ORIGINAL

4. Canadian (Indian)

ATTESTATION PAPER.

No. 2497991

Indian Draft.

Folio. 1497991

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	GOODWIN
1a. What are your Christian names?	Isaac
1b. What is your present address?	Port Albany, James Bay, Ontario
2. In what Town, Township or Parish, and in what Country were you born?	Port Albany, James Bay, Ontario
3. What is the name of your next-of kin?	Clara Goodwin
4. What is the address of your next-of-kin?	Port Albany, James Bay, Ontario
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	August, 10th, 1895
6. What is your Trade or Calling?	Hunter
7. Are you married?	Single
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? (If so, state particulars of former Service.)	Naval or 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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Isaac Goodwin (Signature of Recruit)

Date July, 3rd, 1917 191 . (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Isaac 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.

Isaac Goodwin (Signature of Recruit)

Date July, 3rd, 1917 191 . (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 Toronto, Canada this 3rd day of July, 1917 191 .

(Signature of Justice)

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

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

Description of Isaac Goodwin on Enlistment.

Apparent Age 21 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height: 5 ft 8½ ins.

Chest measurement:
- Girth when fully expanded: 38 ins.
- Range of expansion: 3 ins.

Complexion: Dark

Eyes: Brown

Hair: BLack

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE

Date July, 3rd, 1917 191 .

Place Toronto, Canada

Jas Dalrymple Capt M.O.
PRESIDENT
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.

Isaac 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 (Signature of Officer)

O. C. FORESTRY DEPOT M. D. No. 2

Date AUG 6 1917 191 .

REGIMENTAL DOCUMENTS

Pte NAME Goodwin, Isaac REGT. NO. 2497991 UNIT 1st Dpo. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				17856	
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med. Unfit
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 14)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Nominal Roll					14 + 19
1	Casualty					21 . 22
1	M & R 1917					33 - 22
3	Letter					1
3	Letter					1

W. [illegible]
100M-11-18
17/2-39-1377

P. 559.

MARRIED OR SINGLE S.

PLACE OF BIRTH Port Albany James Bay Ont

NAME AND ADDRESS OF NEXT OF KIN Clara Goodwin
Port Albany James Bay Ont

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

	DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS							
		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.	
Sept/17	AUG 31 1917																							
Sept.	30	1.10	33.													33.								

Balance from Canada

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.	MON
Sept 30	Bal	~~28.~~							28.			
Oct 31.	P. Pay.	34. 10.		Q/S Can					15. 47 10			
		34 10.							15.			
Nov	C. Pay	33.		C & P					15.			
Dec		34 10.		AR 3156 62 D 18/10/17	4 87.							
				AR 3389 " " 25/9/17	9 73.							
				AR h 153 51 Dpt 6/11/17	19 47.							
				C & P Dec.					15.			
				W 4005 V 58 25/9/17 676 Eng	07.				50 06			
		67. 10.			34 14.				30.			

OTIONS. &c.

EFFECTIVE DATE	AUTHORITY

SPITAL, &c.

NAME OF HOSPITAL

REG'L. No. 2491991 RANK Pte NAME GOODWIN Isaace

IF IN PERMT. CORPS WHAT UNIT } UNIT Camp Borden Inf TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Toronto TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 3 July 1917 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.- DATE EFFECTIVE 1.9.17.

PAYABLE TO Clara Goodwin Port Albany James Bay Ont. RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACQUITTANCE ROLLS 2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	C REMARKS
													10.00				
										15.		15.	28. ✓				

BALANCE DEFER-RED. PAY	SER. ALLCE. ENG.	MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE DEFER-RED. PAY	SER. ALLCE. ENG.
8.												
9 10												
50 06												

2671
C.E.F.
Sept 19

229

2497991 Pte Goodwin. J $15.00 Can.

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
	ULARS				CR. 1			CR. 2	PAY					DR. 1	DR. 2	DR.3	DR.4	BALANCE	DEFERRED PAY							
1918																		50 06								
Jan 31 P.					34 10				C.A.F.							15										
									Q4005 AS12-16/10/17				676	5 36													
									ARH667	18/12/17			10760	29 20				34 60								
					34 10									34 56		15										
Feb 28 P					30 80				C.A.F.							15										
									ARH 14	23/1/18			10760	12 17				38 23								
					30 80									12 17		15										
Mar 31 P					34 10				C.A.F.							15										
									ARH 374	12/3/18			10760	9 73												
									" 4446	16/3/18			" "	17 03				30 57	Tfd							
					34 10									26 76		15										

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. 232 * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-9-17	EFFECTIVE DATE:-
AMOUNT:- 15-00	AMOUNT:-

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

Mrs Clara Goodwin
Port Albany
James Bay. Ont

Stopped 1/2/19

NAME:
NUMBE
ORIGIN
DATE
AU

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
14-12-17		Q.M. Chgs 4[5]	96				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis Canada 3/1/19 Lieut. H.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
Mar 31	Bal Ford			
Apr	P P	33 -		C A P
				Q 4005 Y 25 L 6113 14/12/17
				AR 121 108 60 55 Des 6 7 6 24/4/18
		33 -		
May	P P	34 10		C A P
				6 D/s AWL from work from 1.30 AM to 6.30 PM 6/5/18 10 day C.B. Forfeits 1 day Pay
				D O 22. 52 D.H.Q. 8/5/18
				HR 340 109 60 22/5/18
		34 10		
June	P P	33 -		C A P
				AR 594 109 60 25. 6. 18
		33 -		
July	P P	34 10		C. A. P
				G O R 109 60 22. 5 18
				adv to D O Pt Para 348 d 8-5 18 inso far as it refers to M/n date of sentence is ammended to read 6-5 18 and not as therein stated.
				AR 791 109 60 19 7 18
		34 10		
Aug	P. P.	34 10		C. A. P.
Sept	P P	34 10		
		33 -		C A P
Oct	do	33 -		
		34 10		C A P
				G O R B 171 109 60 1. 8. 18
				G O R 218 " " 12. 8 18
		34 10		
Nov	do	33 -		C A P.
DEC		34 10		C A P Dec
				AR 1148 18. 12. 18 11 C G H Qs
Jan	"	34 10		C A P
		101 70		

ENGLAND OR CANADA.	SEPARATION ALLOWANCE. 232	ENGLAND OR CANADA.
1-9-17	EFFECTIVE DATE:-	
15-00	AMOUNT:-	

NAME:- Goodwin . Isaac

NUMBER:- 2497991

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

RESS, 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.

lasa Goodwin
t Albany
ames Bay. Ont
Stopped 1/2/19

UNIT AND TRANSFERS

ORIGINAL UNIT:- Camp Borden For

DATE ACCOUNT FIRST OPENED:- 1-9-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Le 76 Eng

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

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
Q.M. Chgs 4⁵	96				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 - - 10			

ARS OF RENDERING NON-EFFECTIVE:- Dis Canada 3/1/19, List. H.R. War. 95. 28/1/19. M.D. 3.

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Bal Ford								30 57	Inl.	
PP	33 -		CAP				15			
			QH005 Y25 C6113 14/12/17	- 97						
			AR 121 10860 55 Dus bttle 24/4/18	17 03						
	33 -			18 00			15	30 57	Inl	
PP	34 10		CAP 6/5/18 AWL from work from 1.30 AM to 6.30 PM 6/5/18 10 day C.B. forfeits 1 day Pay Do 22.5.18 Rem 5 D.H.Q. 8/5/18		1 10		15			
			HR340 109 60 22/5/18	17 03				31 54	- -	
	34 10			17 03	1 10		15			
PP	33 -		CAP				15			
			AR594 109 60 25.6.18	17 03				32 51	—	
	33 -			17 03			15			
PP	34 10		C.A.P				15 -			
			QOR 109 60 22.5.18 adv to D.O. Pt II Para 348 4 8-5-18 inso far as it refers to m/n. date of sentence is ammended to read 6.5.18 and not as therein stated.	3.29						
			AR791 109 60 19.7.18	17 03				31 29	—	
	34 10			20 32			15			
P.P.	34 10		C.A.P.				15	50 39	—	
PP	34 10		CAP				15	68 39		
	33 -						15			
do	33 -		CAP				15			
			QOR B171 109 60 1.8.18	- 43						
			QOR 218 " " 12.8.18	17.78				69 28	~	
	34 10			18 21			15			
do	33 -		CAP.				15			
	34 10		CAP Dis				15			
			AR6148 18.12.18 11 C G H.Q.	487						
"	34 10		CAP				15	170 61		
	101 70			487			45			

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED
				S. L. 73. S.O.S 4/3/19.						

