ORIGINAL

2 M. D. 1st. Depot Battalion 1st. C. O. Regiment

Regtl. No. 303157

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class .....)

1. Surname: Hamilton.
2. Christian name: Hubert. Weldon.
3. Present address: Copper Cliff. Ontario.
4. Military Service Act letter and number: # 239126 L.R.
5. Date of birth: March 7th. 1895.
6. Place of birth (town, township or county and country): Pembroke. Ontario.
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: Steamshovel Engineer.
10. Name of next-of-kin: John Matthew Hamilton,
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Copper Cliff, Ontario.
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None
15. Medical Examination under Military Service Act:—

(a) Place Sudbury, Ont. (b) Date Nov. 3rd. 1917 (c) Category A 2

DECLARATION OF RECRUIT

I, Hubert Weldon Hamilton, do solemnly declare that the above particulars refer to me, and are true.

Hubert Weldon Hamilton (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	22 yrs.	9 mths.	
Height	5 ft.	8 ½ ins.	
Chest measurement	fully expanded	41 ins.	
	range of expansion	4 ins.	
Complexion	Fair		
Eyes	Blue		
Hair	Fair		

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

Nil

Geo. G. Mitchell Major
for O. C. 1st Depot Btln.
1st C.O. Regt.

Place Toronto Date NOV 17 1917

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

29/8/19
S.P.

REGIMENTAL DOCUMENTS

NAME HAMILTON HUBERT. W. PTE. REGT. NO. 3031154 UNIT 1st D.B.C.O.R. H.Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	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)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				04637	DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
2	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. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	DENT. CERT.					14 - 24
1	M.F.W. 64					23 - 26
2	F.C.D. 3.					30 - 26
2	Cas card					(1)
1	R 122					
3	3X97 W					

Deceased 7.6.59

W. 2 9
100M 11 18

M. S. A.

I.2

2. CARD NO.

SURNAME. Hamilton.

CHRISTIAN NAMES Hubert, Weldon

REGL. NO. 303115 7. RANK Pte

UNIT 1st Cen Ont Regt 1st Dpo Bn.

FORMER CORPS Nil.

Loss Sfis. 7-8-19
Demob FOLL. #2 [illegible]
Do 224 J 12-8-19

NEXT OF KIN.

NAMES IN FULL Hamilton John Matthew.

RELATIONSHIP TO SOLDIER Father.

ADDRESS Copper Cliff. Ont.

138 Clara Belle Road. (auth. Letter. 4-6-19)

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Pembroke, Ont. DATE Mar 7th 1895

PLACE OF ATTESTATION Toronto Ont. DATE Nov 17th 1917.

Ns. 17-6-18 1270/3

R/C 6-8-19 381/33 Pte

L. L 26989 M. & D. 8191. M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

NAME Hamilton H. W. REGT. No. 303115-7.

RANK AND UNIT Pte. (15 L.) 1st. Central Ont. Regt.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100 M.—8-18.
H.Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
6525.	Mil. Conv. Epsom.	14-5-19.	20.
6557.	"Disch. "	26-6-19.	20.

Pw

Number 3031157 Rank Pte B

Surname HAMILTON

Christian Name Hubert Weldon

Units 15th Bn CAN Inf Theatre of War France

Date of Service 9-10-18

Remarks 321 Ontario St Box 743

Latest Address 138 Clarabelle Rd
Copper Cliff
Sudbury Ont

Roll No. B. Page 15105.

200 .-2-21. .

DEPT. MAY 11 1930
DEPT. MAY 12 1930
REGN. NO. 45-8-95

Form R. 149.

Herbert Weldon

Name HAMILTON Rank Pte. Reg. No. 3031157

Unit 15th Batt.

(L)

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14-5-19	Mil. (Com) Hosp	Epsom	"20"	C525		10645.
26-6-19	Discharged		do	C557		0483

HAMILTON. H.W. (Pte). 15th Batt. 3031157.

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

No. 3031157 RANK Pte. NAME Hamilton Herbert Weldon

T. O. S. Trans. from Sudbury M. Centre. D.O. 87 - 18-11-17

UNIT 1st Depot Battalion. 1st C.O.R.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Nov. 20	Nov. 30	✓		
Dec. 1	Dec. 31	✓		

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

Surname	Christian Name or Names	Reg. No.
HIMILTON.	H W	/ 3031157

Rank 1. Pte. Unit 1. 1CO 15 (L)
2. 2.
3. 3.
4. 4.

