CAMC

Laboratory report: Urine negative

Treatment: Mixt Expect + Inhalations Continue

DISCHARGED 11 APR 1916

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

(J 3521.) Wt. W 5600 -2621. 2,000,000. 7/15. D & S.

P.I.O.

Station and Date.	

Forms
I. 1237
10

12236

265

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
12236	415740	Pte	Woodman	Harry
Year 1916	Unit. C.A.S.C. F.D.		Age. 24	Service. 8/12

Station and Date.

Disease Enteric

Single - not overseas.

M.B.H. 19-3-16

Complains of i Pains in side
ii Headache

Family Hist. any. - neg.

Personal Hist. any. - Pneumonia 2 yrs ago.
appendix removed at same time.
No venereal disease.

H.P.I. 5 months ago had an inoculation at work.
3 days ago first noticed pains in Rt side & lft abdomen. sharp. Felt cold & chilly all day. Headache at same time. Vomited 5 or six times.
Says he feels as if he could go asleep all the time.
Diarrhoea of 4 or 5 days coming from Bramshott - 3 wks.

phys Exam.
Pat ent seems mentally depressed - answers questions slowly but quite clearly - memory good.

23-3-16. Patient says he feels fit. Urine. neg.
Fit for discharge.
H Ramsay Capt.

DISCHARGED
25 MAR 1916

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

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

P.T.O.

Station and Date.	

Forms
I. 1237
10

19104.

(G)

265

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
19104	415740	Pte.	Goodwin	Harry R.
Year 1916.	Unit. C.A.S.C. T.P.	Age. 24.	Service. 18/12	

~~Adhesions Peritonitis~~

TRANSFERRED.

Station and Date.
MOORE BARRACKS,
CANADIAN HOSPITAL,
SHORNCLIFFE.

9 - SEP 1916

Disease Adhesions Peritonitis

short Mitt Hosp

Complaint — Pain in region of old appendix Scar — and right side of abdomen.

Present Illness

Pneumonia & appendicitis 2 yrs ago.
— says he was ill in Pittsburg at this time for 6 mos.
— Slow recovery. Had bronchitis last Fall
— ill 2 or 3 weeks.

Pres. Illness.

He has had sharp and dragging pains for about 3 mos. practically every day passing in a line from right 10th costal margin to region of old Operation Scar. Bowels have been fairly regular — Stools not hard. Pain is worse on bending and lifting. No rigidity or nausea.

H. A. Hagerman

Sept 8/16 Transf. to C.C. Hosp. H. A. Bowman Capt.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

P-56

Rank Pte. Name GOODWIN, Harry Richard. Reg'l No. 415740.

Unit ~~40th Bn.~~ C.C.A.C. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Aldershot, July 29th 1915. Place of Birth Yarmouth.

Name and Address, Next-of-Kin Mrs Margaret Goodwin,

Argyle Sound, Yarmouth. Co. Relationship

Assigned Pay Monthly $ 20.00 effective 1/1/16. Payable to Mrs M Goodwin

Yarmouth N.S. Relationship

Separation Allowance $ Payable to

Entered on N.E. Card Index Relationship

Checked by

Discharge, Date and Place Reason Character

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	Balance	Remarks, Casualties, etc
11/1/15	11/30/15	30	1.00	30 00	30	.10	3 00	10 00	43 00			31 63			31 63	11 37	$10.00 to Balford.
12/1/15	12/31/15	31		31 00	31		3 10	11 37	45 47			34 06			34 06	11 41	
1/1/16	1/31/16	31		31 00	31		3 10	11 41	45 51			29 20			29 20	16 31	Pay Cancelled 30/2/47
2/1/16	2/13/16	13		13 00	13		1 30	16 31	30 61				20 00		20 00	10 61	Trans from 54th Batt DO 69
Feb 14	29	16		16 =	16	"	1 60	10 61	28 21			7 30			7 30	20 91	
Mar 1	Mar 31	31	"	31 -	31	"	3 10	20 91	55 01			48 6	20 -	4 54	29 40	25 61	4.54 Cloth. Chgs 10.0.69
		152	✓				152 0 10		177 20 ✓			107 05 40		4 54	151 59		

Checked G.W.W.

BALANCE TRANSFERRED TO KEEW LEDGER.

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

277

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2.

Mrs. M. Goodwin

Name of Soldier Goodwin, H. R.

#418740

"D" 40 Bn

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20 00	
April	1916	7808	20	
May		14 38 9 4	20	
June		376 26	20	
July		10735	20	
Aug.		14861	20	
Sept.		18167	20	#180.00 7.X.16/11/16
Oct.		22856	20	
Nov.				Cancelled — Stopped Returning S.S. Northland 4/11/16
Dec.				Reclaimed Nov/16 JG OK
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

L- L. Job 310—M. & D. 6574.

From 1/1/16

MILITIA AND DEFENCE

368

M. F W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

H

Name	M. Goodwin	Name of Soldier	Goodwin
Address	Argyle Sound, Yarmouth Co, N.S.	Regtl. No.	415740
		Rank	Pte.
		Corps	40th Batt.
Relation to Soldier wife, child or mother	Mother	To what Corps belonging when called out	

PAYMENTS

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

COPIED FOR 6 CASUALTIES.

