7878 O-Inf-297

ATTESTATION PAPER.

No. 433180

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

A

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Clifton Stanley Kirby
2. In what Town, Township or Parish, and in what Country were you born?	Toronto, Canada.
3. What is the name of your next-of-kin?	Leonard St. Kirby (Brother)
4. What is the address of your next-of-kin?	36 Woodlawn Ave Buffalo N.Y.
5. What is the date of your birth?	January 21st 1893.
6. What is your Trade or Calling?	Farmer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated?	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.

Clifton S. Kirby (Signature of Man).

C. Y. Weaver (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Clifton Stanley Kirby, do solemnly declare that the above answers made by me to the above questions 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.

Clifton S. Kirby (Signature of Recruit)

Date May 7th 1915 C. Y. Weaver (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Clifton Stanley Kirby, 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.

Clifton S. Kirby (Signature of Recruit)

Date May 7th 1915 C. Y. Weaver (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 Edmonton this 7th day of May 1914.

C. Y. Weaver (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

C. Y. Weaver (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

7878

Description of Clifton S. Kirby A on Enlistment.

Apparent Age 22 years 8½ months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 11½ ins.

Chest measurement:
- Girth when fully expanded 37 ins.
- Range of expansion 4 ins.

Complexion dark

Eyes Gray

Hair dark

Religious denominations:
- Church of England Yes
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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 7 1915

Place Edmonton

L C Harris
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.

Clifton Stanley Kirby 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)
Lt Col.

Date May 7th 1915

REGIMENTAL DOCUMENTS

NAME Kirby Clifton Stanley REGT. NO. 433180 UNIT 49th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY DEATH
4	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	49				Category
2	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)					
2	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
3	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)				10501	
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					Med Unfit
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
1	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	R-122.					
2	Pay Cards					
2	M F W 42					
4	A.F.I. 1237					
2	A F B - 181					
1	M F W - 125					
7	A F W 3068					
					407120	

PUBLIC RECORDS OFFICE

W. 2589
100M-11-19
17?2-39-1377

Forms
I. 1237
10

12443

7878

F

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
433180	433180	Pte	Kirby	Clifton S.

Year	Unit.	Age.	Service.
1916	9th Res. Batt.	23	10/12

Station and Date.

UBCH.

27-3-16

Disease Epilepsy.

Has been boarded and is awaiting sailing to Canada.

Discharged on order from CCAC

Apr 6. 1916

A J Mackenzie
Major

DISCHARGED.
6 APR 1916
Canada

*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.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

7878 C

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 4th Battalion C.E.F.

Regimental No 433180 Rank Pte: Name Kirby B. S.

Enlisted (a) 7-5-15 Terms of Service (a) Duration of War Service reckons from (a) 7-5-15

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) ____

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				
		Discharged in Canada No Longer Physically fit for War Service K.R+O. 392 XVI			

Jas Lever Lt
for O.C.
C.C.A.C.

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

C7 E 7878

Rank | Name KIRBY, Clifton Stanley | Reg'l No. 4 33180

Unit 49th Bn. | If in perm. Corps, What Unit? | Married or Single Single ✓

Place and Date of Enlistment Edmonton Alta 7th May. 1915 | Place of Birth Toronto Can.

Name and Address, Next-of-Kin Leonard H. Kirby,

369 Woodlawn Ave, Buffalo, N.Y. | Relationship Brother

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ D | Payable to | Relationship

Discharge, Date and Place | Reason | Character

C.E.A.C.
N/E. R.B. No. 4077
File R.L.
Category Can. M. V.

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
		Arrived England		14/6/15	
		Embarked for France		9 OCT 1915	
19-11-15	W.O.	adm No 1 Fild Ambulance	France	28-10-15	(Infected Knee) Rpt 48.
23-11-15	Do.	Returned to Duty	Do	12-11-15	(Infected Leg) Rpt 50.
12-12-15	Do.	No 6 Field Ambulance	Do.	25-11-15	(Influenza) Rpt 61
15-12-15	Do.	Divl Rest Station	6th Can Fd amb	1-12-15	Do Do Do 62
22-12-15	Do	Discharged to Duty	France	6-12-15	Do Do No 66
21-12-15	Do	Div Rest Stn No 6 C F Amb.	Do	21-12-15	(Myalgia) Rpt No 91.
10-1-16 ~~28-12-15~~	Do.	No 1 Mid Div Cas Clg Stn	Do	28-12-15	(Torecolitus) Do 74
21-1-16	Do	Epilepsy	No 2 Can Sty Hosp Boulogne	16-1-16	(Epilepsy) Cas Rpt 99.