Cas. List.	Hospital and Diagnosis.	Date
20-5-19.C.525.	Mil Conv Epsom.	14-5-19
	V.D. G	
30.6.19.6557	Dis	26.6.19

Cas. List.	Hospital and Diagnosis.	Date

D.M.S. 1300.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Hamilton H

REGIMENT 1st C.O.R.

RANK Private

DISTRICT 7.

No. 3031157

M.F.P. 465.
50M 18.
1772 350.

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 Dist.	REMARKS
	1918.																					
Condition on first Examination	May 27.	3 / 1,4 / 18.									5 / 2,3,14 / 19,30									R M Mac Gibbon	7.	

M.S.A. 15.

ORIGINAL

ORIGINAL

19 OCT 1918

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

A 3031157

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname H A M I L T O N Christian name Hubert, Weldon,
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 239126
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Copper Cliff, Ontario.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 3rd. day of November 1917, by the undersigned medical board sitting at Sudbury, Ont. M. B. C. # 19

5. Age as stated 22 Years 0 Months. 6. Apparent age 22 Years 0 Months
7. Height 5 Feet 8 ½ Inches. 8. Weight 175 ½ Pounds.
9. Chest measurement { Minimum 37 Ins. / Maximum 41 Ins. } 10. Complexion Fair { Eyes Blue / Hair Fair }
11. Physical development. Good { Good / Fair / Poor } 12. Smallpox marks None
13. Number of vaccination marks { Right arm 0 / Left arm 1 } 14. When vaccinated last 1905
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil
16. Slight defects but not sufficient to cause rejection Nil

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

Hearing R. Normal - L. Normal
V.R.D. 40 -- L.D. 40

23 JUN 1919

TAB

Signature of Man Hubert Weldon Hamilton

CANADIAN

W Dales President.

W R Patterson Member. J W Moore Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
1/12/17	Good	[signature] M.O.	24/11/17		M.O.
		[signature] M.O.	1/12/17		[signature] M.O.
		M.O.	7/12/17		TAB 1-10-18 [signature] M.O.

Joined day of 191 at

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	12th Res Bn 15th Bn 9-10-18			
Transferred to		3031157		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
C. C. H. Epsom.	23-6-19	Physically Fit A	J W Hocock Capt C.A.M.C.

N. B.—This sheet is 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.

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital: Day	Month	Year	DATES OF Discharge from Hospital: Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Convalescent Hospital, No. ..... Date ..... Woodcote Park, Epsom.		13	5	19	~~27~~ 26	6	19	V.D.G.	~~46~~ 45	apparently cured 18/6/19 Boarded A. Cat.	

To be made out in duplicate. H.Q. 54-21-23-53

DUPLICATE

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

M.S.A.

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..."C" CO. 1ST DEPOT BN. 1ST C. O. R.

(2) Regimental Number 3031157

(3) Full Name of Soldier HAMILTON, Hubert Weldon

(4) Place of Birth Pembroke, Ont.

(5) Are you married, or not? No

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

(b) Present Postal Address.....

(7) Are you a widower? .....

(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

If so, state name and address John Matthew, Hamilton, Coppercliffe Ont

(10) Is your Mother alive? Yes

If so, state name and address Margerette Hamilton

Coppercliffe Ont

(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? Yes

If so, in what Company?

Have you made arrangements for payment of your Insurance premium Yes

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

John [illegible]

Officer Commanding.

1st DEPOT BATTALION

1st C.O.R.

Date JAN 18 1918

16

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3031187 Rank Pte Surname HAMILTON
(Given name in full) Hubert Weldon

Unit or Corps 5th Can Bn Birthplace Pembroke Ont Can

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION: Estimated

Physique Good Weight 180 lbs. Height 5 ft. 8½ in. Colour of Eyes Blue

Nutrition Good

Pulse Good

Condition of arteries Good

Vision Rt. Good Left Good

Hearing (conversational voice) Rt. Good ft.

Left. Good ft.

Identification marks, scars, or deformities. (Give cause and date of origin).