NAME

Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
		S.L. 73. S.O.S 1/3/19.							

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

EG

THIS IS TO CERTIFY that No. #2497991 (Rank) PRIVATE

Name (in full) GOODWIN, Isaac enlisted in

the FORESTRY DEPOT M.D.2

CANADIAN EXPEDITIONARY FORCE at Toronto, Ontario on the 3rd

day of July 19 17

HE served in ENGLAND

and is now discharged from the service by reason of [redacted]
Medical Unfitness.

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

Age 24 Yrs. 6 Mons.	Marks or Scars Vacc. scars left Arm.
Height 5' 8½"	Numerous scars about neck from
Complexion Dark	discharging glands.
Eyes Brown	
Hair Black	

Goodwin I'
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
FEB 28 1920
TORONTO

J. K. Macdonald Maj.
Issuing Officer
for O. C. No. 2 D. D.

Rank

Date 28th February 1920.

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

M. F. W. 39a.
100M-3-19.
H.Q. 1772-39-882.

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G.O.C. District.

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

M. F. W. 54. (A. F. [illegible]
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. #2497991 Rank Pte. Name Goodwin I
C. E. F.

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

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

Extended..... Re-engaged..... Qualification (*b*)..... .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		S.O.S. DIS.#2 D.D. 28th February 1920 Pt. 11 D.O.#57			

J. R. McStavanc
Maj.
for O. C. No. 2 D. 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.

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				

Form R 122.
2353—100M—9-12-16.

LTR

Rank

Name GOODWIN, Isaac

Reg'l No. 2497991

Unit

If in perm. Corps
What Unit?

Married or Single Single.

Camp Borden, For. Dft To. Base Depot

Place and Date of Enlistment Toronto. July 3rd, 1917.

Place of Birth Port Albany, James Bay, Ontario

Name and Address, Next-of-Kin Clara Goodwin

Port Albany James Bay. Ontario, Canada,

Relationship Mother.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

N/E. R.B. No 8192
File R.L.
Category Can. M.U

Discharge, Date and Place

Reason

Character
Ple. M.D.3

H. W. V., Ld.—9546-16.

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.
	6	Arrived in England		15-9-17	S/S Megantic
17·9·17	BD C.T.C	T.O.S. from Canada Ple	S'dale	16.9.17	P.R. II° 122
20-10-17	C.T.C. B'D	S.O.S to 57th Dist C.T.C. "	S'dale	29.10.17	P.R. II. 139 + P.R. II 137 Dist 57. C.T.C M 8-11-17 T.O.S
22-11-17	Dist 51 C.T.C	S.O.S to 55 Dist 109 Coy C.T.C "	Nairn	19-11-17	P.R. II 139 + P.R. II 24 28.11.17 55 Dist T.O.S.
11. 9 18	55 Dist 676	Sgt. to B D 676 "	Stirling	3. 9. 18	" 43
14-3-19	C.T.C	Invalided to Canada Ex La Darby War Hsp Warrington S.L. 73 M.D.3. "		11-3-19	C.L.B. 468. Imbecility
22·3·19	B.D. C.T.C	Having been invalided to Can is S.O.S	S'dale	11·3·19	P.R. II D° 81. "

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.				

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

2497991

Casualty Form—Active Service.

Unit, Regiment or Corps Forestry Depot

Regimental No. ..... Rank Pte Name Gordwin Isaac

Enlisted (a) 3-7-17 Terms of Service (a) ~~C.E.F.~~ D.O.W Service reckons from (a) 3-7-17.

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) Hunter

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		EMBARKED HALIFAX 5.9.17 DISEMBARKED LIVERPOOL 15.9.17			
17-9-17		O.C. C.F.C. T.O.S. Base Depot, C.F.C Sunningdale 15-9-17 Pt.11.D.O.122 W. B. Frankish Capt 14 & A/Adjt. C.F.C.			
30-10-17.		O.C.CFC. SOS.Base Depot C.F.C., Sunningdale 29-10-17. Pt.II.D.O.159. on posting to District ~~102~~ 51, Coy. 109. Capt. for O.C. C.F.C.			
7/11/17.		O.C. 51 Dist T.O.S. 51 Dist 676. at 109 coy Cairn 29/10/17 D.O. Pt II no. 137. 676. Kincardine-on-Forth posting from Base Depot Capt. R. Forestry for O.C. 51 Dist C.F.C.			

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
17-11-17.	O.C. 57 Dist C.F.C.	T.O.S. 57 Dist C.F.C. to ~~Base Depot~~ 55 Dist C.F.C. 109 coy.	Nairn.	19-11-17.	Pt. II D.O. 139. Captain & Adjt., for O.C. No. 57 District, Canadian Forestry Corps.
19/11/17.	O.C. 57 Dist. C.F.C.	T.O.S. 55 District C.F.C. on posting to 109 coy.	Stirling	19/11/17.	D.O. Part II. No. 2- d/28/11/17. 55 District C.F.C. Capt. & Adj.
17-9-18	O.C. 55 Dist C.F.C.	S.O.S. 55 Dist C.F.C. at 109 Coy on posting to Base Depot	Stirling	3-9-18	2/043 d/11-9-18 Capt & Adjt 55 Dist C.F.C.
16.9.18		O.C. C.F.C. T.O. 3. Base Depot, C.F.C. Sunningdale from 55 Dist 109 Co.	3-9-18		Pt. 11 B.O. 221.
23-3-19	M.S.3.	T.O.O #3. S.D & Paraded to Cobourg	Kingston	28-3-19	H.O. Pt II—87
16-2-20.	M.S.3.	S.O.S. #100. to #2 D.D. Toronto.	Kingston	15-2-20	Hq. #47
15-2-20 T.O.S.	No. 2 District Depot, Part II, D.O. No. 54.				T.A. Adjt. No. 3 District Depot

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins..... FORESTRY DEPOT.

(2) Regimental Number 2497991

(3) Full Name of Soldier..... Isaac GOODWIN

(4) Place of Birth..... Port Albany James Bay

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

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

(b) Present Postal Address.....

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

(8) Have you any children ?.....

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

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... Yes ..... George ..... Goodwin .....

If so, state name and address ..... Port Albany James Bay .....

(10) Is your Mother alive ?..... Yes ..... Mrs. Goodwin ..... Same Address .....

If so, state name and address .....

.....

(11) If your Mother is a widow .....

Are you her sole support, or not ?.....

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

.....

.....

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

.....

.....

.....

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

.....

(15) Are you insured ?..... No .....

If so, in what Company ?.....

Have you made arrangements for payment of your Insurance premium .....

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

..... MAJOR

Officer Commanding.

O. C. FORESTRY DEPT. M. D. No. 2

Date 24/8/17

ORIGINAL

MEDICAL HISTORY SHEET

A2 2497991

Surname Goodwin Christian Name Isaac

Examined on 3rd day of July, 1917 191
at Toronto, Canada

Birthplace City or Town Port Albany
County James Bay, Ontario

Apparent age 21 yrs 5 mos

Trade or occupation Hunter

Height 5 feet 8½ Inches

Weight 155 lbs.

Chest measurement Minimum 35 inches
Maximum expansion 38 inches

Physical development Good

Small-pox Marks nil

Vaccination Marks Arm Right Left 1
Number 1

When Vaccinated last 1912

(a) Marks indicating congential peculiarities or previous disease nil

(b) Slight defects but not sufficient to cause rejection

H

DECLARED FIT BY MEDICAL BOARD
Approved by TORONTO MOBILIZATION CENTRE

J. M. Dalrymple Gault M.O.
Rank PRESIDENT M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
1917		[illegible]	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
4/8/17		A W Gregory	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
4/8/17		A W Gregory	M.O.
12/8/17			M.O.
17/8/17			M.O.

Enlisted on day of 191 at

	Corps	Regt'l. Number	Habits	Date
Joined on enlistment	Indian Draft.	2496991		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
The Lord Derby War Hospital 23 JAN 1919 WARRINGTON.	3/1/19	Imbecility	Repatriation to Australia Canada J. J. Ferguson Captain, R.A.M.C. For Officer Commanding THE LORD DERBY WAR HOSPITAL

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.
300M.—1-17.
H. Q. 1772-39-439.

