Original

41 M. D. 1st DEFAULTER. Depot Battalion WO Regiment

Regtl. No. 4005149

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

W.E.N. (Class ONE)

1. Surname HANDSOR,
2. Christian name James.
3. Present address ~~Elxiet Elitxic~~ Electric, Ont.
4. Military Service Act letter and number Defaulter Under M.S.A.
5. Date of birth December 24th. 1890.
6. Place of birth (town, township or county and country) Wallaceburg, Kent Co., Ont.
7. Married, widower or single Single.
8. Religion Baptist.
9. Trade or calling Farmer.
10. Name of next-of-kin Mr. James Handsor.
11. Relationship of next-of-kin Father.
12. Address of next-of-kin Electric, Ont. JLy
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 London, Ont. (b) Date May 21st. 1918. (c) Category A.2.

DECLARATION OF RECRUIT

I, James Handsor, do solemnly declare that the above particulars refer to me, and are true.

May 21st. 1918. James Handsor (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	27 yrs.	5 mths.	Distinctive marks, and marks indicating congential peculiarities or previous disease.
Height	5 ft.	3 3./4. ins.	
Chest measurement	fully expanded	36 ins.	
	range of expansion	33½ ins.	
Complexion	Medium.		
Eyes	Blue.		
Hair	Brown.		

RIGHT EYE D 30/20 LEFT EYE D 30/20

HEARING R Normal. L.Normal.

John L Young Ltcol

O. C. 1st Depot Btln.

WO Regt.

Place London, Ont. Date 20-5-18

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

M. D. ( ) Depot Battalion Regiment

Regtl. No.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname
2. Christian name
3. Present address
4. Military Service Act letter and number
5. Date of birth
6. Place of birth (town, township or county and country)
7. Married, widower or single
8. Religion
9. Trade or calling
10. Name of next-of-kin
11. Relationship of next-of-kin
12. Address of next-of-kin
13. Whether at present a member of the Active Militia
14. Particulars of previous military or naval service, if any
15. Medical Examination under Military Service Act—

(a) Place (b) Date (c) Category

DECLARATION OF RECRUIT

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

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	yrs	ft.	ins.
Height			ins.
Chest measurement	fully expanded		ins.
	range of expansion		ins.
Complexion			
Eyes			
Hair			

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

Depot Batn.

Regt.

Place

Date

REGIMENTAL DOCUMENTS

NAME HANDSOR. JAMES. PTE. REGT. NO 4005149 UNIT 1st D.B.W.O.R. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	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)				06102	
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3 2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)		No Will			Demob.
	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	Y.C.W.3					
8	Misc.					
2	Cap Card					
1	UFI 12-37					

AO-157-4009

16-26
23-26
30 27
3

W 2589
100M-11-18

Form R. 149.

James.

Name HANDSOR Rank Pte. Reg. No. 4005149.

Unit C.F.C. ~~B.A.~~ Sloy. B.D.

Next of Kin Canada

Date 1918.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-8	Mil Isol Hsp Ashot		Mumps	C 291		24075
5 9	Discharged		do	C 308		7815
1.2.19	2 Aust. G.H. Cologne		Tonsillitis	A 438		7169.2
10.2.19	16 Can Gen Hsp Crp'ton		Do	B 425		6739
18-3-19	Discharged		Do	B 455		2612
31-3-19	Reps To C.F.C. Sunningdale		Orp. H. 572		18-3-19	
4-5-19	Can Hsp. Etchinghill		20	C 510		10393
6.6.19	Can Sp. Hosp Witley		Do & 42	C 539		11455
7.7	Discharged		Do	C 5/67		4610

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

REGT'L. No. 4005149

H. Q. FILE No 649

NAME Handson. J.

RANK AND CORPS Pte Depot. Can For Corps.

CABLE

NO.	DATE	NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

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

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

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
C.291.	Mil. Iso. Aldershot	15-8-18	Mumps
C 308	" " " "	5-9-18	" " (Discharged)

NAME Handsor, J. REGT. No. 4005149.

RANK AND UNIT Pte. (8) Can. For. Corps.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A438 (11)	No. 2. Aust. Gen. Boulogne	1-2-19.	Tonsillectis.
B425 (11)	16 Can. Gen. Orpington	10-2-19.	"
B455 (11)	Lüsieh.	18-3-19.	"
C510. (11)	Can. Etchinghill	4-5-19.	20.
C539. (11)	2nd Can. Spec. Witley	6-6-19.	20 & 42.
C561 (1)	Discharged	7-7-19	20 & 42.

A.D.
R.D.

Number 4005149 Rank Pte-

Surname HANDSOR

Christian Name James

Units C.F.C. Theatre of War France

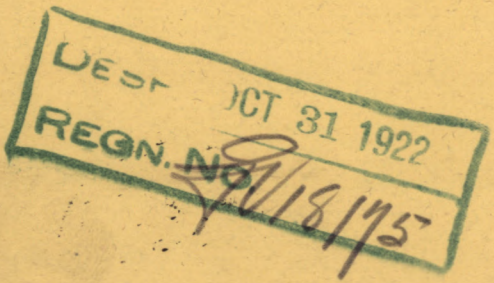
Date of Service 11-10-18

Remarks

Latest Address Electric, Ont-

Roll No.

