

"C" ORIGINAL
ATTESTATION PAPER.
176th O. S. Batt'n, C. E. 7th Batt'n. C.E. 7
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.
2nd Dragoons

No. 850184
Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

1. What is your surname? *Moore*
- 1a. What are your Christian names? *John*
- 1b. What is your present address? *Thorold Ont*
2. In what Town, Township or Parish, and in what Country were you born? *Carlisle Cumberland Co Eng*
3. What is the name of your next-of-kin? *John & Moore*
4. What is the address of your next-of-kin? *Victoria St Niagara Falls 5th Ont.*
- 4a. What is the relationship of your next-of-kin? *Father*
5. What is the date of your birth? *1st April 1888*
6. What is your Trade or Calling? *Carpenter*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
9. Do you now belong to the Active Militia? *no*
10. Have you ever served in any Military Force?
If so, state particulars of former Service. *no*
11. Do you understand the nature and terms of your engagement? *yes*
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John Moore*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

John Moore (Signature of Recruit)
Date *March 15* 1916. *H. J. Taylor Lieut* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Moore*, 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.

John Moore (Signature of Recruit)
Date *March 15* 1916. *H. J. Taylor Lieut* (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 *Thorold* this *15th* day of *March* 1916.

H. J. Taylor (Signature of Justice)

Description of John Moore on Enlistment.

Apparent Age 28 years 0 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement { Girth when fully expanded 38 ins.
Range of expansion 2 ins.

Complexion fair

Eyes brn

Hair brn

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

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

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

2 small scars on left side of neck
4 vaccinations on right arm.

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 15 1916.

Place Shorncliffe

G. A. Colman M.D.
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.

John Moore 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.

D. Sharpe St. Colman
(Signature of Officer)

Date 3 June 1916

REGIMENTAL DOCUMENTS.

SGT. MOORE, JOHN
NAME

REGT. NO. 850184 UNIT 75DH H. Q. FILE NO.

[illegible]

REGIMENTAL DOCUMENT

CONFIDENTIAL

only
Name
Number.

850184

Rank.

a/sgt.

P
Surname.

MOORE

Christian Name.

John

Units

70th Bn Can Div Theatre of War France

Date of Service.

22-6-17

Remarks.

~~112 Hatcher~~

119 Mitchener St.

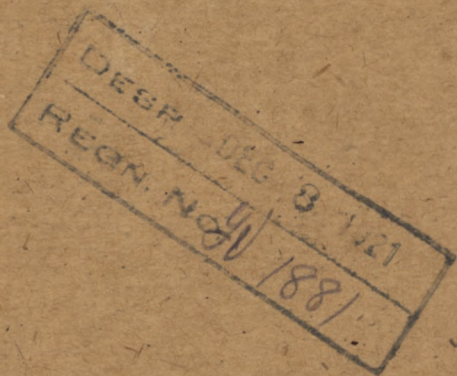
Latest Address.

~~31 Victoria St~~

Magara Falls
Ont

Roll No.

P. Page 8212.



SURNAME.

Moore

CHRISTIAN NAMES

John

REGL. No

850184

RANK

Pte

UNIT

176th

FORMER CORPS

Nil

CARD No.

9.5

*805 Div 7-8-19 Det. of
Do 224 of FOLL. 12-8-19
#2110*

Bn.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Moore John D.

RELATIONSHIP TO SOLDIER

Father

ADDRESS

*Victoria St., Niagara Falls,
Ont.*

COUNTRY OF BIRTH

England Carlisle

DATE

April 21 1888

PLACE OF ATTESTATION

Thorold, Ont.

DATE

Mar 15th 1916

o/s. 29/4/17.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.-8-16. H. Q. 1772-39-339.

*Q/C. 6-8-19 381
29 Sept*

From Halifax Per S.S. Olympic 29-4-17

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Carpenter

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

28

YEARS

0

MONTHS

HEIGHT

5

FEET

8

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

2

INCHES

COMPLEXION

Fair

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

2 Moles scar left side of neck.

MEDICAL EXAMINATION.

PLACE

Thorold, Ont.

DATE

Mar 15th 1916

Present Address. Thorold, Ont.

No. 850184

RANK

Pte cpl.

