1

TRIPLICATE

ATTESTATION PAPER.

No. 766851

123rd Bn. C.E.F., ROYAL GRENADIERS

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Hughes
1a. What are your Christian names?	Joseph Daily
1b. What is your present address?	59 Bathurst St. Toronto Ont. Can.
2. In what Town, Township or Parish, and in what Country were you born?	Dundee, Scotland
3. What is the name of your next-of kin?	Margaret Hughes
4. What is the address of your next-of-kin?	59 Bathurst St. Toronto Ont. Can.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	Augt 19, 1894
6. What is your Trade or Calling?	Driver
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, Joseph Daily Hughes, 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.

Joseph D. Hughes (Signature of Recruit)

Date 13th December 1915 191 J. P. Malone (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Daily Hughes, 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.

Joseph D. Hughes (Signature of Recruit)

Date 13th December 1915 191 J. P. Malone (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Toronto this 13th day of December 1915 191 .

(Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Joseph Daily Hughes on Enlistment.

Apparent Age 21 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5¾ ins.

Chest measurement.
- Girth when fully expanded 35 ins.
- Range of expansion 3 ins.

Complexion Fresh

Eyes Blue

Hair Dark

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 13th December 1915 191 . J. Hughes Capt.

Place Toronto Medical Officer.

*Insert here "fit" or "unfit."

Toronto Recruiting Depot

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.

Joseph Dailey Hughes 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.

123rd BN C.E.F.
ROYAL GRENADIERS

DEC 16 1915
ORDERLY ROOM

W. Hughes (Signature of Officer)

Date ORDERLY ROOM 191 . O.C. 123rd Bn. C.E.F. Lieut Col. Royal Grenadiers

REGIMENTAL DOCUMENTS

NAME Hughes Joseph Daley (Spt) REGT. NO. 366851 UNIT 123rd Bn. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
	TRAINING HISTORY SHEET (M.F.W. 113)				
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				38436
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
	DENTAL HISTORY SHEET (M.F.B. 465)				
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
	MEDICAL EXAMINATION (M.F.W. 129)				
1	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)				
	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	D.D. Cover				
1	Form C.D. 3.				
1	M.I. W.67.				
1	[illegible]				
2	C.R. card				
1	Pay card				

NON-EFFECTIVE BY

DEATH

Category A1

DISCHARGE

Category

Demobilization

DESERTION

11/10.
24-10
30 11
(1)

1

4065/4

W. 2589
[illegible]M-11-18

PUBLIC ARCHIVES RECORDS CENTRE

War Veterans Allowance District Authority

Address Toronto.

Mark your reply:

For attention of:

Head,
Reference Section,
Public Archives Records Centre,
Ottawa 3, Ontario.

Re: HUGHES (Surname) Joseph Daley (Christian Names) Service No. 766851.

Veteran is stated to have served during WWI. (State War or Wars)

in the following Units 123 Bn and 7 Bn C.E.

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars concerning his services: NOTE. Reg No. 766851 on CEF. DOC.

1. THEATRES OF SERVICE

PUBLIC ARCHIVES RECORDS CENTRE
MAR 15 1963
OTTAWA, ONT., CANADA

(1) South African War
Date and port of embarkation for S.A.

Date and port of disembarkation in S.A.

(2) World War I -- (If Canada only, state if with territorial limitations).

Date(s) embarked for U.K. Canada Britain France.

If Canada and U.K. only
Date(s) disembarked in Canada

Period(s) of desertion in U.K.

(3) World War II -- (If Canada only, state if with territorial limitations).

Date of embarkation

2. Date and place of all enlistments. 13 Dec 1915 Toronto Ont.

3. Date of all discharges and reason 28 Mar 1919 Demob.

4. Date and place of birth as per attestation paper. 19 Aug 1894. Dundee Scotland.

5. Marital status; if married, name in full of wife. Single.

6. Any other military service. Nil.

7. Decorations, if any. Nil.

Head, Reference Section

ARC-94(WVA-18)

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

If so, state name and address .....James Hughes 59 Bathurst Street Toronto

(10) Is your Mother alive ?.....Yes.....