200m.-2-21.M. B. Page 17317.



DESP OCT 31 1922
REGN. NO 9/18/75

H. Q. IX

M. D. No. 1. K

Surname Handsor

T. O. S. Nov. 11 1917

Christian names James

D. O. Pt. II 142 of 22/5/18

Regtl. No. 4005149 Rank Pte.

S. O. S. Dis 8-8 1919

Unit West. Ont. Regt. 1st Dpo. Bn.

Reason Demob.

Auth. Do. 221 of 9-8-19 #1.00

Next of kin Handsor. James.

Relationship Father

Address Electric Ont.

Also notify:

BORN—Place Canada. Wallaceburg Ont. Date Dec 24th 1890

ATTESTED—Place London Ont. Date May 20th 1918.

O/S 11-7-18, 13 10/2.

R/C 6-8-19 381/56 Pte.

W. 22—75M-5-18. 1772-39 839.

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

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
HANDSOR	J.	4005149.

RANK	UNIT	CO.	TROOP	BATTY
Pte.	Forr. Depot. 8.			

HOSPITAL	DATE OF ADMISSION
Isol. Mil. Aldershot.	15-8-18.
1. 2 Aus: Gen: Boulogne	Hos. 1. 2. 19.
2. 16 G&H Orpington	Hosp. 10. 2. 19
3. Can Host: Etchinghill	Hosp. 4. 5. 19.
4. E. S. Witley.	Hosp. 6. 6. 19

DIAGNOSIS Mumps.

1.

2. Tonsillitis & V. D. G. & V. D. S.

3.

DISPOSITION	DATE
CL. 17-8-18. C291-2.	REMARKS Dis. 5. 9. 18
6. 9. 18 C 308-2	Discharged 18. 3. 19.
12. 2. 19 H 438-1	7. 4. 19
13. 3. 19 B 425	
20. 3. 19. C 452.	
7. 5. 19 C 510.	
13. 6. 19 C 539	
11. 7. 19 C 561	

A.M.D. 2 DEPT.

Rehabilitation O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

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

Owing Karea

CANADIAN GENERAL LABORATORY.

. . . . . .

WASSERMAN REPORT FOR MEDICAL BOARDS.

NAME. Hardsor J. ..... REGT'L. NO. 4005149

RANK. Pte ..... UNIT. .....

Previous Wasserman Tests. June 30th 1919 .....

Result. Neg .....

STATION & DATE. CSWW ...L. .....

-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-

Result of Wasserman (Original) Quarter System.

DATE. 30 6 19 ... SERIAL NUMBER. ——— ..... RESULT. WASSERMAN NEG. ...L.....

Copy

J Rackerson

~~Major.~~

Officer Commanding.
~~Canadian General Laboratory.~~
V.D.S. Clinic
CAN. SPO. HOSP.
WITLEY.

Witley Camp.

July 14th .....1919.

M.S.A. 15.

DEFAULTER. To AAWAA

19 OCT 1918

MILITARY SERVICE ACT 1917

MEDICAL HISTORY SHEET.

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 HANDSOR. Christian name James.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) Electric, Kent Co., Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 21st. day of May 1918. ~~1917~~, by the undersigned medical board sitting at London, Ont.

5. Age as stated 27 Years 5 Months. 6. Apparent age 27 Years 5 Months

7. Height 5 Feet 3 3/4 Inches. 8. Weight 134 Pounds.

9. Chest measurement { Minimum 33 1/2 Ins. Maximum 36 Ins. 10. Complexion Medium { Eyes Blue yes Hair Brown yes

11. Physical development. Good { Good Fair Poor 12. Smallpox marks Nil.

13. Number of vaccination marks { Right arm 0 Left arm 1 14. When vaccinated last 1917.

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

16. Slight defects but not sufficient to cause rejection

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 AII

RIGHT EYE D 30/20 LEFT EYE D 30/20

HEARING R 21+ L 5'

H E Atwell Capt AMC President.

F. L. Bryans Capt AMC Member. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
25/5/18		J Moore M.O.	24/5/18		J Moore M.O.
		M.O.	31/5/18		M.O.
		M.O.	5/6/18		M.O.

Joined 20th day of May 1918 at London Ont

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	~~1st Depot Bn WOR~~ #2 Construction	4005149		20=5=18
Transferred to	8766 O/S			

Transferred O/S from 1st Depot Bn., W. O. R., London, Ont. JUN 27 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Sunningdale	29/7/18	—	A. J. Dhawson Capt AMC
Sunningdale	19/9/18	Cat. A J. H. Sutherland Capt AMC	
WITLEY CAMP, SURREY.		V D S.	A. Sutherland Capt

15/7 1919

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.

Signature of Man

Surname Handsor Christian Name James

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital Day	Month	Year	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.
MILITARY ISOLATION HOSPITAL, ALDERSHOT.		14	8	18	5	9	18	Mumps	23	Double parotitis & both submaxillary glands affected. No complications.	[illegible] Capt: R.A.M.C.

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—I.
Part I.

