E Coy
2 Batt

ATTESTATION PAPER.

No. 8127.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Edmund Montgomery
2. In what Town, Township or Parish, and in what Country were you born? — West Hartlepool, Durham, England
3. What is the name of your next-of-kin? — Mrs. Montgomery
4. What is the address of your next-of-kin? — 44 Division Street, Kingston
5. What is the date of your birth? — May 22nd 1894
6. What is your Trade or Calling? — Labourer
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? — Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. — 14th Regiment, Kingston, 4 years.
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

Edmund Montgomery (Signature of Man).

Colin W. Day (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edmund Montgomery, 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.

Edmund Montgomery (Signature of Recruit)

Date Valcartier, 22nd September 1914 Colin W Day (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edmund Montgomery, 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.

Edmund Montgomery (Signature of Recruit)

Date Valcartier, 22nd September 1914. Edward O'Brien Lt. Col. R.C.R. (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 Valcartier, 22nd September 1914 this day of 1914.

E A Newet (Signature of Justice)

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

D [illegible] Lt-Col. (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

14 21

Description of Edmund Montgomery on Enlistment.

Apparent Age 20 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 34½ ins.; Range of expansion 2 ins.

Complexion Medium

Eyes Brown

Hair Dark Brown

Religious denominations:
- Church of England ✓
- 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).

Mole on left shoulder

(stammers)

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 Aug. 30 1914. C. P. Driscoll

Place Valcartier Maj Ame 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.

Edmund Montgomery 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 of Officer)

Date Valcartier, 22nd September 1914

Lt Col

MONTGOMERY E. 8127 12 BN 28060

MED. UNFIT.

Deceased
11-1-61

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

Box
6301

open
ATIP

Name Montgomery E. Rank Pte. Reg. No. 8127

Unit 2nd Battalion.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
21/6/15	1 Gen. Hos.	Etretat	Neurasthenia	95		
22-7-15	No. 1 Gen. Hos.	"	"	120		
23-7-15	No 3 " Base Depot	Taken of Strength		122		

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

E 122 m 3.

Number 5127 Rank Pte

Surname MONTGOMERY

Christian Names Edward H

Unit 2nd Anson Bn Theatre of War France

Dates of Service

Remarks 320 University Ave

Latest Address ~~73 Main St~~ Kingston Ont.

13/5/34

Roll No B

Page 633

G 14066 .D5 P
G 3015 .D5 map
APR 2 1 18
JUN 2 2 1

DESP. MAY 16 99
REGN. NO. 427

No. 8127. Rank Pte. (12 Bn.) Name Montgomery E.

T. O. S. Unit Discharge Depot (Quebec.)

M. D. 5.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1915. Sept. 11.	1915. Oct. 23.	✓		

No. 8127 RANK Pte. NAME Montgomery, E.

T. O. S. UNIT 14th Regt.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Aug. 8	Aug. 22	✓		
Aug. 23	Aug. 28	✓		
Aug. 29	Sep. 21	✓	now shown on 2nd Bn. paylist.	
Sep. 22	Oct. 31	✓		

UNIT SAILED
OCT 3 1914

SURNAME. Montgomery.

CHRISTIAN NAMES Edmund

REGL. No. 8127. RANK Pte.

UNIT ~~2nd~~ 12th Bn.

FORMER CORPS 14th Regt. (H. & Yo.)

CARD NO.

S.O.S. 22-9-1915.

FOLL.

NEXT OF KIN.

NAMES IN FULL Montgomery. Mrs.

RELATIONSHIP TO SOLDIER Not Stated

ADDRESS 44 Division St., Kingston, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England. West Hartlepool Durham DATE May 22nd 1894.

PLACE OF ATTESTATION Valcartier P.Q. DATE Sept. 22nd, 1914.

(Trans 12th Bn 30/4/15 auth Pt II O by Lt-Col Mac Leod)

L. L. 94504. M. & D. 6512. D/S 4-10-14 2/14

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

A.P.

Sailed from Quebec per S.S. Cassandra, Oct. 7/14

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Labourer RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 20 YEARS 3 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 34 1/2 INCHES EXPANSION 2 INCHES

COMPLEXION Medium. EYES Brown. HAIR Dark Brown

DISTINGUISHING MARKS Mole on left shoulder. (Stammers)

Sailed Liverpool to Quebec S.S. Corsican 13/9/15 Med unfit.