ACCOUNT CLOSED
DATE..... PER.....

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—813.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

M. Goodwin Mother

Name of Soldier Goodwin H. R. Pte

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June		E5893	120	120	
July		F17889	20	20	
Aug.		F13731	20	20	
Sept.		F15939	20	20	
Oct.		F19855	20	20	
Nov.		Z21770	20	20	
Dec.		~~Z25295~~	~~20~~	~~20~~	cancelled. acct-closed. Returned on Twoship. 4/11/16. Dec.
Jan.	1917				
Feb.					
March			220		
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

ACCOUNT CLOSED

DATE..... PER W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Goodwin, Harry R.
Surname Christian Name

Regimental Number 415740 Rank Pte.

Unit C.A.S.C.

Original Unit

District where paid M.D.t6

Date of Discharge 1-11-17.

P. D. P. Filing Number 2-18-6.

Address (in full) Argyle Sound,
Yarmouth Co., N.S.

07173-H-1.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 20.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
160	10	251	14-12-17	53	00	244	14-1-18	53	00	242	14-3-18	54	10			160	10

Remarks:

M. F. W. 127.
50M—6 17.
1772 39-1140.

File 27175-H-24 Passed to Inv 2-12-19 WBH

WAR SERVICE GRATUITY.

Register No. G1538

Reg. No. 415740 Pte

Name Goodwin HR.

Address Argyle Sound, Yarmouth Co. N.S.

Dependent Mrs Joan Bell wife. Mrs Margaret Goodwin, ~~mother~~

Address same

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

Award ..... Days at $ ..... per day $

..... months $ ..... per mo. $ ..... $

Less P. D. P. credited $ .....

Less further debit balance $ .....

Pay Soldier $ 189.90

Pay Dependent $ 150.00 # 100.00 500.00

Days 153 Rate 70. Due 350.

Less P.D.P. credited 160.10

Less further Dr. Bal. or overpayment.

Net ~~189.90~~ 339.90

Clerk A Sharp WC Haydon Jno Regan

Rev 104 4 3/20

~~Pending~~ Amended Award Inv. L.B. Smart. W.H. Turner. B. Wills 28-1-20

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
4/12/19	47909	9/12/19 S44161	189.90		28-1-20	52402	31-1-20 S48897	150.00
2					2			
3					3			
4					4			
5					5			
6					6			

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

GEN'L AUDITOR Posting checked by ..... Date 28-1-20

GEN'L AUDITOR Posting checked by ..... Date 4/2/19

R Rowes 2/12/19

M. F. W. 41.
10m.—4-16.
1772-39-889.

Name Goodwin Pte H R

449

Regimental No. 415740

Unit 40th Batn.

Date of enlistment 24/7/15

Place of "

Married (yes or no) No S.H. to Mother

Amount of pay assigned monthly $20.xx

To whom payable Mrs. M. Goodwin
Argyle Sound Yarmouth N.S.

~~Name~~ and address ~~of next-of-kin~~
Argyle Sound, Nr Yarmouth N.S.

Med. Bd. via Comr. Home.

Date and place discharged

Reason for discharge Class II

Character on discharge
Boothland 14/11/16

L. L. Job 502 M. & D. 6578.

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.
	23/10/16							42 33								L.P&O.
24/10/16	30/11/16	38	1.xx	38	38	.10	3 80					^60				Invalided
									84 13					34 13	84 13	To Mob 1-12/16

Name.....

17

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly $

Reason for discharge

To whom payable

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					

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. 415740 A. & D. No. 12236

Rank Pte

Name Goodwin, Harry

Corps CASC. T.D.

Religion Bapt. Age 24

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

Disease Vertigo

Admitted 19/3/16

Discharged MAR 25 1916 Discharged

Place in Hospital 12

Transferred

Results

8/12 Garmouth. NS no no 640 F.T.O.

REMARKS:

HISTORY SHEET

Orig. recd. from ..... /..../191 .

Dup. recd. from ..... /..../191 .

Orig. sent to ..... /..../191 .

Dup. sent to ..... /..../191 .

Received from Registrar this Orig. /..../191 .

Dup.

..... Ward .....

265 (E)

D.M.S. 1500.

Surname	Christian Name or Names		Reg. No.
Goodwin	H.	R.	415740

Rank	Unit	Co.	Troop	Batty.
Pte	40th Bn.	(case)		

Hospital — Date of Admission

Transferred Beauwood Wokingham Hosp. 20. 11. 15
Moore Barracks Hosp. 19. 3. 16
" " Hosp. 27. 3. 16
" " Hosp. 6. 9. 16

Diagnosis Bronchitis.

Later Diagnosis (if changed)
(1) Vertigo
(2) Bronchitis
(3) Adhesion Periton

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Dis 23. 11. 15
" 24. 3. 16
REMARKS" 11. 4. 16
" 13. 10. 16

CL 30. 11. 15. 11
. 25. 3. 16. 186
. 29. 3. 16. 189
. 19. 4. 16. 207
" 9. 9. 16 319
CL 14. 9. 16 322
" 18. 10. 16 342.

