221st O. BATT. C. E. F.

ORIGINAL

ATTESTATION PAPER.

No. 288685

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS.)
1.	What is your surname?	Hardwicke
1a.	What are your Christian names?	Colin
1b.	What is your present address?	283 Bannerman avenue, Winnipeg
2.	In what Town, Township or Parish, and in what Country were you born?	Sheffield. Yorkshire, England.
3.	What is the name of your next-of kin?	Mrs J. E. Hebland (mother)
4.	What is the address of your next-of-kin?	283 Bannerman avenue, Winnipeg
4a.	What is the relationship of your next-of-kin?	mother
5.	What is the date of your birth?	29th June 1893
6.	What is your Trade or Calling?	Railway Construction Clerk
7.	Are you married?	No
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.	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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Colin Hardwicke, 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.

Colin Hardwicke (Signature of Recruit)

Date 26th May 1916. Robt Stevenson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Colin Hardwicke, 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.

Colin Hardwicke (Signature of Recruit)

Date 26th May 1916. Robt Stevenson (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 Winnipeg this 26 day of May 1916.

George Spreule (Signature of Justice)

M F. W. 23
750M—3-16
H. Q. 1772-39-341

Description of Hardwicke / Colin on Enlistment.

Apparent Age 26 22 years May 11 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 3/4 ins.

Chest measurement: Girth when fully expanded 38 ins.

Range of expansion 3 ins.

Complexion Fair

Eyes Blue Grey

Hair Light Brown

Religious denominations:

- Church of England X
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic
- 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.

Date May 26th 1916 A Arthur

Place Winnipeg. Man. Capt.

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.

Colin Hardwicke 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.

[signature] (Signature of Officer)

Date May 26th 1916.

LIEUT.-COL.

Comm'd'g 221st Overseas Battalion.

L.M. 11/3/19

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

Attestation Papers.....3.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....2.....

Proceedings on discharge.....2.....

Corps History Sheet.....

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

Copy Dis. Parchment Certificate.....1.....

Medical Report for Invalids.....

Medical History Sheet.....1.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M.F.W. 192 - 1.
a.F.B. 122 - 1
MFB 227 - 1
C.a.D.C. 5-009-1
[illegible] 179-1

M. F. W. 62.
50m. 16.
H. Q. 1772 935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name HARDWICKE, COLIN

Regt. No. 288685 Rank Pte

Corps 221st Bn

Demo

08199

R 25/2

M

H

paycard-1
R. 149-1
M. F. W. 67-1
cas card 1
1-a71/237
R 1221

5-29
19.29
32-30
1

HSB

Number 288685 Rank a/L/cpl

Surname HARDWICKE

Christian Name Colin

Units Can Dn G Bde Theatre of War France

Date of Service 31-10-17

Remarks

Latest Address 283 Bannerman Ave

283 Winnipeg

Roll No. B Page 16883 Man

.-.-1. .

DEEP. SEP 23 1922
REGN.

FORM D M.S. 1300.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Hardwicke.	C.	288685.

RANK	UNIT	CO.	TROOP	BATTY.
Pte	Mgb. 14. (9)			

HOSPITAL — DATE OF ADMISSION

1. 44 Cas. Clg Stn — Hosp. 9.11.17
2. 3 Gen. Le Treport — 12.11.17.
   Queen Mary's Hld. Whalley. — Hosp. 21.11.17
3. Convl. Mil. Epsom — Hosp. 4-12-17
4. — Hosp.

DIAGNOSIS Sw L Leg Rw.
1.
2.
3.

DISPOSITION — DATE

A 15.11.17 a63-2. — Disc. 25.2.18
24.11.17. A71(2)
27.11.17. B72
7-12-17 B81
4.3.18 B153.

REMARKS

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

EPITOME OF HOSPITAL TREATMENT

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

Form R. 149.
7106—250m—7/2/17.

Colin

Name HARDWICKE Rank PTE. Reg. No. 2886/85

Unit 9TH C. M. G. Co.

Next of Kin Canada.

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
9-	11.	44 Cas. Clg. Station			A63	M	6358	
		C 7692.	S.W. L. Leg.					
12-	11-	No. 3. G. H. Letreport.						
		HA16240-2		do.	A71			
21-	11-	Queen Marys. M. H. Whalley						
		6693		do.	B72			
4-	12-	Mil. C. H. Epsom						
1918		7618		do	B81			
25-	2	Discharged		do	B153			3439

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

Form DMS 1401
8289 100M 9/3/17.

~~Convalescent Hospital~~
Woodcote Park, Epsom
HOSPITAL.

A. & D. CARD

AT

A. & D. No. T 265-88 PL. OF ACTION

RANK 288685 Pte. UNIT M.G.C. 14 Coy. SICK OR WOUNDED

NAME Hardwick . C. AGE 24 RELIGION C.E.

PLACE IN HOSPITAL

DIAGNOSIS ~~Gsw. B. Cg Calf Flesh.~~

ADMITTED 3 - DEC 1917 FROM R. M. Whalley

DISCHARGED D/. 25-2-18 TO 3. C.C.D. Stafford.

TRANSFERRED

SERVICE AT ~~HOME~~ 1 7/12 IN FIELD 1/12

RESULTS

(See Document Card for M.H. Sheet and other Documents.)

(P.T.O.)

REMARKS.

3-12-17: Wd. back of leg. lt. entrance on inner side of calf. - exit on outer - healed but leg is stiff.

11-2-18 - flat fut. etc.

26 - " " - Dl.

Gibreland capt.

NAME Hardwicke Colin

REGT'L No. 288685

H. Q. FILE No. 649.

RANK AND CORPS Pte 2nd. Div. Mach Gun. Co.