MEDICAL EXAMINATION. PLACE Valcartier. P. Q. DATE Aug. 30th 1914.

Present Address. Not Stated

NAME Montgomery, Edmund.

H. Q. FILE No. 649-

REGT'L. No. 8124.

RANK AND CORPS Pte. 2nd Battalion

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
C. 2614	27/6/15	Wounded in French Hospital, Suffering from Shock.

NO. 1562

X FOLL.

L. L. Job 83225—M. & D. 5842.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
94	No. 1 Can. Fld. Amb. Trans. to No. 3 Can. Fld. Amb.	20/6/15	Shock. ✓
95	No. 1 Gen. Hosp. Etretat	21/6/15	Neurasthenia ✓
120	No. 1. G. H. Etretat Disch. to Duty.	22/7/15.	Neurasthenia. ✓
122	No. 3 Gen. Base Depot	23/7/15	Taken on Strength (Neurasthenia)

LEDGER NO. _____ SERIAL NO. _____

REG. NO. 8127 NAME Montgomery Ed.

RANK Pte CORPS _____ AGE 21 SERVICE _____

C

HOSPITALS	DATE OF ADMISSION
1 Elmhurst Hospl. Kingston	1-10-15
2	
3	

DIAGNOSIS Shock Ston (Gun)

TRANSFERRED TO _____

DISPOSITION 8-12-15 CATEGORY _____

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

No. 8127. RANK Pte. NAME Montgomery. E.

T. O. S. UNIT Casualties.

M. D. #. O.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. Oct. 24.	1915. Nov. 30.	N.	From 12th. Bn.	
	Dec. 11.	N.		

Surname	Christian Name or Names	Reg. No.
Montgomery	E.	8127.

Rank	Unit	Co.	Troop	Batty.
Pte.	2nd Batt?			

Hospital #1 General Hospital, Etretat. Date of Admission

" " " 19.6.15

Transferred 1. Clan. Hosp. 20.6.15.

2 C.F. Amb Hosp. 20.6.15

Hosp.

Hosp.

Diagnosis Neurasthenia.

(1) Later Diagnosis (if changed) Shock

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION Date

Discharged to Duty 22-7-15.

C.L. 28-7-15 #120(2) REMARKS

Ch. 26.6.15 9f

Ch. 30.7.15. 12(2) Taken on strength of 2. Genl. Base Depot:

A.M.D. 2 Dept.

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

Shannon 8333-15

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Surname: Montgomery, | Christian Name: E. | Reg. No. 8127.

Rank: Pte. | Unit: 12th Res. Bn. | Co. | Troop | Batty.

MEDICAL BOARD held at | Date | Serial No.

(1)

Shorncliffe, | Aug. 19/15.

Other Medical Boards at | Date | Serial No.

(2)

(3)

(4)

(5)

Condition found by Board: Nervous Exhaustion.

Disposition Recommended

(1)
(2) That this patient be sent to Canada and retained in the Service until his depot is reached when his further disposal either
(3) for service in Canada or for discharge as unfit should be decided by Militia
(4) Authorities there.

(5)

CASUALTY BOARD held at | Date.....

Disposition

Remarks

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

Indicate by a P.T.O. if continued on other side.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	8127	Pte.	Montgomery	E.
Year 1915	Unit. 12th Res. Battalion		Age. 22	Service. 12 months

Station and Date.

Shorncliffe 17th Aug

Disease Nervous Exhaustion.

Result of exposure to Shell fire during four days was in hospital under treatment for 5 weeks had previously slight impediment in Speech which as result of Shock became grave. Is sleepless also loss appetite Two weeks ago was run into by a motor car which caused some injury to back and to certain definite extent increased the Shock symptoms.

Frederick Jobbs Capt.

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

(Hse. No.) W 10373-1916. 800M (E) 1/15. Mc. & W.

P.T.O.

Station and Date.	

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1. 2ND CANADIAN INF. BATTALION **Army Form B. 103.**

Casualty Form—Active Service.

Regiment or Corps 2nd Bn 6 E Y.