(1) *Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.)	(2) Regiment or Corps	(3) Regtl. No.
HANDSOR. JAMES	4005149	

(4) Surname

(5) Christian Names

(6) Army Form, number of, Attestation Form or Record of Service paper

(7) Whether of British or of Alien origin (*vide* A.C.I. 578 of 1918)

(8) Date of birth as stated on enlistment

(9) (*a*)

(10) Enlistment (*b*) 20/May 1918

(11) Engagement (*c*)

(12) Service reckons from (*date*)

(13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married ~~or Single~~

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place)

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/8 HWV(R1460) 3/19 100,000 P2151 W10416—(6 28 19)

(A) Report: Date	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
		Arrived in England 22/7/18 Saturnia				
24/7/18	BDCFC	TOS, from Canada		pt Sdau	22/7/18	— 175
10/10/18	"	SOS to 8 Airedrome Const Coy		"	10/10/18	— 242
4/11/18	8 Coy CFC	TOS from BDCFC		" Field	12/10/18	— 1
18/2/19	BDCFC	TOS " 8 Coy		" Sdau	10/2/19	— 49
9.3 19	8 Coy	SOC to BDCFC		" Field	12/2/19	— 6

Certified true copy.

[signature]

for LT. COL. i/c Records, C.E.F.

Nothing to be written in this margin.

Copy

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—I.
Part I.

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.)	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname Handsor		4005149
(5) Christian Names James		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin (*vide* A.C.I. 578 of 1918)		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Date of Enlistment (*b*) London 20th May 18 (11) Engagement (*c*) Dofillar
(Insert date of being called up for service in the case of Recruits under the Derby Scheme or Military Service Act.)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(14A) Religion (Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life (*vide* Army Order 93 of 1917)
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (*date*)
				Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place)

(19) Pivotal-man (*f*) (Date)

Signature of O.C. Unit to which the man is first posted.

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended (23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.

N.B.—(1) Note (*e*) above refers to heading No. 14.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

(8 28 19) W1071—P2364 250,000 5/19 HWV(R877) Forms/B. 103/8

(A) Report: Date	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1137 of 1918. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
			Arrived in England		22-7-18	S/S Saturnia
24-7-18	B.D.C.F.C.	Do 175	TOS from Canada	[illegible]	22-7-18	
10-10-18	—	— 242	SOS to 8 Avdonne Const Coy	" —	10-10-18	+ 8 Coy TOS 1 & 4-11-18
18-2-19	—	— 49	TOS from 8 Coy	" —	10-2-19	+ 8 Coy SOS 6 & 9-3-19
30-6-19	Owing	Do 65	TOS.	witley	30-6-19	
25-7-19	"O" WING	S.O.S., O.M.F.C. ON PROCEEDING TO CANADA.	WITLEY		D.O. PT. 2 No.	

Certified true copy.
S. Owen Capt
for LT. COL. i/c Records, C.E.F.

J. H. Pearse Lieut.,
OFFICER i/c RECORDS,
"O" Wing C.C.C.

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

TOS No 1 Dist. Depot
25.7-19
SOS Dispersed
8.8.9 D.O. No. 221

J. B. Farrell Lt.
For O. C. Dispersal Area Sta. K.

Nothing to be written in this margin.

EYE EAR NOSE AND THROAT CLINIC.

Witley....July 15th.....1919.

Reg.No. 4005149 ...Rank. P.T.E. ... Name. HANDSOR. J.A.S.

Unit. ..... O'wing .....

Original Disease or Injury Deafness bt ear

Date of Origin 5 years ago

Place of Origin Canada

Cause ?-

Present Disability Slight retraction bt M.T.

Eight	Hearing	Left
22 Ft	Voice	24 Ft
	Weber	
	Rinne	
	Schwabach	
	Upper Lt	
	Lower Lt	

Category

Remarks. Had treatment for condition Orpington March in 1918 hearing now improved

