ORIGINAL. ORIGINAL.

ORIGINAL

ATTESTATION PAPER.

No. 299209

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	McDougall
1a.	What are your Christian names?	John
1b.	What is your present address?	P.O. Vancouver B.C.
2.	In what Town, Township or Parish, and in what Country were you born?	Nova Scotia, Canada
3.	What is the name of your next-of kin?	Donald McDougall
4.	What is the address of your next-of-kin?	West Gore, Nova Scotia, Can.
4a.	What is the relationship of your next-of-kin?	Father
5.	What is the date of your birth?	April 19th 1878
6.	What is your Trade or Calling?	Lumberman
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, J. McDougall, 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 McDougall (Signature of Recruit)

Date April 4th 1916 A G Elder (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, J. McDougall, 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 McDougall (Signature of Recruit)

Date April 4 1916 A G Elder (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 Vancouver this Fourth day of April 1916.

C S Kennedy J.P. (Signature of Justice)

M. F. W. 23.
100M.—1-15.
H. Q. 1772-89-841.

Description of Mc Dougall John on Enlistment.

Apparent Age 36 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 9 1/2 ins.

Chest measurement.
- Girth when fully expanded ..... 38 ins.
- Range of expansion ..... 4 ins.

Complexion Medium dark.

Eyes Blue.

Hair Brown.

Religious denominations.
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic .....
- Jewish .....
- Other denominations Disciple. (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).

Scar R. side of chest.
Scar back L. fore 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 April 4 1916.

Place Vancouver.

J. Fuller
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 McDougall 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.

B Stanley (Signature of Officer)
Major ~~Capt.~~ & Adjt.
224th Batt'n. Can. Forestry.

Date May 9 1916.

REGIMENTAL DOCUMENTS

NAME ~~Mr~~ PTE McDOUGALL JOHN REGT. NO. 299209 UNIT 22nd Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Dismb
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)				12335	
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Unis					
1	~~W~~ FW 67					
1	631-1237					
1	card					
1	Cap card					
1	FW 122					

1-7
16-4
28-7

W. 2389
100M-11-18
1272 35 1377

FJ KR

Number 299209 Rank Pte

Surname McDOUGALL

Christian Name John

Units C F C Theatre of War England

Date of Service 30-5-16

Remarks

Latest Address Edmonton, Alta

no letter available

Roll No. A Page 1037

FORM R. 149.
7106—250m—7/2/17.

Name McDOUGALL John Rank Pte. Reg. No 299209.

Unit Can For Company 51 Dist Navy

Next of Kin Canada.

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List R220
19-9.	Murthly War Hsp	Murthly	N.S.	C 18		Hsp Memo
23-10	Discharged		do	C 111		3474
	Acc. Diag		Melancholia	C 212		7591
9-1-19.	11 Can G.H. Scliffe		Del. Insanity	C 44	H 618	4663
13-2-19	Lord Derby Hosp.	Warrington	Mental Observ. Q.	C 447		7222
Reg. C 417	Rep. Mental Obs Q changed to Dementia Precox			C 504		8715
	Is this 447 or 447 Plan					
21-5-19	Invalid To Canada			C 526		9010
	S. List. 503. M.D. 3.					

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

NAME McDougall John. REGT'L No. 299209.

H. Q. FILE No. 649.

RANK AND CORPS Pte. Hdqrs. ~~Can.~~ Mcs. #51 Forestry Corps.

FOLLOWS No. 224 the Bn FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
N. of K.	Donald.	McDougall. (Father) West Gore N.S.
H. 618. 2-6	14-1-19.	Adm. Moore Barracks. H. Shorncliffe
		Jan. 9th 1919. Delusionals insanity

L. L. 20497—M. & D. 7908

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C18.	Murthly War. Murthly	19-9-17	N.S.D.
C111-1.	Discharged	23-10-17.	~~N.Y.D. "C"~~ Melancholia as per H.L. C. 2.12'
C414. (1)	#11 Can. Gen. Shorne.	9-1-19.	Del. Insanity.
C447	Lord Derby War. Warrington	13-2-19	~~Mental Obs. "O"~~ Dementia Praecox as per L. C 504
C526	Invalided to Can.	21-5-19	Dementia Praecox.