PTO 14

D 7878

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
29/1/16	W.O.	Jarrow Military Hospital	Broadstairs	22/1/16	Cas Rpt 83 (Epilepsy)
Do	OC 49th	Invalided Transf to Eng.	France	22/1/16	D.O. Pt II No 5.
3-2-16	OC 9th	Taken on Strength	E Sandling	22/1/16	Rtt DO #34.
16.2.16.	C.C.A.C.	Taken on Strength	Folkestone.	15.2.16	Pt. II — 6:
11.4.16.	49th Batt.	Trans to Moore Bricks	Shorncliffe	26.3.16.	C.L. B.21. (& Pt II O.72 CCAC)
25-11-16	do	Disch Moore Bricks Hospital	do	7-4-16	" " " 165.
15-4-16	CCAC	S.O.S. discharge Canada	F. stone	7-4-16	Rtd O 111

CHECKED. 5th Dec, 1916.

(641)—Wt. W1751-1403.—500,000.—5-15.—C. & G. Forms B. 103/1.

7878

Army Form B. 103.

J89 CCAC

Casualty Form—Active Service.

C

Regiment or Corps 49th Battn. C.E.F.

Regimental No. 433180 Rank Pte. Name Kirby C.S. "A"

Enlisted (a) 6/5/15 Terms of Service (a) Duration of War Service reckons from (a) 6/5/15

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) _____

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					
9.10.15	OC 49th Bn.	DISEMBARKED BOULOGNE P 10		15		Nom. Roll 10/Sig/49/1
30.10.15	OC 49th Bn.	Injured leg	leave	Not Stated	29.10.15	B213
30.10.15	OC No3 Con Field Amb.	Injured leg.	adm. Fm.	No 1 Field Amb.	28.10.15	A36
31.10.15	OC. No1 Con. Fld Amb.	do	adm.	do	28.10.15	A36.
13.11.15.	OC 49th Con Bn.	Not Stated.		To Duty.	12.11.15.	B213.
14.11.15	OC No1 Con. Fld Amb.	Injured leg.	Dis	do.	11.11.15.	A36.
27.11.15	OC 49th Bn.	Rheumatism	leave.	Not Stated	26.11.15	B213
do.	OC No 6 CFA.	Influenza	adm.	No 6 CFA	25.11.15	A36.
4.12.15	OC No 6 CFA	do.	Trans.	ORS No 6 CFA	1.12.15	A36.
do.	OC ORS No 6 CFA.	do	adm.	do	do	A36.
				With Unit	6.12.15	B213
11.12.15	OC 49th Bn.	Returned to duty.			do	A36.
do.	ORS No 6 CFA	Influenza.	Dis	To Duty.		
25.12.15	OC No 6 CFA.	Rheumatism	adm.	No 6 CFA.	19.12.15	A36-59
do	do	do	Trans.	ORS No 1 CFA	21.12.15	A31-59
do	do ORS	do	adm.	do	do	A31-6.

(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.

C

7878 1978

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.
1.1.16	OC N.M. Div Cas. C. Sta.	Tonsillitis		N. Mid Div Cas. Clg. Sta.	28.12.15	A36 DCS 63.
do	OC DRS No 6 CFA.	Myalgia	Trans.	Mt. Des Cats	do	A36 DCS 66
8.1.16	OC No 12 CCS.	Contusion Back.	Adm.	No 12 CCS.	4.1.16	A36 DCS 69.
do	OC N.M. DCCS.	Tonsilitis	Adm.	N.M. DCCS.	28.12.15	A36 DCS. 72
do	do	do	Trans.	To Base.	4.1.16.	do.
16/1/16.	OC No 2 Con. Sty. Hos.	Epilepsy	Adm.	No 2 Con. Sty Hos.	16/1/16.	W3034-761
15.1.16.	OC 49th Bn.	Returned to Duty.		With unit	17/1/16.	B213 DCS 73.
22.1.16.	OC H.S. St. David	Epilepsy	Trans.	To England.	22/1/16.	A36 DO Part II No 5 of 29/1/16.
16.1.16	OC No 2 CFA.	do	Adm.	No 2 CFA.	14.1.16	A36 DCS 76.
do	do.	do	Trans.	No 1 CFA	15.1.16	do.

9-10-15
22-1-16

C. V. Hinch Lieutenant
for Lt Col. D. A. A. G.

	Dis Dpo	S.O.S. Med. Unfit	Quebec	22 4/16	April Paylist.

D. Pitchie
for D of R.

7878

Forms
I. 1237
10

F

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
0232	433150	Pte	Kirby	Clifton S.