Surname Goodwin Christian Name Isaac

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
Royal Infirmary	Sterling	13	8	18	14	10	18	T.B Glands of neck	62	Glands removed & scraped. Euso & dressing.	John Thier.
MCH Epsom		30	10	18	8	11	18	Gen Debility (Convr) + scars + sores face.	10	Scars and open sores left side of face + neck and glands of neck enlarged + tender Transfer to Hosp for active treatment — Orpington. Moore Barracks. F E Pettman major-RAMC	
No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS. SHORNCLIFFE.		8	NOV	1918	3	1	19	Imbecility	57	Heart normal. Wasserman neg. other systems normal. Cervical glands are so advanced in disease that nothing could be done at present except drain out a few of those which are definitely softened, extensive dissection is contra-indicated for fear of resultant cellulitis. Mental Shows exacerbations of excitement Memory poor, Childish in judgement Has refused food for days at a time no change	
"ARAGUAYA."		11	3	19	22	3	19	do			M.H.S. Graham Capt C.A.M.C.

"II" DIVISION.

CASE HISTORY SHEET.

COBOURG MILITARY Hospital. Cobourg Station.

No. 2497991 Rank Pte. Name GOODWIN, Isaac Age 24

Unit #3 D.D. Completed years of service (Where and how long) C.14/12 E. 10/12 F. 7/12

Date of admission 23/3/19 Date of discharge

Diagnosis 1-Imbecile 2-T.B.Adenitis cervical 3-T.B. Lungs? Place of origin 1, 2 & 3 Can.

CONDITION ON ADMISSION AND PROGRESS OF CASE Ht- 5-8½ Wght 150 lbs.

Phys- Well nourished. Large cervical gland freely movable under angle rt. lower jaw, present past 14 yrs. Five scars of varying sizes under left lower jaw extending down over left clavicle from suppurating cervical glands. Three at present have discharging sinuses. Breath sds. rt. apex broncho-vesicular in character but no rales. Remainder of lungs clear. Heart normal. Patient is an Indian.

Neurolog- Pupils active. K.J. active. No tremors.

Mental- Enlist. July 1917. England Jan. 1918. Operation T.B. glands neck Aug. 1918. 30/11/18. Mentally- showed exacerbations of excitement and depression.

At present disoriented for time and place. Memory vary defective. Does not know where he enlisted. Complains of pains in chest. Answers questions in monosyllables. Judgment very defective. On account of language difficulties mental age cannot be estima ted, by Princeton Scale, but would judge this to be about six.-

May 1/19- Transfer to parole Wd.

Aug. 21/19- Frequent dressings to cervical glands which are still suppurating. He has improved mentally and is somewhat brighter and as far as mental condition is concerned is fit for civil life. He however, raquires treatment for his tubercular condition. Has been a parole patient since May 1/19- H. Dover, Capt. A.M.C. p.t.o.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Not obtainable.

TREATMENT

(Especially any specific or special form.)

Dressings, Glands, Rest.

Observation, Diet, Tonics, Operation.

CONDITION ON DISCHARGE

(and disposal made of case.)

a- Individual normal.

Date Feb. 10/1920.

H. Dover Capt. A.M.C.
Medical Officer i/c case.

M. F. B. 313a.
200M.–5-18.
1772-39-439.

1- Number, rank, name, age- [redacted]97991 Pte. Good[redacted]n, Isaac, 24
2- M.S.A. case- No
3- Number of enlistments during present war- One
4- When first admitted to Mil. Hosp-8/11/18
5- Date of last enlistment- July 1917
6- Service, where? C.E. or F-
7- Mental disability before enlistment- Yes
8- Previous Asylum treatment- No
9- If so, where, how long- N.A.
10- Address for year previous to enlistment- James Bay, Ont.

18/11/19- Condition remains about same. Has been on parole since May and has worked on Wd. and is now in vocational work.
11/12/19- Mental condition remains the same. Cervical glands suppurating again. Patient put to bed and dressings applied.
9/2/20- Recommended for discharge with supervision by S.C.R. for gland condition.- S.J.W. Horne, Capt. A.M.C.

A-14

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER Goodwin J. Soldier Draft

REGIMENT [illegible] RANK Pte No. 2497911

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	27/3/19		No	Work	Required															E. W. Sissons Capt	3	O. K.

I.F.B. 465. 200m.—6-18. 1772-39-950.

TRINARIS

No. XI. Canadian Hospital
Rhyl.

Reg. No. 249991 Rank. Pte. Name. Goodwin J. Ward 20.

Unit. Can For Corps Base Exam. Rqd. Routine

Diagnosis Gen Debility.

Date. 9-11- 1918.

for C.C. Bucknard Capt.
Officer i/c Ward.

REPORT

Odor Amber.

Sp. Gr. 1020.

Reaction acid

Sugar neg.

Albumen neg

Microscopic.

S.D. Brown Lt
CAPT. CAMC.
For O. i/c Laboratory

CERTIFIED PARTICULARS AGREE WITH
[illegible]
For O.C. No. 2 District Depot

DEPARTMENT OF MILITIA AND DEFENCE.

DISCHARGED

WAR SERVICE GRATUITY.

O.P-S.C.R.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names Isaac 2. Surname Goodwin
3. Rank Pte 4. Original Unit Indian Draft 5. Reg. No. 249.799.1
6. Address, in full, to which future payments of gratuity are to be forwarded
Post Albany James Bay Ont
7. Date of enlistment in the C.E.F. 3.7.17
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge No
9. Relationship of such dependent No
10. Present address, in full, of such dependent No
No
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Left Canada 6.9.17 C.F.C.
Returned to Canada 23.3.19
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service No
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
2 Yrs. 2 Mons. 27 dys.
Indian Draft, #2 Dist. Depot.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

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? ..... No .....

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? .....

24. Are you now serving in the C.E.F. ..... NO ..... If not, give:—(a) Date of discharge ..28th. Feb. 1920 ..... (b) Reason for discharge ...."MEDICALLY UNFIT"..... .....

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

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ..... No .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ..... No .....

(b) If so, are you in receipt of full pay and allowances from that Department? ..... No .....

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

Signature of Applicant: Gordon J.

Place of Residence: Port Albany James Bay Ont.

Declared before me at: Toronto

This 28th day of Feb 19.20

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths. H. McGowan Major Commissioner by order of P.C.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Clara Goodwin
(Assignee)

PAYMENTS. Name of Soldier Goodwin J. Pte 249799, For'r Cmd Depot

L. L. Job 19227—M. & D. 7814.

Month.	Year.	Cheque No.	Amt.	Remarks.
			15 00	SEP 1 1917 MD 2
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		X 43094	15	83
Oct.		V 45560	15	
Nov.		40872	15	
Dec.		26632	15	
Jan.	1918		60	
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 23216—M. & D. 8049.

ASSIGNED PAY.

MILITIA AND DEFENCE

M. F. W. 11.
15m.—6-17.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Clara Goodwin

Address Port Albany
James Bay. Ont
Canada

Relation to Soldier wife, child or mother Rate

15 00 SEP 1 1917

Name of Soldier Goodwin S.

Regtl. No. 2497991

Rank Pte

Corps Forestry and Construction Depot M D #2

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				

CONSOLIDATED ACCOUNT

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Goodwin (Surname) J. (Christian Name)

Regimental Number 2497991 Rank Pte.

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. P	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks.

File No. 07175-J-2.

WAR SERVICE GRATUITY.

Register No. Spec Reg. 86 / 2561

Reg. No. 2497991. Pte.

Name Goodwin J.

Address

Dependent

Address

Pay Soldier $ 350=

Rothwell-Bradbury

Clerk RH. 15/12/20

Pay Dependent $ Cheque drawn in favour of S.B.R. Ottawa.

Days 153 Rate 70 Due 350=

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net 350=

R.W. 134 22.12.20

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1	Rd by M.D. 2.		70 =		1			
2 15/12/20	65391	182641	280 =		2			
3					3			
4					4			
5					5			
6					6			

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

GEN'L AUDITOR
Posting checked by
Date 13/12/20

D.M.S. 1300 50M-21-11 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Goodwin	J.	2497991.

RANK	UNIT	CO.	TROOP / BATTY
Pte.	6.7.16.55 D.		