1. Vacc. Left Arm

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

V.D.G. 23/3/19. Apparently Cured 18/6/19.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at M.C.H. Epsom (Overseas)

Date 23 June 1919 Signed W. Brock Capt. M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature Hamilton Hall

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

C.A.D.C. 5079A

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

Group O. Wing

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Hamilton, H.W.

REGIMENT C.O.R.D. RANK Pte No. 3031157

Date of Examination in England 1-7-19 Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

Signature of Dental Officer R.C. Crosby, Capt.

W. S. B. CLASS. A.

M.S.A.

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

M. F. W. 54.
500M.—
H. Q. 1772-39-9

Casualty Form—Active Service.

Unit, Regiment or Corps 4th Draft: 1st Bn 1st C.O.R.D.

Regimental No. 3031159 Rank Private C. E. F. Name HAMILTON, Hubert Weldon

Enlisted (a) 17-11-17 Terms of Service (a) Duration of War Service reckons from (a) 17-11-17

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) Civil - Steamshovel Engineer

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
		Intarked Canada.	Montreal	5-6-18	H. M. T.
		Arrived England.	Liverpool	28.6.18	Pannonia
6-7-18	12th Bn.	T-O-S 12th Res Battn.	Witley.	28-6-18.	Part 11/ 159.
10-10-18	O.C. 12th Res. Bn. C.E.F.	Transferred to 15th Battn	Witley	9-10-18	Part II 241 H W Sainsbury Lieut i/c Records 12th Res. Bn. C.E.F. D.
12-10-18	C.I.B.D	Arr in France & T.O.S	15th Bn	10-10-18	Pt. II. 103 d/18.10-18
19-10-18	15th Bn	Joined Unit	Field	16-10-18	B.213.
2.11.18	C.C.R.C. Adv.	On Strength	"	2.11.18	N.R. 1958. K.R. 35913.
4.1.19	15 Bn	Joined unit	"	27.12.18	B 213.
29-3-19	C.R.L. Emb. Camp.	Proceeded to ~~England~~ C.R.L.			N.R. Pt.2 O.No. 24 d/.... C.R.L. Do 32 d/3-4-19

CERTIFIED CORRECT OCT 1918 CAN. RECORDS, LONDON

23 MAR 1919

A. Brandt LIEUT. FOR LT COL. A.A.G.

(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				
12-6-19	C.R.L	Inv. Sick & Posted to 1 CORD	Pte. Havre	12-5-19	55
30/6/19	O Wing	T.O.S from 1 CORD	Witley	30/6/19	

"O" WING S.O.S. O.M.F.C. ON WITLEY
PROCEEDING TO CANADA

FOR LT. COL. I/C RECORDS, C.O.M.F.

D.O. PT. 2 No.

25.7.19

Wm Henderson Lieut.,
OFFICER I/C RECORDS,
"O" Wing C.C.C.

Sail #99 "Saturnia" Glasgow - Montreal
25/7/19 4/8/19

JUL 25 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D.O. 224

AUG 7 1919 S.O.S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D.O. 224

W. C. Roberts
Lieut.
For O. C. No. 2 District Depot.

"O" Wing. "I" Area.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3031157 Rank Pte. Surname Hamilton
(Given name in full) Hubert Weldon.

Unit or Corps 15th Inf. Battn. Birthplace Pembroke, Ont.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique Good Weight 185 est lbs. Height 5 ft. 9 est in. Colour of Eyes Blue

Nutrition Good

Pulse 74 Regular

Condition of arteries Normal

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Small scar outer side left patella since enlistment

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System Yes Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System Yes

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition Yes

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

States subject to bronchitis in civil life. None since enlistment. States had frontal neuralgia before enlistment not since Mar June 1919 V.D.G. Recovery 103 & M.H.S. not available

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 30-6-19 Signed H. B. Robinson Capt Camp M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature H. Hamilton H. W.

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Anita Daly 14-1-48
13-6-19

M.F.W. 129.