Year	Unit.	Age.	Service.
1916	49 Bn. C E F.	24	-8

Station and Date.	Disease Epilepsy.
No 2 Can Stat Hosp 16-1-16	Pt while a school was subject to attacks several times a year, Since then he has never been bothered until he had trench fever which left him run down, and any extra fatigue has been the occassion of an attack
	Treatment, rest and ordinary diet
Jan 18	Has had no attacks since coming here
	Transfer to Eng Class B.
	R Jno Ewen Capt

*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.	

CLINICAL CHART.

(To be attached to Case Sheet.)

7878

Army Form B. 181.

Corps 49 Bn. C.E.T. Military Hospital No 2 Con Stat

No. 423180 Rank and Name Pte Kirby Clifton. L. Age 24 Service -8

Disease Epilepsy Date of admission 16-1-16 Date of discharge 22-1-16 Result

Dates of Observation	17	18	19	20	21	22
Days of Disease						
Temperature Fahrenheit — Time A.M.P.M.						
107°						
106°						
105°						
104°						
103°						
102°						
101°						
100°						
99°						
98°						
97°						
Pulse per Minute	80					
Respirations per Minute	20					
Motions per 24 hours	1	1	1	1		

Transferred to Eng. Canad

(2669.) W9043—1195. 800,000. 12/14. C.P., Ltd. Forms/B. 181/3.

Signature Eda P. Denmark Sister In charge of case.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE 9.6.77

NAME *NOM* KIRBY, CLIFTON STANLEY

Service No. / *Matricule No* 433180-Army-W.W.1

CPC No. / *CCP No* 225042

WVA No. / *AAC No* 234926

Information Received from:
Information reçue de: Memo from S.P.M.E.--VI Dist.--C.P.C.

Date of Death
Date du Décès 7.2.77

Place
Endroit Victoria, British Columbia

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC

Pour le chef,
for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) BIL.

4362

Forms
I: 1237
10

399423

F 7878

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Rank.	Surname.	Christian Name.
4362	Pte	Kirby	Clifton S.
Year	Unit.	Age.	Service.
1915	49th Batter Coy A.	22.	4/12

Station and Date.

In B.C.H. Stonecliffe

Disease Ingrowing toe nail

Nail on right great toe ingrowing causing inflammation in inturned flesh
Part of nail & matrix removed

21687

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

Station
and Date.

No 433180

Pte C. S. Kirby.

49th. Batt.

14

WILL

In the event of my death I give the whole of my property and effects to L. S. Kirby 369 Woodlawn Ave. Buffalo, New York State, U. S. A.

Date. Oct 8th/15.

(Signed) Clifton. S. Kirby.

In the event of my death I give the whole of my property and effects to. _____

Master Sidney Latam, Bremner Alberta. Canada.

Signed Clifton S. Kirby
Reg No. 433180
A Coy. 49 Battn.

S. H. Leach.
Oct. 8/15

Bremner, Alta.

RATES OF REGIMENTAL PAY.

OFFICERS, ALL ARMS. *Per Diem.*

	Pay.	Field Allowance
Colonel	$6.00	$1.50
Lieut-Colonel	5.00	1.25
Major	4.00	1.00
Captain	3.00	.75
Lieutenant	2.00	.60
Paymaster	3.00	.75
Quartermaster	3.00	.75
Nursing Sister	2.50	.60
Command Pay	1.00	
Adjutant in addition to pay of Rank	.50	

WARRANT OFFICERS, N. C. O's and Men.

Warrant Officers	$2.00	.30
Quartermaster Sergeant	1.80	.20
Orderly Room Clerks	1.50	.20
Pay Sergeants	1.50	.20
Squad, Battly, or Co. Sergeant-Major	1.60	.20
Colour Sergeant or Staff Sergeant	1.60	.20
Squad, Batt'y, or Co. Q. M. S. S.	1.50	.20
Sergeants	1.35	.15
Corporals	1.10	.10
Bombardiers or Second Corporals	1.05	.10
Privates, Gunners, Sappers, etc.	1.00	.10

Working Pay in addition to pay of rank varying from $1.00 to 50c. per diem, according to qualifications, is granted to Artificers, Motor Car Drivers, Cooks, etc.

Emd vK

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

21893/436

10112-C-1

Name Kirby, Clyton, Stanley
Surname Christian Name

Regimental Number 433180 Rank Pte. Address (in full) Bremner, Alta.

Unit 49th Batt.

Original Unit

District where paid Ottawa.

Date of Discharge 7/5/16.