FOLLOWS No.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY (Form 22 1st B)
M6358 21/1	17-11-17	Adm No 44 Cas. Cl. Stat. Nov. 9th 1917 GSW Lt. Leg
M6521 W.S.H.	23-12-17	Officer in charge Woodcote Park Convt. Hospital Epsom reports. Flesh wound left leg unhealed, painful, stiff. probably D.I. for seven weeks.

L. L. 26138. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a63 (2)	No 44 Cas. Clg. Station	9.11.17	S.W.L. Leg
a71 (2)	No 3 Gen. Le. Treport	12.11.17.	" " " "
B72 (1)	Queen Mary's Mil. Whalley Lanes	21.11.17	" " " " L 21-12-17
B81	Mil. Conv. Epsom	4.12.17.	" " " "
B153	Dis	~~25-2-18~~	" " " "

No. 288685 RANK Pte. NAME Hardwicke Colin

T. O. S. 26-8-16 UNIT 221st Battalion C. E. 7.
D.069 26-8-16

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 May 26	1916 May 31	✓		
June		✓		
July		✓		
Aug		✓		
Sept.		✓		
Oct		✓	Forfeits-pay 14-9-16 to 30-9-16	D.O. 187 Oct pay list
Nov.		✓		
Dec.		✓		
1917 Jan.		✓		
Feb.		✓		
Mar.		✓		

*Name Hardwicke Colin Rank Pte. Regtl. No. 288635

Fyle Depot 10 W.D.H. 166

Original unit 221st. Present unit C.M.R.D. M or S. Age 22 Religion C.O.E. Ref. H.Q.

Port, ship, and date of arrival 14-12-18 Olympic, Halifax.

Next of kin Mrs J. A. Medland 283 Bannerman Wpg, (Mother)

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Rly Cntr. Clerk. Date and place of enlistment Wpg. May 26th, 1916.

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
7-12-18	T.O.S. #10 D.D.Posted Cas Coy CO 301-4789 DO	250-1856
	14 days landing leave with subs.	

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192.
60M.—3-18 (D.P. 353).
1772-39-1243.

No. 10 DISTRICT DEPOT DISCHARGE SECTION

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

10861

This is to Certify that No. 288685 (Rank) Pte.

Name (in full) Colin Hardwicke enlisted in

the 221st Battalion

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 26th

day of May 1916

HE served in 14th M.G. Coy. - France - 1 Month

and is now discharged from the service by reason of ☆ C.O. 29 - 351 D.O. 35 ☆

Demobilization R.O. 1420 (c)

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

Age 25 years 6 months

Height 5' 7¾"

Complexion Fair

Eyes Grey

Hair Brown

Marks or Scars G.S.W. left leg.

Colin Hardwicke
Signature of Soldier

D. Gillespie
Issuing Officer

Lt. Col.
Officer Commanding No. 10 District Depot
Rank

Appointment

Date of Discharge 7-2-19.

Signed at Winnipeg this 7th day of February 1919.

in Military District No. 10.

File Reference No. 44-H-1259

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
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Form R 122.
2353—100M—9-12-16.

LTR

Rank Name HARDWICKE, Colin Reg'l No. 288685

221st Bn. to Manitoba Regt. If in perm. Corps What Unit? Married or Single Single.

Unit

Place and Date of Enlistment Winnipeg, 26th May. 1916. Place of Birth Sheffield, Yorkshire England.

Name and Address, Next-of-Kin Mrs J.E. Medland.

283 Bannerman Ave. Winnipeg. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship Pte

N/E. R.B. No. 2810
File R.L.
Category O R CAN

O/S

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

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.
C		ARRIVED IN ENGLAND 29-4-17 S.S. AUSONIA.			
MAY, 1·17	11 RES	TOS as A/L/Cpl.		30 4 17	Pt O.100
17-5-17	11th Res.	S.O.S. to C M G Dep Crowbord	Seliffe	17-5-17	Pt II O. 1148 C M G/L Pt II O 138 d/18/5/17
15.5.17	✓	Reverts to Ranks.	✓	15.5.17	— 112.
1.11.17	C M G D	Posted to M G Pool O/Seas.	Pte Seaford	31.10.17	— 306 - M G Pool. Pt II O 94 d/14/11/17
14.11.17	9th M G Co	Adm. No 44 C.C. Station	Field	9.11.17	Ch A 63 S.W. L Leg.
~~19.11.17~~	~~M G Pool~~	~~S.O.S. to 9th M G Co.~~ Cancelled by Pt II O 98 d/24.11.17 M G Pool	✓	~~8.11.17~~	~~Pt II O 96.~~ ~~3rd D M G Co.~~ ~~Pt II O 80 d/20~~ Cancelled Pt II O 183 d/23.11.17
23.11.17	9th M G Co	Tfd No 3. Gen Hosp	Le Treport	12.11.17	Ch A 71. —
26.11.17	✓	Tfd - Queen Mary Mil Hosp	Whalley	21.11.17	— B 72 —
24.11.17	2nd Div M G Co.	T.O.S. of 14th M G Co.	✓ Field	9-11-17	Pt II O 136 M G Pool Pt II O 98 d/24.11.17.

A.F. 103 CHECKED 27 NOV 1917

288685 Hardwicke C

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.
30.11.17	MGC Depot	(Wounded) TOS of MGC Depot	Pte Seaford	21.11.17	Pt II O 264 & 2nd Ch MG Corps RV 3d/11/1/18
6.12.17	9th MG Coy	Tfd Mil Com. Hosp.	" Epsom	4.12.17	Ch B 81
1 3 18	MG Corps Depot	Disch. hosp; on command 3rd CCD.	" Seaford	25-2-18	Pt II DO #52 & 3rd CCD #52 d/2-3-18
8-6-18	do.	Ceases att'd 3rd CCD; on Comm'd CMGD	" do.	6-6-18	Pt II DO #130 & CMGD #160 d/9-6-18 & 3rd CCD #131 d/6-6-18
27.11.18	CMGD.	Ceases att. from CMGCD.	Seaford	20.11.18	Pt II DO #311 & CMGCD Pt II DO 270 d/27.11.18
26-12-18	CMGCD	S.O.S. on Hfr to C.E.F. in Canada	" do	24.12.18	Pt II D.O. 293

14

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 22nd Batt C.E.F.