CONDITION WAS ..... PRESENT PREVIOUS TO ENLISTMENT AND HAS not

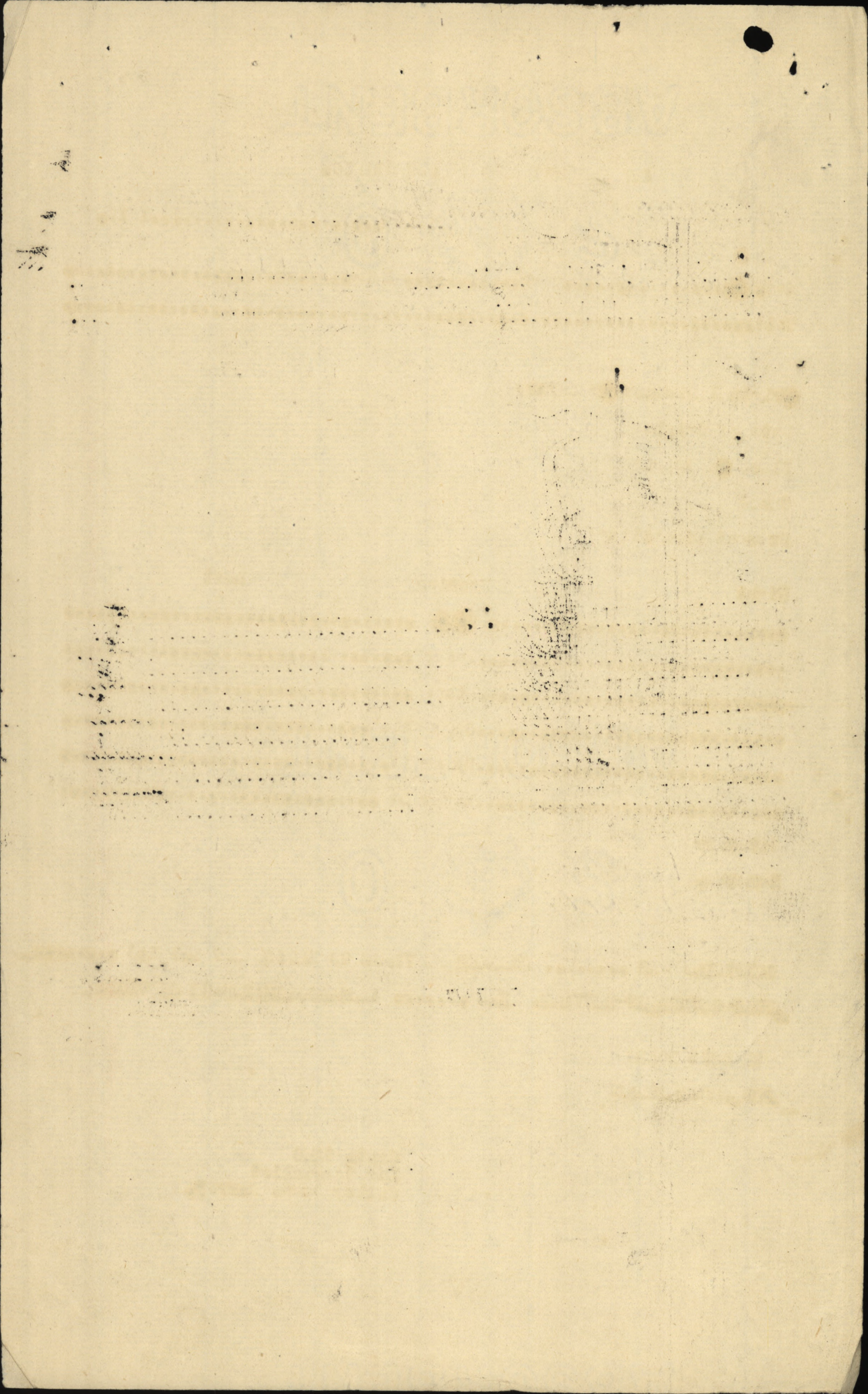
~~BEEN CAUSED BY SERVICE.~~ HAS ..... ~~BEEN AGGRAVATED BY SERVICE.~~

~~FOR LONG BOARD~~

FOR SHORT BOARD

W. V. Hunter

Capt. CAMC
Ear Specialist
Witley Camp. Surrey.



EYE EAR NOSE AND THROAT CLINIC

Witley. 15-7 1919.

Reg. No. 400.5149 Rank. Pte Name. Handsor

Unit. O Wing

WITHOUT GLASSES

WITH GLASSES (as per prescription below)

	SPH	CYL	AXIS
Visual Acuity Rt 6/6 with			
Visual Acuity Lt 6/6 with			
Category Recommended is;- A			
Glasses not ordered			
Original Disease or Injury			
Date of Origin			
Place of Origin			
Cause			
Present Disability			
Remarks.			

Vision Normal

CONDITION HAS ..... ~~PRESENT PREVIOUS TO ENLISTMENT AND HAS~~ .....

~~BEEN CAUSED BY SERVICE. HAS ..... BEEN AGGRAVATED BY SERVICE.~~

~~FOR LONG BOARD~~

~~FOR SHORT BOARD~~

J. P. Macneil

Capt. CAMC
Eye and Ear Specialist
Witley Camp. Surrey.

during Korea

CANADIAN GENERAL LABORATORY.

. . . . . .

WASSERMAN REPORT FOR MEDICAL BOARDS.

NAME. Mandsor J. REGT'L NO. 400 5149

RANK. Pte UNIT.

Previous Wasserman Tests. June 30th 1919

Result. Neg

STATION & DATE. C.S.H.W.

-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-

Result of Wasserman (Original) Quarter System.

DATE. 30 6 19. SERIAL NUMBER. RESULT. WASSERMAN NEG. L.

Copy

Major.

Officer Commanding.
~~Canadian General Laboratory.~~

C.D.S. Clinic
CAN. SPC. HOSP.
WITLEY

Witley Camp.

July 14 Th 1919.

War Service Badge
Class "A" No.....

"K" D.A. "O" WING.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 4005149 (Rank) Pte

Name (in full) Handsor, James enlisted in

the ~~C. F. Corps~~ 1 D B W O R

CANADIAN EXPEDITIONARY FORCE at Landowart on the 20

day of May 1918

HE served in C. F. C. (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 27

Height 5" 5"

Complexion Dark.

Eyes Blue

Hair Brown.

Marks or Scars

James Handsor
Signature of Soldier.

J. B. Farrell
Issuing Officer.

Date of Discharge

DISCHARGE SECTION
AUG 8 1919
No. 1 District Depot

Lieut
For O. C. Dispersal Area Sta. K.
Rank

Date AUG 8 1919 19

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.B. 39A.