P. D. P. Filing Number 2K5.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100	10	3011	23/8/17	33 00	3009	24/9/17	33 00	3007	24/10/17	27 56	6 54	93.56
1910	1st	G-37041	13-3-19	70.00								
1641a	2nd	G34589	13-3-19	70 00								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:
34589 }
37041 } Cancel ck not called for — Tracer 12174 — 7/5/19 JJ

Advice C.P. 7/9/17

Dec'n No 21893/436 W.S.G. File No 10112-6-7

Award 4 days at $70.00 per day $ 280.00

S.S.A. ..... months at $$ .... per mo. $ $100.10

Less P.D.P. Credited $179.90

$

Less further debit balance $ 179.90

Not due paid as below

TO SOLDIER TO DEPENDENT

	Ag. No	Ch No	Amount	Ag. No	Ch No	Amount
0						
1	~~1910~~	~~37041~~	~~70~~			
2	~~16410~~	~~34589~~	~~70~~			
3			~~39.90~~			
4	~~29250~~	~~477837~~	~~70.00~~	Cancelled 12/8/19 - 15789 DOC		
5	~~663~~	~~505811~~	~~109.90~~	Cancelled 12/8/19 - 15789 DOC		
6						
7	~~41534~~	~~38528~~	179.90	Total		

~~13/3/19~~

~~"~~

21.7.19 W.C.G.

8.11.19

GEN'L AUDITOR
Posting checked by
D Shimmin
Date 15/7/19

~~c/o Wilson Construction Coy.~~

~~Hargwen~~

~~Alta~~

~~#7605 R.N.W.M.P.~~

~~Vancouver B.C.~~

c/o George Gellard.
Correspondence Dept. 4/11/19
P.O. Vancouver B.C.

① ~~Duplicate 2nd payment on A.G. 29250~~

~~$70.00 Chg. 477837~~

~~RH~~

{37041 - $70 - Retd & Cancelled - Not Called For}
{34589 - $70 - " " " " "}

Tracer #12174

477837 - Remailed to new add 29.7.19 W18

R W113 13-12-19

GEN'L AUDITOR
Posting checked by
W Black
Date 1-8-19

DRR.

M. F. W. 41.
10m.—4-16.
1772-39-889.

117

Name Kirby, (Pte) Clifton S.

Regimental No. 433180

Unit 49th Bn.

Date of enlistment

Place of "

Married (yes or no) no

Amount of pay assigned monthly $ 20.00 31/3/16

To whom payable A/A no.

~~Name~~ Home and address of next-of-kin Bremner Alta.

Date and place discharged

Reason for discharge Discharged

Character on discharge

Metagama 19/4/16 Class I H.Q. 649-K-649

L. L. Job 502 M. & D. 6578.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
30/3/16	29/3/16 9/5/16	39	100	39 00	39	10	3 90	60 15 Subs 9 00	112 05			102 32		9 73	112 05	L.P.C. Eng × D.D. Quebec Paid. ° Paid on Boat
		2/7 Transf. to Suspense a/c. K-2.							6 54	Rec'd by P.D.P. List 3.				6 54	6 54	× Amd L.P.C. new 24/8/16 On list to Mr. Bull 6-9-17.

5/9/16 wrote him to refund 6.54

21/10/16 no reply on file –

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Rank Btc. Name KIRBY, Clifton Stanley Reg'l No. A.33180

Unit ~~49th Bn.~~ C.C.A.C. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Edmonton Alta 7th May. 1915 Place of Birth Toronto Can.

Name and Address, Next-of-Kin Leonard H. Kirby,

369 Woodlawn Ave, Buffalo, N.Y. U.S.A. Relationship Brother

Assigned Pay Monthly $ 20 ~~Apr~~ Oct. 1/15 Payable to Mr. Mark Latam

Bremner, Alberta, Canada. Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Canada 29 3/16 Reason C.C. 1. 29 3/16 Character