HOSPITAL — DATE OF ADMISSION

1. 4 Scott. Gen. Glasgow — Hosp. 13.8.18
2. Woodcote Park Epsom. — Hosp. 30.10.18.
3. 11 C.G. Moore Barracks. 9-11-18 — L. Derby War. Warrington — Hosp. 3.1.19
4. — Hosp.

DIAGNOSIS

1. Hypertrophy Glands Neck a.s. & Debility
2. General Debility a.s.
3. ~~Mental Obs.~~ Imbecility ?.

DISPOSITION	DATE	REMARKS
C.P.	17.8.18	291-2/358 (2)
	4.11.18	
	15-11-18	C/368-1.
	8.1.19	C.H.10.
	9-1-19	C.H.11
		Note Ref. C.H.10 Report Mental Obs. Changed to "Imbecility"
	17.3.19	C.468 (3)
		Inv. to Canada
		11.3.19

EPITOME OF HOSPITAL TREATMENT

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

*Name GOODWIN Isaac Rank Pte. Regtl. No. 2497991

Fyle Depot 3-G-470

Original unit Indian Dft. Present unit C.F.C. M. or S. Age 24 Religion R.C. Ref. H.Q.

Port, ship, and date of arrival Portland, Me. Araguaya 22-3-19

Next of kin Mother, Mrs. Lizzie Goodwin, Port Albany, James Bay, Ont.

Address on leave Same

Address on discharge ditto

Transportation issued Yes / No Date Character on discharge

Previous occupation Hunter Date and place of enlistment Toronto 3-7-17

Diagnosis Imbecility (Moron, Adenitis, Tubercular. Chro Bronchitis) Date of Medical Boards 10-2-20

Date.	Remarks	Pt. 2 Order No.
T.O.S.	From Clearing Depot	
23-3-19	Posted to Cobourg	H.S. 87
15-2-20	Transferred to #2 D.D. Toronto	Wy. 4/7
15-2-20	T.O.S. #2 D.D. on Trans. from #3 D.D. & Posted to Cas. Co. 54	
16-2-20	Granted Subs. Indef.	54

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

(over)

Date.	Remarks.	Pt. 2 Order No.
28-2-20	Dis. as Med. Unfit" and Entitled to 153 days W.S.G.	
	(to take further OUT-patient treatment with D.S.C.R.)	57

M.F.W. 192
150M—6-18.
1772-39-1243.

Number 2497991 Rank PTE

Surname GOODWIN

Christian Name Isaac

Units C.E.F. Theatre of War Eng.

Date of Service 15-9-19

Remarks Med to be desp'd to: c/o The Rev. P.A. Wortham, St. Pauls Mission, ~~Fort Albany Lake Bay~~

Latest Address James Bay, c/o Messrs Revillon Freres, 134 McGee St, Montreal, P.Q.

29/9/22 Out 29/9/22

Roll No. A Page 2780

200m.-2-21.M.

To Rev. R. A. Northam.
St Pauls Mission.
Albany. James Bay

C/o Riordon Frères
134 McGill
Montreal

M 975-3

32. 10/2/20
CARD NO. D054 of 23-2-20 = 2048

S.O.S. M.U. 25-2-20

POLL. D.O.S.T.F. 26-2-20. 2048.

SURNAME. Goodwin

CHRISTIAN NAMES Isaac

REGL. No. 2497991 RANK Pte.

UNIT Rly. Constn. & Forestry Coy. (M.D. 2.)

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Goodwin, Mrs. Clara

RELATIONSHIP TO SOLDIER mother

ADDRESS Port Albany, James Bay, Ont. Fort.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Port Albany DATE Aug. 10th. 1895

PLACE OF ATTESTATION Toronto Ont. DATE July 3rd. 1917

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Hunter RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 21 YEARS 5 MONTHS

HEIGHT 5 FEET 8½ INCHES

CHEST MEASUREMENT 38. INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Brown HAIR Black

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Toronto Ont. DATE July 3rd. 1917

Present address, Port Albany, James Bay, Ont.

LEDGER NO. _____ SERIAL NO. 31345

REG. NO. 2497991 NAME Goodwin Isaac

RANK Pte. CORPS Indian Draft. AGE 24 SERVICE C 14/12 E 12/12 T 2/12

	HOSPITALS	DATE OF ADMISSION
1	Coboung Mil.	Coboung 23-3-19
2		
3		

DIAGNOSIS S Imbecility. T.B. Adenitis cervical

TRANSFERRED TO _____

DISPOSITION Dis to S & R 16-2-20 & S. CATEGORY _____

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

P.T.O.

REMARKS:

NAME Goodwin Isaac REGT'L. No 249791

RANK AND CORPS Pte (~~Can For Corps~~) H. Q. FILE No. 649

NATURE OF CASUALTY Hosp Ld's 5th For Corps

FOLLOWS Form Fly Cons For Corps

CABLE No.	CABLE Date
Norkin Paris F.E.C.T.O.	
1-6	11-1-19.
#613	11-1-19

Mrs Clara Goodwin (Mother)
~~Port~~ Albany James Bay Ont.
Adm. Lord Derby War. N Warwick
Jan 3rd 1919, Insufficiency

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

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

LIST NO. (21)	HOSPITAL	DATE OF ADMISSION	REMARKS
C 391	7th Scottish Gen Glasgow	5-8-18	Hypertrophy Glands neck
C 3583	Mil Conv. W. Epsom	30-10-18.	
C 368 1/	#1 Con Em. Sharne	9-10-18	Gen Debility
C 410 1/	Lord Derby War. Warrington	31-19	Imbecility Mental Defs
C 468 3	Ins. to Canada.	11-3-19	Imbecility S.L. 13 M.D. 3

Form R. 149.

Name GOODWIN Isaac Rank Pte Reg. No. 2497991

Unit C.F.C. 55 Deal

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
13.8	4 Sct. G.H.	Sobhell	Sh[illegible] Wd			
			Gunshot Neck	C 291		24176
30.10	Wendeale PR Lpool		Ag: debility	C 355		30463
9-10.11	H.C. Gen Hohenschaffe		Gen debility	C 368		901
3.1.19	Lord Derby's War Hos Warrington		Mental Obs:	C 410		4386
"	Report Mental Obs: Chgd to		Imbecility	C 411	461	36141
11.3.19	Invalided to Canada		Do	C 468		800
	SL: 73. MD 3.					

DISCHARGED 9/31 SK

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

F.B. 122
.B. 103
.B. 178
.F.A. 45

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

EG

1. No. #2497991

2. Rank PRIVATE.

3. Name GOODWIN, Isaac.

4. Unit Forestry Depot M.D.#2. (#2 D.D.)

5. Date of Discharge | FEB 28 1920 | Place TORONTO, ONT.

6. Reason for Discharge "MEDICALLY UNFIT"

7. Authority (#2 D.D. Part 11 Daily Order #57)

8. Proposed Residence after Discharge Port Albany, James Bay, Ontario.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?

Isaac Goodwin

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date FEB 28 1920

No. 2 DISTRICT DEPOT
FEB 28 1920
TORONTO

Medical Documents forwarded to ~~S. C. R.~~ or B. P. O. on

Signature

(O.C. Discharging Unit.)

M.F.B. 218a—150M-3-19—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

PART I. Ward 25. Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C. EXPEDITIONARY FORCE

Regt. No. 2497991 Rank Pte. Surname GOODWIN Christian Name ISAAC

Unit or Corps—(a) Overseas from United Kingdom Nil (b) In United Kingdom Can. For. Corps

Born at—Town Port Albany County or Province James Bay, Ont. Country Canada

Date of Birth—Day ? Month ? Year 1896 Age 22 yrs. ? months.

Joined at Toronto, Ont. Date 3 June, 1917.

Former Trade or Occupation Hunter

Permanent marks or peculiarities that will serve for future identification: North American Indian

Height—feet 5 inches 8 1/2 Colour of eyes brown

Signature of Soldier (*for identification purposes*) [signature]

Medical Report.

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

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

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

Disabilities Group (*a*): IMBECILITY

Disabilities Group (*b*): T.B. ADENITIS (LEFT)

Disabilities Group (*c*):

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Congenital	Canada	Prior to enlistment
(*ii.*) As to Group (*b*) above.	Infection	Canada	Prior to enlistment
(*iii.*) As to Group (*c*) above.			

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? Yes If yes, has Active Service aggravated it? No.

(*ii.*) As to Group (*b*) above? Yes If yes, has Active Service aggravated it? No.

(*iii.*) As to Group (*c*) above? If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? No

(*ii.*) As to Group (*b*) above? No.