If so, state name and address.....Margeret Hughes 59 Bathurst Street Toronto

.....

(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.

No

.....

.....

(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.

No

.....

.....

.....

(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.

X

.....

(15) Are you insured ?.....Yes.....

If so, in what Company ?.....Metropolitan Life Ins Co

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

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

123rd Bn C.E.F.
ROYAL GRENADIERS
JUL 21 1916
ORDERLY ROOM

Date.....

.....Lieut.-Col.
Officer Commanding.
O.C. 123rd Bn. C.E.F.
Royal Grenadiers

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

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(1) Name of Overseas Unit which Soldier joins 123rd Bn C.E.F., ROYAL GRENADIERS

(2) Regimental Number 766851

(3) Full Name of Soldier Hughes, Joseph Daly

(4) Place of Birth Dundee, Scotland

(5) Are you married, or not ? single

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

(b) Present Postal Address

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

R—122

TLH. Rank Name HUGHES, Joseph Daily, Reg'l No. 766851.

Unit 123rd.Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Toronto, 13th.Decr. 1915. Place of Birth Dundee, Scotland

Name and Address, Next-of-Kin Margaret Hughes,

59, Bathurst Street, Toronto, Ont. Canada. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

N/E. R.B. No. 7931
File R.I.
Category CANCR

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
"C"		Arrived in England S.S. "Cameronia" 18-8-16			A.F.B. 103 CHECKED 14 MAR 1917
		Embarked for France		9-3-17. N.R.	
29-9-17.	126th (123rd)	To 8. Field Amb.	Field Pte.	24.9.17	6L. A24. 5W. Elbow.
29.9.17	" "	To Duty	" "	24.9.17	" A24 " "
8-10-17	123rd Bn.	Wounded, (at Duty)	" "	24.9.17	Pte 0.62.
		Now known as 128rd Pnr Battn Can Eng 10-3-18			
12.7.18	7 Bn C.E.	T.O.S. from 123rd Pnrs	Field Spr	29.5.18	Pte 5, 123 Bns 72 d/12 7/18
17-3-19.	—"—	S.O.S. to Canada.	Bowshott.	17.3.19.	Pte 0.30.
		3/2-41- D.A. "I"		17.3.19.	

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 123rd Bn. C.E.F., ROYAL GRENADIERS

Regimental No. 766851 Rank Pte Name Hughes, Joseph Daily

Enlisted (a) 13/12/15 Terms of Service (a) Dft. W. Service reckons from (a) 13/12/15

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) Nil. Driver

CERTIFIED CORRECT. 21 MAR 1917 CAN. RECORDS, LONDON

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 Canada xxxxxxx	Halifax	8-8-16	
		Arrived England xxxxxxx	Liverpool	19-8-16	
9.3.17	123rd Bn.	Proceeded Overseas for Service	Witley	9.3.17	Pt. II 1066 9.3.17 Basil Lenning Lt. and Capt. Adj. 123rd Bn. C.E.F. Royal Grenadiers
10/3/17	M.L.O.	Disembarked	Boulogne	10/3/17	M.L.O. R-10 K.R. 2/172
14.7.17	O.C. 123rd	Ord. Comd. to 1st Army School. Batman to Mj Hood	Field	16.7.17	B-213. 3rd Edn. D-G-766
21.7.17	"	Retd. to Unit fr. L.G.C.	Field	20.7.17	B-213.
25.9.17	8.C.F.A.	S.W. Elbow adm.	8.C.F.A.	24.9.17	A-36-a-948
"	"	" " To Duty	Field	24.9.17	
29-9-17.	O.C. 123rd	Wounded (at Duty)	Field	24-9-17	B-213-Part-11-62-8-10-17.
17.11.17	"	To Trelje area. Batman to Maj Hood. Comdt.	Trelje area	10.11.17	B-213.
31.5.18	Area Comdt.	Left Maj Hood. Area Comdt.	Area Comdt.	31.5.18	K-245 (K.J. 17-145-3. C.E.B. 9-233-2.6.18
29.6.18	7 Bn. C.E.	Rejd from Comd	Field	27.6.18	B-213.
	123rd Bn	S.O.S. on Transfer to 7th Battalion. Canadian Engineers.	Field	28-5-18	Part-11-72.
	7 Bn. C.E.	T.O.S. on Transfer from 123rd Pioneer Bn.	Field	29-5-18	Part-11-5.