[OVER]

DVA CEF 3031157, WSR 5a/GG

DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

DEPARTMENT OF VETERANS AFFAIRS
FEB 24 1956
RECORDS
OTTAWA CANADA

THIS REPORT IS NOT VALID WITHOUT THE IMPRINT OF THE OFFICIAL STAMP OF THE DEPARTMENT

Service Rank and/or Number 3031157 Name Hubert Weldon HAMILTON

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE
2. Date and Place of Birth: 7th March, 1895. Pembroke, Ont.
3. Date and Place of Appointment, Enlistment or Enrolment: 17th November, 1917. Toronto, Ont.
4. Unit on Appointment, Enlistment, or Enrolment: 1st Depot Battalion, 1st Central Ontario Regt.
5. Theatres of Service: CANADA - ENGLAND - FRANCE
6. Date and Place of Retirement or Discharge: 7th August, 1919. Toronto, Ont.
7. Reason for Retirement or Discharge: "Demobilization"
8. Rank on Retirement or Discharge: Private
9. Medals and Decorations: BRITISH WAR & VICTORY MEDALS
10. Remarks: Nil

1538 Rue Portage Rd., Kenmore, Ont.

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Height: 5 Feet 8½ Inches.

Eyes: Blue Hair: Fair Complexion: Fair

Marks or Scars: Small scar outer side left patella.

Ottawa, Ont., Canada

February 24th, 1956.

for Director, War Service Records

DVA 812 (REV. 7-51)

CANADIAN EXPEDITIONARY FORCE

War Service Badge

DISCHARGE CERTIFICATE

389757

THIS IS TO CERTIFY that No. 3031157 (Rank) Pte.

Name (in full) Hamilton Hubert Weldon enlisted in

the Has 1st Depot Bn. 1st C. O. R.

CANADIAN EXPEDITIONARY FORCE at Toronto on the 17th

day of Nov. 1917

HE served in 15 Bn. in France.

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

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

Age 24

Height 5' 8½"

Complexion Fair

Eyes Blue

Hair Fair.

Marks or Scars

Small scar outer side

left Labelle

H W Hamilton

Signature of Soldier.

Date of Discharge

No. 2 DISTRICT DEPOT

AUG 7 1919

TORONTO.

Issuing Officer

[signature] Lt. C.E.

Rank

For

O.C. No. 2 District Depot.

Date AUG 7 1919 19

NB.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.

M.F.B. 39A.

Form R 122.
10287—65M—28-7-17.

G.H. Rank Name HAMILTON, Hubert Weldon. Reg'l No 3031157.

Unit If in perm. Corps, What Unit? Married or Single Single.

4th Dft 1st En 1st C.O.R.

Place and Date of Enlistment Toronto. Nov 17th 1917. Place of Birth Pembroke. Ont.

Name and Address, Next-of-Kin John Matthew Hamilton.

Copper Cliff. Ont. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 30973
File R.L.
Category CAN.OR

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.
C		Arrived in England 28-6-18 S/S PANNONIA			
6.7.18	12 Res	Taken on strength.	WITLY	28.6.18	P 159
10.10.18	12 Res	SOS to 15 Bn O/S	Pk —	9.10.18	P 241 (103. 18/10/18 15 Bn)
29.3.19	15 Bn	Trans to ~~England~~ C.R.L.	" Field	23.3.19	— 24 } C.R.L. W.O. 32 dy 5-4-19
12.6.	C.R.L.	Inv sick & posted 1st C.O.R.D.	Pte Havre	12.5.19	— 55
27-6-19	1 CORD	To S & att. to N Wing	" Witley	26-6-19	Pt 131
30-6-19	1 CORD	Ceases att'd to N Wing &	" "	28-6-19	Pt 133 (DO 67 "O" Wing dy 2-7-19)
1ST CEN. ONT. REGT.		SOS to O Wing Cal.			S.L. 99-I-37 25/7/19
25.7.19	O. Wing	S.O.S to Canada	✓ ✓	25.7.19	-86.

15

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.					

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. *
EFFECTIVE DATE:- 1/6/18		EFFECTIVE DATE:-
AMOUNT:- ~~$15.00~~		AMOUNT:-

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

N.R.

Mrs. J. M. Hamilton
138 ~~Clarendill~~ Road,
Copper Cliff, Ontario

Stopped 11/7/19

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIE BY INSERTION OF DATE CHARGED IN RE

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A R	UNIT PAID
~~4 2 x 51 days @ 60 ¢~~			~~20 60~~	~~Paid~~	~~Ord~~	~~11/7/19 HP~~
~~[illegible]~~		~~Ey~~	~~[illegible]~~			
16/6/19		"	~~[illegible]~~			
19/6/19 3 82		"	~~7 50~~			
~~29/6/19 10 29~~		"	~~9 73~~			~~2 12 C Balce~~