Form R 122.
10287—65M—28-7-17.

BT. Rank Name HANDSOR James. Reg'l No. 4005149

No. 2 Cont. Bn C F C B D Unit If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment London, 20th May, 1918 Place of Birth Wallaceburg, Ont.

Name and Address, Next-of-Kin Mr. James Handsor.

Electric Ontario. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Report. Date.	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
CFC		Arrived in England	22-7-18 S/S SATURNIA		
24-7-18	BDCFC	TOS FROM CANADA	PTE S'DALE	22-7-18	PT II Q 175.
10-10-18	" "	SOS to 8 Airdrome Cand Coy Ck	" "	10.10.18	242 TOS 8 Coy pte pII 6.1. 4/11/18
18-2-19	" "	TOS from 8 Coy.	" "	10-2-19	- 49 (SOS 8 Coy Ark RV 6 2/9 3/19
10.7.19	O. Wing	(S.O.S. CFCBD) + T.O.S. pen. R.T.C. + pushed to "K" Gp.	" Wikey	10.7.19	" 74.
			99. K.	25.7.19	
25.7.19	O Wing	S.O.S to Canada	" "	26.7.19	-86.

A.F.B. 103 CHECKED 18 OCT 1918

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.					

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE .....8..2..1972.....

NAME
NOM ...HANDSOR JAMES.....

Service No.
Matricule Nº ..400549.....

CPC No.
CCP Nº ..158256.....

WVA No.
AAC Nº ..55271.....

Information Received from:
Information reçue de: .....STMO,LONDON..DIST.....

Date of Death
Date du Décès ...FEB..1..1972...

Place
Endroit .WESTMINSTER HOSPITAL.

Distribution: WSR-DASG
VI - ASS
DO ~~XXXXXX~~
HO - BC

Pour le chef,

for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) BIL.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.	NAME:- HAND
EFFECTIVE DATE:- 1:7:18.		EFFECTIVE DATE:-		NUMBER:- 400
AMOUNT:- $15.		AMOUNT:-		PARTICULARS

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.	AUTHORITY
Mrs Elesia Handsor. (mother)		
Electric P. O.		
Ontario.		
~~Stopped 1/5/19~~		ORIGINAL UNIT:- 4
~~Restored 1/7/19~~		DATE ACCOUNT FIR
Stopped 1/8/19.		AUTHORITY
		Do. 1/5 B.D. 6.1.6.

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
26/4	1736	~~6. H. 6/19 L 101~~	~~8 67~~	~~6/4~~		~~S. Turks. 18-3-19 3 Hagg 1/3/19~~	~~9 19~~
~~2-7-19~~			~~20~~				
9-7-19	Q 4005	Willey	9 73			R/L Corp. 4.572.	
	11211		~~9 93~~				
						Disch Can 31/7/19 MA H 11/6 15. 9/7/19 Willey £ 7	
31/7/19 L RL Cr Bal #47 93/100							
Hedges Cr Bal #7 85/100						Issues to Can 30/6/19 R Ryan Dale 30/6/19	
						Ledger Bal 97.84 L RL Cr Bal 19.11	

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2.
30/6/18.	BALANCE FROM CANADA			Canada		
July	P P	3H 10		to A.P		
		3H 10				
Aug	P.P.	3H 10		A.R. B 2001 B.D. 1-8-18	24 33	
				C.A.P.		
				A.R. B. 2226 B.D. 14-8-18	9 73	
Sept.	P P	3H 10			3H 06	
		33 -		Can.	34 06	
				AR B2983 12-9-18 BD.	9 73	
				" B3182 25-9-18 —"—	H 87	
		33 -			1H 60	
Oct.	Ptes. Pay	3H 10		Can.		
				AR 11 1-11-18 Hosp.	3 73	
		3H 10			3 73	
Nov.	✓	33 -		Can.		
				AR HH 16-11-18 —"—	3 73	
				" 76 27-11-18 —"—	3 73	
Dec 1919	✓	3H 10		Can.		
Jany	✓	3H 10		Can.		
		101 20			7H6	
Feby	✓	30 80		AR 126 18-12-18 —"—	9 08	
				" 158 31-12-18 —"—	2 60	
				" 192 14-1-19 —"—	5 03	
				" 3000 12-2-19 Orpington	H 87	
				Can.		
Mch	✓	3H 10		Can		
	S.T. 18/3/19 to 31/3/19 13 days D.081 23/3/19 CFC BD.	9 49		AR 1507 H 12-3-19 —"—	H 87	
				" 15451 18-3-19 —"—	48 67	
		7H 39			75 12	

COMPILED BY [signature]
CHECKED BY

~~ENGLAND OR~~ CANADA.

SEPARATION ALLOWANCE.

ENGLAND OR CANADA.

NAME:- HANDSOR. James. 11 A

NUMBER:- 4005149.

EFFECTIVE DATE:-

: 7:18.

AMOUNT:-

15.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private.

ESS, 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.

ia Handsor. (mother)
ectric P.O.
Ontario.

~~Exported 11/5/19~~
~~Returned 11/5/19~~
W. 1/8/19.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 43 Offk. 1st Depot Bath W.O.R.