(*iii.*) As to Group (*c*) above?

PART I. *(continued)*.

5. If a cause of disability was an injury received on Active Service, was it received – No.

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

(*iii.*) Was a Court of Inquiry held ? (*iv.*) Where ? (*v.*) When ?

(*vi.*) Opinion of the Court ?

6. HISTORY OF THE CASE. *(State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).* Impossible to get much personal history as pt. refuses to talk except in monosyllables. Was troubled with enlarged glands of neck prior to enlistment. Has always been below par mentally. Came to England Jan., 1918. Operated upon for T.B. Glands of neck in Aug. 1918. Was in Hosp. 2 mths. after which he was trans. M.C.H. at Epsom 30-10-18. The Cervical glands again showed softening & breaking down & his feeble minded condition was noted so he was trans. here for mental exam. & active treatment of T.B. Glands. Admitted 8-11-18.

7. PRESENT CONDITION. *(Give previous and present weight if likely to indicate progress of disability.)* Well built & well nourished in appearance. Cervical glands are so advanced in disease that nothing could be done at present except drain out a few of those which are definitely softened. Excision dissection is contra-indicated for fear of resultant cellulitis. It is advised that this work be done in Canada. Impaired percussion note in left infra-clavicular region. No adventitious sounds in lungs. Heart normal. Wassermann negative. Other systems normal. Mental condition shows exhibitations of excitement & depressions. Can not read or write for memory. Child's judgment. Has refused food for days at a time. Wanders out of bed at night if not watched etc.

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

(*ii.*) If so, state what. Adenectomy : August, 1918.

(*iii*). Was one advised and declined ? No.

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

9. (*i.*) Is there loss or decay of teeth attributable to Active Service ? No.

(*ii.*) If so, describe.

10. DO YOU RECOMMEND :—

(*a*) Fit for duty ? No.

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

(*c*) Invalid to Canada ? Yes.

(*d*) Discharge from the Service as permanently unfit ? No.

Date of Report 19 Dec 1918. Signed W.H.D. Graham Capt C.A.M.C.
Officer in medical charge of case.

Station # 11 Can. Gen. Hosp. Moore Barracks.

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

William A. Scott
COLONEL, C.A.M.C.
OFFICER i/c No. XI CANADIAN GENERAL HOSPITAL
MOORE BARRACKS, SHORNCLIFFE.

Officer i/c Hospital / (S.M.O. Brigade) Strike out one of these.

Dated at Station, on 191

* Delete if inapplicable.

No. XI CANADIAN GENERAL HOSPITAL ORDERLY ROOM 30 DEC 1918 MOORE BARRACKS SHORNCLIFFE

PART II.

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

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

11. Is the disability fully indicated in Part I. (1)? Yes

If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? Yes

If not, indicate it.

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

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.) Na

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*) Na

16. Permanency of the Pensionable Disability estimated next above in (15). No pensionable disability
(*i.*) Is it permanent?

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Na

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? —

(*b*) Fit for base duty? —

(*c*) Invalid to Canada? Yes

(*d*) Discharge from service as permanently unfit? —

Classification for the Military Hospitals Commission.

Date of Board

Station

Signatures of the Board. O. Napier Peart, President.
J. R. Ferguson Capt. R.A.M.C.
H. Cunningham Capt.

Approved Major, D.A.D.M.S. A.D.M.S.

Dated at Buxton Area Station

191

The Last Relief War Hospital 25 JAN 1919 WASHINGTON

ASSISTANT DIRECTOR OF MEDICAL SERVICES 24 JAN 1919 CANADIANS BUXTON AREA.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

CASE HISTORY SHEET.

Military Hospital. Cobourg Ont. Station

No. 2497991 Rank Pte. Name Graduine Isaac 24

Unit #300. Completed years of service Where and how long } 1st C.E. 10/27 7/12

Date of admission 23/3/19 Date of discharge 16-2-20

Diagnosis (1) T.B. adenitis Cervical (2) T.B. Lungs Place of origin 1 & 3 Can. Inf.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Ht. 5-8½ Wght 150 lbs. Resp. well nourished. Large cervical glands freely movable under angle of. Lower jaw, present past 14 yrs. Three scars & adjoining scars under left lower jaw extending down over left clavicle from suppurating cervical glands. Three at present have discharging sinuses. Breath sds. Lt. apex broncho. vesicular in character but no rales. Remainder lungs clear. Heart normal. Patient is anæmic. Neurolog. Pupils active. K.J. active. no tremors. Enlisted. Exeter. July 1917. England Jan 1918. Operation T.B. Glands neck Aug 1918. 30/11/18 Neurasthenia removed. Exacerbations & excitement & depression.

At present disoriented for time & place. Memory very defective. Does not know where he enlisted. Complains of pain in chest. Answers questions in monosyllables. Reflexes very defective. On account of language difficulties mental examination cannot be estimated nor obtainable.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

TREATMENT (Especially any specific or special form.) Dressings Glands. Rest. Observation. Diet. Tonics. Operation.

CONDITION ON DISCHARGE (and disposal made of case.) Strike out condition not applicable.

a-Individual normal?
b-No change since admission.
c-Recovery.
d-Convalescent.
e-Improved.
f-Progressive.

Transferred to Christie St. Hospital Toronto for treatment.

Date 16/2/20

Medical Officer i/c case.
Hans Captain

M. F. B. 313a.
200M. 5-18.
1772-39-439.

31345

1- Number, rank, name, age.
2- M.S.A. case?
3- Number of enlistment[illegible] during present war? one
4- When first admitted to [illegible]. Hosp[illegible] 3/3/19
5- Date of last enlistment.
6- Service, where? C.E. or F. C.E.
7- Mental disability before enlistment? yes
8- Previous Asylum treatment? no
9- If so, where, how long. n/a.
10-Address for year previous to enlistment? Can.

by Runcorn Scale; but wound judge this to be about six.

H Laws, Capt. A.M.C.

May 1/19. Transfer to parole Wd. B.D.

Aug 21/19. Frequent dressings to cervical glands which are still suppurating. He has improved mentally & is somewhat brighter & as far as mental condition is concerned is fit for civil life. He however, requires treatment for his tubercular condition. Has been a parole patient since May 1/19.

H Laws Capt. A.M.C.

18/11/19

Condition remains about same. Has been on parole since May and has worked on Wd. 9 & is now in Vocational Work. D.J. Horne

11/12/19.

Mental condition remains the same. Cervical glands suppurating again. Patient put to bed and dressings applied. D.J. Horne

9/2/20 Recommended for discharge with supervision D.J. Horne
by C.C.R. for gland condition.

(1)
(2) No
(3) One
(4) 8/11/18
(5) July 19 ?
(6) C.E.F.
(7) Yes
(8) No
(9) n/a
(10) James Bay Cont.

Forms
I. 1237
12

Army Form I. 123[illegible]

MEDICAL [illegible]SE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T816	2497991	Pte.	Goodwin,	Issac.
Year 1918.	Unit.		Age.	Service.
	Can. Forestry Corps.		22	

Station and Date.

No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS. EARLSCLIFFE. 19.12.18.

Disease IMBECILITY.

Impossible to get much personal history as patient refuses to talk except in monosyllables. Was troubled with enlarge glands of neck prior to enlistment. Has always been below par mentally. Came to England Jan. 1918. Operated upon for T.B. glar of neck in Aug. 1918. Was in hospital two months after which he was trans. M.C.H. Epsom 30.10.18. The cervical glands again showed softening and breaking down and his feebleminded condition was noted so he was trans. here for mental examination and active treatment of T.B.glands. Admitted 8.11.18.

Present Condition.

Well built. Well nourished in appearance. Cervical glar are so advances in disease that nothing could be done at present except drain out a few of those which are definitely softened. Extensive dissection is contra-indicated for fear of resultant cellulitis. It is advised that this work be done in Canada. Impaired percussion note in left infra-clavicular region. No adventitious sounds in lungs. Herat normal. Wasserman negative. Other systems normal. Mental condition shows exacerbations of ex[illegible]itement and depression. Can not read or write. Poor memory. Childish judgment. Has refused food for days at a time. Wanders out of ward at night if not watch[illegible]te.

~~Adenectomy August.~~

3.1.19 Transfd to Lord D.W.K. Warrington

(Signed) M.F.D. GRAHAM, Capt. C.A.M.C.