Regimental No. 8127 Rank Pte Name Montgomery. Edmund

Enlisted (a) 22/9/15 Terms of Service (a) Period of War Service reckons from (a) 22/9/15

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				
20.6.15	16 Y Amb.	Shock To	36 Y Amb.	16.6.15	a 36
20.6.15	36 Y Amb	do To	26 Y Amb.	16.6.15	a 36
22.6.15	1 Genl.	Neurasthenia Ad	1 General	21.6.15	W3034 a/97.
22.6.15	1 Genl	do To	Duty	22.6.15	W3034
26.7.15	3 GBD.	Taken on.	19. Camp Rouelles		
28.7.15	3 GBD.	Left Base Depot to report to D.A.A.G	Southampton England	28.7.15	2971/78. K7-1-5. 30/7/15.
31.7.15	O/C 12th	T.O.S.	S'thpte	30.7.15	P.U. 0-925
11.9.15	✓	S.O.S to Canada		10.9.15	1268

A. C. Sanks CAPT.
OFFICER i/c RECORDS
CANADIAN SECTION G. H. Q

Capt'n
Lieut [illegible] 1st Canadian Depot Coy, Orpington, for O/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				

22-M-117

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	8127	Pte.	Montgomery	E.
Year	Unit.		Age.	Service.
1915	12th Res. Battalion		22	12 months

Station and Date.

Disease ~~Shell~~ Nervous exhaustion.

Shorncliffe 17th May

Result of exposure to Shell Fire during four days was in hospital under treatment for 6 weeks - had previously slight impediment in speech which as result of Shock became grave. Is sleepless also Loss of appetite - Two weeks ago was run into by a motor car which caused some injury to back & to a certain definite extent increased the Shock symptoms.

Frederick H. Jay
Capt.
M.O. 12th

1237

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

(Hse. No.) W 10373-1916. 800M (E) 1/15. Mc. & W.

P.T.O.

Station and Date.	

B. P. C. Form 10
FALSE DOCKET
2

ORIGINAL

74-M.1496
8127.

E. Coy

MEDICAL HISTORY SHEET.

671

Surname Montgomery *Christian Name* Edmund

Examined { on 22 day of Sept 191 4
at Valcartier

Approved by G. Barnett Green
Rank Capt Trans. M.O.

Birthplace { City or Town West Hartlepool
County Durham England

Apparent age 20 yrs 3 mths

Trade or occupation Labourer

Height 5 Feet 6 Inches.

Weight Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 34 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease Mole on left shoulder. Stammers

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 22nd *day of* Sept: 191 4 *at* Valcartier

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	2nd Batt:	8127.		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

50M—8-14.
H. Q. 1772—39—439.

Entries in Red Ink made from Attestation Sheets.

20/5/15 R. M. Shaw
for D. D. M. S.

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

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				

E
M.R

Name Montgomery Pte E

M. F. W. 41.
10m.—4-16.
1772-39-889.

L. P. C. No. M15

15

Regimental No. 8127

Unit 2nd Bn

Date of enlistment

Place of "

Married (yes or no) no

Amount of pay assigned monthly $ 20 30/9/15

To whom payable SA Wife

Corsican 20-9-15

Name and address of next-of-kin 44 Division St
Kingston Ont

adm. "Elmhurst" 1/10/15

Date and place discharged 11-12-15

Reason for discharge

Character on discharge Civilian Clothing issued
649- M- 1210

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.
	16/9/15							2 30								h PC
11/9/15	23/10/15	43	100	43	16	10	1 60	21 Subs	67 90					60 59		2nd Gord
														x 7 31	67 90	x C P.M. Calls to 2nd Gord. see L.P.C
24/10/15	30/11/15	38		38	38	10	3 80									
27/9/15	23/10/15				x 27		2 70		44 50	360	25/11/15	27 25	✓	⊗ 17 25	44 50	x unamp'd 2nd ⊗ amp'd subs 1/10/15 23/10/15 by 2nd
1/12/15	11/12/15	11		11	11		1 10		12 10	1417	22/12/15	3 30	✓	x 8 80	12 10	x 8 days detention Sgt 261-6-11 M.D.3
All Subs								2 00	2 00	1811	21/1/16	2 00	✓		2 00	
								x Subs 3 00	3 00	A3232	29/12/16	1 05	4	1 95	3 00	x Subs 22-9-25-9-15 amended L.P.C

E. G. P. Sept 15 $20 cr

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					

29370 THE MORTIMER SYSTEMS
OTTAWA, CANADA

354

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Mrs E. Montgomery

Address ~~44 Division St~~ 73 Main St. Kingston Ont.