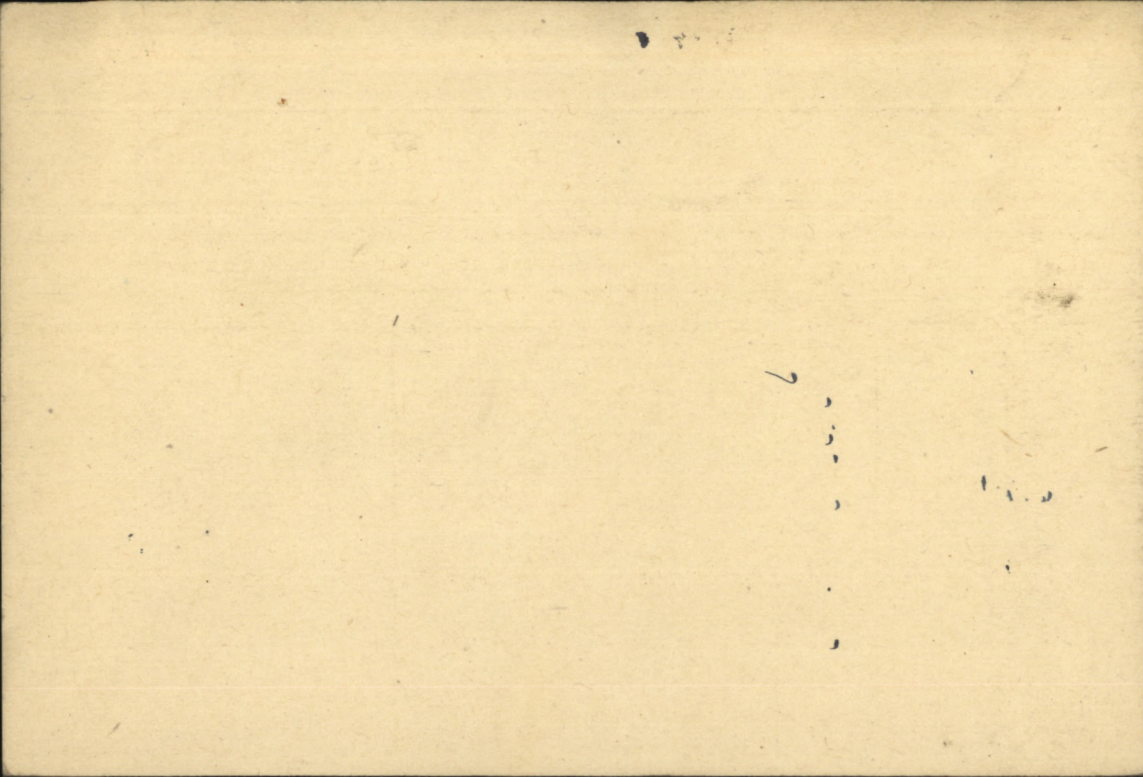
NAME

Moore, John

T. O. S. 15-3-16 to 30-3-16 UNIT 176th Battalion C. E. F.

M. D. 2.

PAID FROM 1916	PAID TO 1916	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Mar. 15	Mar. 31	✓		
Apr		✓		
May		✓		
June		✓		
July		✓		
Aug		✓		
Sept -		✓		
Oct -		✓		
Nov		✓		
Dec		✓		
Jan.		✓		
Feb		✓		
Mar		✓		
Apr		✓		
		~		
			Promote cpl 1-7-16	Do 136-17-7-16.



Name **MOORE**

Rank

Sgt.
1st C.O.R.D.Reg. No. **850184**Unit **7th Baltn.**

Next of Kin

Canada

10025

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
30.10.17	1 Cor. Dep. Boulogne		Wounded Q	A57	116371	1/15749
30.10	N. 83 Gen Hosp. Boulogne		G.S.W. R. Hand	A58		15814
This entry precedes entry in A57.						
9.11	To No. 3 Rest camp		do	A66		16167
19.2.18	No. 12 Gen Field Amb.		P.U.D.	A69		14074
24.2.18	Dis. to Duty		do	A158		14230
18.3.18	No. 6 Gen. Lab. Stn		Shell W. L. Thigh & Hand	A168	A151	P 107263
	DANGEROUSLY WOUNDED		N.S.	A170	H92	P 108659
21.3	IMPROVING		do	A170		5227
28.3	No. 13 U.S.A. Gen. H. Boulogne		do	A170		15513
1-4	1st Bn. W.H. Rednal Bn.		do	B180		
			P.T.O.			

John

Pile

850184

75 Rev.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
5-6	Mil. (Conv.) Hosp.	Epsom	G.S.W. L ^e . thigh	B234		19231
26-7	Discharged		d.	B250		6996
25-4-19	N° 11 ban & H	Thorncliffe	"20"	L 372		10144
2-7-19	Discharged		do	L 564		4585
Ref. C.L.	b. 5124	5-5-19 report	"20" changed to "(20) Prostatitis"	L 573		9460
R/L	26-7-18 to 7-8-18	2nd Comd. Mammouth				

SURNAME

CHRISTIAN NAME OR NAMES

FORM D M S 1300

REG. NO.

moorey. J. 850184.

RANK

UNIT

Co.

TROOP

BATTY

HOSPITAL

DATE OF ADMISSION

1. 83 Gen B. ague 30.10.17
HOSP. 30.10.17

2. 12 b 4 Amb 19.2.18
HOSP. 19.2.18

3. 13 General - Boulogne 18.3.18
HOSP. 18.3.18

4. 1 Birmingham War Birmingham 1-4-18
HOSP. 1-4-18

DIAGNOSIS

W. G. S. W. R. Hand 1600

1. P. V. O. b.

2.

3.

SW L. Thigh & Hand.
V. D. G. L. Prostatitis. 100

DISPOSITION

Disco to 3 Post Camp 9-11-17.

DATE

REMARKS

ch 8.11.17 A57.5.
9.11.17 A58.5.
19.11.17. A66 (2).
26.2.18 A149.3.
1. 3. 18 A152.
20. 3. 18 A668. Hand. w. d.
28.3-18 A175. Condition Improving-21-3-18
4. 4. 18 A1796
5- 4- 18 B180
7- 6- 18 B234-II
1- 8- 18 B280/2.
5- 5- 19 C512.
9.7.19 C564
22.7.19 C577

Note: Re. C. 512. Report (V.D.G.) changed
Beh. of D. G. M. S. G. M. F. D. London.
to Prostatitis

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1. *Mel Court TP Epsom* 5.6.18
2. *11 G. G. H. Moore Barracks* 25-4-19
- 3.
- 4.
- 5.
- 6.
- 7.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank A Sqr Name JOHN Surname MOORE
Unit or Corps 1st C.O.R.D (If a soldier) Regt. No. 850184
Born at CARLISLE ENGLAND on date 1st APRIL 1878
Signature (for identification) appt J. Croone

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 150 lbs.
Height 5 ft. 8 ins.

Vertical adherent scar 2" x 5" on outer aspect of left thigh. No limitation of movements. On squatting no feeling of constriction at site of scar

2. NUTRITION AND DIATHESIS?

Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?

Normal

4. RESPIRATORY SYSTEM.

Normal

5. HEART?

Abnormal Sounds?

Normal

Abnormal Size?

Normal

Pulse Rate?

80

Intermittence or irregularity?