5.1.19. An Indian. Hunter. Uneducated. Says there is nothing the matter Childish in manner & conversation. Denies alcoholic excess Volunteers no information. Says he sleeps well. No headache. Reflexes normal. Is reported as rather obstinate. I am not sufficiently acquainted with the normal - Red Indian to express an opinion on his mental abnormality, if any.

D.F. Napier Train Capt RAMC

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.&S. Forms/I. 1237/12. (E239)

P.T.O.

P.T.O.

Station and Date.	
7.1.19.	Glands in neck seem to be breaking down again. Transfused to 4 D in consequence. There is also a possibility of T B lungs. O.C. Napier Ward

Boarded 23.1.19 and Recommended FOR REPATRIATION

J.J.N. Ferguson Captain

I ~~HEREBY CERTIFY that~~ No. 2497991 Pte Goodwin F. is not suffering from any Infectious Disease. He is free from vermin, and is in a fit state of bodily health to allow of his ~~transfer~~ to Hospital Ship for Canada

THE LORD DERBY WAR HOSPITAL 10.3.19. WARRINGTON

H.P. Gandell Lt

Captain, R.A.M.C.
For Officer Commanding
THE LORD DERBY WAR HOSPITAL

Unit C.J.C.

Squadron, battery or company B Coy.

MORNING SICK REPORT

MEDICAL INSPECTION REPORT*

Station and Date 29/10/18. 191

Army Form B 256

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married).	Completed Years of Age.	Completed Years of Service.	Religion.	If for duty†	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's Remarks and Signature.
~~2497991~~	~~Pte Gwelim G~~	~~30~~ 21	~~7~~ 3	Meth	—	—	—	—	General Weakness.	~~Remind~~ Epsom
2497991	Pte Gwelim G	21	5/12							

J.S. Munro

†State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

*Strike out whichever is not applicable.

Orderly N.C.O.

(40957) W2245/P1076 4,500,000 6/18 T. & W. & J. M Ltd. E 3552

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

Unit C. F. C.

Army Form B 256

MORNING SICK REPORT
MEDICAL INSPECTION REPORT*

Squadron, battery or company B Coy.

Station and Date 29/10/18. 191

Regtl. No.	Rank and Name (Christian name in full. Surname first: Maiden name if married).	Completed Years of Age.	Completed Years of Service.	Religion.	If for duty †	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's Remarks and Signature.
2497991	Pte Goodwin	21	10/12	Meth	—	—	—	—	General Weakness.	~~Bearwood~~ Epsom

J S Munro

†State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

*Strike out whichever is not applicable.

Orderly N.C.O.

(40957) W2245/P1076 4,500,000 6/18 T. & W. & J. M Ltd. E 3251

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

NO 2497[illegible] RANK Pte NAME Gordon. Jas

I RECOMMENDED FOR MEDICAL

PCA[illegible] INVALIDITY. Debility following operation for T.B. glands.

No boat for duty.

J S Munroe Capt.

M.C. Base Depot Can, Forestry Corps.

Form D.M.S. 1394
10M

PROCEEDINGS OF A MEDICAL BOARD

Dated at Sunningdale 22/10/1915.

No 2497991 Rank Pte Name Goodwin. S.

Local Unit C.F.C. Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
O verseas - Local
(scratch one out)

PRESENT CONDITION.

Convalescent Hosp.
All wounds are
Soldly healed.

BOARD RECOMMENDS:-

1. Fit for Duty .....
2. Fit for duty after .....weeks' physical training
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:-

(..... President.
(Members (.....
((.....

APPROVED

Dated ..... 191 . ..... For A.D.M.S

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

Regtl. No., Rank and Name #249 7991 Pte Goodwin J. Corps Can. F. A.

Disease Gen Debility Hospital X1 C Y H.

To Officer i/c Laboratory. Ward 24

Please carry out an examination of the accompanying specimen of Blood

with special regard to Wassermann

Date 26-11-18 M. G. H. Graham Capt.

O. i/c pro tem. Ward.

LABORATORY REPORT.

1.

NEGATIVE

Edward Fisher Capt. C.A.M.C.

Date of Examination 26 NOV 1918

O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

LABORATORY REPORT.

NEGATIVE

(313) W124/M3035 10,000 10/17 Cax.P.Ltd.

Army Form B. 183.

Report on a Case of Mental Disability.

1. Regimental Number 2497991. Rank Pte.

   Surname GOODWIN Christian Name. ISSAC

2. Regiment or Corps. Can.Forestry Corps.

3. Age last Birthday. 22 years. Religion. R/C.

4. Place of birth. Port Albany, James Bay, Ont.

5. Married or single. Single.

6. Names and Addresses of nearest surviving relatives.

   Mother -

   Mrs. Lizzie Goodwin,
   Port Albany,
   James Bay, Ont.

7. Service.

COUNTRY	PERIODS	
	From	To
Canada	3rd. Jly . 1917.	Jan. 1918.
England	Jan. 1918.	Present.

Years. Days.

The answers to the following questions will be in the handwriting of the Officer in medical charge of the case.

8. Character, especial regard being paid as to whether temperate or otherwise.
   (For guidance in forming an opinion, the Company Conduct Sheet will be obtained from the soldier's Commanding Officer.)

   Uncertain

9. Form of mental disease.

   IMBECILITY.

10. Is this a first attack ? Not applicable.

11. Duration of present attack. All his life.

12. Was the attack sudden or insidious ? If the latter, mention any peculiarity of behaviour or change of habits which preceded it. Not applicable.

13. Was it preceded or accompanied by any particular illness, such as fever, rheumatism, syphilis, &c. ? T.B. Adenitis

Surgical interferance defined until patient arrived in Canada, (see A.F.B. 179.)

14. What are the supposed causes (moral or physical) of the attack ? Congenital.

Has the patient suffered from sunstroke, concussion, or injury of the head ? No.

15. Has the disability been caused or aggravated by his service as a soldier? If so, how? No.

16. Does any hereditary predisposition exist? Not known.

17. What are the particular ideas or actions which have induced the belief of insanity?

(*a*) Observed by you.

(*b*) Communicated to you by others.

Suspected for a time that a secondry Psychosis was being engrafted on a congenitally feebleminded basis. Patient would wander out of Ward at night and several times was found asleep in the grass.

Refused food for several days and all at once began toeat with a good appetite. He denies hallucinations. Is resistive to treatment and attention. Cannot read or write. Does not know what month this is nor when he came to England &c.

Is childish in actions and judgment Scratches his arms and hands with pins.

18. (*a*) Is the disease complicated with epilepsy, paralysis, or homicidal or suicidal impulses ? — No.

(*b*) If suicidal tendency exists, the way in which self-destruction has been attempted should be stated. — Nil.

19. (*a*) Is the patient noisy, dangerous, mischievous, or given to steal ? — Uncertain,

(*b*) Are his habits cleanly or the reverse ? — Cleanly.

(Sgd.) M.F.D.Graham, Capt. CAMC

Officer in medical charge of the case.

Station No.Xl.Canadian Gen. Hospital. Moore Barraks, Shorncliffe.

Date December 19th. 1918.

The A. D. M. S. (or D. D. M. S.)

District (or Command).

I recommend that this soldier be brought before a Medical Board, with a view to his mental condition being definitely affirmed, and his disposal determined.

(Sgd.) Wallace. A. Scott, Colonel, C.A.M.C.

Officer i/c No.Xl.Canadian General Hospital. Moore Barracks, Shorncliffe.

Officer in charge, Military Hospital.

Station Shorncliffe.

Date December 30th. 1918.

(313) W124/M3035 10,000 10/17 Cax.P.Ltd.

Army Form B. 183.

Report on a Case of Mental Disability.

1. Regimental Number 2497991. Rank Pte.

   Surname GOODWIN Christian Name. ISAAC

2. Regiment or Corps. Can.Forestry Corps.

3. Age last Birthday. 22 years. Religion. R/C.

4. Place of birth. Port Albany, James Bay, Ont.

5. Married or single. Single.

6. Names and Addresses of nearest surviving relatives.

   Mother -

   Mrs. Lizzie Goodwin,
   Port Albany,
   James Bay, Ont.

7. Service.

COUNTRY	PERIODS	
	From	To
Canada	3rd. Jly . 1917.	Jan. 1918.
England	Jan. 1918.	Present.

The answers to the following questions will be in the handwriting of the Officer in medical charge of the case.