Regimental No. 288685 Rank Pte Name Hardwicke Colin

Enlisted (a) 26-5-16 Terms of Service (a) Dur. War C.E.F. Service reckons from (a) 26-5-16

Date of promotion to present rank. | Date of appointment to lance rank 19-6-16 | Numerical position on roll of N. C. Os.

Extended | Re-engaged | Qualification (b). (Clerk B. Construction Machine Gunner)

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	26-4-17	H.M.T.
		Disembarked	Liverpool	29-4-17	Scandinavian.
2-5-17	O.C. 22nd Battn.	Appmt. of A/Sgt. held on arrival in England	Dibgate	30-4-17	Pt II Bn.O. 89
2-5-17	" "	Trans to 11th C.R.Bn	Shorncliffe	30-4-17	Pt II Bn O. 89
					Capt & Adjutant 22nd Battalion C.E.F.
1-5-17	O.C. 11th Can Res Battn.	Taken on strength 11th	Shorncliffe	30-4-17	Pt II Bn.O. 100
15-5-17	O.C. 11th	Reverted to Ranks	"	15-5-17	Pt.2 B.O.112
17-5-17	O.C. 11th	Trans to C.M.G. Depot Crowborough.	Shorncliffe	17-5-17	Pt II B.O.114
					R. Godfrey Simmons Lieut for Adjt 11th Can Res Bn.

(a) If 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) Engineering Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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.
MAY 18 1917	Com. C.M.G.D.	Taken on Strength, C.M.G.D.	Crowborough	MAY 18 1917	Auth. Depot Order Pt. II No. 188
NOV 1 1917	Com. C.M.G.D.	Transferred to O/Seas C.M.G. Pool	Seaford	31-10-17	Depot Order Pt. II No. 306 [signature] Lieut. A/Adjutant, C.M.G. Depot.
1-11-17	O.C. Pool.	Arrived France T.O.S. C.M.G. Pool.	Camiers	1-11-17	N.R. Pool 35. P 294 Dy 14-11-17.
9-11-17	CCRC	Transf. 14th C.M.G. Coy	3 ills	8-11-17	NR 45 P.II.O. 98 S/24-11-17
9-11-17	do	T.O.S. 14th Can M.G. Coy	✓	9-11-17	NR 45 P.II.O. 136 S/24-11-17
9-11-17	O.C. Unit	Joined unit for duty	✓	6-11-17	B 213.
17-11-17	do	Wounded in action	✓	9-11-17	B 213.
11/11/17	14 C.C.S.	S.W. Reg L. 9/11/17 To 34 A.T.		11/11/17	A 36 (B. 5014)
12.11.17	3 Gen Hosp	do	3 Gen Hosp	12.11.17	W3034-66-58
19.11.17	3 Gen Hosp	do	To England		W3034-9382
7.1.18	D.D.M.S. Havre	do Invalided (wounded) and posted Cdn M.G. Depot, Seaford per H/S "Essequibo"		20.11.17	Letter K.G. 16/17/102 Pt 11 Ord 3d 11.1.18

[signature] Johnston Capt.

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

CERTIFIED CORRECT. 9 - NOV 1917 CAN. RECORDS, LONDON.

LAST PAY CERTIFICATE

Reg'l. No. 288685 Rank Pte. Name Hardwick, C. 221st Corps, No. 10 District Depot, MD 10, who was Discharged. on Feb. 7th 1919, to

M.D. 10
NO. 30

The following is a statement of account of above named from Feb. 1st 1919 to Feb. 7th 1919, inclusive date of Transfer or Discharge.

DR.		CR.	
Bal.Dr.from Prev.Month		Bal.Cr.fr.Prev.Mo	
Advances by Cheques No.		Reg.Pay 7 Dys 1.00	7.00
No.		Fld.All 7 Dys .10	.70
Assgd.Pay &S.A.		S.A.Monthly @	
Other Charges		Other Allces	
Pay't.on Trans.orDis	42.70	Other Credits Civ. Cloth	35.00
Bal.Cr.(to be pd.by new Unit)		Bal.Dr.(to be deducted by New Unit)	
Total	42.70	Total	42.70

A monthly stoppage of $ 20.00 has been paid on acc't. of Assigned Pay Jan. on Prev. acct. & Closed. for month of 1919) & Sep.Allce.for mo. of Nil. 1919) To Assignee Mrs. Grace Medland, 283 Bannerman Ave., Winnipeg, Man.

REMARKS: Entitled to 153 days W.S.G.

State (1) date of enlistment

(2) if Married & if Sep. Card has been submitted No.

(3) Cause of Discharge Demob. Auth. D.O.35.

(4) Authority for Transfer

I have carefully examined this statement of account and find it to be correct extract from the paylist of the unit.

Date Feb.5th. 1919.

W. Gatolint Paymaster
District Depot, M.D. 10.

Place, Winnipeg, Man.

Made up by J.B.

Checked by D.H.

Forms
I. 1237.
10

Army Form I. 1237.

MIL CNV HP
WOODCOCK PK
EPSOM.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	288685	Pte	Hardwicke	C

Year	Unit.	Age.	Service.
1917	14 Canadian M[illegible] C	24	1 6/12

Station and Date.	Disease Shell wound Leg L
Whalley	Wounded in L. leg by shell 9. 11. 17
21. 11. 17	Foreign Body over anter[illegible] & outer side leg calf
	Incised & removed.
	On admission both wounds nearly healed
26. 11. 17	Pt up & wounds now practically healed
	A.T.S. France 9. 11. 17
	" Whalley 24. 11. 17 500 units

D A MacLaren
Capt RAMC.