None

6. ARTERIES.—Any hardening?

None

7. DIGESTIVE SYSTEM?

Normal

8. GENITO-URINARY SYSTEM?

Normal

Urinalysis—S.G.?

1020

Reaction?

Alkaline

Albumen?

Nil

Sugar?

Nil

9. SKIN, MIDDLE EAR, EYE

or any other part?

V.R.P. 6/6
V.S.P. 6/6

Ear-hearing normal.

Examination Sept. C.A.M.C.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

No

11. Opinion as to the health and physical condition of the one examined?

Good



Examined at

Witly

Signed

R. Morrison Capt

M.O.

Date

Dec 30th 1918

Signed

C. Harofalo Capt

M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

74

1891

Q. R. 370

1845

10. 11. 1900

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters)

RECEIVED

Date of Examination in England

Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? *no*

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

(a) In Canada

(b) In England *70*

(c) In France

Signature of Dental Officer

R. C. Crosby, Capt

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

Casualty Form—Active Service.

M. F. W. 34. (A. F. 1-16)
250M.—1-16
H. Q. 1772-39-971

Unit, Regiment or Corps

176th O. S. Batt'n, C. E. F.

Regimental No. 850184

Rank

Private

Name

Moore, John

C. E. F.

Enlisted (a) 15.3.16

Terms of Service (a) War and 6 mos.

Service reckons from (a) 15.3.16

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)

Carpenter

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				

Embarked at Halifax April 28/17

Disembarked at Liverpool May 7/17

Promoted to a/cpl Otterpool May 7/17

Transferred to 12th Res. Bn

FIRST SANDING 9.5.17 Part II 126

Reverts at own Request to previous unit

Second SANDING 21.6.17 Part II 154

Transferred to 75th Bn

FIRST SANDING 21.6.17 Part II 155

3 JUL 1917

C.B.D. TAKEN on STRENGTH 75th

22 JUN 1917

N. R.

Shane Thompson
90 Lieut i/c Records
12th Res. Bn. C.E.F.

26 JUN 1917

Left for Unit

FIELD

26 JUN 1917

N. R.

29 JUN 1917

Unit

Joined Unit

FIELD

27 JUN 1917

N. R.

Sail #29 "Saturnia" Glasgow-Montreal
28/7/19 4/8/19

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

(P.T.O.)

CERTIFIED CORRECT.

1 JUL 1917

GEN. RECORDS, LONDON.

850184 Pte. Moore J

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					
28/10/17.	12 C. 7 A.	S.M. Hand R.	to	10. C.C.S.	28/10/17	A/36/1124 - A/9476.
30/10/17	1 Condep.	do.		1 Condep.	30/10/17	M. 3034/2949 - A/9476.
29/10/17	13 C. 7 A.	do.	to	C.C.S.	28/10/17	A/36/1125 - A/9902
30/10/17	83 Gen.	do.	to	Con Camp. Boulogne	30/10/17	M. 3034/2984 - A/9856
29/10/17	3 C.C.S.	do	to	5 A.T.	29/10/17	A/36/1194 - B. 157.
3/11/17	Unit	Levac. Wounded		Field	27/10/17	B. 213.
30/10/17	83 Gen.	Gen. R. Hand		83 Gen.	30/10/17	M. 3034/2985; B. 636.
12/11/17.	H.C.I.B.D.	T.O.S. Class A.	Grant Con Camp		12/11/17.	N.R.
9/11/17	1 Con. Dept.	Fit.	To Rest Camp.		9/11/17	W. 3034. W. 4088.
11/11/17	Detail Camp	To Base			11/11/17	N.R. - 136
22/11/17	4 C.C.S.	Classified "A"		4 C.C.S.	22/11/17	N.R. 148
14/11/17	No.	Neurothemia. T.B. Treatment		No.	14/11/17	N.R.
26/12/17	do	D.O.D. & C.C.R.C.		Field	26/12/17	M.R. 551
V	C.C.R.C.	I.O.S.				M.R. 66.
15/2/18	"	Left for Unit			15/2/18	N.R. 146
16/2/18	Unit	Rejoined Unit			15/2/18	B. 213
19/2/18	12 C. 7 A.	Sgt. P.H.O.		12 C. 7 A.	19/2/18	A/8360 - D. 4450.
23/2/18	Unit	Levac. Sick		Field	do.	B. 213.
24/2/18	12 C. 7 A.	P.H.O.	To	Duty	24/2/18	B. 213.
2/3/18	Unit	Rejoined Unit		do.	do.	B. 213.
19/3/18	11 C. 7 A.	S.M. (K) Little finger, (C) Thigh		11 C. 7 A. }	18/3/18	A/9860 - D. 8605
19/3/18	6 C.C.S.	do.		6 C.C.S. }	18/3/18	A/9761 - D. 8605.
23/3/18	Unit	Levac. Wounded		Field	do	B. 213.
27/3/18	6 C.C.S.	S.M. (K) Little finger (C) Thigh.	To	24 A.T.	27/3/18	A/184. D. 9912.
28/3/18	13 Gen.	Gen. Multiple		13 Gen.	28/3/18	M. 6254 - E. 604
4/4/18	do.	do.		England	1-4-18	M. 6444 - E. 1162.
		Posted to H/S. Jan Breydel				W. 3083/5082
		Rep. Dep. Shorncliffe				D.O. 28 d/19-4-18
						Lieutenant, AAC for Lt. Col. 3rd Ech. G.H.Q.

S.O.S. CMFC TO G.H.Q.