PAY OFFICE, N.E. BRANCH MAY 27 1916 CANADIAN CONTINGENTS

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
June 1	30	30	1	30	30	10	3.	2 50	35 50			22 50			22 50	3. 10	Bal from May
July 1	31	31	1	31	31	10	3 10		34 10			32 50			32 50	14 60	
		Adjustment of Exchange						1 47				55				16 07	
Aug 1	31	31	1	31	31	10	3 10		34 10			29 20			29 20	20 97	
Sept 1	30	30	1	30	30	10	3		33.			26 77		1 42	28 19	25 78	R Warrant 1/4 1819
Oct 1	31	31	1	31	31	10	3 10	25 78	59 88			7 48			7 48	52 40	
Nov. 1	30	30	1.	30	30	10	3	52 40	85 40			5 29			5 29	80 11	
Dec 1	31	31	1.	31	31	10	3 10	80 11	114 21			13 96	60		73 96	40 25	
Jan. 1	31	31	1.	31	31	10	3 10	40 25	74 35			2 61	20		22 61 ~~30~~	51 74 ~~54 35~~	Hd. to 9th Res. Bn. D.O. No. 5 of 29/1/16.
1.2.16	14. 2/16	14	1	14	14	10	1 40	51 74	67 14				20		20	44 14	Trans C.C.A.C.
15.2.16	29.3.16	44	1	44	44	10	4 40	47 14	95 54			14 49 60	20		35 39	60 15	JMS 5.2.16 L.P.C. to C.C. Dr E.D.
Bal on Transfer to N.E. Bch								60 15		#7 Hosp 31 29-2-16 164 15-3-16 102 29-2-16		2 31 2 36 87			6 54	53 61	Auth. C.C. 1 29 3/16 S.P. rend'd 31 3/16 eff 1 4/16 P.B. verified & filed
								53 61									A.L.P.C. 16/6/16 = $54 61
N.E. Sept 1916.									53 61					53 61	53 61		Actnc Ottawa. H.9 649.K.649. 5/9/16. P.L. K35 - 479. To recover

Transd to "Canada Disc'ge a/c"

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

L. L. Job 85095—M. & D. 5953.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

527

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mark Latam

Address Bremner Alta.

Rate $20. Oct 1-15

2 M 2 12/15 W R.S.

By Whom Assigned ~~Kirby~~ Kirby, C.S.

Regtl. No. 433180

Rank Pte

Corps 49th Batt. A Co.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				P.D.P. 27/7/17. H.J.M.
July				
Aug.				
Sept.				
Oct.				Returned on Metagama
Nov.				
Dec.				
Jan.	1916	V10657	80—	19-4-16.
Feb.		M 13534	20	F.X. =
March		Q16524	20—	Stop Payt apl 1/63 m 31 3/16 JCS
			120	

COPIED FOR 3 CASUALTIES.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

528

Sheet No. 2. Mark Latam

L. L. Job 89002.—Req. 6213.

Name of Soldier ~~Kirley~~ Kirby C. S.
"A" Co. 49th Battn.

Month.	Year.	Cheque No.	Amt.	Remarks.
				$20.00
April	1916	~~X1056~~ Cancelled	~~20~~	Stop Payt Apl 1/16 3 m 31 3/16 JSy
May				
June				
July				
Aug.				Returned on Metegama 19-4-16 F.X. E.W.E.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
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.				

D.M.S. 1300.

Surname	Christian Name or Names		Reg. No.
Kirby.	C.	S.	433180.
Rank	**Unit**	**Co.**	**Troop** / **Batty.**
Pte.	49th. Battn.		

Hospital: No.1 Fld.Amb. — Date of Admission: 28-10-15.

Transferred Div Rest Stat. # 6 Fld Amb. Hosp. 1.12.15

" " " " " " Hosp. 21.12.15

N.M.D. Car Clear Stat. Hosp. 28.12.15

2 Can Stay Boulogne. Hosp. 16.1.16

Diagnosis: Infected leg.

Later Diagnosis (if changed):
(1) Influenza
(2) Myalgia
(3) Tonsolitis. Epilepsy

Additional Diagnoses: if more than one state present

DISPOSITION: To Duty — Date 12.11.15

" " — " 6.12.15

REMARKS: Dis. 7.4.16.

C.L. 19-11-15. 48.
C.L. 23.11.15 50
C.L. 15.12.15 62
C.L. 22.12.15 66
C.L. 4.1.16 71
C.L. 10.1.16 74
C.L. 21.1.16. 79
C.L. 29.1.16. 83
11-4-16 B 21
25.11.16 B 165.

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	York. Mil. Broadstairs	22.1.16
2.	Moore Barracks	26.3.16
3.		
4		
5.		
6.		
7.		

7878

H. Q. FILE No. 649-

NAME Kirby, C. S.

REGT'L. No. 433180

RANK AND CORPS Pte. 49th Battalion.

CABLE	
NO.	DATE
J.223	

NATURE OF CASUALTY

NO. 667

FOLL.

Returned to Canada per the S.S. "Metagama" April 7th, 1916 - Epilepsy.