Rate $20.00 per Mth

By Whom Assigned Montgomery E.

Regtl. No. 8127

Rank Pte.

Corps E Co 2nd Battn

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.		B2139	40	
Dec.		A3025	20	
Jan.	1915	H3760	20	
Feb.		J5206	20	
March		F5437	20	
Apl.		E6663	20	
May		A9297	20	
June		C9803	20	
July		B11141	20	
Aug.		A12569	20	
Sept.		J7833	20	
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

COPIED FOR CASUALTIES.

7 X. 25 7/6 ~~8 H 8~~

2 40 00

Discharged

Stop Pay. Oct 1/15. 3 M 21/9/15 HW.

Remove this sheet after Auditor Generals are written for Sept

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME MONTGOMERY, Edmund

Regimental No. 8127

Unit 2nd Bat'n

Date of enlistment 22nd Sept., 1914

Place of birth, England

Married (yes or no) No

Amount of pay assigned monthly $ 20.00

To whom payable Next of Kin

Name and address of next-of-kin
Mrs. Montgomery,
44 Division St., Kingston, Ont

Date and place discharged 10/9/15 Canada

Reason for discharge H.Q. P.M. Letter 55/3 2/9/15

Character on discharge

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.
22/9/14	31/12/14	40	1.00	40	40	.10	4		44			22 50	20		42 50	
1/1/15	30/1/15	30	1.00	30	30	.10	3	1 50	34 50				26		20	
Dec 1.31		31	1.00	31	31	.10	3.10	14 80	48 60			5 -	20	1.10	26 10	1 Day pay 9/12/14
Jan 1915 1.31		31	1.00	31	31	.10	3.10	22 50	56 60			20 -	20		40 -	
Feb 1.	Feb 28	28	1.00	28	28	.10	2.80	16 60	44 40			5.	20		25 .	
Mar 1.	Mar 31.	31.	1.00	31	31	.10	3.10	22 40	56 50			5	20		25 .	
Apl 1.	Apl 30	30	1.00	30	30	.10	3	31 50	64 50			3.	20		23 .	
May 1	May 31	31.	1.00	31	31	.10	3.10	41 50	75 60			6 .	20		26 .	
Jne 1	Jne 30	20	.	20	20	.	2.	49 60	82 60			6	20		26.	
Jly 1	Jly 31	31	.	31	31	.	3.10	36 60	90 70				20		20	
								70 70				72 50				
Aug 1	Aug 15	15	.	15	15	.	1 50	1 93	89 13			53 53 20			73 53	Trans to 12th Aug 15th
16/8/15	31/8/15	16	1.00	16 00	16	.10	1 60	15 60	33 20			14 60			14 60	
10/9/15	10/9/15	10	"	10 00	10	"	1 00	18 60	29 60			73 020			27 30	Right to Canada M.C. 10/9/15 Auth H.Q. P.M. Letter 55/3 dated 2nd Sept.
								230 -				7 30			7 30	10/- to be paid dependants
										O.S.B. 4th Aug	July	1 95		5 00	6 95	Cheque Authority Branch 6/9/15 Cheque paid at Quebec 17/9/15.
														1 95		Amended L.P.C. 18/10/15.
														6 95		" " 23/3/16
NE	Feby															
NE	Mar 16							6 95	6 95					6 95	6 95	Trans to acct P.M.G. Gen Liability Cr. Ross

Balance Nil

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					

POST DISCHARGE PAY OFFICE

22777/454

Three months pay and allowances after discharge.

013073-E-1

Name Montgomery, Edmund
Surname Christian Name

Regimental Number 8127 Rank Pte.

Unit 12th Res.Bn.

Original Unit

District where paid Ottawa

Date of Discharge 25.9.15.

P. D. P. Filing Number 2M4.

Address (in full) 73 Main St.
Kingston, Ont.