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

Over

RW

(E) 265

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Hermitage Hosp Hastings	9.9.16
2.		
3.		
4.		
5.		
6.		
7.		

Name Goodwin H.R. Rank Pte. Reg. No. 415740

Unit 41st Bn. 11th Bde. 26th. Res. Bn.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
20/11/15	Can. Com.	Hosp. Cookingham Bramshott	Bronchitis	11		
23-11-15	do	(Discharged)	"	11		

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

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. 415740 A. & D. No. 12494

Rank Pte

Name GOODWIN HARRY. R.

Corps L.A.S.C. S.D.

Religion Bapt Age 24

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

Disease Bronchitis

Admitted 27/3/16

Discharged APR 1 1916 Discharged to Duty.

Place in Hospital 13

Transferred

Results 8/12 Yarmouth Yes No P.T.O. 235

REMARKS:

MEDICAL HISTORY SHEET.

Orig. recd. from R.O. 3/3/1916.
Dup. recd. from ..../..../191 .

Orig. sent to ..../..../191 .
Dup. sent to ..../..../191 .
Received from Registrar this Orig. 9/4/1916.
Dup.
C. Holman Ward 13

Canada at England only (8th)

Number 415440 Rank Pte

Surname GOODWIN

Christian Name Harry Richard

Units 40th Bn C.E.F. Theatre of War Eng.

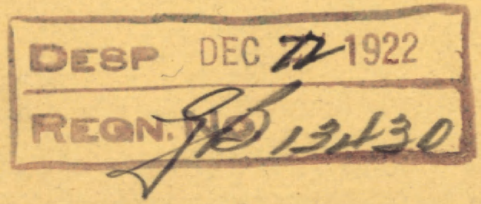
Date of Service 28-10-15

Remarks

Latest Address Argyle Sound. Ont.

Roll No. a Page 2780

200m.-2-21.M.


DESP DEC 22 1922
REGN. 13430

R. 149.

Name GOODWIN Harry Richard *Rank* Pte. *Reg. No.* 415740

Unit C.A.S.C. TRAINING DEPOT (40th Battn)

Next of Kin Canada.

1916 Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Mar. 19	M.B.C.H.S'cliffe		Vertigo	186	ER	
" 24	Discharged		do	189	ER	
Mar. 27	M.B.C.H.S'cliffe		Bronchitis	207	ER	
Apr. 11	Discharged		do	207	ER	
Sep. 6	M.B.C.H.S'cliffe	ADHesion	Peritonuea	319	ER	
" 9	M.H.S.Adm. Hermitage	Hastings	do	322		
Oct. 13	Discharged		do	342	ER	

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

ADMITTING CARD.

Regt. No. 415740 A. & D. No. 19104

Rank Pte

Name Goodwin Harry R.

Corps 6 A S C T.D.

Religion Meth Age 34

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

Disease adhesions Peritonaeum

Admitted 5-9-16

Discharged

Place in Hospital 3

Transferred Military Hpl S'cliffe. SEP 9 1916

Results 18/12 Yarmouth no no 11 N. F.T.O.

REMARKS:

MEDICAL HISTORY

Orig. recd. from Case-22 6/9/1916.
Dup. recd. from ..../..../191 .

Orig. sent to ..../..../191 .
Dup. sent to ..../..../191 .
Received from Registrar this Orig. /..../191 .
Dup.
R.C.H. 19/7 8/6/16 Ward

CANADIAN CONVALESCENT HOSPITAL,
AT
CANADIAN CONVALESCENT HOSPITAL
Bear Wood, Wokingham, Berks.

A. & D. CARD.

265

Regt. No. 415740 A. & D. No. 99
Rank Pte. Corps 40 Bn D. Co.
Name Goodwin HR Age 24 Religion Bapt.
Service at Home 6/12
" " Front
Diagnosis Bronchitis
Admitted Nov. 20/15
Discharged Nov. 23/15 to duty. Bramshott.
Place in Hospital 134 B.
M. H. Rec'd O. 24/11/15 sent Bramshott. (See Document card)
Transferred
Results

P.T.O.

(F)

265

REMARKS: Two wks ago taken ill Frenchman, Hill Hosp. complaining pain in right chest and cough. Much improved very little cough.

No. 415740 RANK Pte. NAME Goodwin H R.

T. O. S. UNIT Discharge Depot. Suda

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916		40 ch.	
Nov	no dates	1		

CARD NO.
file # 649-3-4244
S. O. S. Dis 10/11/17
6

SURNAME. Goodwin

CHRISTIAN NAMES Harry Richmond

REGL. No. 415740. RANK Pte.

UNIT 40th Bn.

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Goodwin Mrs. Margaret

RELATIONSHIP TO SOLDIER Mother

ADDRESS Argyle Sound Yarmouth Co. Canada

COUNTRY OF BIRTH Canada

PLACE OF ATTESTATION Aldershot.