LEDGER NO. 194 SERIAL NO. A.19207 14 (N7)

REG. NO. 299209 NAME Mc Dougal

RANK Gnr CORPS D.D 3 AGE 23 SERVICE C 2/12 G 2/12 7 2 5/12

HOSPITALS	DATE OF ADMISSION
1 Mil Coburg	1.6.19
2	
3	

DIAGNOSIS Oy Dem Prae

TRANSFERRED TO

DISPOSITION Back to Custodial Care 30.6.19 CATEGORY

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

P.T.O.

REMARKS: HOSPITALS.	DATE.	DIAGNOSIS.
Admitted from S C R		
to Mel Cobourg	1-7-19	Dem Prae
Trans (9 unit) S.C.R.	15-7-19	" "
for custodial care		

C/ SURNAME. McDougall 3

CARD NO. 80 Disc

CHRISTIAN NAMES John

FOLL. 30/6/19 DO 180 2/7/19

REGL. No. 299209 RANK Pte.

Demit #3 Br.

UNIT 224th

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL McDougall, Donald

RELATIONSHIP TO SOLDIER Father

ADDRESS West Gore, N. S.

COUNTRY OF BIRTH Canada Nova Scotia DATE Apr 19th 1878

PLACE OF ATTESTATION Vancouver, B.C. DATE Apr 4th 1916

O/S. 19-5-16 418/18

R/C. 30/5/19 938/16 Pte.

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Axeman RELIGION Disciple

DESCRIPTION.

APPARENT AGE 38 YEARS – MONTHS

HEIGHT 5 FEET 9 1/4 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 4 INCHES

COMPLEXION Med Dark EYES Blue HAIR Brown

DISTINGUISHING MARKS Scar R. side of neck. Scar back of left forearm

MEDICAL EXAMINATION. PLACE Vancouver, B.C. DATE Apr 4th 1916

Present Address P.O. Vancouver, B.C.

*Name McDougall John Rank Pte. Regtl. No. 299209

Fyle Depot

Original unit 224 Bn Present unit 3DD M. or S. Age 41 Religion Dis Ref. H.Q.

Port, ship, and date of arrival

Next of kin Don. McDougal West Gore Nova Scotia

Address on leave

Address on discharge West Gore N.S.

Transportation issued Yes No Date Character on discharge

Previous occupation Ayman Date and place of enlistment

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
7/6/19	T.O.S. 3DD. To Hospital Cobourg	H.Q. 158
30/6/19	S.O.S. Dis M.U. To S.C.R.	
	For Treatment R.O. 1080	H.Q. 175

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

[OVER]

Date	Remarks.	Pt. 2 Order No.

M.F.W. 192.
233-D.P.-200M-3-19.
1772-39-1243.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
McDOUGALL	J.	2992D9

Rank	Unit	Co.	Troop	Batty.
Pte.	CAN.FORR.COS	9D. (10T)		

F1D.

Hospital	Date of Admission
Murthly War.	19-9-17.

Transferred 11 Can. Gen Shorncliffe Hosp. 9-1-19
Lord Derby War, Warrington Hosp. 13-2-19
Hosp.
Hosp.

Diagnosis ~~NS "Q"~~
~~NYD "Q"~~
(1)
Later Diagnosis (if changed)
(2) Melancholia
(3)

Additional Diagnosis: if more than one state present
Del. Insanity and E.
~~Mental Obs. "Q"~~
Dementia Praecox. R

~~DISPOSITION~~ Invalided to Canada. 21.5.19 Date

CL. 25-9-17 C18.

Dis 23.10.17.

REMARKS

16.1.18. C111.
16.5.18 C212-1 Re. C111 Diag. is Melancholia.
13-1-19 C414
20-2-19 C447 (2)
30.4.19 C504. Ref. C417. Mental Obs "Q" changed to Dementia Praecox.
27.5.19 C526 2

A.M.D.9 DEPT.
Sch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 299209 (Rank) Private

Name (in full) McDOUGALL, John enlisted in

the 224th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Vancouver, B.C. on the 4th

day of April 19 16.

HE served in Canada, England.

and is now discharged from the service by reason of "Medically Unfit R.O. 1080".

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

Age 41 yrs. 2 months. Marks or Scars

Height 5 ft. 9½ ins. Large scar (scald) left forearm.