(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.

Hughes. J. D. 766851.

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				
18-1-19	Brit C.E.	Gtd 14 days leave	H.K.	17.1.19	B-213 Gt 2-11-27.1.19
20-2-19	"	Att to C.C. Camp f. Bramshott 31.1.19 Gt 11-20			
		ow expiration of leave on			
		S-O-S- 7th Battn. C.E.			
		proceedin to Canada Pt-2-30 D- 15-3-19			
		J.R. Buchanan Capt.			

C.A. Howell Lieut.
for Lt. Col., A.A.G.,
Canadian Section

EMBARKED S S OLYMPIC
SOUTHAMPTON 17-3-19

R. Blandford Capt.
Adjutant, No. 8 Trans-Atlantic Conducting Staff

MAR 17 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 94

MAR 28 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 94

Lieut.,
For O. C. No. 2 District Depot.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

Wound Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 766851 (Rank) Spr

Name (in full) Hughes, John Daly enlisted in

the 123rd Batt.

CANADIAN EXPEDITIONARY FORCE at Toronto Ont. on the 13th

day of December 19 15

HE served in 123rd Pioneer Batt. & 7th C.E. Batt.

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

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

Age 24

Height 5'6 5'3/4

Complexion Fresh

Eyes Blue

Hair Dark

Marks or Scars

Signature of Soldier J B Hughes

Issuing Officer G S Russell Jr

Date of Discharge No. 2 DISTRICT DEPOT MAR 28 1919 TORONTO

MAR 28 1919

Rank

For O.C. No. 2 District Depot

Date 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.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____ enlisted in

the _____

CANADIAN EXPEDITIONARY FORCE at _____ on the _____

day of _____ 19__

He served in _____

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:—

	Marks or Scars
Age	
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier _____

Date of Discharge	Issuing Officer
	Rank
	Date _____ 19__

N.B.—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.

C[illegible]C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) HUGHES. J.D.

REGIMENT 7th C.E. H.R. RANK Spr. No. 766857

Date of Examination in England _____ Date of Examination in France 13.1.19

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper — None.
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

- (*a*) In Canada — Yes
- (*b*) In England
- (*c*) In France

Signature of Dental Officer W. H. Marlatt Capt

M.B. 100 CANADIAN CORPS CAMP, BRAMSHOTT.

DATE.....19.

To:- Officer Commanding,

.....

EAR

The following is a special EYE report on the undermentioned of your Unit. Your M.O's attention should be called to it, and the case should now be paraded with this report in triplicate, the Medical History Sheet and the Casualty Form to the LOHC Board as there IS NOT a disability of the EYE. EAR.

.....Major CAMC.
Officer i/c Eye & Ear Dept.,
Medical Boards, C.C.C. Bramshott.

Name.....Number.....Rank.....Date.....

Unit.....Former Occupation.....

Original Disease or Injury.....

Date of origin.....Place of origin.....

Cause.....

Present disability.....

Present condition:-

Vision R.-

L.-

Hearing R.-

L.-

Category recommended.....

History of present condition.....

.....

.....

Did the disabling condition have origin before Enlistment?.....

If so, has it been aggravated by Service ?.....

Has the disability been caused or aggravated by Intemperance or improper conduct or by unreasonable refusal to accept treatment?

.....

.....

What is the probable duration (in months) of the disability?.....

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

M.B. ICO CANCELLING [illegible] CALL, [illegible].

To:- Officer Commanding.

.....