DATE

DATE July 29th 1916

Sailed from Quebec Per SS "Saloria" 18-10-15

L. L. 24504. M. & D. 6512. o/s 18-10-15. 238/9.

M. F. W. 22. 25057—2-16. H. Q. 1772-39-339.

RIC 14-11-16. RIC 14/11/16

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

No. 415740 RANK Plt NAME Goodwin H. R.

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

M. D. 6 -

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Dec 1	1916 Dec 31	"		
1917. Jan.		"		

No. 415740 RANK Pte. NAME Goodwin Harry R.

T. O. S. 27-7-15 (DO 119 of 2-8-15) UNIT 40th Battalion C. E. F.

M. D. 6 Wal

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
July 27	Aug 31	✓		
Sep.		✓		
Oct.		✓		
Nov.		✓		
Dec.		✓		

UNIT SAILED
OCT 18 1915

MARRIED OR SINGLE S.

PLACE OF BIRTH Yarmouth, N.S.

NAME AND ADDRESS OF NEXT OF KIN Mrs. M. Goodwin, Argyle Sound, Yarmouth Co.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

Entered on N.E. Card Index

Checked by

REG'L. No. 415440 RANK Pte NAME Goodwin Harry Richard

IF IN PERMT. CORPS WHAT UNIT UNIT 6a Sig Bn TRANSFERRED TO 6 C.A.C. DATE 21/10/16. AUTHORITY 392 20/10/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Aldershot. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION July 29th 1915. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $20 DATE EFFECTIVE 1/2/16

PAYABLE TO Mrs. M. Goodwin, Yarmouth, N.S. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 23/10/16 EFFECTIVE 1/11/16 1/1/16 REASON Discharged to Canada

DISCHARGE DATE AND PLACE 23.10.16. To Canada REASON AND AUTHORITY C61 L352. 20/10/16

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 24 Oct 1916.

Entered on N.E. Card Index

Checked by

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mar 31															177 20															151 59	25 61				
Apl	30	1/-	30	-	30	10	3	-							33 -	1144	17/4/16	1487	24/5					243	487			20 -		22 43	36 18				
May	31	1-	31	-	31	10	3	10							34 10	1766	24/6/16	1385	16/5					243	487			20 -		32 17	38 11				B.I.34 Black Chgs 6844.
June	30	1.	30		30	10	3	-							33 -	1731	30/8							487				20	1 34	21 34	49 71				7 dy F.P. #2 DO 210 28/7/16
July	31		31		31		3	10							34 10	1617	15/6	1918	19/7					730	487			20	77 0	44 74	39 13				
Aug	31		31		31		3	10							34 10	2058	31/7	2217	15/8					486	487			20		29 73	43 50				
Sept	30		30		30		3								33	2358	31/8							973				20		29 73	46 77				Hd to 6 Bab 24/10/16
Oct 1-20	20		20		20		2								22													20		49 73	48 77				Vide B.I.B. 352 25/10/16
															4 00 50					551	11/9	Meetings						351 73						
Oct 21-23	3		3		3			30							3 30					676	25/9	"							9 14	42 33				Disch^d to Canada C61 L 352. 20/10/16
															403 80					718	16/10	"							361 47					
																				792	16/10	C.C.A.C.							312 57	39 90				A.P. Stopt 1.11.16
																				192	5/10	M. Bks								39 90				Pay. book Verified
Febry 9th															39 90													39 90	39 90				

Checked Geo W Mann

Checked

Checked

Balance transferred to N. E. Branch

* Extracts from Pay Book Amended & PC to credit 1 dy ad pay 30.10.16

Hd 24 Oct 1916

Transd to "Canada" Nov 20 4/22

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			

Rockland 14/11/16

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 415740 Army Rank Private

Name Goodwin Henry R.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps Canadian Army Service Corps. 40 Bn 29/7/15

Battalion, Battery, Company, Depôt, &c. C.C.A.C.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge 10-11-1917.

Place of discharge Canada.

1. *Description at the time of discharge.*

Age 25 years 2 months

Height 5 feet 7½ inches

Chest measurement: girth when fully expanded 37¼ ins.; range of expansion 1¼ ins.

Complexion Fresh

Eyes Brown

Hair Brown

Trade Fisherman.

Intended place of residence (To be given as fully as practicable) Yarmouth, N.S.

Descriptive marks.

One scar on abdomen.

6

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for War Service.

K.R. & O. 392 XVI.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— ~~Original documents not available.~~ Good

CAPT. & ADJT. No. 6 C.C. Discharge Depot, Quebec

4. Character awarded in accordance with King's Regulations :— Good

~~Original documents not available.~~

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

E.A.J. Lieut. for

Initials of Commanding Officer.

C.C.A.C.

Army Form B. 2088 has been issued to*

Wt. W. 13141/283 430,000 3/15 M.&C. Ld.

*Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay ... ... Class_____

6. Campaigns, Medals and Decorations

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place)_____

(Date)_____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*)_____ _____ (*Signature of Soldier.*)

(*Date*)_____ _____ (*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 at his own request.*

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

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to_____(the date to which the record of service is completed)_____ years_____ days.