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			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	1094	12/7/17	33 00	992	20/8/17	33 00	996	20/9/17	34 10		100 10
1702 pt	9.32304	11/3/19	70 00								
1414 2nd	933036	11-3-19	70 00								

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

Dec'n No 22727/4054 I. S. G. File No 13023-E 12

Award 4 days at $ 70.00 per day $ 280.00

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

Less P. D. P. Credited $ .....

$ 179.90

Less further debit balance $ .....

Net due paid as below 179.90

	TO SOLDIER			TO DEPENDENT		
	Ag No	Ch No	Amount	Ag No	Ch No	Amount
11/3/19	1702	32304	70 ✓			
"	14640	33026	70 ✓			
19-4-19	1350 B	430608	39 90 ✓			
	Total		179 90			

GEN'L AUDITOR
Posting checked by
.....
Date 8/6/19

73 Main St
Kingston
Ont.

This space to be left blank for the Chelsea Number.

C.H.

Army Form B. 268.

CENTRAL REGISTRY
REFERENCE
No H.....22-M-117
-1 SEP. 1915
HEADQUARTERS.
CANADIAN TRAINING DIVISION.

Proceedings on Discharge.

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

No. 8127. Army Rank Pte.

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

Corps 12th Reserve Battalion. C.E.F.

Battalion, Battery, Company, Depôt, &c. Shorncliffe. Kent.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Forces, &c., or to General Staff of the Army, it should be so stated.)

DISCHARGE DEPOT SEP 25 1915 QUEBEC

H

Date of discharge ~~Sept~~. 1915 11-12-15 ~~SEP 25 1915~~

Place of discharge CANADA.

1. *Description at the time of discharge.*

Age 22 years — months
Height 5 feet 6. inches
Chest measurement { girth when fully expanded 36 ins. / range of expansion 2½ ins.
Complexion Dark
Eyes Brown.
Hair Black.
Trade Labourer.
Intended place of residence (To be given as fully as practicable) { 44 Division Street / Kingston Ontario.

Descriptive marks.

Corsican

3 Vacc L. arm.

Passed 11-12-15

(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 Medically Unfit.
Auth. Para. 392. (XVI) K, R, & O

(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 :— GOOD.

Character awarded in accordance with King's Regulations :—

Good.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2087* and that Army Form D. 489 was awarded in this case.

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.

Edm 10/17/15

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) Shorncliffe. Kent. _____ Lieut Col.

(Date) Sept. -August 1915 *Commanding* 12th Res. *Battn.* C.E.F. *Regiment.*

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

I 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 SEP 25 1915 QUEBEC

(*Place*) _____ E. Montgomery (*Signature of Soldier.*)

(*Date*) _____ Bennett. Sgt. (*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 (date)

DISCHARGE DEPOT SEP 25 1915 QUEBEC

(Place) _____

(Date) _____ *Signature* _____ Major R. C. A. 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.)

E. Montgomery

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.

THIRD DIVISIONAL AREA
NOV 25 1915
8.D. 74-11-21

-II-

MEDICAL HISTORY OF AN INVALID.

1.—Station. Kingston, Ont.

2.—Regiment of Corps. 2nd Battalion, C.E.F.

3. Regimental No. and Rank. 8127 Pte.

4.—Name. Edmund Montgomery.

5.—Age last Birthday. 21 years 22-5-15.

6.—Enlisted on 8-8-15 at Kingston, Ont.

7.—Former Trade or Occupation. Laborer

8.—General remarks on his :—

(a) Conduct. G.G.-M.H.Q.10

(b) Habits.

(c) Temperance.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date 15-11-15

9.—Service.	Years.	Days.
	PERIODS.	
	From	To
2nd Battalion, C.E.F.	8-8-15.	Do not know

10.—Disease or Disability. Due to gas at Givenchy--- Shock---Stammering

11.—Date of origin, cause, present condition, and whether the same is the result of service or climate. At battle of Givenchy, France--Gas- Fully recovered except for stammering condition which existed previous to enlistment and is not the result of service. At present fit for discharge from Convalescent Home as cured.

Has it been aggravated by intemperance, vice or misconduct? No.