P.L.B. ORDER NO. 73

26/11/19

Cal Bemoor

RECEIVED 11/10/19

SPS 1110 000 WITLEY

*Miss
100M*

Rank _____ Name **MOORE, John.** Reg'l No. **850184**
 Unit **176th Bn. to 1st C.O. R.D.** If in perm. Corps, }
 What Unit? }
 Married or Single **Single.**
 Place and Date of Enlistment **Thorold. 15th March 1916.** Place of Birth **Carlisle.**
Cumberland. Co. Eng.
 Name and Address, Next-of-Kin **John D. Moore,**
Victoria St, Niagara Falls, South. Ont. Relationship **Father.**
Canada.
 Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____
 Separation Allowance \$ _____ Payable to _____
 Relationship _____

31144
 N/E. R.B. No. _____
 File R.L. _____
 Category **CAN. OR**

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

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.				
<i>C</i>		Arrived in England. S.S. "Olympic"		7.5.17	
18.5.17	12 th Bn	T.O.S. from 176 th Bn. & landing		9.5.17	Pt 110-126
18.5.17	✓	To be A/Cpl.	✓	9.5.17	✓ 126 + Pt 110-164 d/3.7.17
20.6.17	✓	Reverts to ranks to go to S.	✓	21.6.17	✓ 154 <i>Cancelled</i> Pt 110-171 d/11.7.17
3.7.17	✓	Reverts to ranks.	✓	21.6.17	✓ 164.
21.6.17	✓	S.O.S. to 75 th Bn. O/S. <i>Pte</i>	✓	21.6.17	✓ 155.4 (75 th Bn. Pt 110-90 d/3.7.17) A.F.B. chkd.
7-11-17	1 st BOR.	To 1 st Bn Dep	Boulogne	30-10-17	b.L. A 57. wounded.
8-11-17	✓	To 83 Gen Hosp	✓	30-10-17	— A 58.
17-11-17	✓	Disch to 3 Rest Camp	✓	9-11-17	— A 66.
20-3-18	1 st BOR	Dangerously wounded	Field	18-3-18	Ch A/168

*100M
Miss
100M*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS	
Date.	From whom received.				Taken from Official Documents.	
8-4-18	1 CORP	LOS from France	Ph Wittey	14-18	Ph 96	(28 ^d 19/4/18 75 Pm)
29-7-18	✓	On Com. 2nd CCO	✓	26-7-18	- 208	
28-8-18	12th Res	TOS from 1st CORD	✓	27-8-18	D.O. 204	(^{1st CORD} D.O. 239 ^d 19-8-18)
31-8-18	✓	SOS to 1st CORD	✓	31-8-18	- 207	(^{1st CORD} D.O. 243 ^d 2-9-18)
11-9-18	1st CORD	On Com. Inf. Instr. Pool Bechill Pte. Wittey		6-9-18	D.O. 252	
21-10-18	"	Leaves on com. and is S.O.S.	u	19-10-18	- 292.	
		to Inf. Instr. School, Bechill	✓		6 th DO 255	10/30 18
31-10-18	C.L.S.	App of sergeant with pay	✓ Bechill	19-10-18	DO 255	
3-12-18	S.S.	Leaves on com. to 2 nd Res.	as Sgt do	2-12-18	DO 284	
5-12-18	S.S.	S. AS to 1 st CORD	as Sgt Bechill	5-12-18	DO 286	(^{1st CORD} D.O. 343 ^d 11-12-18)
3-7-19	1 CORD.	Attd N. Wing	✓ Wittey	2-7-19	DO. 135	S.L. 99-I-43
7-7-19	1 CORD	App of sergeant with pay to P. Wing	✓	4-7-19	✓ 138	25/7/19
	1st CEN. ONT. REGT.					
26-7-19	P. Wing	Lost to Canada.	Wittey	24-7-19	DO 93	

15-3-16
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
25m-4-17.
H. Q. 1772-39-819.

To Whom *Mrs. H. Douglas.*
Address *Victoria St.*
Niagara Falls.

By Whom Assigned *Moore J.*
Regtl. No. *850184.*
Rank *Corpl.*
Corps *176 Bn.*

Rate *15-00/ From May 1-17*

Ont.
MAY 1 1917

PAYMENTS

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



THE
Y. S. B. Y.
OF THE

W. S. B. Y.
S. S. B. Y.

21 pp I

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mrs. D. Douglas*
(Assignee)

PAYMENTS.

Name of Soldier *Moore J.**Corpl. 850184 - 176 Bn.*

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			<i>15-00</i>
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		<i>M14435</i>	<i>15</i>	
June		<i>O 17016</i>	<i>15</i>	<i>c</i>
July		<i>E 22255</i>	<i>15</i>	<i>s</i>
Aug.		<i>R 32275</i>	<i>15</i>	
Sept.		<i>R 38158</i>	<i>15</i>	<i>ln</i>
Oct.		<i>I 44410</i>	<i>15</i>	
Nov.		<i>T 51214</i>	<i>15</i>	
Dec.		<i>R 60035</i>	<i>15</i>	
Jan.	1918			
Feb.				<i>150</i>
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.						

DEPARTMENT OF VETERANS AFFAIRS

To
Attention of

COPY FOR H.O. FILE

OTTAWA 4, ONTARIO
NOV 18, 1968
Date.....

NAME	MOORE JOHN	SERVICE	850184 WW1	C.P.C. No.	161906	NAVY
		NUMBER		W.V.A. No.	206006	ARMY X
						R.C.A.F.

The DEPARTMENT has received information from

.....~~TELE~~ MEMO S.T.M.O. DVA SUNNYBROOK HOSPITAL NOV 13, 1968.....
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death.....NOV 12, 1968.....
Cause of Death.....
Place of Death.....SUNNYBROOK HOSPITAL TORONTO 12, ONTARIO

Name and Address of next of kin (if known).....

Copies to: W.S.R.
V. I.
~~DAY~~
~~XXDO.~~
H.O.

} Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

DEPARTMENT OF DEFENSE AFFAIRS

OTTA A. 01110
NOV 13, 1963

NOV 13, 1963

A number of

NAME: JOHN JOSEPH
ADDRESS: 10000 W. 100th St.
CITY: WYOMING
STATE: WYOMING
ZIP: 83006

THIS FILE IS THE PROPERTY OF THE DEPARTMENT OF DEFENSE

IT IS TO BE KEPT IN THE FILE OF THE DEPARTMENT OF DEFENSE

IT IS TO BE KEPT IN THE FILE OF THE DEPARTMENT OF DEFENSE

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

NAME AND ADDRESS OF THE PERSON TO WHOM THE FILE IS TO BE SENT

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

NOV 13, 1963

121
653
111

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET. 850184

Surname Moore Christian Name John

Examined { on 15 day of Mar. 1916
at Shorncliffe

Birthplace { City or Town Barlyke
County England

Apparent age 28

Trade or occupation Painter

Height 5 Feet 8 Inches

Weight 165 Lbs.

Chest measurement { Minimum 36 inches
Maximum expansion 38 inches

Physical development good

Small-Pox Marks none

Approved by JA. R. ...
Rank ... M.O.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
<u>18.7.18</u>	<u>DZ</u>	<u>John ...</u> <u>11 APR 1918</u> M.O.
<u>21.8.18</u>	<u>A</u>	<u>Dr. ...</u> <u>Major</u> <u>22.8.18</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
Number 5 1

When Vaccinated last 9 years ago 11/8/16 T A. J. ... M.O.

(a) Marks indicating congenital peculiarities or previous disease 2. small scars on
left side of neck M.O.

(b) Slight defects but not sufficient to cause rejection

Date.	Result.	VACCINATIONS.
<u>11/8/16</u>	<u>T</u>	<u>A. J. ...</u> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>19/7/16</u>	<u>P</u>	<u>A. J. ...</u> M.O.
<u>26/7/16</u>	<u>P</u>	<u>A. J. ...</u> M.O.
<u>2/8/16</u>	<u>P</u>	<u>A. J. ...</u> M.O.
<u>11.7.18</u>	<u>2nd</u>	<u>2nd</u> <u>22.8.18</u> M.O.

Enlisted on 15 day of March 1916 at Shorncliffe

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>176th Bn.</u>	<u>850184</u>	<u>good</u>	<u>Mar 15/16</u>
Transferred to	<u>C.E.F.</u> <u>12th Bn</u> <u>75th Bn</u>	<u>21/6/17</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>WITLEY CAMP, SURREY.</u> <u>12.7</u> <u>1918</u>	<u>Jan. 24</u>	<u>Thyph. B.</u>	<u>...</u>

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.

CANADIAN

Christian Name *John*
Surname *Moore*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Niagara Falls		7	11	16	10	11	16	Pleurisy	3	Recovery	W. F. Ryher
1st Birmingham War Hospital.		1	4	18.	24	6	18	Shw. Sh. B. Th. Thigh & L. Hand	65	15.2.18 Leno. Large wound. ind. 65. hip. 7. B. venereal R. Thigh. 12.4.15. Wds healed. Movements.	W. F. Ryher
M. L. Epsom.		4	6	18.	26	JUL	1918	do.	53	L. O. A. Wounds. left thigh not quite healed. Complaints frequency of micturition. Dressings and P.T. here, Improved. Now fit D.I.	W. F. Ryher
No. XI CANADIAN GENERAL HOSPITAL MOORE BARRACKS SHORNOLIFFE.		24	4	19	13	5	19	V. O. G.	19	Headwound in injury frequency - P. D. - Ur. pos. Treat. Uriz Sp. - See injury card	W. F. Ryher
		13	5	19	2	7	19	Prostatitis	50	Nygagmids. Day changed & Prostatitis 13/5/19 Cystoscopy Uric acid Uriz. Dorch. D. duty with a flesh clip Cat A	W. F. Ryher

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

- (1) Name of Overseas Unit which Soldier joins 176th Overseas Battalion
- (2) Regimental Number 850184.
- (3) Full Name of Soldier JOHN MOORE.
- (4) Place of Birth Cumberland, England.
- (5) Are you married, or not? Yes.
- (6) If married, state,
 - (a) Full name of your wife
 - (b) Present Postal Address
- (7) Are you a widower? No
- (8) Have you any children?
If so, give number of boys and girls.
Also their names and ages.

(9) Is your Father alive?

If so, state name and address

(10) Is your Mother alive?

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Brother - Harry J. Moore
Winford St. Niagara Falls
Ontario Canada

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

Date

MAR 20 1917

W. Sharpe
Lt. Colonel
Officer Commanding.
115th Overseas Battalion, C.E.

MEDICAL CASE SHEET.*

Oro 111

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

850184

Pvt

Moore

J

Unit.

Age.

Service.

Year

75th Bn

29

Station
and Date.

Disease

G. S. W. L. thigh

5.6.18.

Wound on left thigh not quite healed. Complaint of
frequency of urine. & 7 redressing. UrinalysisJ. Blum
11.7.182ab 11.7.18
2

18.7-18.

D.I.

J. Blum
Capt. C. G. M. C.

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

Station
and Date.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE.
CLASS "A" No. _____THIS IS TO CERTIFY that No. 850184 (Rank) 1st SergeantName (in full) John Moore enlisted inthe One Hundred and Seventy Sixth BattalionCANADIAN EXPEDITIONARY FORCE at Thoulon on the 15thday of March 1916HE served in France with Seventy Fifth Battalion

Demobilization.

and is now discharged from the service by reason of

~~Medical Unfitness.~~

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

Age 31 yearsHeight 5 ft 8 inchesComplexion FairEyes BrownHair AuburnSignature of Soldier. J. MooreMarks or Scars Scar right andleft thighSignature of Issuing Officer. H. Sargent

Issuing Officer.

O.C. No. 2 District Depot.

Rank

Date of Discharge
No. 2 DISTRICT DEPOT

AUG 7 1919

TORONTO

Date AUG 7 1919 19....NB.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO
FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.