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

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

P.T.O.

Station and Date.	

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Hardwicke *Christian Name* Colin

29 NOV 1917

Examined on 26 day of May 1916 at Winnipeg

Birthplace City or Town Sheffield County York's, England

Apparent age 21

Trade or occupation Rway Coust, Clerk

Height 5 Feet 7 3/4 Inches.

Weight 150 Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 38 inches.

Physical development Good.

Small-Pox Marks None.

Vaccination Marks Arm Right. X Left. 1 Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection Nil

Approved by A Arthur

Rank Capt M.O.

27 NOV 1917

Date.	Fit or Unfit.	Examined for Re-engagement.
20/2/18	D I	[illegible] M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
Nov		A L Shanks M.O.
9.11.17		A.T.S. M.O.
14.11.17		" 500 units M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
June 1		A Arthur M.O.
12th	TAB	A Arthur M.O.
12.3.18	4/5/17 TAB	Capt Mackay M.O.

Enlisted on 26 *day of* May 1916 *at* Winnipeg, Man.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	221st Overseas Battalion	288685		May 26 1916
Transferred to	M G Pool			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
3rd C.C.D. Seaford.	27-5-18	Weakness of Both Feet	B I. Wm. H. Taylor Capt. C.A.M.C.
Seaford	11-7-18	Weakness Legs	B I. G G Phillips
Do	12/10/18	Do	B I G Phillips Capt
Seaford	1-11-18	Flat Feet	B I J W Macleod Capt
Seaford	17-11-18	ditto	B I J W Macleod Capt

PRESIDENT, STANDING MEDICAL BOARD

PRESIDENT, STANDING MEDICAL BOARD

CANADIAN

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.
400M.—1-16.
H. Q. 1772-39-439.

J. McD

Surname Starowicki Christian Name Colin

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.
Queen Mary's Military Hospital, WHALLEY, Lancs.		21	Nov.	1917	3	12	17	IX. 1. S.W. leg L.	13	Wounded in left Leg by shell. 9.11.17. F.B. felt over anterior & outer side by Calf. incised & removed. 26.11.17 Pt up. & wounds practically healed. Grant. 3/12/17 to Can. Con. Hosp. Woodcote Park Epsom	J T Machaven Capt Rame
Mch Epm		3	12	17	25 FEB 1918			pro	54	Suffers from flat feet this can be Easily be over come by having his arch adjusted he wears Steel Supports otherwise there is no Evidence of disability D I	G E Wilcox Capt. C.A.M.C. No. 1 Division.

Rank.

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 221st OVERSEAS BATTALION C. E. F.

(2) Regimental Number 288685

(3) Full Name of Soldier Colin Hardwicke. Lance. Corp.

(4) Place of Birth Sheffield Yorkshire England.

(5) Are you married, or not ? No

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

(b) Present Postal Address 283 Bannerman Ave.,
Winnipeg.

(7) Are you a widower ? No

(8) Have you any children ? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address

(10) Is your Mother alive? Yes

If so, state name and address Grace Medland

283 Bannerman Ave Winnipeg

(11) If your Mother is a widow No

Are you her sole support, or not? No

(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.

Mrs Grace Medland

283 Bannerman Ave Winnipeg

(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.

No

(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.

H Thompson Capt
Officer Commanding.
B Coy 221st Battn

Date NOV 7 1916

W McMeau Engr
for Lt Col
LIEUT-COL
Comm'd'g 221st Overseas Battalion

SPECIAL EYE REPORT.

SEAFORD. 24/8/18

Number 288685 ~~839041~~ R. 6/6 With Glasses

Rank Pte.

Name Hardwick C. L. 6/6 With Glasses.

Unit C.M.G.D.

Complaint:-

This condition was.....present before enlistment and

has.....not.....been caused by Service.

Glasses have.....not been.....ordered.

As far as Eyes are concerned fit for Category: A

Remarks:-

L. J. Hebert
Capt. CAMC.

L. L. Job 4503.—M. & D. 6332.

Assigned Pay

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs. Grace Medland

Address 283 Bannerman Ave. Winnipeg Man.

Relation to Soldier wife, child or mother } Aunt 20

Name of Soldier Hardwicke C.

Regtl. No. 288685

Rank L/corpl.

Corps 221 Bn

To what Corps belonging when called out

APR 1- 1917

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 4 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs. Grace Medland
(Assignee)

PAYMENTS. Name of Soldier Hardwicke C.

No 288685 L/Corpl. 22/Bn.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916		20 60	APR 1 1917
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		£8973	40.	40R
June		Z19155	20	20 S
July		N22551	20	B.
Aug.		N29814	20	
Sept.		V35294	20	D
Oct.		C42367	20	
Nov.		T49497	20	
Dec.		A48785	20	180
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

P. 559.
MARRIED OR SINGLE: Single

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN: Mrs Grace Medland, 382 Bannerman Ave, Winnipeg, Man. Mother

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reverts to Ranks.	15/5.	GO. 112.
Restricted pay 2 mos.	19-3-18	Mdq-22/8 3rd CCD

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 288685 RANK ~~Ste.~~ ~~Lce.~~ Pte. NAME Hardwicke Colin

IF IN PERMT. CORPS | WHAT UNIT — UNIT 32nd Batt. to 11th Re. TRANSFERRED TO CMGS DATE 11/8/17 AUTHORITY by request.

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Winnipeg, Man. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 26th May 1916. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 20 00 DATE EFFECTIVE 1st ~~May~~ March 1917. Paid in Canada to the end of March.

PAYABLE TO Mrs Grace Medland, 382 Bannerman Ave, Winnipeg Man. 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)

C.J.