Further service ,, ,, _____(the date of confirmation of discharge) ... ..._____ ,, _____ ,,

Total ..._____ ,, _____ ,,

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place)_____

Signature _____

(Date) _____

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). (Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any). (Army Form B. 221.)
8. Court of Inquiry on an injury (if any). (Army Form A. 2.)
9. Regimental conduct sheet. (Army Form B. 120.)
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178.)
13. Medical report on invalid (if any). (Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge).
18. Descriptive return (Army Form D.400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103.)
20. Employment sheet. (Army Form B. 2066.)

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority.)
2. Medical history sheet (if any). (Army Form B. 178.)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

LE No. 649-

NAME Goodwin, H. R. REGT'L. No. 415740.

RANK AND CORPS Pte. 40th. Batt.

CABLE		NATURE OF CASUALTY
NO.	DATE	
0389	8-11-16	Sailed for Canada on Nov. 4th Per the S.S. Northland "Neurasthenia"

NO. 982.
FOLL X

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
11.	Can. Conv. Bearwood Wokingham.	20-11-15	Bronchitis.
11	" " " "	23-11-15	" Discharged
186	Moore Barracks Can., Shorncliffe	19-3-16	Vertigo (6.A.S.6.H. 21st).
189	Moore Barracks Can., Shorncliffe	24-3-16	Vertigo — Discharged
207	Moore Barracks Can., Shornc.	27-3-16	Bronchitis (6.A.S.6. Fin. depot)
207	Moore Barracks Can., Shornc.	11-4-16	Bronchitis — Discharged
319	Moore Bar. Shornc.	5/6-9-16	Adhesions Periton!
322	adm. to Hermitage. Hastings	9-9-16	" Peritiotis
342	Ex M.T. Shorncliffe	13-10-16	" " (Disch.)
6.	M.H.6.6. Halifax	1-1-17.	Out-Patient-
148	" " " "	19-6-17	Out Parks Conv. Home P.C. 508.

NAME Goodwin, H. R

REGT'L. No. 415740

H. Q. FILE No. 649

RANK AND CORPS Pte. 40th Bn.

FOLLOWS NO.

FOLLOWS

CABLE

NO. DATE

NATURE OF CASUALTY

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

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
309	M.A.M.C. Halifax	10-11-17	Disch. from H.M.S. Pike Hill Class 1 Conduct Good

H. Q. Reference

No. 415740 Rank PRIVATE Unit C. A. S. C.

Surname GOODWIN.

Christian names HARRY RICHARD

Kindly forward Medals, to which I am entitled by reason of my service in FRANCE
(Theatre of War)

with C. A. S. C. H. T.
(Unit with which served in Theatre of War)

No.

Street

Town Tusket

County Yarmouth. N.S. H. R. GOODWIN
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

O.H.M.S.

POSTAGE FREE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

200M-10-20

Shown as single at time of purchase
at time WS 6 was paid in 1919
wife was recorded as Jean Bell

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps C.A.S.C. Military Hospital M B.

No. Rank and Name Pte H. Goodwin Age 24 Service 8

Disease Pertigo Date of admission 19-3-16. Date of discharge 25-3-16. Result Improved.

Dates of Observation	19	20	21	22	23
Days of Disease					
Temperature Fahrenheit — Time A.M. P.M.					
107°					
106°					
105°					
104°					
103°					
102°					
101°					
100°					
99°					
98°					
97°					
Pulse per Minute	78	72	80	80	
Respirations per Minute	20	20	18	18	
Motions per 24 hours					

Signature H Kennedy Capt. In charge of case.

(3253) W7204—1542. 750,000. 8/15. McA. & W. Ltd. Forms/B. 181/3.

(J)

265

NOV 18 1916

II

Form to be used instead of blank space on Army Form 1790.

Proceedings of Medical Board at Discharge Depot.

Number 415740 Rank Pte Name & Corps of disabled soldier. Goodwin, Henry Richard C.A.S.C

Previous civilian occupation.

Fisherman

Cause of disability:-

Neurasthenia. — Aggravated by service.

Condition in detail which prevent the soldier earning a full livelihood:-

He sits in a listless manner with eyes looking at nothing in particular and taking very little notice of his surroundings. Seems to be very worried about something. Complains of continuous pain in right side of abdomen made worse by exercise. He had an operation for chronic appendicitis before enlistment but pain has remained. Complains also of pain in left side of chest, loss of weight, headaches

Opinion of the Board.

P.T.O.

Degree of incapacity (Please state in Fractions)

Total. - 20% due to service

Probable duration of incapacity.—

2 months for aggravation

Does it render him permanently unfit for Military Service? yes.

Would operation, special treatment or the use of appliances etc., lessen incapacity? Convalescent Hosp for observation and treatment

Signature

W. M. Carruth Major President.

W. E. Walsh Capt Members

J. H. Storey Capt

Station. Quebec

Date Nov 14 1916

Approved.

Date Nov 14/16

W. M. Carruth Major
Assistant Director Medical Services.

Date 22/11/16

for D. J. McKay Capt
Director General Medical Services.

B. P. C. F.
FALSE
4

Was see
21-10-17

R-197

265

pains across lumbar region, pains in legs etc.