THE 10-20-1919
Name (Print) John Thomas
Rank at time of entry into service
Company
Service No. 127
Date of birth
Place of birth
Place of residence
Place of birth of father
Place of birth of mother

Place of birth of father
Place of birth of mother
Place of birth of father
Place of birth of mother
Place of birth of father
Place of birth of mother
Place of birth of father
Place of birth of mother
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Place of birth of mother
Place of birth of father
Place of birth of mother
Place of birth of father
Place of birth of mother
Place of birth of father
Place of birth of mother

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

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.

Regimental No. 850184 Rank Pte Name Moore John
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
JUL 25 1919 O. S.		T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919			PART II D. C. 224
AUG 7 1919 S. O. S.		(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II			224
					<i>W. C. Roberts</i> Lieut. For O. C. No. 2 District Depot.

(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				

ASSIGNED PAY		ENGLAND OR CANADA.		SEPARATION ALLOWANCE.		ENGLAND OR CANADA.		NAME:- MOORE John															
EFFECTIVE DATE:- 1.5.17				EFFECTIVE DATE:-				NUMBER:- 850184															
AMOUNT:- £5.00				AMOUNT:-				PARTICULARS OF RANK OR APPOINTMENT															
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.				AUTHORITY		DATE EFFECTIVE		RANK OR APPOINTMENT											
Mrs H Douglas (Sister) Victoria St. Niagara Falls Ont South Ont								D.O. 255-30/10/18. C. Ing Sch.		19/10/18		Pte a/Sgt											
A.P. Stopped Effec 1/8/19.								UNIT AND TRANSFERS															
								ORIGINAL UNIT:- 176 th Bn															
								DATE ACCOUNT FIRST OPENED - 1.5.17															
DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT		DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT									
2-7-19		3162		XL C.F.H. £1-		487																	
5-7-19		8886		P.Wing £17-		8273																	
						8760																	
								Ledger Bal 93 68															
								L.P.C. 608															
								P 868 ready 26.8.19 Dr 13.00															
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK																			
DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT		DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT									
2-7-19		3162		XL C.F.H. £1-		487																	
5-7-19		8886		P.Wing £17-		8273																	
						8760																	
								Ledger Bal 93 68															
								L.P.C. 608															
								P 868 ready 26.8.19 Dr 13.00															
PARTICULARS OF RENDERING NON-EFFECTIVE				Disch: to Canada 31 79 N.R. 11461 Prom: 6/7 Witley M.D. 2																			
MONTH		PARTICULARS		CR 1		CR 2		PARTICULARS		DR 1		DR 2		DR 3		DR 4		BALANCE		DEFERRED		SEPARATION	
Mar 31		Bas Indg																105 98					
Apr		P Pay		33				Can at										15		123 78			
				33														15					
May		do		34 10				Can at										15		143 08			
				34 10														15					
June		do		33				Apr. 3242. 6.6.18. Opsom		973								15		151 35			
				33				Can at		973								15					
July				34 10				Can at										15					
		to O. 179. 31.7.18. 2 CCD						AR 3452. 11.7.18. Woodgate Pk		487								15		125 67			
		St. James. 26.7.18 to 7 PM. 7/8/18		876				1864. 26.7.18 do		4867								15					
				42 86						53 54								15					
Aug		P Pay		34 10				Can at										15					
								AR 3540 15/8 2 CCD		24 57								15		95 63			
								✓ 3975 28/8 do		24 57								15					
				34 10						49 14								15					
Sept				33				Can at										15					
								AR 1782 7/9 3 Res		24 33								15		79 57		OK-9850	
								2828 26/9 C.J.S		9 93								15					
				53						34 06								15					
Oct				34 10				C.A.P.										15		98 67			
		apptd a/Sgt with Pay.																					

NAME MOORE. J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Jan/19	Forward	138.			973			45	153.08		
				2107. 26/11 21 Res. (67)	2433				128.75		
Feb	S.P.	138.			3406			45			
		42						15	155.75		
				14463 3/1/19 G.S.D. (21)	1460						
				12876 20/12/19 " (21)	6327						
				16537 15/1/19 " (26)	1460						
				17662 27/1/19 " (29)	973						
				17026 21/1/19 " (29)	487						
				48737 21/1/19 " (29)	1947				2921		
				20007 10.2.19 (36)	973				1948		
Mch		46.50						15	5098		
				20938 14.2.19 " (38)	487				46.11		
				24 17.2.19 " (40)	973				3638		
				715 24.2.19 " (40)	973				2665		
				1593 3.3.19 " (49)	487				2178		
				1967 8.3.19 " (49)	487				1691		
		88.50			17034			30			
Apr.		45		G.A.P.				15	46.91		
				3327 14.3.19 P.D.Y. .8.	487				42.04		
				4450 20.3.19 " .8.	487				37.17		
				5535 28.3.19 " 11.	973				27.44		
				4991 24.3.19 " 11.	973				17.71		
				1170 12.4.19 " 11.	487				12.84		
May	S.P.	46.50		G.A.P.				15	44.34		
				2247 22.4.19 - 20	973						
				1923 17.4.19 20	243				3218		
		91.50			4623			30			
June		45		G.A.P.				15	62.18		
July		46.50						15	93.68		
		91.50						30			
				2886 Pring 5/4.	87 1/3				1095		
				3162 Xicel 7/4.	487				608		
					8460						
Aug.				Hab Steph 24/4/19 Tue 13/5/19 N.D. 20 days.							
				No. 137- 5/7/19. 1 C.O.R.D.		13 00			6.92		
						13 00					
				L.O.S 25.7.19 M.DZ. S.F. 99.							

I. Group. P. Wing.

WAR SERVICE BADGE

CLASS "A" No.