DATE 1917	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
May 1			Balance from Canada											13 00	13 00																13 00				
"	31	1.10	34	10											34 10			182 q/s.						2 H3.				20 ~~21~~		H2 H3	H 67				GO. 112. Reverts to Ranks. 15/5.
June	30	1.10	33												33	269	14/5							4 99				20		24 99	12 68				
July	31	1.10	34	10											34 10													20		20	26 78				
Aug	~~31~~ 10	1.10	11												11													20		20	17 78				Trans to CMGS 11/8/17 by request.
"	21		23	10											23 10																40 88			
Sept	30		33												33	689	30/6							2 44											
																570	15/6	808		352	3/5	Gravel		4 86	7 30	12 17		20		46 77	27 11				
			168	30										13	161 30									12 29	9 73	12 17		120		154 19	27 11				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct.		~~Pay~~							27 11		
"		P Pay 34 10		A.R. 1045 31.8.17 Can G.D.	4 86						
				A.R. 946 14.8.17 Can G.D.	9 74						
				" 901 31.7.17 " "	4 87						
		Forward 34 10			19 47						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct.	Br. Forward.	34 10.			19 47						
				A.R. 1133 14.9.17 Engs.	7 30						
				" " 998 29.9.17 "	4 81						
				A.R.	31 63		20	9 58			
		34 10					20				

*288185. Pte Hardwicke L. a 1 #20

DATE	PAY: No. of Days	PAY: Rate	PAY: Amount $	PAY: Amount c.	FIELD ALLOWANCE: No. of Days	FIELD ALLOWANCE: Rate	FIELD ALLOWANCE: Amount $	FIELD ALLOWANCE: Amount c.	WORKING OR SPECIAL PAY: No. of Days	WORKING OR SPECIAL PAY: Rate	WORKING OR SPECIAL PAY: Amount $	WORKING OR SPECIAL PAY: Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1: No.	1: Date	2: No.	2: Date	3: No.	3: Date	4: No.	4: Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE: Credit	BALANCE: Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS									DR.1		DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.														
Nov				Can. Ass pay													20																		
	PP	33		ah. 1343 15-11-17 Can Ass										7 30																					
				" 1399 29-11-17 " "										4 87																					
Dec	"	34	10	Can Ass pay													20	24 51																	
1918		67	10											12 17			40																	
Jany	"	34	10	Can Ass pay													20																	
				ah. 6381 4-12-17. 66th Epsom										9 73				24 44																	
		34	10											9 73			20																	
Feb	PP	30	80	Can A.P.													20																	
		30	80	AR. 215. 11-1-18 CCH Epsom										9 73			20	29 95																	
														9 73																				
Mar:	Subs allce 25 3/18			" 6804 - 4 3/18 " "										4 87																					
	7 3/18 50. 52. 1/3/18 6th Lgd	8	00	Can A.P.													20																	
	P.P	34	10	AR 9984 - 25 2/18 " "										48 60																					
				" 2942 - 12 3/18 3rd Lgd										4 87																					
				Awarded 4 days F.P. #2																															
				forfeits 2 days pay by Pres.																															
				Total forfeiture 6 days Prob.																															
				A.O 60 - 12-3-18. 3rd Lgd											6.60																					
				AR 3104 - 20 3/18 " "										2.43																					
		4 8 6												60 84		6 60		20		11 63															

P.820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- HARDWICKE Colin
EFFECTIVE DATE:- 1.3.19	EFFECTIVE DATE:-	NUMBER:- 288685
AMOUNT:- $20.00	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

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 Grace Medland, 283, Bannerman Avenue Winnipeg Man: Mother	

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 221st Bn.

DATE ACCOUNT FIRST OPENED:- 1.5.19

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			b. M. G. D

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
10/5/18	1621	B.M.G.D.	~~40 60~~			P870 for AR 436 3982	2 43
1/11/18	5491	"	~~9 45~~	Charged			
13/11/18	5952	"	~~40~~	"			
			14 60				
							30-11-18 Cr Balance 4.35

DAILY RATES OF PAY AND ALLOWANCES rendered R.N.E. April 1/19.

AUTHORITY	PAY	F.A.	P.F.A.	SUBSISTENCE ALLOWANCE
	1 00	10		
Restricted pay 2 mos from 19-3-18	0 6 9	22-3-18.		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred to Canada. E/ff 1-12-18 HQ E Hal 4-1-62 of 12.11.18

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
March 31	Balance forward								14 63		
April	P. P.	33 -		b.a.p.				20			
				Q4005 - 15/3/18 - 3rd CCD.	3 70					4 10	50
				aR151 - 12/4/18 ✓	2 43						
				" 400 - 29/4/18 ✓	2 43				10 19		
		33 -			8 56			20			
May	P. P.	34 10		b.a.p.				20			
				aR956 - 15/5/18 - 3rd CCD	2 43						
				" 1540 - 29/5/18 ✓	2 43				- 95		
		34 10			4 86			20			
June	P. P.	33		" 1479 13.6.18 Stanley	9 73						
				b.a.p.				20			
				aR 1960 26.6.18 " "	9 73				7 41	14 9	Wired
		33			19 46			20			
July	P.P.	34 10		b.a.p.				20	6 8		
		57 30		aR 3359 11 7 8 " "	4 8						
				" 3647 29 7 8 " "	4 6				61		
		34 10			17 30			20			
Aug	Ptes Pay	34 10		a.p.				20			
				3183 14/8 "	4 87						
				aR 3759 28/8/18 C.M.G.D.	4 87				3 75		
		34 10			9 74			20			
Sept	Ptes Pay	33		a.p.				20			
				aR 3965 11/9/18 C.M.G.D.	7 30				9 45		Wire Cancelled
		33			7 30			20			
Oct	Pay	34 10		Cap				20			
				aG 4691 10.10.18 C.M.G.D.	14 60						
	Carry Forward	34 10			14 60			20	9 45	14	

NUMBER 288685 RANK Private NAME Hardwicke Colin

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Brot forward	34 10			14 60			20	9 45	14 RP	
Oct		34 10			14 60			20	8 95		
Nov	P P & C.	33		Cap				20	33 95		
Dec		~~67 10~~		AK 5481 · 13·11 · Eddy 8	9 73				41 95		
				5852 13·11 · ✓	4 87				37 03		
				3932 · 2·12·18 · Buxton	2 43				492		
		33 -			~~14~~ 03			20	—		

This space to be for numbers

DEPT. MILITIA & DEFENCE
MAR - 1 1919
H.Q. CANADA

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).