8. Character, especial regard being paid as to whether temperate or otherwise. Uncertain
   (For guidance in forming an opinion, the Company Conduct Sheet will be obtained from the soldier's Commanding Officer.)

9. Form of mental disease.

   IMBECILITY.

10. Is this a first attack ? Not applicable. 15.

11. Duration of present attack. All his life.

16.

12. Was the attack sudden or insidious ? If the latter, mention any peculiarity of behaviour or change of habits which preceded it. Not applicable.

17.

13. Was it preceded or accompanied by any particular illness, such as fever, rheumatism, syphilis, &c. ? T.B. Adenitis

Surgical interferance defined until patient arrived in Canada, (see A.F.B. 179.)

14. What are the supposed causes (moral or physical) of the attack ? Congenital.

Has the patient suffered from sunstroke, concussion, or injury of the head ? No.

15. Has the disability been caused or aggravated by his service as a soldier? If so, how?

No.

16. Does any hereditary predisposition exist?

Not known.

17. What are the particular ideas or actions which have induced the belief of insanity?

(*a*) Observed by you.

(*b*) Communicated to you by others.

Suspected for a time that a secondary Psychosis was being engrafted on a congenitally feebleminded basis. Patient would wander out of Ward at night and several times was found asleep in the grass.

Refused food for several days and all at once began to eat with a good appetite. He denies hallucinations. Is resistive to treatment and attention. Cannot read or write. Does not know what month this is nor when he came to England &c.

Is childish in actions and judgment Scratches his arms and hands with pins.

18. (*a*) Is the disease complicated with epilepsy, paralysis, or homicidal or suicidal impulses ?

No.

(*b*) If suicidal tendency exists, the way in which self-destruction has been attempted should be stated.

Nil.

19. (*a*) Is the patient noisy, dangerous, mischievous, or given to steal ?

Uncertain.

(*b*) Are his habits cleanly or the reverse ?

Cleanly.

(Sgd.) M.F.D.Graham, Capt. C.A.M.C.

Officer in medical charge of the case.

Station No.XI.Canadian Gen. Hospital. Moore Barracks, Shorncliffe.

Date December 19th. 1918.

The A. D. M. S. (or D. D. M. S.)

District (or Command).

I recommend that this soldier be brought before a Medical Board, with a view to his mental condition being definitely affirmed, and his disposal determined.

(Sgd.) Wallace. A. Scott, Colonel, C.A.M.C.

Officer i/c No.XI.Canadian General Hospital. Moore Barracks, Shorncliffe.

Officer in charge, Military Hospital.

Station Shorncliffe.

Date December 30th. 1918.

(313) W124/M3035 10,000 10/17 Cax. P. Ltd.

Army Form B. 183.

Report on a Case of Mental Disability.

1. Regimental Number 2497991 Rank Pte.
   Surname. GOODWIN Christian Name. ISAAC
2. Regiment or Corps. Can. Forestry Corps.
3. Age last Birthday. 22 Religion. R.C.
4. Place of birth. Port Albany, James Bay, Ont.
5. Married or single. single
6. Names and Addresses of nearest surviving relatives.

Mother -
Mrs. Lizzie Goodwin,
Port Albany,
James Bay, Ont.

7. Service.

COUNTRY	PERIODS	
	From	To
Canada	3 July: '17	Jan., 1918.
England	Jan., '18	present.

Years.	Days.

The answers to the following questions will be in the handwriting of the Officer in medical charge of the case.

8. Character, especial regard being paid as to whether temperate or otherwise. Uncertain
   (For guidance in forming an opinion, the Company Conduct Sheet will be obtained from the soldier's Commanding Officer.)
9. Form of mental disease.

IMBECILITY

10. Is this a first attack? N. A.

11. Duration of present attack. all his life.

12. Was the attack sudden or insidious? If the latter, mention any peculiarity of behaviour or change of habits which preceded it. N. A.

13. Was it preceded or accompanied by any particular illness, such as fever, rheumatism, syphilis, &c.? T. B. Adenitis.
Surgical interference deferred till pt. arrives in Canada.
See A.F.B. 179.

14. What are the supposed causes (moral or physical) of the attack? Congenital

Has the patient suffered from sunstroke, concussion, or injury of the head? no.

15. Has the disability been caused or aggravated by his service as a soldier? If so, how? No.

16. Does any hereditary predisposition exist?

Not known.

17. What are the particular ideas or actions which have induced the belief of insanity?

(*a*) Observed by you.

(*b*) Communicated to you by others.

Suspected for a time that a secondary psychosis was being engrafted on a congenitally subnormal basis. Pt. would wander out of ward at night & usual times was found asleep in the grass. Refused food for several days & all at once began to eat with good appetite. He denies hallucinations. Is resistive to treatment & attention. Can not read or write. Does not know what month this is nor when he came to England etc. Is childish in actions & judgment. Scratches his arms & hands with pins.

18. (*a*) Is the disease complicated with epilepsy, paralysis, or homicidal or suicidal impulses ? No.

(*b*) If suicidal tendency exists, the way in which self-destruction has been attempted should be stated. Nil.

19. (*a*) Is the patient noisy, dangerous, mischievous, or given to steal ? Uncertain

(*b*) Are his habits cleanly or the reverse ? Cleanly.

M. H. D. Graham Capt.
C.A.M.C.
Officer in medical charge of the case.

Station # 11 Can. Gen. Hosp.

Date 19 Dec., 1918.

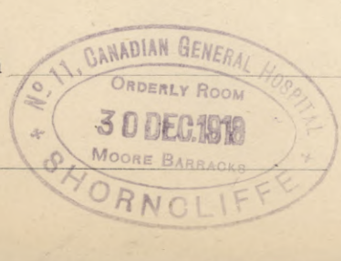
The A. D. M. S. (or D. D. M. S.)

_____ District (or Command).

I recommend that this soldier be brought before a Medical Board, with a view to his mental condition being definitely affirmed, and his disposal determined.

Station _____

Date _____



William A. Scott
COLONEL, C.A.M.C.
OFFICER I/c No. XI CANADIAN GENERAL HOSPITAL,
MOORE BARRACKS, SHORNCLIFFE.
Officer in charge, Military Hospital.

Local

2 Dent.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1918	2497991	Sk.	Goodwin	S.
	Unit.		Age.	Service.
	6.F.6.			

Station and Date.

30 OCT 1918

Convalescent Hospital,
No. .....
Date .....
Woodcote Park, Epsom.

Disease Genl Debility. Coins.

Scars & open sores on left side of face & neck and glands of neck enlarged & tender. Transfer to Hosp for actue treatment. — Orpington

F. E. Pettman
Maj.

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

(6365) W2914/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

Forms
I. 1237
12.

Army Form I. 1237.

No. XI CANADIAN GENERAL HOSPITAL

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T816	2497991	Pte.	Goodwin	L.
Year 1918	Unit.		Age.	Service.
	Can. For. Corps.		24	9/12

Station and Date. Nov. 8th

Disease Gen. Debility

North American Indian

N.B.:- Impossible to get history: patient talks at times to other patients but r/s and m.o. can get no information of any kind from him. - Mentality to be investigated later.

12/11/18 Examination

Well nourished, health neg

Infraclavicular epitrochlear not probable
In the neck Sub maxillary nodes & post-
Auricles, are enlarged the lower, size
of acheroins, Below left ear, an anterior
there too, are remains of two recent
sinuses at present dry

Lungs

Percussion note impaired somewhat
in left - infra clavicular
breath sounds not remarkable
heart - neg:-

Prognosis - T.B. adenitis neck bad.

A.C. Borchard

12-12-18 Parade this pt to Lt Chambers
M.H. Chambers Capt

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.&S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION COBOURG, ONT. DATE Feb. 10, 1920.

1. 1 (*a*) Unit 3 D.D. (*b*) Regimental No. 249791 (*c*) Rank Pte.

(*d*) Surname GOODWIN (*e*) Christian name Isaac

(*f*) Home address Port Albany, James Bay, Ont.

(*g*) Next of Kin Miss L. Goodwin (*h*) Relationship Mother

(*i*) Address of Next of Kin Port Albany, James Bay, Ont.

2. Age last birthday 23 Date of birth 1896 Month not known.

3. Enlistment, or Appointment (if an Officer) (*a*) Place Toronto (*b*) Date July 3rd.1918

4. Personal description:

(*a*) Height 5' 6½" (*b*) Weight 150 lbs. (stripped) (*c*) Complexion Dark

(*d*) Colour of hair Black (*e*) Colour of eyes Brown (*f*) Identification marks, Scars, etc. Numerous scars about neck from discharging glands.