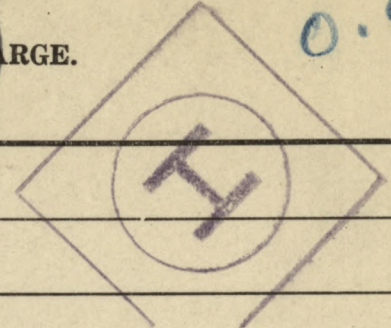
389298

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

d.a. 1/2
o.e. 2



1. No. 850184.

2. Rank *Serjt.*

3. Name *Moore, John.*

4. Unit *75th Batt.*

5. Date of Discharge | AUG 7 1919 | Place *TORONTO, ONT.*

6. Reason for Discharge **DEMOBILIZATION**

Demobilization

7. Authority No. 2, D.D., Part II, D.O. No. 224

8. Proposed Residence after Discharge

31 Victoria St.

*Niagara Falls, S.
Ont.*

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?

John Moore

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place **No. 2 DISTRICT DEPOT**

Date **AUG 7 1919**

TORONTO

Signature

H. Sargent
FOR
U.C. No. 2 (O.C. Discharging Unit.)

12

PROCEEDINGS ON DISCHARGE
(Demobilization)
SHORT FORM

1. No.		2. Rank		3. Name		4. Unit	
5. Date of Discharge		6. Reason for Discharge		7. Proposed Residence after Discharge			
8. Authority		9. Signature of Soldier					
10. CONFIRMATION		The discharge of the above named man is hereby confirmed.					
Place		Date		Signature			
11. (O.C. Discharging Unit)		12. (O.C. Discharging Unit)					

DEMobilIZATION

TORONTO, ONT.

Aug 7 1919

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the undernoted place and date I received my discharge Cer-

tificate M.T.W. 1

Signature of Soldier

CONFIRMATION

The discharge of the above named man is hereby confirmed.

Place

Date

Signature

(O.C. Discharging Unit)

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Summary Documents.

Group.....

Checked by No.....

Date 23 JUL 1919.....

DISPERSAL T.

-

-

-

-

-

-

-

-

-

-

-

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M

18702 May 1-17

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 850184
 Rank Cpl. Promoted Reverted Discharge
 Soldier's Name J. Moore
 Battalion 176th Battr
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name Mr H. Douglas
 Address Victoria St., Niagara Falls
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					013056-7-210
Dec 3			120	120	
Jan	I 62837		15	15	✓
Feb	9 73064		15	15	✓
Mar	N 91247		15	15	✓
Apr	N 9225		15	15	✓
May	A 16419		15	15	✓
June	N 20705		15	15	✓
July	H 30108		15	15	✓
Aug	P 39357		15	15	✓
Sept	S 50795		15	15	✓
Oct	X 55063		15	15	✓
Nov	J 61489		15	15	✓
Dec	X 66702		15	15	✓
1919					
Jan	U 71431		15	15	✓
Feb	W 75820		15	15	✓
Mar	M 85142		15	15	✓
Apr	P 2945		15	15	✓
May	J 7572		15	15	✓
June	H 10958		15	15	✓
July	G 11296		15	15	✓
Aug	P 13371		15	15	✓
			820	820	

M. F. W. 128
 400M-6-17-1772-39-141
 L. L. 22320-M. & D. 1883.

No Closed

Rep'd per

Date

AUDITED

A STENCIL
 HAS BEEN MADE
 FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque
No.

Amount
S/A

Amount
A/P

Total

REMARKS

M. F. W. 128
400M.-6-17-1772-38-1141
L. L. 22320-M. & D. 7983.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley Surrey DATE July 12/19

1. 1 (a) Unit 76 Bn (b) Regimental No. 1560184 (c) Rank Sgt

(d) Surname MOORE (e) Christian name John

(f) Home address 31 Victoria St Niagara Falls Ont

(g) Next of Kin John L Moore (h) Relationship Father

(i) Address of Next of Kin 31 Victoria St Niagara Falls Ont

2. Age last birthday 31 Date of birth April 1st 1887

3. Enlistment, or Appointment (if an Officer) (a) Place Thorold Ont (b) Date March 15/16

4. Personal description:

(a) Height 5' 0" (b) Weight 150 lb (c) Complexion Fair

(d) Colour of hair Dark brown (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Scar on left thigh -

5. Former trade or occupation Carpenter

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

Years

Days

Three

121

PERIODS

From

To

Canada March 15/16 April 28/17

England May 7/17 June 21/17

France or other theatres of War June 21/17 April 2/18

7. Original disease, or injury LACERATION LT. THIGH

(a) Date of origin 18.3.18 (b) Place of origin France

(c) Cause SSW (shrapnel)

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

(Slight weakness Lt. thigh)

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective - Large irregular scar outer side left thigh 6" long. Tender on pressure in parts.

Subjective. Lt leg tires easily say six miles.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System... no Cardio-Vascular System... no Genito-Urinary System... no
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
Special Senses... no Respiratory System... no Integumentary System... no
Disturbances of Mentality... no Digestive System... no Muscular System... no
Osseous and Joint Systems... no Any other general condition... no

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

18.3.18 GSW Lt & Rt thighs.
wound in Rt thigh slight.
Admitted 1st B.W Hosp 1.4.18
transferred MCH Hosp
Dressings & P/Os. 26.7.18
D.T.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

7.11.16 Pleurisy Recovery
24.4.19 VDg! Recovery
13.3.19 Prostatitis Cat. A

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

4 (F)

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

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

na

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

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? *3 months*

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

10 (a)

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

no

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

17. Recommendations.....

Staples G. H. Cane
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, *Moore* have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

ym

Asgt J. Moore

Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Y. J. McConer.