B. P. C. FOLIO
FALSE DOCKET
5

M. F. B. 227.
5m.—3-15.
H. Q. 1772 39 -117.

[OVER]

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

Was injured through inhalation of gas at Givenchy, France.
Fully recovered at present.
Do not know.

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

No.

14.—If aggravateed, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

No.

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

Recovered from inhalation of gas.
Stammering still exists, but existed previous to enlistment.
Capable of earning a full livelihood.

16.—Full particulars of medical treatment of case up to date of invaliding.

Admitted to "Elmhurst" Convalescent Home Oct., 1st 1915.

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

Do not know.

18.—State if for discharge on account of unfitness for service.

Yes, and from Convalescent Home, Kingston.

J. S. Parks Capt. A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in above Report.)

The Board having assembled pursuant to order proceed to examine and report upon the present physical condition of No 8127, Pte. Edmund Montgomery, 2nd Battalion, C.E.F. concurr fully with the above report, find him fit for discharge from service and from "Elmhurst" Convalescent Home, Kingston as cured.

Signatures :— R. Gardiner Major A.M.C. President.

Station Kingston, Ont., R. B. Richardson Capt. A.M.C. } Members.

Date 16-11-15. W. E. Bell Capt. A.M.C. }

Date 24.11.15 R. Gardiner Major A.M.C.
Assistant Director of Medical Services.

Approved.

Date 2.12.15 W. M. Ogilvie Lt Col A.M.C.
Director of Medical Services.

B. P. C. FOLIO
FALSE DOCKET
4

[OVER]

Militia Form B. 227.

5m.—3-15.
(H. Q.—1772-39-117.)

DETAILED MEDICAL HISTORY OF INVALID

Station _____

Corps _____

Regimental No. _____ Rank _____

Name _____

Disability _____

Date _____

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of Invalids.

(At Station or Hospital where finally disposed of)

Station and Hospital } _____ Arrived from } _____

Date _____

If admitted.	If under treatment.		Disease.	How finally disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

SUMMARY of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. }

_____

Administrative Medical Officer.

22-M-117

Army Form B. 179.

Medical Report on an Invalid.

Station Shoreliffe

Date August 17th 1915

1. Unit 2/K Res. Battalion
2. Regimental No. 8124
3. Rank Pte
4. Name Montgomery E.
5. Age last birthday 22
6. Enlisted { on August 17th 1914 / at Kingstown Cat.
7. Former Trade or Occupation { Labourer

8. **Disability.**

Nervous Exhaustion

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. June 1915
10. Place of origin of disability. La Giverchie
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Was under shell fire 4 days after which he became very nervous & was suffering considerable shock — The impediment in his speech which was very slight now became much worse he had tremors & could not sleep.

Was in hospital 5 weeks 2 weeks sick furlough returned to duty 4 weeks ago 2 weeks ago was injured in the back by collision with motor Car: Causing pain in walking

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

(*b*) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (*See notes on page* 3).

Shock from Shell fire
Active Service
Shock from exposure to Shell Fire.

B. I.
FALSE DOCKET
3

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.

Fairly well nourished Has poor appetite does not sleep well is nervous and has grave impediment in his speech of nervous origin Some pain in the back on walking no headache or other pain. Otherwise normal

14. If the disability is an injury, was it caused

(a) In action? yes

(b) On field service? yes

(c) On duty? yes

(d) Off duty? no

15. Was a Court of Inquiry held on the injury? no

If so—(a) When? at no time

(b) Where? nowhere

(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? no

19. Do you recommend

(a) Discharge as permanently unfit, or

(b) Change to England? Discharge

Frederick Johns Capt

Officer in medical charge of case.

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

Station Shorncliffe

Date 17th Aug 1915

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.

22-M-117

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, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital 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 pension vary directly according to whether the disability is attributed to (*a*) active service, (*b*) climate, or (*c*) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165, Pay Warrant, 1913).

(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.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (*a*) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service.

yes
no.
no.

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

Shell fire.

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?

To be stated in months.

not applicable

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

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.

total.

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

not applicable

26. Do the Board recommend

(*a*) Discharge as permanently unfit, or

(*b*) Change to England?

yes in Canada.

I concur; but recommend that this patient be sent to Canada and retained in the Service until his disposal, either for service when this further disposal, either for service in Canada or for discharge as unfit, should be decided by Militia Authorities there.