DATE ACCOUNT FIRST OPENED:- 1:7:18.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET TSP'D	UNIT TRANSFERRED TO
Do. 1/5 B.D. 6.7.6.	22:7:18		Bde 6.7.6.

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
~~6.7.6. 1919 Lot~~	~~4 8 6~~	~~6th~~ S. Turlo.	18-3-19	~~Treasury 1919~~	~~9 19~~
4005 Willey	~~20~~ 9 22 9 93	R.A. Disp.	4.572.		
	~~Disd~~	Can	31/7/19	M.A.H. 11/7/19.	9/7/19 Wills & Willey M.D. 1.
Bal #47 92/100 #5 85/100		Trans to Cap to 6th/19 Rdy Wdsee D.H. Hospg			

Ledger Bal 97.89 L.R.C. Cr Bal 19/7/21. 26/4/21 Stale 601

RS OF RENDERING NON-EFFECTIVE:

PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
BALANCE FROM CANADA			Canada					38 97		
P	34 10		C.A.P.				15	58 07		Nil.
	34 10						15			
.V.	34 10		a.R. B 2001 B.D. 1-8-18	24 33						
			C.A.V.				15			
			a.R. B. 2226 B.D. 14-8-18	9 73				43 14	—	
P.P	34 10 / 33 -		Can.	34 06			15 / 15			
			AR B2983 12-9-18 B.D.	9 73						
			" B3182 25-9-18 —"—	14 87				46 51		
	33 -			14 60			15			
Ptes. Pay	34 10		Can.				15			
			AR11 1-11-18 8 Coy.	3 73				61 88		
	34 10			3 73			15			
✓	33 -		Can.				15 -			
			AR HH 16-11-18 —"—	3 73						
			" 76 27-11-18 —"—	3 73						
✓	34 10		Can.				15 -			
✓	34 10		Can.				15	110 62		
	101 20			7 46			45			
✓	30 80		AR 126 18-12-18 —"—	9 08						
			" 158 31-12-18 —"—	2 60						
			" 192 14-1-19 —"—	5 03						
			" 3000 12-2-19 Orpington	14 87						
			Can.				15			
✓	34 10		Can.				15			
18/3/19 to 31/3/19 13 days D.081	9 49		AR 1507 H 12-3-19 —"—	14 87						
			" 15451 18-3-19 —"—	48 67				79 89		
	74 39			75 12			30			

1919 NUMBER H005149 RANK Pte NAME HANDSOR J

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE
				Bal. B. Fort.					79 89
Apr	P.P	33 -		Cap.				15	77 89
				Q4005-266 8-10-18 C.F.C	1 30				
				AR 1736 26-4-19 Bal	48 67				47 92
		33			49 97			15	101 20
June	May & June Pay	67 10		Cap. May & June				30	149 12
July		34 10		AR 2666 19.6. Witley	4 87				57 17
				Cap. July				15	
				AR 3144 25/6. Witley	7 30				91 95
		101 20			12 17			45	
				AR 11211 9/7/19 O Wing	9 73				
				✓ 12359 23/7 ✓ Ent	9 73				
				Q4005 #67 7/7/19 CSH Witley	20				72 29
					19 66				

SoS Canada MD1
List 99

A.S.M. FORM REN'S
DISCHARGES TO
PAY BOOK VERIFIED
BAL L.P.C. REN'S
AUTHY.

COMPILED BY
CHECKED BY

P 868 Issued 7/3/19 Cr Bal 47.92

Cancelled

NK Pte NAME HANDSOR

Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation
		Bal. B. Fort.					79 89		
33 -		Cap.				15	97 89		
		G4005-266 8-10-18 C.F.C	1 30						
		AR 1736 26-4-19 Bd	48 67				47 92		
33			49 97			15	101 20		
67 10		Cap. May 1 June				30	149 12		
34 10		AM 2666 19.6. Witley	4 87				57 17		
		Cap. July				15			
		AM 3144 25/6. Witley	7 30				91 95		
101 20			12 17			45			
		AR 11211 9/7/19 O Wing	9 73						
		✓ 12359 23/7 ✓ Ent	9 73						
		Q4005 #67 7/7/19 CSH Witley	20				72 29		
			19 66						

9789
4867
49.22

47.92

War Service Badge
Class A No. 196276 Issued

Dispersal Area K
Occupational Group 1

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 4005149
2. Rank. Pte
3. Name. Handsor. James
4. Unit. C.F.C.
5. Date of Discharge AUG 8 - 1919 Place London. Ont.
6. Reason for Discharge DEMOBILIZATION

DEMOBILIZATION

7. Authority. R. O. 1894
8. Proposed Residence after Discharge

Electric 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.?

James Handsor
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date AUG 8 - 1919

Signature J. Farrell Lt
for (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

1D 30-H-2379 77

AUDITOR	PAYMASTER

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

M. OR S. S.

REGT. No. 4005149 RANK Pte NAME (IN FULL) HANDSOR James (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: Mrs Elisia Handsor RELATIONSHIP: M
ADDRESS: Electric P.O. Ont

IS SEPARATION ALLOWANCE PAID? Paid and Closed by Ottawa DATE EFFECTIVE
TO WHOM PAID RELATIONSHIP
ADDRESS Nil!