[illegible]

[illegible] Army [illegible] the under-
[illegible] of Para 13. [illegible] this recommendation should be
[illegible] it. [illegible] now [illegible] viewed with this
report in triplicate. The Medical History Sheet and the
[illegible]
[illegible] form to [illegible] [illegible] Liability
of the Unit.

[illegible]

Name .....Rank.....No.....

Unit.....

Original Disease or Injury .....

Date & Place .....

Cause .....

Present Disability .....

Treatment conditions:

Vision .....

Hearing .....

Orthopaedic Condition .....

.....

.....

.....

Did the disability [illegible]

It was [illegible]

[illegible]

.....

.....

Name [illegible]

Can the Minor be [illegible]

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Hughes Christian Name Joseph Daily

Examined on 13 day of December 1915
at Toronto

Approved by J. Hughes Lieut. M.O
Rank
Toronto Recruiting Depot

Birthplace City or Town Dundee, Scotland
County

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

Apparent age 21 yrs.

Trade or occupation Driver

Height 5 Feet 5¾ Inches.

Weight 115 Lbs.

Chest measurement Minimum 32½ inches.
Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks Arm Right. Left. 2
Number 2

Date	Result	Vaccinations.
18-1-16	V	E.J. Lewis Capt M.O.
		M.O.
		M.O.

When Vaccinated last Infant

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection
Pock-marks 2160

Date	Result	Anti-Typhoid Inoculations, Etc.
11-1-16	V	E.J. Lewis Capt M.O.
15-1-16	V	E.J. Lewis Capt M.O.
19-1-16	V	E.J. Lewis Capt M.O.

2/9/16 T+B Lewis Major
by Hume

Enlisted on 13 day of December 1915 at Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	G. G. B. G. (123rd Battn.) P.O.S.	766851		MAR - 9 1917
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott	6-3-19	Def Vision	"A" D.O. Overseas

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

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

Surname Hughes Christian Name Joseph Daily

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Margaret, Hughes.

L. L. Job 310.—Req. 6574.

Name of Soldier Hughes, Jos. D.
#766851, Pte. "D" Coy, 123rd Batt,

AUG 1 1916

$20

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		~~7~~ ~~L52986~~	~~20~~	
Sept.		~~S17685~~	~~20~~	
Oct.		S22825	20	
Nov.		Z26192	20	
Dec.		O32336	20	
Jan.	1917	L39977	20	
Feb.		L45060	20	
March		I ~~5~~9995	~~20~~	20 M
April		C2590	20	20 Ch
May		~~C~~9385	~~20~~	
June		B14919	20	20 Ln
July		E22840	20	C
Aug.		N29070	20	
Sept.		Z38540	20	Ln
Oct.		~~M44133~~	~~20~~	M44133 Cancelled 25/9/17 amacm
Nov.		A41684	20	
Dec.		T59215	20	
Jan.	1918		240	
Feb.				
March				
April				
May				
June				
July				

O46902

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Margaret, Hughes,

Address 59 Bathurst St.
Toronto, Ont.

AUG 1 1916

Rate $20.-

By Whom Assigned Hughes. Jos. D.

Regtl. No. 766851.

Rank Pte,

Corps "D" Coy, 123rd Batt.

PAYMENTS

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

FORM D.M.S. 1300.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
HUGHES	J.D.	766851

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	1CO. 123P.			

HOSPITAL — DATE OF ADMISSION

1. 8 C.F.AMB — 24-9-17. — HOSP.
2. — HOSP.
3. — HOSP.
4. — HOSP.

DIAGNOSIS

1. SW Elbow.
2.
3

DISPOSITION — DATE

CL. 1-10-17 A24. Dis. to duty 24-9-17. — REMARKS

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

EPITOME OF HOSPITAL TREATMENT

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

Dvd

Ham

Number 766851 Rank Spr

Surname HUGHES

Christian Name Joseph Daily

Units 6 E Theatre of War France

Date of Service 9-3-17

Remarks

Latest Address 66 Bathhurst St
Toronto Ont

Roll No. B

200m.-2-21.M. Page 12631

DESP. MAY 13 1922
REGN. No 115957

"D" CARD NO. ✓

SURNAME. Hughes.