PARTICULARS OF RENDERING NON-EFFECTIVE: To Canada 7/7/19

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	P
May 31	Balance from Canada			
June July	Pay 61 days	67 10		Can ap
				AR 469.
		67 10		
Aug	"	34 10		Cap
				AR 1590
				" 1948
				" 2046
		34 10		
Sept	"	33 .		Cap.
				AR 2197.
				" 2365
		33 .		
Oct	"	34 10		
				2597 9/10
				Q400 5/162
				9-19
				Sask 2697
		34 10		
Nov	"	33 -		C.A.D.
Dec Jan		68 20		A.R. 1843
				" 3920
				" 193
				" 2H2
				" 2718
				CAD
		101 20		
				2103

SEPARATION ALLOWANCE. ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

NAME:- HAMILTON, Hubert Welden

NUMBER:- 3031157

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
LPC from Can	1/6/18	Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 4th Draft. 1st Depot Bn 1st COR

DATE ACCOUNT FIRST OPENED:- 1/6/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			12th Res

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
868	Rend 11/7 HS "V"		88 80

DAILY RATES OF PAY AND ALLOWANCES

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

LPC Balce G #48 39 [illegible]

To Canada 1/7/19 Witte, 20 Witte, TIR 4 11 83 29/6/19 MD 2

CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
							10 75		
67 10		Can A.P. June & July				30			
		AR 469. 5/7. Transhaw	4 87				42 98		
67 10			4 87			30			
34 10		CAP				15	62 08		
		AR 1590 2.8.18 12 Res	26 77						
		" 1748 14/8 "	9 73						
		" 2046 28/8 "	9 73				15 85		
34 10			46 23			15			
33		CAP.				15	33 85		
		AR 2197. 12.9. "	7 30						
		" 2365 20 9. "	9 73				16 82		
33			17 03			15			
34 10						15			
		2597 9/10 12th Res	9 73						
		Q400 5 (1629) 5/10 "	1 89						
		949 24/10 15th Res	3 73						
		Dnak 2697 18/10 CCHQ	3 73				16 84		
34 10			19 08			15			
33 -		C.A.P.				15			
68 20		A.R. 1843 6.11.18 1W CCR	3 73						
		" 3920 7.11.18 H.Q. Det.	3 73						
		" 1933 20/11/18 1st W C Det	13 06						
		" 2425 7.12.18 "	3 73						
		" 2718 21.12.18 "	3 73						
		CAP	27 98			30	45 06		
101 20			27 98			45 -			
		2103 5/1 3 Bdg 2	3 77						

NUMBER 3031157 RANK Pte. NAME HAMILTON, O

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR.
		— —		Brot Forward	3 77	
				2291 19/1 3 Bdg 2	3 73	
Feb & Mar		64 90		2553 29/1 ✓	9 33	
				2639 1/2	3 73	
				2928 15/2 ✓	3 73	
				AR 3208 5/3 ✓	3 73	
				Cap Form		
				AR 4036 18/3 15 Bn	3 73	
		64 90			31 75	
Apl	P.P. Apl & May	67 10		C.A.P.		
				4437 15/5 M&H Eng	2 43	
		67 10			2 43	
June	P. Pay	33 1		C.A.P.		
				3188 19/6 Epsom	7 30	
				2899 16/6 ✓	2 43	
				Hosp S "V" 13/5 - 18/6 37 Days		
				DO 133 30/6/19 C 60 1 Cak Dent		22
				H.S "V" 23/3 - 12/5 51 Days		
				DO 55 12/6.19 6 Kee List		30
				10189 29/6 O Wing	9 73	
		33 1			19 46	52
				AR 10710 4/7/19 O Wing End	48 67	
				✓ 11986 17/7 ✓ End	9 73	
		—			58 40	

Sailing List 99. Md
SOS to Canada

HAMILTON, H.W.

PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Forward	3 77				45 06		
19/1 3 Bdg 2	3 73						
29/1 ✓	9 33						
1/2	3 73						
15/2 ✓	3 73						
5/3 ✓	3 73						
at Fr M			m ~~30~~	30			
18/3 15 Bn	3 73				48 21 ~~19~~ ~~44~~		
	31 75		m ~~30~~	30			
P				30			
15/5 M & H Ens	2 43				82 88		
	2 43			30			
e. o. P.				15			
19/6 Epsom	7 30						
16/6	2 43						
13/5 - 18/6 37 Days							
30/6/19 @ 60c 1 Cak Dent		22 20					
3/3 - 12/5 51 Days							
6.19 6 Kee List		30 60					
29/6 O Wing	9 73				28 62		
	19 46	52 80		15			
4/7/19 O Wing End	48 67						
17/7 ✓ Ends	9 73				29 78 Dr		
	58 40	—					

LRC Compd.
J. M. Lurine.

g List 99. Md 2
to Canada 25. 7. 19

SHORT FORM.

War Service Badge Class "A" No. 38975

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Dispersal Area "I" Occupati... Group 12

1. No. 3031157
2. Rank. Pte.
3. Name. Hamilton Hubert Weldon.
4. Unit. 15 Bn.
5. Date of Discharge | AUG 7 1919 | Place TORONTO, ONT.
6. Reason for Discharge DEMOBILIZATION
7. Authority. T.O.S. No.2 District Depot, Part II, D.O. No. 224.
8. Proposed Residence after Discharge 138 Clarabelle Rd. Cliffcliffe P.O. Ont.

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.?

H. W. Hamilton
Signature of Soldier.

Released 7.6.59

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

No. 2 DISTRICT DEPOT
AUG 7 1919
TORONTO.

Signature For O.C. No. 2 District Depot.
(O. C. Discharging Unit.)

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

1. Triplicate Attestation Paper (Militia W. 23), or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment } Statement O.M.G. Form (D.O.S. 2),
    and Clothing }
12. Last Pay Certificate (P. 651). 1 Dup
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

B

Group.....

Checked by No. 24

C A M

Date 22.7.19

"SATURNIA" 4-6-19

DISPERSAL "I"

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 3031157 | RANK Pte. | NAME (IN FULL) HAMILTON, H.W. (BLOCK LETTERS SURNAME FIRST) 2/6021

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 1st C.O.R.R. | IF IN P.F. WHAT UNIT? Bank of Toronto, Copper Cliff Ont

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION Nov. 19, 17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 31/8/19 Closed by Ottawa

PAYABLE TO Mrs J.M. Hamilton | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 138 Clarke Rd. Copper Cliff Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 7-8-19 | REASON Demob | AUTHORITY DO 224 | IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	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																																		T.O.S 25.7.19 D.O. 224 SUGS ..... M.O. ..... D.O. .....
20/6/19					35	00		48	39	10710		1986				48	67	19	73													48	39	
9/8/19	40	1.10	44	00	70	00		114	00					D 18659		48	67	15	00	11	12	15	00							197	39			
								197	39																					197	39			
																												70	00					
																												2	20					
		W.S.G																						W.S.G				15	00			AMOUNT DUE SOLDIER DEPENDENT		
122 days		28 0						28	0																					84	20	192	80	
											7.8.19																							
										OR 134	Sep 10	1354	1449			52	80													140		140		
										RR 151	" 30	1391	1482			70														210		70		
																22	20													732	20	47	80	
										" 24	Jan 26	1721	1755			47	80													280				
		280						280								192	80											87	20		280				

Paid as above

Paid over Ch. 2 days.

Aug 31 Last pr Pabrai

1917 W.S.G. Paid by #2 D.D.O.

Hdm.

Hdm

Hdq V. 13/5 to 19/6/19. DO 133 30/6/19

Hdqrs 75.25 H 84 12 " 20.

File Hdq 80524

100M-1-19.—L. L. 53962—M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

H.Q. 701358

Date of Assignment Feby 1st/18

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

11-12-26-5

Feby

PARTICULARS OF SEPARATION ALLOWANCE

No. 3031157

Rank Pte Promoted Reverted Discharge

Soldier's Name H. W. Hamilton

Battalion 1st Depot Battn. 1st C.O.Reg. O/S Draft 4

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs J. M. Hamilton (Mother

Address 138 Clarbell Road Copperclift Ont

Change of Address

1 MRS.J.M.HAMILTON,
138 CLARBELL ROAD,
COPPERCLIFF,ONT. 15 15.00
% 3031157 PTE H.W.HAMILTON
FIFTEEN DOLLARS

2

3

4

Date		Cheque No.	Amount S/A	Amount A/P	Total	
Feb	E	68696		15	15	Bo
March	H	96860		15	15	A
April	H	160 50		15	15	A
May	B	11254		15	15	A
June	A	141 41		15	15	A
July	M	29059		15	15	A
Aug	D	28620		15	15	A
Sept	C	36011		15	15	A
Oct	E	42874		15	15	
Nov	6	50963		15	15	A
Dec	E	63113		15	15	A
Jan	6	70474		15	15	A
Feb	B	77490		15	15	7
Mar	E	83211		15	15	2
Apr	D	861		15	15	2
May	P	9741		15	15	2
June	O	11122		15	15	2
JULY	O	12142		15	15	
Aug	J	13554		15	15	
				285	285	