Complexion Medium

Eyes Blue

Hair Black

Signature of Soldier

Captain
Issuing Officer
O. C. Discharge Section
No. 3 District Depot
Rank

Date of Discharge 30-6-19

Appointment

Signed at Kingston, Ont. this 30th day of June 19 19

in Military District No. 3

File Reference No. 3DD-3-Mc-575.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

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

H

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 224 Batt Foresters

Regimental No. 299209 Rank Pte Name McDougall John

Enlisted (a) 4/4/16 Terms of Service (a) C.E.F. Duration of War Service reckons from (a) 4/4/16

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) Axe man

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
		Embarked	Halifax	19/5/16	
		Disembarked	England	29/5/16	
22.11.16	O.C.224th	S.O.S. 224th Bn.	London. A. MacDuff	22.11.16	D.O. Pt. II No. 153. Lt. & A/Adjt. 224th C.F.Bn.
22.11.16	D.of T.O.	T.O.S. Can.For.Corps.	London. W.J. Wilson	22.11.16	D.O. Pt. II No. 1. Lt. & Asst/Adjt. C F.C.
26/10/17.	O.C. no 51 Dist C.F.C.	S.O.S. no. 51 Dist. C.F.C. on posting to Base Depot for return to Canada. Reg T. Law Capt for O.C. 51 Dist. C.F.C.	Nairn.	26/10/17.	D.O. Pt. II. no. 135.
29-10-17	O.C. C.F.C.	T.O.S. B.D. C.F.C.	S/dale	26-10-17	D.O. Pt. II. 158.

8-11-17. O.C.CFC. S.O.S. BASE DEPOT CFC. SUNNINGDALE. 8-11-17. PT. II. D.O. 167.
on posting to Dist. 51. Coy. 129. Smoalker
Capt. for O.C.; CFC.

(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				
15-11-17	O.C. 51 Dist C.F.C.	T.O.S. 51 Dist. C.F.C. 129 coy, from Base Depot	Nairn ..	8-11-17	Pt II D.O. 138. [signature] Captain & Adjt., for O C No 51 District, Canadian Forestry Corps.
16-1-19	O.C. 51 Dist C.F.C.	S.O.S. 51 DISTRICT C.F.C. AT 129 COY. ON POSTING, to BASE DEPOT C.F.C. Admitted Moore Biks Hosp. Shorncliffe	Inverness	6-1-19	Pt II D.O. 2 [signature] Captain & Adjt., for O.C. No. 51 District, Canadian Forestry Corps.
21-1-19		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from 129 Co Dist 51.	6.1.19	Pt.11.D.O. 21	[signature] LIEUT. & ADJT. FOR O.C. BASE DEPOT, CANADIAN FORESTRY CORPS.
7.6.19.	3 D.D.	T.O.S. #3 D.D.	Kingston	21.5.19	H.Q. 158.

30/6/19 S.O.S. Dis M.U. to S.C.R. For treatment R.O. 1080. Kingston H.Q. 175

[signature] Lieutenant For O. C. No. 3 District Depot.

R—122

LTR

Rank Name MCDOUGALL, John ✓ Reg'l No. 299209 ✓

Unit 244th, Forestry Bn. If in perm. Corps, What Unit? Married or Single Single. ✓

Place and Date of Enlistment Vancouver, 4th, April, 1916, ✓ Place of Birth Nova Scotia, Canada.

Name and Address, Next-of-Kin Donald McDougall. ✓

West Gore, Nova Scotia, Canada. ✓ Relationship Father. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 5625
File R.L.
Category Can M U

N/E. R.B. No. 5,625
File R.L.
Category CAN. OR

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
				30 MAY. 1916	
	C.	Arrived in England per S. S. Adriatic.			
Now	n wn as	Can. Forestry Corps Auth; Pt. II DO. I, 22, 11, 16			
10/3/17	1 Dist. C.F.C.	On Strength Co. 8.	Edinburgh	1.5.17	P.II 9
24-9-17	C.L. C.F.C.	Adm Murthly War Hosp	Murthly	19-9-17	C.L. #C 18 Not Stated
29-10-17	C.F.C. B.D.	T.O.S. fm 51 Dist C.F.C.	Pte Sundale	26-10-17	P.II 158. 51 Dist C.F.C. P.II 135, 31-10-17.
8-11-17	"	S.O.S. to 51 Dist C.F.C.	" "	8-11-17	" 167 51 Dist C.F.C. P.II 138, 15-11-17.
19.12.18	51 Dist C.F.C.	S.O.S. to B.D.C.F.C.	" Inverness	14 12 18	and 2 ~~20~~ bs T.O.S. B.D.C.F.C. Pte P.II O. 300 17.12.18
4.1.19	B.D.C.F.C.	On Comd to Rhyl	" Sdale	4.1.19	-6
18.1.19	11 M.D. Wing	Attached	" H. park	18.1.19	32