CHRISTIAN NAMES Joseph Daily

REGL. No. 766851 RANK Pte.

UNIT 123rd Batt.

FORMER CORPS Nil.

S.A.S. Hamot 28-3-19
FOLL. to 4th Res Bn 9-4-19
to 2 Dtl

NEXT OF KIN.

NAMES IN FULL Hughes, Mrs Margaret

RELATIONSHIP TO SOLDIER Mother.

ADDRESS ~~59~~ 66 Bathurst St., Toronto, Ont.

S.A.A.F. 7/6/18

CHANGE OF ADDRESS

COUNTRY OF BIRTH Scotland, Dundee. DATE Aug. 19th 1884.

PLACE OF ATTESTATION Toronto. DATE Dec. 13th 1915.

Sailed from Halifax per S.S. "Cameronia" 8-8-16

R/C 24-3-19 133 Spr.

L. L. 90589.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Driver. RELIGION R. C.

DESCRIPTION.

APPARENT AGE 21 YEARS 4 MONTHS

HEIGHT 5 FEET 5 3/4 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 3 INCHES

COMPLEXION Fresh. EYES Blue. HAIR Dark.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Toronto, Ont. DATE Dec. 13th, 1915.

NAME Hughes, Joseph Daily

REGT'L No. 766851

H. Q. FILE No. 649.

RANK AND CORPS Pte. 12 3rd. Dnl.

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	C.	NATURE OF CASUALTY
M.6132 9-2	30-9-17		Adm. 8th Fld. Amb. Depot G.S.W. elbow, returned to Regt. duty 24th Oct. 17

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 24	8 Can. fld amt.	24-9-17	R.W. Felbow.
a 24	Duties to duty	24-9-17	" "

FORM R. 149.
7106—250m—7/2/17.

Name HUGHES, Joseph Daily Rank Pte Reg. No. 766737

Unit 123 Pioneers.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24-9-17	8 b 2 A	[illegible]	Pillow		M 6 32	
24-9-17	Dis to Duty (3929)	[illegible]	— do —	a 24		
					[illegible]	

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

No. 766851 RANK Pte. NAME Hughes J. D.

T.O.S. Transfd from Base UNIT 123rd Battalion
Armouries Toronto 17-12-15
D012 of 17-12-15

M.D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915	✓		
Dec 17	Dec 31	✓		
1916	1916	✓		
Jan		✓		
Feb		✓		
mar		✓		
april		✓		
May		✓		
June		✓		
July		✓		
Aug. pay list not available				

UNIT SAILED
AUG 7 1916

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.8.16 ~~1/7/18~~		EFFECTIVE DATE:-	
AMOUNT:- 20		AMOUNT:-	

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

Margaret Hughes (Mother) NR.	
66 ~~59~~ Bathurst St. Toronto ONT.	

NAME:- HUGHES Jas. D.

NUMBER:- 766851

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 123

DATE ACCOUNT FIRST OPENED:- 1.8.16

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

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
13/2/19	285		H 85				
16/3/19	789	Brantford	H8 ~~85~~				
						L Pde Bde 36.22 Nov	

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Leave to Can 28/2/19 - 3290 Ref. 17-2-19 Brantford M.D.2.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Ford								30 13		
Apr.	P. Pay	33		A Pay				20			
				AR 40 173 4/4/18	4 46						
		33		AR 125 123 26/4/18	~~3~~ ~~5~~ 3 57			20	35 10		
					803						
May	P. Pay.	34 10		A Pay				20			
				AR 143 3rd 66 5/5/18	4 46						
				AR 992 3 Dir Leg 24/5/18	4 46				40 28		
		34 10			897			20			
June.	P. Pay	33		AR 1211 6/6 3 Cdn Sig	4 46			20	5		
				AR 1499 18/6	357				45 25		
		33 –			803			20			
JUL											
	Pay	34 10		100 3/7 7 C E 1/2	357			20			
				170 16/7 7 C E 2/2	357				54 21		
		34 10			714			20			
Augt	Spl Pay	34 10		C.A.P.				20	66 31		
				225 14/8 7 C E	7 14				59 17		
		34 10			7 14			20			
Sept	" "	33		292 2/9/18 7 C E.	357				72 17		
				356 14/9/18 -"-	357						
				C.A.P.				20	65 03		
		33			714			20			
OCT		34 10		420 1/10/18 ✓	373						
				495 16/10/18 ✓	373						
				C.A.P.				20	71 67		
		34 10			746			20			