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

7878

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
H8(1)	No. 1. Fld. Amb.	28-10-15.	Infected leg.
50	" " "	12-11-15.	(Infected leg) Returned to Duty.
61	No. 6 Can. Fld. Amb.	25-11-15.	Influenza.
62.	Div. Rest Stat. (16th Can. Fld. Amb.)	1-12-15.	Influenza.
66	No. 6. Can. Fld. Amb. Div. Rest Stat.	6-12-15.	(Influenza.) Disch. to Duty.
71	Div. Rest Stat. No. 6 Can. Fld. Amb.	21-12-15	myalgia.
74.	North Mid. Div. Cas. Cl. Stat.	28-12-15	Tonsilitis.
79.	#2 Can. Stat Boulogne	16-1-16.	Epilepsy
83.	Yarrow Mil. Broadstairs	22-1-16	" " " "
B21.	Moore Bks. Shorncliffe	26-3-16.	Epilepsy.
B165.	Discharged	7-4-16.	Epilepsy

E

Name Kirby, C.S. *Rank* ~~Sapper~~ Private. *Reg. No.* 433180.

Unit 49th Battalion.

Next of Kin Canada

Date	1915.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
28-10		No.1. Field Ambulance,		Infected Leg	48.		
12-11		Returned to Duty		"	50		
25-11		6. Can. Field Amb.		Influenza	61		
1. 12		Div. Rest Station		"	62		
6 12		Dis to Duty		"	66		
21 12		Div. R. S. 6 Can. Fld Amb.		Myalgia	71		
28-12		North Mid. Div. Cas. Cl. Station		Tonsilitis	74		
16 1-16		No 2. Can. Stn. Hosp.	Boulogne	Epilepsy	79		
22-1.		Yarmouth Hosp.	Broadstairs	"	83		
26 3		Moore Barracks Hosp.		"	B21		
7 4		Discharged			B165		

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

No. 433170 RANK Pte NAME Kirby. C. S.

T. O. S. UNIT Discharge Depot Quebec.

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Mar 30	1916 May 7	✓	49th Bn.	

No. 433180 RANK Pte. NAME Kirby, C. S.

T. O. S. UNIT 49th Battalion C. E. F.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 May 7	1915 May 31 June	✓ ✓		

UNIT SAILED
JUN 4 1915

Number 433180 Rank pte

Surname KIRBY

Christian Name Clifton Stanley

Units 49th Bn Can Inf Theatre of War France

Date of Service 9-10-15.

Remarks

Latest Address ~~Bremner, Alta.~~
RR #3
C/o Alta. Pacific Grain Co Ltd
Tofield
Alta.

Roll No. B Page 16758

200m-2-21.M.

DESP. JUL 26 1922
REGN. NO 69474

This space to be left blank for the Chelsea Number.

7878

Army Form B. 268.

Proceedings on Discharge.

I

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 433180 Army Rank Private

Name KIRBY. Clifton Stanley

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 49th Battalion. (9th Res. Battn.)

Battalion, Battery, Company, Depôt, &c.

(If attached to the Regular Establishment, the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff, it should be so stated.)

DISCHARGE DEPOT QUEBEC

Date of discharge ~~MAY 7 1916~~ 22.4.16

Place of discharge CANADA Quebec.

1. *Description at the time of discharge.*

Age 22 years 4 months.

Height 5 feet 11½ inches

Chest measurement { girth when fully expanded 37 ins. / range of expansion 4 ins.

Complexion Dark

Eyes Gray

Hair Dark

Trade Farmer

Intended place of residence (To be given as fully as practicable) Edmonton.

Descriptive marks.

13

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for war service, King's Regulations & Orders, 392, XVI

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— Documents not available.

4. Character awarded in accordance with King's Regulations :— Documents not available.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D.1489 was awarded in this case.

O.C. C.C.A.C.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

A1933 Wt. W. 13141/283 70,000 3/15 D. D. & L. Sch. 39 Forms B. 268 39

* Strike out if not applicable.

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations _____

Certificate of education ..... _____

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

DISCHARGE DEPOT APR 22 1916 QUEBEC

(*Place*) _____ C. S. Kirby (*Signature of Soldier.*)

(*Date*) _____ H. C. Dated (*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 at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

_____

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for 7/5/16 (date)

(Place) _____

DISCHARGE DEPOT APR 22 1916 QUEBEC

(Date) _____

Signature _____ O. C. Discharge Depot.

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

Nil

DISCHARGE DEPOT
APR 22 1916
QUEBEC

C. S. Kirby

Metagama 17-4-16 — R.O. 24-4-16.

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge (Army Form B. 268)
2. Proceedings on transfer to reserve (if any) (Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name (if any)
6. Re-engagement paper (if any) (Army Form B. 136)
7. Authority for continuance, or extension, of service (if any) (Army Form B. 221)
8. Court of Inquiry on an injury (if any) (Army Form A. 2)
9. Regimental conduct sheet (Army Form B. 120)
10. Company conduct sheet (Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet (Army Form B. 178)
13. Medical report on invalid (if any) (Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge)
18. Descriptive return (Army Form D. 400), where required

See section 11 on second page

19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority)
2. Medical history sheet (if any) (Army Form B. 178)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

D.M.S. 1312.
Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Shorncliffe Military Hospital,

Date February 21st. 1916.