He has been able to do very little work for years previous to enlistment and says he feels about the same as when he joined but he certainly looks worse now than he could have looked when he ~~enlisted~~ enlisted.

W. M. Carrickhoff
Walsh Capt
Astley Capt

23

265

(H)

MOORE BARRACKS LABORATORY.

REQUISITION:

Date Sept 6 - 1916

Reg. Number. 415740

Name Pte. Goodwin

Unit C A S C.

Ward 3

Diagnosis Adhesions Peritoneum

Exam. required Pertussis

REPORT :

Colour Lt amber

S - G. 1018

Reaction acid

Sugar neg

Albumin neg

Microscopic

Medical Officer. Capt

Capt. C. A. M. C.
for. O.i/c. Laboratory.

St. C.P., Kingsway, W.C.
30,000—17/4/16—10533.

103747

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Canadian Convalescent Hospital
Hastings Sussex

Date 3rd Oct 1916

1. Unit C.A.S.C. C.E.F.
2. Regimental No. 415740
3. Rank Pte
4. Name GOODWIN H.R.
5. Age last birthday 25
6. Enlisted on 27-7-1915 at Yarmouth N.S.
7. Former Trade or Occupation Fisherman

MILITIA & DEFENCE
FEB -4 1918
H.Q. CANADA

B. P. C.
C. R.
MAY
6
1916

8. **Disability.**
(1) Chronic appendicitis
(2) Debility
(3) Neurasthenia

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. Previous to enlistment

10. Place of origin of disability. Canada

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

Patient claims to be suffering from a chronic appendicitis which was removed March 1914 Had had attacks for nearly a year previous to this time was no better after being operated on Has not improved any since but has been no worse since enlistment Has not been able to work steadily for the last ten years being laid up with recurrent attacks of influenza. Had pneumonia in 1914 and was in Hospital seven months. Did no work for over a year. Has been in Hospital most of the time since joining the army and never did full duty.
Family history. Father died of T.B. in 1913. others of no interest

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

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3.*)

(1) No.
(2) No. condition same as before enlistment

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.

Patient states that the present condition of his health is the same as before enlistment. Fine subcripitant rales audible over ~~lower part of~~ both bases few cripitant rales audible over lower part of intra scapular region with slightly diminished breath sounds. Few large mucous rales in R apex. Considerable bulging of chest wall immediately over precordial region
Urinalysis Negative T.B. Negative

Other systems and organs examined and found to be quite normal.

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

(*a*) In the presence of the enemy? Not applicable

(*b*) On active service? Not applicable

(*c*) On duty? Not applicable

(*d*) Off duty? Not applicable

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

If so—(*a*) When? Not applicable

(*b*) Where? Not applicable

(*c*) Opinion? Not applicable

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

17. If not, was an operation advised and declined? No.

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? No.

19. Do you recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

A Stephenson Capt RAMC
Officer in medical charge of case.

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

Station Canadian Convalescent Hospital Hastings, Sussex.
Officer in charge of Hospital.

Date 3rd Oct 1916.

* 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 it is essential that the Members of the Pensions and Claims Board 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 pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(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.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

a1 No. a2 No.

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

Not applicable.

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No.

(*b*) Misconduct? No.

22. Is the disability permanent? Yes for military life.

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

Not applicable.

To be stated in months.

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

None as compared with capacity on enlistment.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, *or total incapacity.*

25. If an operation was advised and declined, was the refusal unreasonable?

Not applicable.

26. Do the Board recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

27. Remarks.

APPROVED
CAPTAIN, C.A.M.C. for D.G. of R. & O.
BRIGADIER-GENERAL
COMMANDING
CANADIAN TRAINING DIVISION.

Signatures:—

Jas Pullar Capt
President.

Hastings
R. Henderson Capt
Members.

Station

Date 17 - OCT 1916

Approved.

Station Shorncliffe.

Date 9 OCT 1916

D.J. McIntyre
Administrative Medical Officer.

.....CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the day of 191

FEB 5 1919

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at Prior Park, Bath, this day

of , 191 .

President.

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(L)

MILITARY HOSPITALS COMMISSION
COMMAND
SEP 19 1917
G. 71
No. 10 UNIT, HALIFAX, N. S.

MEDICAL HISTORY OF AN INVALID.

1.—Station. Halifax

2.—Regiment of Corps. 6. a. S. C.

3.—Regimental No. and Rank. 415740 Pte

4.—Name. H. R. Goodwin Pte

5.—Age last Birthday. 24 yrs

6.—Enlisted { on July 27th 1915 — at Aldershot.

7.—Former Trade or Occupation. Fisherman

8.—General remarks on his :—

(a) Conduct. Sheet not available at "B" unit.

(b) Habits.

(c) Temperance.

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

Date 16/9/17

9.—Service.	Years.	Days.
	PERIODS.	
	From	To
40th Batt. 6. a. S. C.	July 27th 1915 unable to state when transferred.	

10.—Disease or Disability. Neurasthenia

11.—Date of origin, cause, present condition and whether the same is the result of service or climate. Patient states he had fits during childhood. Congenital mental deficiency is apparent. On physical examination an appendectomy scar. No disease of chest lungs or abdomen discovered. Reflexes and sensation normal.