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									71 67		
	Pay	101 20		561 - 2/11/18 - T.E.	3 73						
				656 20/11/18 ✓	13 04				41 20		
				736 - 3/12/18 ✓	3 73						
				C.C.d.					112 87		
		101 20			20 52			60 -	92 35		
								60			
Feb	P.R.	30 80		AR-867 - T.E. - 19-12-18	4 66						
				" 990 " 3-1-19	3 73						
				" 12H " 14-1-19	68 13						
				AR-1072 " 15-1-19	9 33				6 50		
				C.C.R.	85 85			20	17 30		
				AR-286 - Cable - 13-2-19	4 87						
				" 89 ✓ 17-2-19	48 67						
				" 802 ✓ 8-3-19	4 87				41 11		
		30 80		L.P.C. END	144 26			20			

13.4 4
17.20
36.24

S.S.F. 241 - Transfer to Can
Eff. 17-3-19 - 2 E.R.B.

P. 559

MARRIED OR SINGLE S.

PLACE OF BIRTH Dundee Scot

NAME AND ADDRESS OF NEXT OF KIN Hughes. ~~Jos D.~~ Margaret. 59 Bathurst St. Toronto.

RELATIONSHIP OF NEXT OF KIN Mother.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

0

REG'L NO. 766851. RANK Private NAME Hughes Jas D.

IF IN PERMT. CORPS WHAT UNIT } UNIT 123rd Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION TORONTO, ONT.

DATE OF ATTESTATION 13th December 1915.

TRANSFERRED TO	DATE	AUTHORITY

ASSIGNED PAY MONTHLY $ 20 nt DATE EFFECTIVE 1.8.16

PAYABLE TO Hughes Margaret. 59. Bathurst St. Toronto 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)

G.J.

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
																													5 00	5 00		5 00			Balance from Canada
Aug.	1-31	31	1 00	31 00	31	10	3 10								34 10	39.								7 30				20 00		27 30	180				
Sept	1-30	30	1 00	30 00	30	10	3 00								33 00	52	14/9/16	197	29/9/16					4 87	2 43			20 00		27 30	7 50				
Oct	1-31	31	1 00	31 00	31	10	3 10								34 10			181	17.10.16						4 87			20 00		27 30	14 30				
																		199	30.10.16						2 43										
Nov.	1-30	30	1 00	30 00	30	10	3 00								33 00	264	15/11/16	326	29/11/16					4 86	4 87			20 00		29 73	17 57				
Dec	1-31	31	1 00	31 00	31	10	3 10								34 10	368	15/12/16	395	31/12/16					2 43	9 74			20 00		32 17	19 50				
Jan	1-31	31	1 00	31 00	31	10	3 10								34 10	[illegible]	[illegible]	486	30/1/17					7 30	4 86			20 00		32 16	21 44				
				18 40																															
Feb	1-28	28	1 10	30 80											30 80	535	15/2/17	559	22/2/17					7 30	4 87			20 00		32 17	20 07				
																		572	26/3						2 62										
Mar	1-31	31	1 00	34 10											34 10			620	14/3						2 62			20		25 24	28 43				
Apl	1-30	30	1 00	33 00											33 00													20		20	41 93				
May	1-31	31		34 10											34 10	106	28/4							2 61				20		23 23	50 80				
																335	15/5							2 62										
June	1-30	30		33											33	160	15/6							1 67				20		25 35	58 45				
																219	28/6							2 68										
July	1-31	31		34 10											34 10	268	15/7							2 67				20		22 67	69 88				
				401 50											401 50									4731	3931			240	5	331 62	69 88				

76851, Pte 'Hughes' J.D. a/Pay $2.00 bar.