C. Mallard.
Captain, C.A.M.C.
for D.M.S.
Canadian Contingents.

AUG 24 1915

Signatures:—

Wm McKeown Lt Col President.

Fred E. Watts Capt. } Members.

J. A. McCredran Capt.

Station Stonecliffe

Date aug 19-15

Approved.

Station Stonecliffe

Date Aug 20th 1915

A. D. Mundy Capt
Administrative Medical Officer.

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

B. P. C. FOLIO
FALSE DOCKET

(On leaving Corps or Station where invalided.)

Transfer { Date _____ / Station _____ }
or
Embark-ation { Date _____ / Port _____ }

Name of { Conveyance _____ / Vessel _____ / Officer in medical charge _____ }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ / Hospital or Station _____ }

_____
Officer in medical charge.

(At Station or Hospital where finally disposed of.)

Station and Hospital _____

Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
Date	From	To			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

SEP 21 1915

The board having assembled proceeds to examine No 5179 Pte. Montgomery & does not agree with answers to 22. 23. viz. the board is of opinion that the answer to 22 should be "no." answer to 23, 6 months & answer to total disabled recommend that he be given 6 months treatment in convalescent home

Wm Delaney Lt Col. A.M.C.
Lawrence Kay Major A.M.C.
Jas Chisholm Capt A.M.C.

Date of final Medical Board, or decision

Approved
24-9-15
J. H. Mayo Lt-Col
A.D.M.S.

_____
Administrative Medical Officer.

Lt.-Colonel, A. M. C.
A. D. M. S., 5th Division.

Army Form B. 179.

MEDICAL REPORT ON AN INVALID.

Hospital or Station transferred to for final disposal
Date of final disposal
How finally disposed of

The original Report is invariably to accompany the discharge documents of Invalids.

Forms B. 179. 34

xs (83579) Wt. 1336 475M 5-15 W B & L

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

This is to Certify that No. 8127 (Rank) Private

(Name in Full) Edmund Montgomery enlisted in

12th Battalion

Canadian Overseas Expeditionary Force, on the 17th of August

1914, and accompanied said unit to overseas.

was returned to Canada, and discharged from the service at Quebec P.Q.

on the 25th of Sept 191__, in consequence of being

medically unfit for further service

DESCRIPTION ON DISCHARGE

Age 22 yrs.

Height 5' 6"

Complexion Dark.

Eyes Brown.

Hair Black.

Trade Labourer

Marks or Scars

3 Vacc L. arm

Signature of Man

J. J. Staples

Major R. C. A.

O. C. Discharge Depot.

Officer in charge Discharge Depot.

DISCHARGE DEPOT
11 Dec
SEP 25 1915
QUEBEC

Place and Date

SHOULD THIS DISCHARGE CERTIFICATE BE LOST, NO DUPLICATE OF IT CAN BE OBTAINED.

N. B.—Any person finding this Certificate is requested to forward it in an unstamped envelope to The Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39
200m.-5-15.
H.Q. 1772-39-882.

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

No. 8127

Rank Private

Name E. Montgomery

Unit 12th Batt

Address on Discharge

His conduct and character while in the Service have been : Good

DISCHARGE DEPOT
SEP 25 1915
QUEBEC

Place

Date

Commanding T. T. Snaples
Major R. C. A.
O. C. Discharge Depot.

Campaigns

Medals and Decorations

Rank and Name MONTGOMERY, Edmund

Regimental No. 8127

Unit 2nd Battn.

Date of enlistment Sept. 22, 1914

Place of birth England

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Mrs. Montgomery,
44 Division St., Kingston, Ont.

Date and place of discharge

Reason for discharge

Character on discharge

2nd 21804

6

NBRB #7

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
9 12/14	O.C. 2nd	Absent 1 dys pay.	Bustard	9-12-14	Pt. II - 21.
26 6/15	CD94 2nd Bn	Shock	No1 Can Field Amb	20.6.15	Transf to No3 Can Field Amb. ON.
28 6/15	CD95 "	Neurasthenia	No1 Can Hosp Etretat	21.6.15	
28.7.15	" 120 "	- " -	- " -	22.7.15	Dis to Duty
30.7.15	" 122 "	On strength No3 Can Base Details	France	23.7.15	
28.7.15	OC. No3 C. B.D.	To Canadian Base England	No3 C. B.D.	28.7.15	Pt II-24-7.8.15
31-7-15	OC 12th	Taken on Strength 5 Coy.	Shorncliffe	30-7-15	Pt II. 0 925.
11-9-15	R.02370.	Struck off. To Canada for discharge Per S.S. Corsican from	Liverpool	10-9-15.	Medically Unfit Pt II. 1268

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				

378

Army Form B. 179.