REMARKS 7825-H-84

A/c Closed 31/8/19
Ret'd per. Saturnia
Date 7/8/19 M.F.W.187 14/8/19
Closed C. S. Johnstone

M.D#2

M.R.O. 108472

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

AUDITED.

M. F. W. 128
400m.—6-17—1772-39-141
L. L. 22320—M. & D. 1933.

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. 7933.

Da 2 Red Camp. Steam Eng

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

39 Gen Hospital. 87. H. Ward.

Age	Service	Religion	Disease
23	1y 1m	Pres	

Regiment	Coy.	Reg. No.	Rank	Name
157 Can Inf.	2 R. Camp	3031157	Pte	Hamilton H.

Date of Admission	Disposal	Date of Discharge
23-3-19		

SUMMARY 287-

This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, ~~2nd, 3rd~~ attack ~~or relapse~~ 1st Att

Dates and Places of Three last Exposures: Liege 21-1-19

Main points in history

Condition on admission: Period ? 22-3-19

1 Slight dis.

2 Scalding.

2 Frequency.

W210—P1 17 H W (P360) Forms W. 3497/3

Date	Treatment		Progress	Complic... and their T...
		General		
24-3-19	1/4000		Pus +	
25 —				Smear +
27 —	Protargol		Pus	
29 —		Plumbi et Opio Fomts.		Epididymitis
30 —	Plumbi et Opio		Vaccine. Full Course	
12-4-19	1/6000		Pus	Ichthyol Oint:
14 —				Urine. Shreds & clear
17 —		~~Ol Tonic~~		
19 —		Ol Santal	Bead.	
23 —	$AgNO_3$			
25 —	— " "			
29 —	— " "			
2.5.19	" " "			Smear. not seen
5.5.19	" " "			
7.5.19	No. V. (2 days)			
9.5.19	1.6000.			

33

225 200,000 5/18 HWV(P1147)

Army [illegible] 7A.
Continuation Card to [illegible] W. 3497.

[illegible]157 Name Pte Hamilton H.W. Regt. 50 Btn Disease VDG.

Date	Treatment: Local	Treatment: General	Progress	Complications and their Treatment
19.5.19	P.M. + Smear.			
21/5/19	Irrigation / 1/4000		Pros normal	
24/5/19	white dis in a.m. Smear		many P.C. few E.C. no G.C.	
	Urine 1st glass clear little mucous; 2nd " clear		deep aq.	
28/5/19	slight discharge on stripping urine clear shreds acc. deep aq			
31/5/19	Irrigate h/4	———	sl discharge in a.m.	
4/5/19	———	———	M.D. dry.	
7/6/19	Sounds	15/18	dry (M.D)	urine 1 clear 2 clear
11/6/19	Irrig h/4		dry 5 days	1 clear shreds ++
14/6/19	Irrigate h/4		dry 8 days	2 clear

W1809 [illegible] 000 5/18 HWV(P1147)

Army Form W[illegible]
Continuation Card to [illegible]7.

No. _____ Name _____ Regt _____ Disease _____

Date	Treatment		Progress	Complications and their Treatment
	Local	General		

W1809—P1225 200,000 5/18 ...my Form W. 8497A.
...ion Card to A.F.W. 3497.

No._____ Name _____ Regt._____ ...se_____

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
18/6/19	—		dry 12 days	urine 1 clear 2. clear
			7 for Discharge	
			E McPherson Capt-	

W1809—P1225 200,000 [illegible] WV(P1147)

Army Form W. 3497A.
[illegible]tinuation Card to A.F.W. 3497.

No._____ Name_____ Regt._____ Disease_____

Date	Treatment		Progress	Complications and their Treatment
	Local	General		