1. Unit. 49th.Btn. attached to 9th.Res.
2. Regimental No. 433180.
3. Rank Pte.
4. Name Kirby, C.S.
5. Age last birthday 23 years.
6. Enlisted { on May 7th. 1915. / at Edmonton, Alta.
7. Former Trade or Occupation { Farmer.

8. **Disability.**

Epilepsy.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. At age of 4 - 1893.

10. Place of origin of disability. Toronto, Ontario.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

From age 4 to age 12 averaged 3 or 4 fits a year. Attributed to a blow on head with an axe. Had a fit in 1911. Had no fits then until Oct. 1915. when he had a fit on St. Martins Plains immediately after a route March. In Nov. had three in one day. In Dec. three at intervals. On Jan. 15th. had a fit at Neuve Eglise near trenches. Taken to No. 2. General Hospital 7 days. To Yarrow Military Hospital 11 days. On Feb. 2nd. to Shorncliffe Hospital. No authentic account of fit in any Hospital.

12. (*a*) Give your opinion as to the causation of the disability.

Do not know.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

(1.) No.

(2.) No.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

General health good.

Heart and Lungs: Normal.

14. If the disability is an injury, was caused

(*a*) In action?

(*b*) On field service? Not applicable.

(*c*) On duty?

(*d*) Off duty?

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where? Not applicable.

(*c*) Opinion?

16. Was an operation performed? If so, what? No.

17. If not, was an operation advised and declined? No.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? Not applicable.

19. Do you recommend

(*a*) Fit for duty? No.

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

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

K. A. MacKenzie Capt Cam C

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station Scaffe Mil Hospital

E. B. Bryan Maj

Lieut. Col.

pro O. C. No. 7 "Over Seas" Stationary Hospital

Officer in charge of Hospital.

Date 21st March 16.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(1.) No.

(2.) No.

(*b*) If due to one of these causes, to what specific condition do the Board attribute it ?

Not applicable.

21. Has the disability been aggravated by

(*a*) Intemperance ? No.

(*b*) Misconduct ? No.

22. Is the disability permanent ? Yes.

23. If not permanent, what is its probable minimum duration ? Not applicable.

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present ?

None, compared to capacity on enlistment.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable ? Not applicable.

26. Do the Board recommend

(*a*) Fit for duty ? No.

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

(*c*) Invalided to Canada ? No.

(*d*) Discharge as permanently unfit ? Yes.

APPROVED
CAPTAIN ... FOR D. OF R. & O. FOR
PRESIDENT GENERAL
COMMANDING
CANADIAN TRAINING DIVISION, SHORNCLIFFE

Signatures :— D W Morrison Capt Cam C President.

Station Shorncliffe. Donald A. Murray Capt Members.

Date February 27th.1916.

Approved.

Station Shorncliffe

Date 1st March 16.

T H Bowlby

Administrative Medical Officer.

Capt. A/D.A.D.M.S.

Canadian Training Division, Shorncliffe.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Folkestone, Kent, England, on the day of 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TODD, C.A.M.C.

LIEUT.-COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER, *Legal Adviser.*

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

_____ *President.*

_____ Lt.-Col. _____ Major.

_____ Lt.-Col. _____ Major.

Army Form B 181.

CLINICAL CHART.

(*To be attached to Case Sheet*).

Corps 9th R. Batt. G

Military Hospital M. B. C. H.

No. H 33180 Rank and Name Pte. Clifton. S. Kirby Age 23. Service 10/12

Disease Epilepsy Date of admission 25-3-16. Date of discharge 6.4.16 Result Discharged

Dates of Observation	May 30																																
Days of Disease																																	
Temperature Fahrenheit	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.
107°	Admission																																
106°																																	
105°																																	
104°																																	
103°																																	
102°																																	
101°																																	
100°																																	
99°																																	
98°																																	
97°	•	•																															
Pulse per Minute	92	74																															
Respirations per Minute	20	18.																															
Motions per 24 hours																																	

Wt. W. 7106-623. 350,000m. 11/14. J. J. K. & Co., Ltd., Forms B 181/3.

Signature A. MacKenzie Capt. In Charge of Case.

Forms
I. 1237
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SHORNCLIFFE MIL HOSP.