Medical Report on an Invalid.

SECTION "D"
DEPT. MILITIA & DEFENCE
FEB 23 1915
H.Q. CANADA
B. R. & I. OCT 13 1916

Station Shorncliffe

Date August 17. 1915.

1. Unit 12th Reserve Batt
2. Regimental No. 8124
3. Rank Pte.
4. Name Montgomery E.

5. Age last birthday 22.
6. Enlisted { on August. 17. 1914 / at Kingston Ont.
7. Former Trade or Occupation { Labourer.

649-m-1210

8. Disability.

Nervous exhaustion

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. ~~Same as right~~ June 15

10. Place of origin of disability. ~~Shorncliffe~~. La Quinchie

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

Was under shell fire for four days, after which he became very nervous - & was suffering considerable shock. The impediment in his speech which was previously slight now became much worse. He had tremors could not sleep. Was in hospital four weeks - 2 weeks sick furlough returned to duty 4 weeks ago. 2 weeks ago was engaged in the bank by collision with motor car causing pain on walking.

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

(b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (*See notes on page 3*).

Shock from shell fire
Active service
Shock from exposure to shell fire

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.

Heavy well nourished. Has poor appetite does not sleep well. is nervous and has grave impediment in his speech of nervous origin some ~~weakness~~ pain in the back on walking no headache or other pain. Otherwise normal

14. If the disability is an injury, was it caused

(*a*) In action? Yes

(*b*) On field service? Yes

(*c*) On duty? Yes,

(*d*) Off duty? No

15. Was a Court of Inquiry held on the injury? No

If so—(*a*) When? ~~[illegible]~~

(*b*) Where? no where.

(*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? No

19. Do you recommend

(*a*) Discharge as permanently unfit, or
(*b*) Change to England? I Discharge

W Frederick Parker Capt.

Officer in medical charge of case.

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

Station Shorncliffe

Date 17th August 1915

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.

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, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital 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 pension vary directly according to whether the disability is attributed to (*a*) active service, (*b*) climate, or (*c*) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165, Pay Warrant, 1913).

(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.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (*a*) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service.

I Yes
II No
III No

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

Shell fire

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?

To be stated in months.

Not applicable

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

Total.

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

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

Not applicable

26. Do the Board recommend

(*a*) Discharge as permanently unfit, or

(*b*) Change to England? No

Yes in Canada

I concur; but recommend that this patient be sent to Canada and retained in the Service until ..... when his further disposal, either for service in Canada or for discharge as unfit, should be decided by Militia Authorities there.

AUG 24 1915

Captain, C.A.M.C.
for D.M.S.
Canadian Contingents.

Signatures:—

[signature] President.

Fred'k Watts Capt. } Members.

J. A. McPherran Capt. }

Station Shorncliffe

Date Aug 19 - 15

Approved.

Station Shorncliffe

Date Aug 20th 1915

[signature] Administrative Medical Officer.

a/Dadms

R.C. MAR 1 1918
FEB 1918
NOT CHARGED

(*On leaving Corps or Station where invalided.*)

Transfer { Date _____ / Station _____ } or Embarkation { Date _____ / Port _____ }

Name of { Conveyance _____ / Vessel _____ / Officer in medical charge _____ }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ / Hospital or Station _____ }

_____
Officer in medical charge.

(*At Station or Hospital where finally disposed of.*)

Station and Hospital _____

Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
Date	From	To			

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision _____

_____
Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN INVALID.

Station _____
Corps _____
Regimental No. _____
Rank _____
Name _____
Disability _____
Date _____

Hospital or Station transferred to for final disposal _____

Date of final disposal _____

How finally disposed of _____

The original Report is invariably to accompany the discharge documents of Invalids.

Forms B. 179. 34

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