Has it been aggravated by intemperance, vice or misconduct?

Present condition. He is fairly well nourished (weight 148) & very listless appearance. Speech slow and stuttering. Complains of pain by time in appen. scar but there is no tenderness

M. F. B. 227.

20m.—5-15.
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 ?

not applicable

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.

not applicable

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

Says he feels as well as when he enlisted. But he is so listless and has such a sluggish mentality that he must be worse than at that time

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

Yes. Earning power at his occupation fishing not impaired on account of service

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

Moore Barracks Hospital	5/9/16	9/9/16
C. C. H.	9/9/16	7/10/16

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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.

Not applicable

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

Yes.

Jas. A. Proudfoot. Capt. 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.)

Mailing address. Argyle Sound Yarmouth Co. N.S.
The Board ~~Examined~~ ~~Examined~~ No 415-740 Pte H. R. Goodwin C.E.F. C. concur in the above report: and recommend that he be placed in Category E on account of his deficient mentality which has evidently been present before enlistment further treatment would not benefit:

Signatures :— Phil Lockhart Hay M.O. President.

Station Halifax N.S. John Cameron Capt. A.M.C. Members.

Date 17-9-17

Date 21/9/17 Assistant Director of Medical Services.

Approved.

Date

Director of Medical Services.

[OVER]

265

(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.

20 m-5-15.
H. G. 1772—39—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.

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(K)

MILITARY HOSPITALS COMMISSION COMMAND
MAY 28 1917
"D" UNIT, HALIFAX, N. S.

MILITARY HOSPITALS COMMISSION
JUN 6 1917
UNIT, HALIFAX

MEDICAL HISTORY OF AN INVALID.

1. Station. Halifax N.S.

2. Regiment or Corps. C. A.S.C. 6. Fd.

3. Regimental No. and Rank.
H 154740 Pte

4. Name. Goodwin, Henry R.

5. Age last Birthday. 26

6. Enlisted on July 1915
at Amherst N.S.

7. Former trade or occupation.
Fisherman

8. General remarks on his:—
(a) Conduct. Sheets not available
(b) Habits.
(c) Temperance.

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

DEPT. MILITIA AND DEFENCE
JUN 18 1917
H.Q. CANADA

Date. May 26. 17

9. Service.	Years.	Days.	PERIODS From	PERIODS To
40th Bn C.E.F.			July 26. 1915	
C.A.S.C.				

10. (a) Disease or disability. Mental Deficiency,
(b) Date of origin. Congenital
(c) Place of origin. Yarmouth Co. N.S.
(d) Cause. Unknown

11. Present condition. (Most Important.)
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.)

A fairly well nourished man of listless appearance, with slow stuttering speech. He complains of pain in Rt side of abdomen and Praecordial region. He states that as a child he was the subject of "fits", but has since the age of ten years.

On Examination an appendectomy scar is found (dating from 1913) No physical signs of disease found in heart lungs, or abdomen, Nervous System: Mentality below par & sensation, motion and reflexes normal. There is a well marked attack of scabies present.

B.P.C.F.D. FALSE DOCUMENT

6

12. (a) Is the disability the result of service or climate?
no.

(b) Has it been aggravated by intemperance, vice or misconduct?
Conduct sheets not available

6

Was Sec. 31-10-17 Lee

M. F. B. 227.
200M. 8 16.
1772-39-117.

1 265

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Tattoo - "Yarmouth" across Chest. Also other Tattoo designs on arms

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

Not applicable

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable

14. Treatment. No particulars available

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

No

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

Permanent

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

30%

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

Yes

D. J. Macdonald
Capt A.M.C.

Medical Officer by whom the case is brought forward.

265

(K)

OPINION OF THE MEDICAL BOARD.

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

10. Yes

11. Yes

DEPT. MILITIA & DEFENCE
JUN 18 1917
H.Q. CANADA

12. Yes

15. Yes

16. Yes

17. Yes

18. Is he unfit for Military Service. Yes

Recommendations: that no 4157740 Pte Henry R. Goodwin C.A.S.C. C.E.F. be sent to hospital for treatment of the Scabies, and afterward that he be discharged the service as medically unfit. Class I.
The Board places him in Category "E".

Signatures:—

J R Cruston Capt RO President.

F. N. Anderson Capt

Members.

B. F. C. FOLIO
FALSE DOCKET

Station. Halifax N.S.

Date. 26-5-17

Date. 12-6-17.

A. E. Mackenzie
for Asst. Director of Medical Services.

Approved.

Date. 29/6/17

Director-General of Medical Services.

S1A-18-6-17

265

100-18-8-12

(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.
200m. 8./6.
H. Q. 1772-39-11.

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.

L. L. Job 85095—M. & D. 5953.

(1) End

2 26

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. M Goodwin

Address Argyle Sound
Yarmouth Co. N.S.

Rate $20.00 Feb. 1/16 2m 27/1/16 [illegible]

By Whom Assigned Goodwin K.R.