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Army Form I. 1237

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1916.	433180	Pte	Kirby	C. S.
	Unit.		Age.	Service.
	9 Res. Bde		23	5/12 0s 3/12

Station and Date. Shorncliffe 2/2/16

Disease Epilepsy

History — From age of 4. & age of 12 had 3 or 4 fits a year attributed to blow on head by an axe. In 1911 had a fit. About Oct 1st had a fit on St Martins Plains. immediately after route march. In Nov. had three in one day. Under three at intervals. On Jan 15th had a fit at Neuve Eglise. near trenches. Taken to No 2 Canadian Hosp 7 days. To Yarrow Military Hospital 11 days. (no fits) Feby 2nd came to shorncliffe Military Taken into Hospital for observation.

Feby 14th. — No fits since admission. Sent to lines. for observation.

K A MacKenzie
Capt CAMC

Feby 15. — To Westcliffe. for eye examination Glasses to be provided.

23-2-16 — 179.+

Feb 26th — Was called to see patient at 9. P. M. Found him in an Epileptic fit. — L. A. Murray.

27-2-16 — Appeared before board. Discharged as permanently unfit.

K A MacKenzie
Capt CAMC

*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.

Station and Date.

768.

D.M.S. 1312.
Army Form B. 179.
Canada.

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Medical Report on an Invalid.

Station Shorncliffe Military Hospital.

Date February 21st. 1916.

1. Unit. 49th.Btn. attached to 9th.Res.
2. Regimental No. 433180.
3. Rank Pte.
4. Name Kirby, C.S.
5. Age last birthday 23 years.
6. Enlisted { on May 7th. 1915. / at Edmonton, Alta.
7. Former Trade or Occupation { Farmer.

8. **Disability.**

Epilepsy.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. At age of 4 - 1893.

10. Place of origin of disability. Toronto, Ontario.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

From age 4 to age 13 averaged 3 or 4 fits a year. Attributed to a blow on head with an axe. Had a fit in 1911. Had no fits then until Oct. 1915. when he had a fit on St. Martins Plains immediately after a route March. In Nov. had three in one day. In Dec. three at intervals. On Jan. 15th. had a fit at Neuve Eglise near trenches. Taken to No. 2. General Hospital 7 days. To Yarrow Military Hospital 11 days. On Feb. 2nd. to Shorncliffe Hospital. No authentic account of fit in any Hospital.

12. (*a*) Give your opinion as to the causation of the disability.

Do not know.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

(1.) No.

(2.) No.

7878

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13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

General health good.

Heart and Lungs: Normal.

14. If the disability is an injury, was caused

(*a*) In action?

(*b*) On field service? Not applicable.

(*c*) On duty?

(*d*) Off duty?

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where? Not applicable.

(*c*) Opinion?

16. Was an operation performed? If so, what? No.

17. If not, was an operation advised and declined? No.

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? Not applicable.

19. Do you recommend

(*a*) Fit for duty? No.

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

(*c*) Invalided to Canada? No.

(*d*) Discharge as permanently unfit? Yes.

K A MacKenzie Capt CAMC

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station Shorncliffe

Date 21st Feb 16.

[signature] Lieut. Col.

O. C. No. 7. "Over Seas" Stationary Hospital.

Officer in charge of Hospital.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

7878

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Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(*b*) If due to one of these causes, to what specific condition do the Board attribute it ?

(1) no
(2) no
not applicable

21. Has the disability been aggravated by

(*a*) Intemperance ? no

(*b*) Misconduct ? no

22. Is the disability permanent ? yes

23. If not permanent, what is its probable minimum duration ?

not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present ?

none compared to Capacity on enlistment

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable ?

not applicable

APPROVED
CAPTAIN A.M.C. FOR D. OF R. & O. FOR
MAJOR GENERAL
COMMD'G
CANADIAN TRAINING DIVISION, SHORNCLIFFE

26. Do the Board recommend

(*a*) Fit for duty ? no

(*b*) Fit for light duty ? no

(*c*) Invalided to Canada ? no

(*d*) Discharge as permanently unfit ? yes

Signatures :— D A Morrison Capt. A.M.C. President.

Donald A. Murray Capt. Members.

Station Shorncliffe.

Date February 27th. 1916.

Approved.

Station Shorncliffe

Date 1st March 16

G A Bowlby

Administrative Medical Officer.
Capt. A/D.A.D.M.S.
Canadian Training Division, Shorncliffe.

7878

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Folkestone, Kent, England, on the day of 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.*
LIEUT.-COL. W. GRANT MORDEN.
MAJOR JOHN L. TODD, C.A.M.C.
MAJOR MAURICE ALEXANDER, *Legal Adviser.*

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

_____ *President.*
Lt.-Col.

_____
Major.

_____
Lt.-Col.

_____
Major.