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F.: Can. For. Corps. IF IN P.F. WHAT UNIT? Bank of Toronto Wallaceburg Ont
PLACE OF ATTESTATION
TRANSFERRED TO: T. o. 8. DD 1 DATE: 25-7-19 AUTHORITY: D. o. 221
DATE OF ATTESTATION: 20-5-18
TRANSFERRED TO DATE AUTHORITY
ASSIGNED PAY $ 15.00 DATE EFFECTIVE Paid and Closed by Ottawa 31/8/19
PAYABLE TO: Mrs Elisia Handsor RELATIONSHIP: M ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS: Electric P.O. Ont
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE
DISCHARGED PLACE: London DATE: 8-8-19 REASON: Dem AUTHORITY: D. o. 221 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. No. of Days	Rate	Amount	Other Credits		Total Credits	Acquittance Rolls Col. No. 1–3	Cash Payments Col. No. 1	Col. No. 2	Col. No. 3	Assigned Pay	Regimental Charges	Other Charges		Total Debits	Balance Debit	Balance Credit	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 31-7-19					47 92	47 92	20											Ret Per SS. Saturnia 4-8-19
																		BAL. ENG L.P.C. 31-7-19
1-9 8/19	9	1.10	9 90	35 70		114 90	186/751	4 87	5 00	143 22			9 73		162 82			PAY TO ESTIMATED DATE OF DISCHARGE 9-8-19 CLO. ALLCE. 1ST PAYMENT OF W.S.G. BOAT MONEY TRAIN MONEY
																		Adv. — a/c 17359

WAR SERVICE GRATUITY

A.K. Mortimore Maj

MONTH	Other Credits	Total Credits	Cash Payments Col. No. 3	Other Charges	Total Debits	Balance Debit	PARTICULARS OR REMARKS
	W.S.G. S.a.		W.S.G. S.a.			Soldier & Dependents	
122 days	280 –	280 –	70			210 –	1st Pay W.S.G. as above
				a/c 15 00		195 –	a/c for Aug paid & not chgd.
				1 10		193 99	chge to adjust to date of discharge 1 day 1.10
			53 90			140 –	5/9/19 1165255
				1 30		138 70	Ref. P.2-H. 7-5-19. O.M. 8-10-18. C.F.C. Bottle Water carrier & S.S. not included in
			68 70			70 00	L.P. OCT 4 1919 1174216
			70 00				NOV 4 1919 1182365
	280	280	262 60	17 40	280		

J. [illegible] Capt.

200M-3-19.—L. L. 58788-H. & D. 9985.
M. F. W. 2596.
1772-39-1390.

Date of Enlistment 11.11.17. app. 20.5.18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

H

13179

Date of Assignment 1st July 18

10 L 29 L 5

Bab.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.00			

PARTICULARS OF SEPARATION ALLOWANCE

No. 400 5149.

Rank Pte. Promoted Reverted Discharge

Soldier's Name Jas. Handsor

Battalion Ind C.B., WOR. 43 Dft

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.ELISIA HANDSOR, H13179

2 ELECTRIC P.O., ONT. 15 15.00

3 % 4005149 PTE JAS.HANDSOR FIFTEEN DOLLARS

4

REMARKS 7876-J-35

Date 1918	Cheque No.	Amount S/A	Amount A/P	Total	
July	A 25722		15	15	A
Aug	D 29070		15	15	A
Sept	C 36475		15	15	A
Oct	E 43336		15	15	A
Nov	G 51417		15	15	A
Dec	E 63418		15	15	A ✓
Jan.	G 70814		15	15	A
Feb	B 77862		15	15	A
Mar.	E 83551		15	15	A
Apl.	D 1139		15	15	A
May	R 4985		15	15	L
June	O 11265		15	15	L
JUL	O 12232		15	15	
Aug	O 13586		15	15	
			210	210	

ENTERED IN AUDIT LEDGER JUL 15 1918 BY [signature] VOUCHER SECTION

M. F. W. 128 400M.—6-17—1772-39-141 L. L. 22320—M. & D. 7993.

A/c Closed 31/8/19

Ret'd per Saturnia

MD #1 Date 7/8/19 M.F.W.187 14/8/19

Closed C. S. Johnstone

M.R.O. 108478

AUDITED.

AUTHORITY FOR NEW ACC'T. M.D. 1-B1 Robt. Armstrong 16.7.18

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

ENTERED IN AUDIT LEDGER
JUL 15 1918
VOUCHER SECTION

M. F. W. 128.
400M.—17—1772 59-1141
L. L. 22320—M. & D. 7993.

Original

Owing K.

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 Mitchy DATE 15-7-19

1. 1 (a) Unit 6 A.G. (b) Regimental No. 4005149 (c) Rank PTE

(d) Surname HANDSOR (e) Christian name JAMES

(f) Home address Electric Ont.

(g) Next of Kin Mrs. E. H. Handsor (h) Relationship mother

(i) Address of Next of Kin ~~Cochrane~~ Gentre Ont.