19. Is the invalid fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service (Canada only),
- (d) Temporarily unfit.
- (e) Unfit for service in Categories A, B and C

(Category A) ~~(Yes or No.)~~
 (" B) ~~(Yes or No.)~~
 (" C) ~~(Yes or No.)~~
 (" D) ~~(Yes or No.)~~
 (" E) ~~(Yes or No.)~~

yn BT

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
- (c) ~~Should pass under his own control.~~
- (d) ~~Should not pass under his own control.~~
 (Strike out condition not applicable.)

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

RAC and CG, Tel 90837 11/11/18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

WITLEY CAMP, SURREY.
 127
 1919

PLACE.....

DATE.....

[Signature] President.
[Signature] Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE.....
 DATE.....
 President
 Members

APPROVED BY *[Signature]* APPROVED BY *[Signature]*
 Assistant Director of Medical Services. Director-General of Medical Services.

DATE *15-7-19*

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

Casualty Form—Active Service.

Regiment or Corps... 176th Pm.....Rank... Pte..... Surname... Moore..... Christian Name... John.....

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

Enlisted (a)... 15.3.16..... Terms of Service (a)... D.O.W...... Service reckons from (a)... 15.3.16.....

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

Extended { } Re-engaged { } Qualification (b).....
or Corps Trade and rate.....

Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked...			
<u>8.4.18</u> <u>us</u>	<u>17th CORD</u>	<u>TOS from 75th Pm.</u>	<u>Witley</u>	<u>1.4.18</u>	<u>D.O. 96</u>
<u>2nd C.C.D.</u>	<u>31-7-18</u>	<u>Transferred to 2nd C.C.D.</u>	<u>26-7-18</u>	<u>17.9</u>	<u>PL 11 No. 179</u>
	<u>OC, 2nd C.C.D.</u>	<u>Ceases to be attached to</u>	<u>Brainshott.</u>		<u>Pt. 2 D.O. No. 203.</u>
<u>28.8.18.</u>		<u>2nd C.C.D.</u>	<u>27.8.18.</u>		<u>Brainshott.</u>
		<u>on return to 1st CORD Res. Bn.</u>			<u>for OC, 2nd C.C.D.</u>
<u>28.8.18</u>	<u>12th Res.</u>	<u>T.O.S. 12th Res Batt</u>	<u>Witley.</u>	<u>27.8.18</u>	<u>part "204</u>
<u>31.8.18</u>	<u>12th Res</u>	<u>S.O.S. in 1st CORD</u>	<u>Witley</u>	<u>31.8.18</u>	<u>part "207</u>

(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 in the 1/6 Records.

(b) Signaller, Shoeing-Smith, &c.

W. 5527—M2008 1990m 7/17 (35435) C. P. & S. Ltd. Forms B. 103 1/11/50

NAME

Moore, J.

REGT. No.

850184

RANK AND UNIT

Sgt. J.

1st. Cent. Out Regt

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Q. 564

Disch.

2-7-19

as per 523
50. Prostatitis

NAME

Moore John

REG'T'L No.

850184

H. Q. FILE No. 649.

RANK AND CORPS

Dty. C. Sgt.

75th Bn (form 176)

FOLLOWS

No.

75th Bn

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

22-5

M 6321

10-11-17

Adm. No 1 Conval. Depot Boulogne
Oct. 30th 1917 wounded ✓H. 81¹⁴⁻²

21-3-18.

Darg. wounded No 6 Cas. Clg. Str.
Mar. 18th 1918. ✓H 92²²⁻¹

29-3-18

Cond. improved No. 6 Cas. Clg. Stat.
Mar. 21st. 1918. ✓

6361 W.S.M. 3-4-18

Improving

67 W.S.M. 17-4-18

1st. Birmingham War H. Rubery Hill Birmingham
G.S.W. left. thigh has undergone operation Wnd.
Progressing Satisfactorily. Able to sit up
much better.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS 1st cent Ont. Regt.
a 57 ⁵	1 conv. Depot, Boulogne	30-10-17	Wounded "Q"
a 58- ⁵	83 Gen Boulogne	30-10-17	GSW. R. Hand
a 66-	Discharged to #3 Rest Camp	9-11-17	" " " " "
a 149 ³	#12 Can. Fld. Amb.	19-2-18	P. U. O.
a 152 ¹	Disch to duty	24-2-18	P. U. O.
a 168 ¹	#6 Can. Clear Statn	18-3-18	Dang. wounded
a 175 ¹	#6 Can. Clear Statn	21-3-18	condition improving Prev. rept. dang. wded (Sw. L. Thigh & Hand)
a 179 ⁶	#13 Gen. Boulogne	28-3-18	" " " "
B 180 ¹	1st Birmingham War Rednal, Birmingham	1-4-18	Sw. L. Thigh & Hand
B 234 ²	Mil. conv, Epsom	5-6-18	GSW. L. Thigh, flesh.
B 280 ⁽²⁾	Discharged	6-7-18	" " " "
C 512	11 Can Gen. Moore Bk. Thamecliffe	29-4-19	P. O.

6. B. 9 Margue

MEDICAL CASE SHEET.*

T.C. No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.		
121	850184	PC	Moon J.	J.		
Year	Unit.	Age.	Service.			
1918	75 Canadian	29	2			
Station and Date.	Disease					
3.4.18	SSW (shell) thighs & left hand on 18.3.18 Lins.					
	Penetrating wound L. upper thigh passing across perineum to inner side Rt. Thigh I.B. already removed from Rt. Thigh. Saline in admission.					
	Large penetrating wound L. outer hip Clean. Saline Small. healing Wound.					
4.4.18	A.T.S. given.					
11.4.18	Urine. Sp. gr. 1.020. React. Acid. Alb. nil. Sugar nil (Phosphate)					
12.4.18	A.T.S. 500.					
	Wds. healed. pres. wounds to satisfaction					
28.5.18	Can m. cut. E.F. Bro					

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

Station
and Date.