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.
	~~SOS to CEF CAN. MD-11~~ ~~3.1.19 on Ceasing on Com~~ ~~RHYL~~ ~~BDCFC DO 31 d 31.1.19~~		Pt Entered in error.		
27.5.19	C.R.O.	Inv. to Can. Ex. Lord Derby. War Hospl. Warrington.	Pt London	21.5.19	Ch C 526 (Dementia Praeco.)
30.5.19	C.F.C.B.D.	Having been Invd to Canis SOS	" S'dale	21.5.19	Pt II DO 151

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	299209	Pte	McDougall	J

Year	Unit.	Age.	Service.
1917	Canad Forestry Corps 108. Co.	39.	

Station and Date.

Disease Melancholia.

MURTHLY WAR HOSPITAL
MURTHLY

19/9/17. Admitted from Stanley Lumber Camp.
Diffident & worried shows no mental symptoms
Is a nervous high string man. History that was
suspicious, depressed & then excited
J.H.Baugh Lt Name

23/10/17. Showed no symptoms - Worked Well.
Is to day discharged to Unit
J.H.Baugh Lt Name.

HOSPITAL
7 - MAR. 1918
MURTHLY

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.

ORIGINAL

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 224th. Batt. (Foresters)

(2) Regimental Number 299209

(3) Full Name of Soldier McDougall, John

(4) Place of Birth Nova Scotia, Can. (Riverside Corner)

(5) Are you married, or not ? No.

(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 /

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address Donald McDougall, West Gore. Hants. Co Nova Scotia

(10) Is your Mother alive? Yes

If so, state name and address Elizabeth McDougall, — do —

(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.

Father or Mother as above.

(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? No

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium —

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

Chas J F Pracey
Officer Commanding.
LIEUT. & ASSISTANT-ADJT.
224th CANADIAN FORESTRY BATT'N, C. E. F.

Date May 2nd 1916.
For O.C.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

	Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments 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		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

File No. 12296-J-128

WAR SERVICE GRATUITY.

Register No. Spec Reg

26/789 fve

Reg. No. 299209

Name McDougall John,

Address C/o Saving's Dept.,
Bank of Commerce
Vancouver B.C.

Pay Soldier $ 420 00/xx

W J Martin
W C Haydon

Clerk C C Boreham

Dependent nil

Address —

Pay Dependent $ nil

Days 183 Rate 70 00 Due 420 00

Less P.D.P. credited ✓

Less further Dr. Bal. or overpayment. ✓

Net 420 00/xx

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1 13/7/20	58684	1819576.	420 00		1			
2					2			
3					3			
4					4			
5					5			
6		Total	420 00		6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
[illegible]
Date 13/7/20

DUPLICATE

DUPLICATE.

MEDICAL HISTORY SHEET.

Surname McDougall *Christian Name* James.

Examined { on 12 day of April 1916. at Kamloops BC.

Birthplace { City or Town Alexandria County Ont.

Apparent age 45°

Trade or occupation Woodsman.

Height 6 Feet 1. Inches.

Weight 180 Lbs.

Chest measurement { Minimum 36 inches. Maximum expansion 39 inches.

Physical development good.

Small-Pox Marks none.

Vaccination Marks { Arm Right. Left. 1 Number 1

When Vaccinated last ~~at~~ 5 years ago.

(*a*) Marks indicating congenital peculiarities or previous disease —

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

Approved by M. G. Archibald Capt Camp

Rank M.O.

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.
13/5/16		W. A. Hutton Capt Camp M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
9/5/16	OK.	W. A. Hutton Capt Camp M.O.
13/5/16	OK.	M.O.
		M.O.