MEDICAL DOCUMENTS FORWARDED TO ~~S.C.R. or~~ P.B.C. on FEB 26 1919

No. 288685

Rank Private

Surname Hardwick.

Christian Name Colin

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 221st Batt.

Date of Discharge Feb.7, 1919

Place of Discharge Winnipeg

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 25 years 6 months.

Height 5 feet 7¾ inches.

Complexion Fair

Eyes Grey

Hair L.Brown.

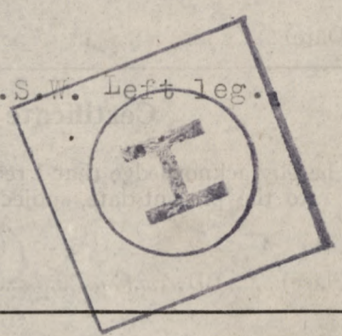
Trade Clerk

Intended place of residence (To be given as fully as practicable.) 283 Bannerman Ave., Winnipeg.

Descriptive Marks

G.S.W. Left leg.

I



2. The above-named man is discharged in consequence of

☆ C.O. 29 - 351 D.O. 35 ☆

Demobilization R.O. 1420 (c)

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.
K.C.D. 23/1/20

(OVER)

Noted 11-3-19 Ken

5. He is in possession of the following number of G. C. Badges:

No reference to G. C Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place)..... .....

(Date)..... *Commanding* .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Winnipeg. Colin Hardwicke (*Signature of Soldier.*)

(Date) Feb. 7, 1919 E Pettlado Lt (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

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

.....(*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Winnipeg

(Date) Feb. 7, 1919

(*Signature*) R S Grieve Lt. Col.
O.C. No 10 District Depot.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Colin Hardwicke

(OVER)

440-1 3-19

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263.
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a.
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia Form	B. 313
Medical Report for Invalid*	"	B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	"	D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form	B. 235.
Proceedings on Discharge	"	B. 218.

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

(*a*) Proceedings on Discharge.

(*b*) Attestation.

(*c*) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Army Form B. 103.

Regimental Number 288685

Casualty Form—Active Service.

Regiment or Corps .....

Rank ..... Surname Hardwicke. Christian Name Colin

Religion ..... Age on Enlistment ..... years ..... months

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

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (*b*) ..... or Corps Trade and Rate .....

Occupation .... Signature of Officer.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
		Embarked ...			
		Disembarked ...			
30-11-17.	M.G. Corps Depot..	Taken on Strength from 14th M.G. Coy.	Seaford.	21-11-17.	Nt. II Do # 264

H. F. Moody LIEUT:
FOR LT: COL: I/C RECORDS, C.O.M.R. 28 2/18

6/6/18 DISCHARGED FROM 3RD C. C. D. Seaford TO CMDCo BN. PART II D. O. No. 132. 6/6/18

F. B. M. Hammond Capt.
For O.C.
3rd Canadian Command Depot.

...e 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.
...ng-Smith, &c.

W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354.

[P.T.O.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
[illegible]3.18	C.M.G.CD	On Command 3rd C.C.D.	Seaford	25.2.18	Pt II D.052
[illegible]6.18	C.M.G.CD.	On Command C.M.G.D.	Seaford	6.6.18	Pt II D 0130
					B.W. Wace LIEUT. FOR OFFICER COMMANDING, CANADIAN MACHINE GUN CORPS DEPOT.
9/6/18	Com. C.M.G.D.	Att from C.M.G.C.D	SEAFORD.	6/6/18	D.O. Pt II 160
27.11.18	C.M.G.C.D.	On Command to C.D.D. Buxton	Seaford	25.11.18	Pt.2.D.O. 270.
					[illegible] LIEUT. FOR OFFICER COMMANDING, CANADIAN MACHINE GUN CORPS DEPOT.

27 NOV 1918 Attached C.D.D. Buxton for return to Canada, Part 11 Order No. 280
Ceases to be attached C.D.D. Buxton on embarking for Canada.

J. Armour Lt. for Lt. Col.
Commanding Canadian Discharge Depot,

7.12.18 Sailed for Canada

T.O.S. No. 10 DISTRICT DEPOT.
7/12/18 D.O. 250 PARA 1856
[illegible] Patton Lt. for Lt. Col.
Officer Commanding No. 10 District Depot.

Discharged 7-2-19
C.O. 29 / 351 D.O. 35

[illegible] D/or Lt. Col.
Officer Commanding No. 10 District Depot

PART I. A.F.B. 179 Canada (Revised 1918). 40266 10/8/18 T.D. 343

Reserved for M.H.C.

Regt. No. 225685 Rank PTE Surname HARDWICKE Christian Name COLIN

Unit or Corps—(a) Overseas from United Kingdom 14 M.G. Co. (b) in United Kingdom C.M.G.D.

Born at—Town SHEFFIELD County or Province YORKSHIRE Country ENG.

Date of Birth—Day 29 Month JUNE Year 1893 Age 25 yrs. 5 months.

Joined at WINNIPEG MAN Date 26 MAY 1916

Former trade or occupation CLERK

Permanent Marks or any peculiarity that will serve for future identification :—

TWO MOLES CHEEK RT

Height—feet 5 inches 7 3/4 Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) C Hardwicke

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

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

Disabilities Group (*a*): FLAT FEET

Disabilities Group (*b*):

Disabilities Group (*c*):

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	GENERAL SERVICE CONDITIONS FRANCE NOV-11		
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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

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

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

(*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 ? YES

(*ii.*) As to Group (*b*) above ?