5. Former trade or occupation Hunter.

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
	2	221

	Periods	
	From	To
Canada	(1) July 1917; 23/3/19	Jan.1918-Present
England	Jan. 1918	Aug. 1918
France or other theatres of War		

7. Original disease, or injury (1) Moron
(2) Adenitis, Tubercular
(3) Chronic Bronchitis.

(*a*) Date of origin (1)(2)(3)Prior to Enlistment. (*b*) Place of origin Canada

(*c*) Cause (1) Constitutional (2) & (3) Infection.

M. F. B. 227.
400M.—11-18.
1772-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, 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.)

(1) Moron

(2)(Adenitis cervical) partial loss function glands cervical.

(3) Partial loss function lungs.(Bronchitis).

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.)

(1) Man at present disoriented for time but oriented for place. Does not know when he enlisted. Answers questions in monosyllables. Judgement is defective and memory poor. On account of his being an Indian cannot estimate age by Princeton Scale. As far as mental state is concerned has been well behaved here and is suitable for civil life.

(2) Cervical glands are enlarged both sides, numerous scars where these have suppurated but none are discharging at present.

(3) Expansion chest good. On percussion an area of dullness in left infra clavicular space, which is not well marked. Breath sounds are a little harsh in both apices but no rales are heard.

(*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..as above..Digestive System..No..Muscular System..No..

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

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

(1) Has had present mental status since childhood. Documents state he was admitted to Moore Brks. Hpl. T.B. Glands 8-11-18. Mental examination also made. Was transferred to Canada and admitted to Cobourg Military 25/3/19. Since being here has shown some improvement mentally and has "carried on" on a parole ward.

(2) Cannot remember when glands first began to enlarge. Admitted to Hpl. 8-11-18 but no radical treatment given at that date. Glands have suppurated on two occasions since admission here.

(3) Lung condition dates back to origin of glandular.

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*).)

None.

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

Numerous scars of suppurating glands rt. & left side of neck.

11.—(*a*) Did the disabling condition have its origin before enlistment? (1) Yes (2) & (3) 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.)

(1) No (2) Yes (3) No

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (1) (2) & (3) No (a & b)

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? (1) Permanent (2) Six months (3) Six months.

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

Moore Barracks Hpl. for mental and glands.

Lord Derby War Hpl.

Cobourg Military Hpl. 13/3/19 to present.

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

Recommended to be discharged to pass under his own control with supervision of S.C.R. for glandular condition.

G. W. Horne Capt. A.M.C.

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 I. Goodwin 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

Sapper Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the invalid fit for

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

20. It is certified that the invalid

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

(*b*) Does not require treatment.
(*c*) Should pass under his own control. with supervision by D.S.C.R.
(*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.)

To pass under his own control with supervision by D.S.C.R.

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.

Yes

Capt. C.A.M.C. *President.*

Capt. C.A.M.C.

PLACE C.M.H. Cobourg

DATE 11-2-20. } 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..... } Members

DATE.....

APPROVED BY

Captain A.M.C.

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 2497991 RANK Pte. NAME (IN FULL) G O O D W I N. Isaac (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? NO | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Subs. Indef.	16/2/20	D054

ORIGINAL UNIT C.E.F. Indian Draft. | IF IN P.F. WHAT UNIT? Port Albany

PLACE OF ATTESTATION 3/7/17 | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE James Bay Ont | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 1/3/20

PAYABLE TO Mrs. C Goodwin | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Port Albany James Bay Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED Toronto | PLACE Ter Cat Par | DATE 28/2/20 | REASON Mu | AUTHORITY D059 | IF ENTITLED TO POST DISCHARGE PAY 152

MONTH 1920	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				
Feb 16	14	1.10	15	40	263	61											192896		15	00																T.O.S. 2 D.D. 15-2-20 on trans. from T3 D.D. D.O.54
					11	20			290	21	277172						275	21													290	21				2436 C.A.H.Q. D.D. 21/2/20
					35	-																							1	10						Subs 16/2-29/2
					70	-			105	-	324967 277-27.2						103	20											-	80			105	-				1st. Div Pay Feb. - 1.50 " Subs " "
			15	40	379	81			395	21							378	3											1	90			395	21				Payment War Service Gratuity
					105	9	Sd																						105	9	Sd						No W.S.G. paid by M.D. 3
153 days					350	.			350	.							Feb 28												70	.			70	.	280	.		
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Offwarded	DEC 1 1920	bh	1725	155	280	-			280	-																	280	00					280	00	nil	280	-

CAPT. PAYMASTER, M.D. 3 MILITARY DISTRICT

Award file 97175-D-2. Bal. W.S.G. Pd by Ottawa 15/12/20. CK in favour of D.O.K. 280 = CK 188264 marked 15/12/20.

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch G 4748

OVERSEAS CONTINGENTS

Date of Assignment Sept 1/17.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 2497991

Rank pte Promoted Reverted Discharge

Soldier's Name J. Goodwin.

Battalion Forestry & Cons. Depot M.D. #2.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Clara Goodwin.

Address Port Albany. James Bay

Change of Address Canada. 029

1

2

3

4

071 45 J 2.

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917 Dec. 21	—		60 -	60 -		MRO 82059 Destroy 28.3.19 Em B.
Jan. 19	66359		15	15	M	
Feby	91302		15	15		
Mch	91942		15	15		
April	11109		15	15		
May 2	18537		15	15		
June 6	21022		15	15	B.	
July	29643		15	15	B	
Aug	37052		15	15	B.	
Sept.	47468		15	15		
Oct.	54444		15	15	B	
Nov	58194		15	15	B.	
Dec	63432		15	15	B	
1918 Jan.	74580		15	15	B	
Feb.	78349		15	15	B	
Mar	90646		15	15	B	
			285	285	B.	

31.3.19 A/c Closed

Ret'd per Kwaguaya.

Date 23.3.19 E.E. 28.3.19

Clerk E.M. Barnes

AUDITED

CONSOLIDATED ACCOUNT

M. F. W. 128.
400m.—5-17—1772 '19-1141
L. L. 22320—M. & D. 1923.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M.—6-17—1772 39-1141.
L. L. 22320—M. & D. 1993.

Arsquaya 22-5-19

AUDITOR	PAYMASTER

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

M. OR S.

REGT. No. 2497991 RANK Pte NAME (IN FULL) Goodwin, Isaac (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN Wd RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Wd DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS Wd.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
$1.10.		A Bourg.

ORIGINAL UNIT C.E.F. C.F.C. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO N 2 D Dept DATE 15-2-19 AUTHORITY D.O. 47

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 15.00 DATE EFFECTIVE 1-4-19

PAYABLE TO Mrs Clara Goodwin RELATIONSHIP N.S.

ADDRESS Port Albany, James Bay, Ont.

ANY CHANGE IN ASSIGNEE OR ADDRESS Clara Goodwin N.S. Port Albany James Bay Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE REASON per M.T.O. 187 AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							120	61	120	61																									120	61		
1919 Jan.																							30	00							30	00			90	61	D.O. 87 Tor.
Feb.	28	1.10	30	80					30	80																									121	41	
Mar	31		34	10					34	10																									155	51	
Apl	30	"	33	00					33	00													15	00							15	00			173	51	#8297
May	31	"	34	10					34	10							5	00					15	00							20	-			187	61	223718 228905
June	30	"	33	-					33	-							10	-					15	-							25	-			195	61	225440 228802
July	31	"	34	10					34	10							10	-					15	-							25	-			204	71	275100 275494 416677
Aug	31	"	34	10					34	10													15	-							15	-			223	81	417597 417760
Sept	30	"	33	-					33	-							10	-	10	-			15	-							35	-			221	81	417974 419331
Oct	31	"	34	10					34	10							10	-					15	-							25	-			230	91	419416
Nov	30	"	33	-					33	-							10	-					15	-							25	-			238	91	420647 420886
Dec	31	"	34	10					34	10							10	-					15	-							25	-			248	01	421282 421123
Jan	31	"	34	10					34	10							5	-					15	-							20	-			262	11	421815 421732
Feb	15	"	16	50					16	50													15	-							15	-			263	61	418412
									538	61																					263	61					
																															538	61					Transfer to N 2 D Dept

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.