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
Ford			401	50											401 50
Aug 31	31	1s 10	34	10											34 10
Sept	30		33												33
			468	60											468 60

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
320	27/6						
417	26/7	534	1/9				
337	1/7	458	4/8				

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
4731	3931			240	5	331 62	69 88				
267				20		22 67	81 31				
535	265			20		37 85	76 46				
446	536										
5979	4735			280	5	392 14	76 46				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SEP. ALLCE	ENG.
1917							Eng Can a/Pay					
Sep.	bal brot for'd	~~76 46~~							76 46			
Oct.	1 Pay	34 10		a/Pay				20	90 56			
		34 10						20				
Nov.	1 "	33 00		a/Pay				20				
				AR 706 123 13/4/17	4 46							
				AR 650 do 7/10/17	2 57							
				AR 591 do 16/9/17	2 68							
Dec.	1 "	34 10		a/Pay				20	106 95			
		67 10			10 71			40				
1918 Jan.	1 Pay	34 10		a/Pay				20				
				AR 754 123 4 11/17	4 46							
				AR 1907 3rd Div Sig 20/11/17	13 38				103 21			
		34 10			17 84			20				
Feb.	1 Pay	30 80		a/Pay				20				
				AR 2718 3rd Div Sig 17/1/18	3 57							
				AR 1055 2nd Bmk 29/1/18	4 46							
				AR 1114 123 9 7/8	8 92				97 06			
		30 80			16 95			20				
Mar	1 "	34 10		a/Pay				20				
				AR 2563 Ch 58463 123 9/2/18	73 00							
				AR 1218 123 4 3/8	4 46							
				AR 1325 123 17 3/18	3 57				30 13			
		34 10			81 03			20	30 13			

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

H 10727

Date of Assignment Aug 1/16.

8L10719 Div

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 766851.

Rank Pte. Promoted Reverted Discharge

Soldier's Name Jos. H. Hughes.

Battalion "D" Coy. 123rd Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Margaret Hughes

Address ~~59~~ 66 Bathurst St Toronto Ont.

Change of Address

1

2

3

4

09126-J-75

	Date 1917		Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec. 31					340	✓ 340	
Jan	S	67341			20	20	B
Feb	K	72517			20	20	
Mar	D	95561			20	20	- -
Apr	A	9911			20	20	- -
May	A	5686			20	20	- -
June	B.	15851			20	20	- -
July	U	32055			20	20	- -
Aug	7	31111			20	20	- -
Sept	S.	46428			20	20	- -
Oct.	J	51978			20	20	
Nov.	E	61161			20	20	
Dec	K	62869			20	20	
JAN	F	73251			20	20	
FEB	E	80192			20	20	
MAR	E	91051			20	20	
APL							
					640	640	

A/c Closed 31-3-19

Ret'd per OLYMPIC

Date 26-3-19 M.F.W.187

Closed APL. 3-4-19.

MD 2

MRD Dishoy 80534

A STENCIL HAS BEEN MADE FOR THIS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 7593.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7493.

"OLYMPIC" 26-3-19

DISPERSAL "I"

H. 2333.

AUDITOR | PAYMASTER

M. & R S.

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

REGT. No. 766851 RANK Spr. NAME (IN FULL) HUGHES J.D (BLOCK LETTERS SURNAME FIRST)

28

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. 123rd Bn IF IN P.F. WHAT UNIT? Same

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 13-12-15. TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 DATE EFFECTIVE 4 closed by Ottawa 31.3.19

PAYABLE TO Margaret Hughes. (mother) RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 66 Bathurst St Toronto