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

PART I. (continued).

5. MEDICAL HISTORY. France 1/12

Went to France with 14 MCG 26-10-17
States his feet were giving him considerable trouble was going to report but got wounded in meantime
Wounded by shell fragment in leg left 9-11-17 In hospt at Letrefort for couple of weeks
M.H.S admitted Queen Mary Military Hospt 21-11-17 G.S.W. Leg Left 13 days
M.C.H Epsom G.S.W. Leg 54 days
Discharged D1 Boarded B1 weakness of feet
Seaford 27-5-18

6. PRESENT CONDITION.

Subjective Symptoms
Complaints of pain in the feet after marching or foot exercises.
Objective Symptoms
Young man of healthy appearance and good development
Small G.S.W. scar outer surface Leg Left No disability at present
Both feet quite flat and everted
Tenderness along course of post tibial tendon.
Other Systems normal.

7. OPERATION. (i.) Was one performed? Yes (ii.) If so, state what. Removal 2B

(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.

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

(ii.) If so, describe.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) B1

(b) Invalid to Canada? No

(c) Discharge from the Service as permanently unfit? No

Date of Report 17-11-1918

Signed [signature] Capt Cane
Officer in medical charge of case.

Station Seaford

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

..... {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

NOT IN HOSPITAL

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

10. Is the diasbility fully described in Part I. (1)? If not, describe it. Yes

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. Yes

12. From the medical information now adduced, was the disability caused or aggravated by:—
(a) Negligence of the Soldier { Caused? no / Aggravated? no }
(b) Misconduct of the Soldier { Caused? no / Aggravated? no }

13. 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, 5%, 10%, 15%, 20%, etc.*) None

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*) What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) None

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent? N.A.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? N.A.

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? N.A.

17. Can the former trade or occupation be resumed? Yes

18. REMARKS:—
Authority A. C. telegram 9083. 11-11-18

19. RECOMMENDATION:—
(a) Fit for duty? (*state category*) B1
(b) Invalid to Canada? no
(c) Discharge from Service as permanently unfit? no

Date of Board 17-11-18

Signatures of the Board { J. W. Macheil Capt. / [illegible] Capt. / [illegible] Capt. } President.

Station Seaford

Approved [illegible] for A.D.M.S.

Dated at Seaford, Sussex Station 17 NOV 1918

191

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned, Colin Hardwicke, have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

Colin Hardwicke
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

Form R & O 6045
1288-130M-29/11.16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD MAY 22nd 1918.

No. 280685 Rank PTE Name HARDWICKE C.

Local Unit M.G.T.D. Overseas Unit M.G.C. Age 22

Examination held at 3rd C.C.D. MEDICAL DEPARTMENT

DISABILITY.
Overseas—~~Local~~.
(scratch one out)

WEAKNESS OF BOTH FEET.

PRESENT CONDITION.

1. In France. 1 month.
2. Invalided to Hospital 21 1917. G. S. W. Left by.
3. No improvement at 3rd C.C.D.
4. Subj. Synpt. Pain in both feet.
5. Obj. Synpt. Has double P. as P. lamina of rim. Pinged light.

BOARD RECOMMENDS:— B.T. not likely to be raised

1. Fit for Duty
2. Fit for duty after Seaford 1-11-18 B.T. J.W. Macheal Cont weeks' physical training.
3. Fit for Temporary Base Duty weeks.
4. Fit for Permanent Base Duty
5. Discharge

MEDICAL DEPARTMENT.
3rd Canadian Command Depot.
31 MAY 1918
SEAFORD CAMP.
SUSSEX.

Signatures:—

Members { Wm. H. Taylor Capt. Camc. President.
C. D. Bantry Capt. Camc
Geo. [illegible] Taylor

APPROVED

Dated at Seaford 30-5-18 1916. [illegible] Dowsley Maj. Camc

Remedial Treatment not Recommended

For A.D.M.S.

Bd Funding Indiana
11/7/18
T Phillips Capt

Form R. & O. 6045
1238-130M 29/11.16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD, MAY 1916.

No. [illegible] Rank [illegible] Name [illegible]

Local Unit M.G.T.D. Overseas Unit M.G.C. Age [illegible]

Examination held at 3rd C.C.D. MEDICAL DEPARTMENT

DISABILITY.
Overseas—Local.
(scratch one out)

WEAKNESS OF BOTH FEET.

PRESENT CONDITION.

1. [illegible]
2. Invalided to Hospital [illegible] 3rd C.C.D.
3. [illegible] Pain in both feet.
4. [illegible] Has double [illegible] of [illegible] [illegible]

BOARD RECOMMENDS:— [illegible]

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.....

MEDICAL DEPARTMENT,
3rd Canadian Command Depot,
31 MAY 1918
SEAFORD CAMP,
SUSSEX.

Signatures:— [illegible] Capt. CAMC

Members { [illegible] President.
[illegible] CAMC
[illegible]

APPROVED

Dated at Seaford 30-5-16 1916. [illegible] CAMC

Remedial treatment [illegible]

For A.D.M.S.

Bd Finding Endorsed
11/7/18
G G Phillips Capt

Confirmed 12/1/18

G G Phillips Captain,
Medical Officer, Canadian Machine Gun Depot

S.S? Olympic 283 Bannerman Ave., Winnipeg, Man.

B.P.C. ORIGINAL 44-A-1259

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 Winnipeg, Man. DATE Jan. 29, 1919.

1. 1 (a) Unit 221/11R/CMG Depot/10DD (b) Regimental No. 288685 (c) Rank Pte.