Regtl. No. 415740

Rank Pte

Corps 2 Co. 40 Bn.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop payments Nov 1/16 "Discharged to Canada" 3m 23/1/16 — J.G. 14/1/16
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.		K 13952	20 —	Returning
March		016100	20	

COPIED FOR CASUALTIES.

St. C.P., Kingsway, W.C.
30,000—17/4/16—10533.

(I)

2655

A.E.F.

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Canadian Convalescent Hospital
Hastings Sussex

Date 3rd Oct 1916

1. Unit C.A.S.C. C.E.F.
2. Regimental No. 415740
3. Rank Pte
4. Name GOODWIN H.R.
5. Age last birthday 25
6. Enlisted { on 27-7-1915 / at Yarmouth N.S.
7. Former Trade or Occupation } Fisherman

8. Disability.

(1) Chronic appendicitis
(2) Debility
(3) Neurasthenia

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. Previous to enlistment

10. Place of origin of disability. Canada

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

Patient claims to be suffering from a chronic appendicitis which was removed March 1914
Had had attacks for nearly a year previous to this time was no better after being operated on
Has not improved any since but has been no worse since enlistment
Has not been able to work steadily for the last ten years being laid up with recurrent attacks of influenza. Had pneumonia in 1914 and was in Hospital seven months. Did no work for over a year.
Has been in Hospital most of the time since joining the army and never did full duty.
Family history. Father died of T.B. in 1913. others of no interest

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

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3.*)

(1) No.
(2) No. condition same as before enlistment

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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.

Patient states that the present condition of his health is the same as before enlistment. Fine subcripitant rales audible over ~~lower part of intra scapular region~~ both bases few cripitant rales audible over lower part of intra scapular region with slightly diminished breath sounds. Few large mucous rales in R apex. Considerable buldging of chest wall immediately over precordial region
Urinalysis Negative T.B. Negative

Other systems and organs examined and found to be quite normal.

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

(*a*) In the presence of the enemy? Not applicable

(*b*) On active service? Not applicable

(*c*) On duty? Not applicable

(*d*) Off duty? Not applicable

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

If so—(*a*) When? Not applicable

(*b*) Where? Not applicable

(*c*) Opinion? Not applicable

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

17. If not, was an operation advised and declined? No.

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? No.

19. Do you recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

H Stephenson Capt CAMC
Officer in medical charge of case.

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

Station Canadian Convalescent Hospital Hastings, Sussex.

Officer in charge of Hospital.

Date 3rd Oct 1916.

* 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.

(I) 265

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 it is essential that the Members of the Pensions and Claims Board 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 pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(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.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

a1 No. a2 No.

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

Not applicable.

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No.

(*b*) Misconduct? No.

22. Is the disability permanent? Yes for military life.

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

Not applicable.

To be stated in months.

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

None as compared with capacity on enlistment.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, *or total incapacity.*

25. If an operation was advised and declined, was the refusal unreasonable?

Not applicable.

26. Do the Board recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

27. Remarks.

APPROVED
CAPTAIN C.A.M.C. for D. of R. & O. FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN [illegible] DIVISION.

Signatures:—

Jas Pullar Capt
President.

Hastings
R. Henderson Capt
Members.

Station

Date 7 OCT 1916

Approved.

Station Shorncliffe

Date 9 OCT 1916

D.J. McIntyre
Administrative Medical Officer.

CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE

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PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at Prior Park, Bath, this day

of , 191 .

President.

C122.EC. 415740.

DUPLICATE.

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 GOODWIN *Christian Name* Harry, Richard

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County Yarmouth

Examined ... ... on 21st day of July 1915,
at Aldershot, N.S.

Declared Age ... ... 24 years 8 months days.

Trade or Occupation ... Fisherman

Height ... ... 5 feet 7½ inches.

Weight ... ... _____ lbs.

Chest Measurement — Girth when fully Expanded: 37¼ inches.
Range of Expansion: 1½ inches.

Physical Development ... _____

Vaccination Marks — Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... ... R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) One scar on abdomen

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

Approved by (*Signature*) Victor F. Connor,
(*Rank*) Capt. A.M.C.
Medical Officer.

Enlisted ... ... at Aldershot
on 27th day of July 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
	C.A.S.C.	415740.
Transferred to		

Became non-effective by _____

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

on _____ day of _____ 191 .

(*Signature*) A. Williams Betty Lieut.-Col.
(*Rank*) In charge of Records, Canadian Contingent.

(B 99129.) W. 15297/M127. 500M. 1/16. J. P. & Co., LTD. Forms B. 178 39

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing use. In subsequen be given i
	Day	Month	Year	Day	Month	Year			
Moore Barracks Hosp; Shorncliffe	19	3	16	25	3	16	Vertigo	7	Dischar
Moore Barracks.	27	3	16	11	4	16	Bronchitis	16	Just an

ick List in the case of Warrant Officers treated in quarters.

emarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
Discharged to duty	J.B. Mc Murrich. Capt
Just an ordinary case of bronchitis.	R.S Wilson. Capt.

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

Date	Brief details, and signature

Table IV.—Service Table.

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