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE Toronto. DATE 28-3-19 REASON Demob. AUTHORITY D.O. 94 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																						T.O.S. 17-3-19 D.O. 94
28.2.19																											36	24			36	24	36	24			SUBS. TO D.O.
31.3.19	31	1/10	34	10																																	$36.24 Rs Bal Eng 2/126
					35	00																															P.A.U. 1/3/19 to 31/3/19.
																			4	87																	Clothing allce.
					70	00																															Separation Allce.
											ck.						68	12					20	00													P.A. Paid. W.S.G.
																	48	7	5	00																	March 19.
									139	10																									102	86			Beat Armistice Day.
																							70	00														Less W.S.G. Paid as above
	11/4																										3	30										8.32 = 8/Cr. 3 days. Ord
183 dys		1.20	00						120	00							Mar	28																	73	30	346	70	1st W.S.G. Paid by #2 D.D.
																	Apr	28	259311				66	70											140		280		
																	May	26	357262				70												210		210		
															A.Q.#72		June	25	687872				70												280		140		
															A.Q.91		July	18	996039				70												350		70		
															A.Q.119		Aug	22	1376921				70												420		Nil		
									420	-													41	6 70					3	30					420	-			W.S.G. PAID IN FULL

Paid

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

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

War Service Badge
Class "A" No. 157269

D.A. I. 67.
O.G. 11.47.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Ca.

1. No. 766851
2. Rank. Spr.
3. Name. Hughes. Joseph Daley.
4. Unit. 7th Can Engrs. Batt.
5. Date of Discharge MAR 28 1919 Place Toronto, Ont.
6. Reason for Discharge Demobilization
7. Authority. No. 2, D.D., Part II, D.O.No. 94
8. Proposed Residence after Discharge 66 Bathurst St Toronto

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.?

J. D. Hughes.
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date MAR 28 1919

For G. S. Russell Lt.
O.C. No. 2 District Depot.
Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

awt.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W.23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment) Statement O.M.G. Form (D.O.S. 2).
    and Clothing)
12. Last Pay Certificate (P.331). & Duplicate
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 11

Lom

Date 13:3:19

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 Bramshott DATE 6/3/19

1. 1 (a) Unit 7 Batt C.E. (b) Regimental No. 766857 (c) Rank Sapper

(d) Surname Hughes (e) Christian name Joseph Daily

(f) Home address 59 Bathurst St Toronto Ont.

(g) Next of Kin Margaret Hughes (h) Relationship Mother

(i) Address of Next of Kin 59 Bathurst St Toronto Ont.

2. Age last birthday 24 Date of birth Aug 19th 1894

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date 13-12-15

4. Personal description: estimated

(a) Height 5' 2" (b) Weight 125 (stripped) (c) Complexion fair

(d) Colour of hair dark (e) Colour of eyes blue (f) Identification marks, Scars, etc. nil

5. Former trade or occupation Driver

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
	3	90

	Periods	
	From	To
Canada	13-12-15	8-8-16
England	14-8-16	9-3-17
France or other theatres of War	10-3-17	13-2-19

7. Original disease, or injury Cpd. Hyperopia Astigmatism R & L.

(a) Date of origin Childhood (b) Place of origin —

(c) Cause Congenital

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.)

Defective Vision R & L.

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.)

Vision R. 6/12 cg 6/9

L. 6/36 cg 6/12.

(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).)

Has always had defective Vision

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*).)

G.S.W. Rt. elbow slight - 29-9-17.

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

slight scar rt. elbow

11.—(*a*) Did the disabling condition have its origin before enlistment? yes.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

no

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? permanent

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

special eye report attached signed 5/3/19

J.H. McClear Capt Canc.

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

none

J Gurochean 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 J. D. Hughes 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

J D Hughes Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

19. Is the invalid fit for

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

(*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.)
R. T. b. auth. A.G. W. 9083 of 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.

Chas. P. Sparks Capt. — *President.*

PLACE Bramshott — A.G. Dwyer Capt.

DATE 6-3-19. — } 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 — APPROVED BY

for H. Macdonald Lt Col
Assistant Director of Medical Services. — *Director-General of Medical Services.*

DATE 6-3-19 — DATE.....