(d) Surname HARDWICKE (e) Christian name Colin

(f) Home address 283 Bannerman Ave., Winnipeg, Man.

(g) Next of Kin Mrs. Grace Medland (h) Relationship Mother

(i) Address of Next of Kin 283 Bannerman Ave., Winnipeg, Man.

2. Age last birthday 25 Date of birth June 30, 1893

3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg, Man. (b) Date May, 26, 1916

4. Personal description:

(a) Height 5' 8" (b) Weight 150 (stripped) (c) Complexion Medium

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

Small circular scar calf of left leg. One Vacc, mark left arm.

5. Former trade or occupation Timekeeper

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

	Periods From	Periods To
Canada	May 26, 1916 Dec. 7, 1918	April 9, 1917 Jan 29, 1919
England	April 9, 1917 Dec. 3, 1917	Oct. 26, 1917 Dec. 7, 1918
France or other theatres of War	Oct. 26, 1917	Dec. 3, 1917.

7. Original disease, or injury FLAT FEET

(a) Date of origin Nov. 1917 (b) Place of origin France

(c) Cause Stress of Service.

10 M. D. JAN 30 1919 HEADQUARTERS WINNIPEG

Asst. Director Medical Services No. JAN 30 1919 MIL'Y DIST. No. 10, WINNIPEG

M. F. B. 227. EM

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.)

IMPAIRED FUNCTION OF FEET. (a)No (b) Partial loss of function of both feet. (c) No (d) No

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.)

Both feet moderately flat. (Non-rigid type), and slightly everted. Can walk five miles without difficulty or pain.

(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

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

Enlisted May 26, 1916. Feet then were in good condition. Went to France Oct. 26, 1917. When engaged in carrying ammunition, feet became sore, and states he would have had to give up, but on Nov. 9th received a shrapnel wound in calf of left leg, and was taken to Hospital.

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*).)

Shrapnel wound calf of left leg, Nov. 9, 1917. Wound well healed
No disability

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

See sec 4 F

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.)

Originated on service in France

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

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

None

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

Category B "2"

M W Smith Capt
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 C. Hardwicke 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

Colin Hardwicke Rank. Pte.
Signature of invalid exam

J Bmdy

...ST. No. 10. WINNIPEG

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.
(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.)

Given Category B "2"

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.

J B McGregor Capt *President.*

PLACE Winnipeg, Man.

DATE Jan. 29, 1919.

W W Smith Capt } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned ..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... *President.*

PLACE .....

DATE ..... } Members

APPROVED BY J C Paxton Capt for *Assistant Director of Medical Services.*

DATE JAN 31 1919

APPROVED BY ..... *Director-General of Medical Services.*

DATE .....

H.109
Case closed

AUDITOR | PAYMASTER

12

M. OR S.

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

REGT. No. 288685 RANK Pte. NAME (IN FULL) Hardwicke Colin (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 221st Bde. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 26-5-16. — TRANSFERRED TO — DATE — AUTHORITY

~~ASSIGNED~~ PAY $ — DATE EFFECTIVE

~~PAYABLE TO~~ — ~~RELATIONSHIP~~ — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 283 Bannerman Ave Winnipeg.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Winnipeg. — DATE 7-2-19. — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	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.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
1919 July 4	153								350 00						4868		70 00																		280 00		70 on 1st Payment Wpg.
Mch 8															90 37		70 00																				70 on 2nd " "
April 4															130751		70 00																		210 00		70 on 3rd " "
																																			140 00		
May 4															161413		70 -																				70 on 4th " "
																																			70 -		
June 4															215823		70 -																		70 -		70 on 5th " "
									350 -								350 -																350 -				

Closed. SAC

AUDITED JUN 8 1919 Audit Clerk M.D. 10

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

M.

AUDITOR 1 | PAYMASTER

M. OR S.

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

REGT. No. 288585 RANK Pte NAME (IN FULL) Hardwicke C (BLOCK LETTERS SURNAME FIRST)

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. 221 — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 DATE EFFECTIVE 1/1/19

PAYABLE TO Mrs Grace Medland RELATIONSHIP

ADDRESS 283 Bannerman Av. Wpeg

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE MD 10 DATE 7/2/19 REASON D AUTHORITY D.O. 35 IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																											55 08			55 08	55 08			8	153 Dup N. S.
1/1/18 - 31/12/18	62	1.10	68	20			11	20	79	40			12657	12658					4	32			20 -				55 08		31/1	79	40					4	Trans. Dr 55 08 for pay on 1/1/18 & a/c of Fuse Rpt Cas Co
1/1/19 to 7/2	7		7	70	35				42	70			15402						42	70										42	70					4	62 35 66 D.O. 35
			75	90	35	-	11	20	122	10									47	02			20 -				110	16		177	18	55	08			3	V.P.6. ford.

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

H 2399

Date of Assignment 1916 Apr 1/17.

RATE OF SEPARATION ALLOWANCE

7/6442 & .

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 288685.

Rank L/6pl. Promoted Reverted Discharge

Soldier's Name C. Hardwicke.

Battalion 221 Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Grace Medland.

Address 283 Bannerman Ave, Winnipeg. Man.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS 7982-C-15
Dec 31			180	180		M.O 49830. D 19.12.18
1918 Jany	R 67671		20	20	Br.	
Feb	E 64835		20	20		
Mch	H 97827		20	20		
apl	I 9080		20	20		
May	B 12275		20	20		
June	a 15101		20	20		
July	W 30030		20	20		
Aug	D 29601		20	20		
Sept	C 37030		20	20		
Oct	E 43892		20	20		
Nov	C 51975		20	20		
Dec	E 63787		20	20		
			420	420		

M.D. 10

A/c Closed 31-12-18

Ret'd per Olympic

Date 14-12-18 M.F.W.187 19-12-18

Closed

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

CONSOLIDATED ACCOUNT

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. 22820—M. & D. 7993.