2. Age last birthday 27 years. Date of birth 24. 12. 91.

3. Enlistment, ~~or Appointment (if an Officer)~~ (a) Place London (b) Date 30-5-18

4. Personal description: est.

(a) Height 5' 5" (b) Weight 145 lbs. (stripped) (c) Complexion Medium

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

Car upper left arm posterior.

5. Former trade or occupation Farmer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	1 yr	~~3 mos~~ 57

	Periods From	Periods To
Canada	30-5-18	25-7-18
England	25-7-18	2-10-18
France or other theatres of War	2-10-18	1-2-19

7. Original disease, or injury

V. D SYPHILIS

(a) Date of origin 26. 4. 19 (b) Place of origin England

(c) Cause Infection

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

no apparent disability

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.)

Objective. Lean Gen Lab Specialist Report Wilkey 14.7.19

Wasserman – negative

J. R. Atkinson
Capt. C. A. M. C.

no open or suppurating lesions

Subjective no disability

(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 (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no — Respiratory System no — Integumentary System no

Disturbances of Mentality no — Digestive System no — Muscular System no

Osseous and Joint Systems no — Any other general condition no

Gen report Wilkey 15.7.19.

Hearing R. 22 ft L. 24 ft Slight retraction Rt. M.T. Condition present prior to enlistment – not aggravated by Service

Sgd W. W Hume Capt

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

Pt. first noticed sore on penis 26.4.19 evacuated to Hospital received full anti-syphilitic treatment. Previous Wasserman 30.6.19 negative

Pt. last Wasserman 8.5.19 negative.

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*).)

Mumps 14. 8. 18 to 5. 9. 18 Recovery
Tonsilitis 9. 2. 19 to 18. 3. 19 Recovery.
~~See 4 (b)~~

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

See 4 (b).

11.—(*a*) Did the disabling condition have its origin before enlistment? no

(*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.)

not applicable

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

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

Hospital 8 Injections "606."
8 " "Hg".

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? Suggested
(If the answer is "yes" state nature of treatment required and probable duration)
that patient be dealt with on arrival in Canada in accordance with P. C. 47 dated 20. 1. 19.

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

17. Recommendations

W. S. Jones Capt. C. 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 James Handson 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 nil
as

James Handson 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 we concur.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or ~~No.~~) yes cat A
(*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.)

suggested he undergo BTC in accordance P.O. 277 20 1-19

(*b*) ~~Does not require treatment.~~

(*c*) ~~Should pass under his own~~ control.

(*d*) ~~Should not pass under his own~~ control.

(Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged.~~ (When not for discharge add special recommendation.)

RTC auth ag T-49083 29 11-11-18

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.

F. McCullough Lt Col *President.*

A Macdonald Capt. } Members

PLACE WITLEY CAMP

DATE 15/7/1919

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

W Hunt Capt
for *Assistant Director of Medical Services.*

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

A.D.M.S. HEADQUARTERS CANADIAN CORPS CAMP. 16 JUL 1919 WITLEY SECTION.

Duty 18-3-19

36

Forms I. 1237 / 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F10197	4005149.	Pte	Handsor.	J.

Year	Unit.	Age.	Service.
	C.F.A.	27	9/12.

Station and Date.	Disease Tonsillitis
	ante sorrens 2 wks ago.
	To 16 in Can Gen Hosp. 9-2-19.
	Xam shows.
	ante infl^ns. Tonsils Rest negative
	G T
17/2/19	[illegible] — [illegible]
22/2/19	[illegible] MO FTP. [illegible]
24/2/19	aspirin gr T Tid. [illegible]

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

Station and Date.	

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

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

Casualty Form—Active Service.

No 2 Const Bn 67 CBD

Unit, Regiment or Corps ..... 1st Depot Battalion, W.O.R.

Regimental No. 4005149 Rank Pte Name Handson James

Enlisted (a) 20.5.18 M.S.A. Terms of Service (a) C. E. F. Dofw Service reckons from (a) 20-5-18

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) Harness

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
JUN 27 1918	1st Depot Bn. W.O.R.	Transferred o/s EMBARKED 10-7-18 CANADA H. M. T. DISEMBARKED 22-7-18 ENGLAND H. M. T.	London, Ont.		Author H.Q.5[illegible] / 20C 249 JUN 24 1918
24.7.18	67 CBD	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale on draft from Canada.		22.7.18	Pt. 11. D.O. 175
10/10/18	O.C. C.F.C.	S.O.S. BASE DEPOT C.F.C. SUNNINGDALE on transfer to 8 Co. France		10.10.18	PT. II DO. NO 242 Lt. for O.C. C.F.C.
8th Coy. CFC.		Disembarked.	France.	11-10-18.	D.O.No.1.dated 4-11-18.
1/11/19	OR	To Hosp.	Rouen	29/11/19	B213 B/-
9/1/19	A/Jan Breydel.	Convalescent Depot	Aux A.T. Jan Breydel	9/1/19	W3083 Pl-6. 1919

(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.

CERTIFIED A CAN. RECORDS, LONDON. 21 OCT. 1918

George Shelton Lieut for O.C.

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				
18-2-19	BDCfc	P.O. S from 8 Coy	S'dale	10-2-19	P.O. 49

[signature] Lieut.

for LT COL. i/c Records, C.E.F.