Enlisted on 3rd *day of* April 1916 *at* Kamloops BC

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	224.	299209.		
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.

400M.—1-16.
H. Q. 1772-39-439.

Surname _____ Christian Name _____

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.

181

Married or Single: Single

Place of Birth: Nova Scotia

Name and Address of Next of Kin: D. McDougall, West Gore, N.S.

Relationship of Next of Kin: Father

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date)

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 299209 Rank Pte. Name McDougall, John

If in Permt. Corps / What Unit: 224th Unit Forestry Batt — Transferred to — Date — Authority

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation: Vancouver — Transferred to — Date — Authority

Date of Attestation: 4/4/16 — Transferred to — Date — Authority

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) — Effective — Reason

Discharge Date and Place — Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
														28 90	28 90																28 90				As at 31/5/16
June	30	100	30	00	30	10	3	00							33 00			129	9/6/16						4 87					4 87	57 03				
July	31	1.00	31	00	31	.10	3	10							34 10	215	29 6/16	235	10 7/16					4 86	7 30 / 12 17					24 33	66 80				
Aug	31		31		31		3	10							34 10	370		420						9 73	7 30					17 03	83 87				
Sept	30		30		30		3	00							33 00			536	15/9						14 60					14 60	102 27				
Oct	31		31		31		3	10							34 10			636	8 10/16						17 03					17 03	119 34				
Nov.	30		30		30		3								33			699	1 4/16						17 04					17 04	135 30		91 50		
Dec.	31		31		31		3	10							34 10	790	3 12/16							17 03						17 03	152 37				
~~1917~~ 1916	F. A.		21	40			—	—																											
1917 Jan	31	1.00 .10	34	10											34 10			874	4/1						17 03					17 03	169 44				
Feb	28		30	80											298 40 / 30 80															128 96	200 24				
			300	30										28 90	329 20									31 62	97 34					128 96					

#299209. Pte Mc Dougall. Jno. April

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			300	30										28 90	329 20									91 62	97 34					125 96	200 24				
Mch	31	1.00	34	10											34 10	18932712		1963	30/3					1704 1703	1703					51 10	183 24				
Apr	30		33												33																216 34				
May	21		34	10											34 10			58	19/4						1704					17 04	233 30				
June	30		33	-											33 -																266 30				
July	31		34	10											34 10																300 40				
Aug	21		34	10											34 10	173	25/5							1703.					17 03.	317 47.				
Sept			33												33	337	33/7							1704					17 04	333 43				
			535	70										28 90	564 60									99 76	131 41					231 17	333 43				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEF. OR PROV. PAY	SER. ALLOC. ENG.
Sept	Bal	~~333 43~~							333 43.		
Oct	Pay	34 10		C/R. 485 - 4/9/17 108 Co.	17 04				350 49 253		
		34 10			17 04						
	~~Appl. a/Sgt 1/9/17 2 d/4/9/17 10 pc~~										
Nov	Plt Pay	33									
Dec	do	34 10							417 59 285		
		67 10									
Jan	do	34 10		A.R. N 365. 129 Coy. 27/11/17	38 93						
		34 10		" 596 " 20/12/17	34 07				378 69 300.		
					73 -						
Feb				" N 862 " 23-1-18	4 87						
	do	30 80							404 62 315		
		30 80			4 87						
Mch	do	34 10		A.R. 1074 129 Coy 21-2-18	17 03						
		34 10		" 1333 " 21-3-18	19 47				402 22 330		
					36 50						

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	AMOUNT:–

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

NAME:– McDOUGALL John

NUMBER:– 299209 161

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 224th For. Bn

DATE ACCOUNT FIRST OPENED:– 1-6-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.F.C. Eng

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
			8.08	Jan 21/5		C.F.C.	50.3

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:– Invalided Canada 3/5/19. Auth. List H.R. War. 104. 5th Bgd. H. Liverpool

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal. Fwd.								402 22	330	
April	Pte Pay	33		A.R. 55 51 Dvsn 15-4-18	1947				415 75	345 ~~330~~	
		33			1947						
May	do	34 10		A.R. 353 129 Coy 16-5-18	1947				430 38	360	
		34 10			1947						
June	do	33		A.R. 601 129 Coy 24-6-18	1947				443 91	375	
		33			1947						
July	do	34 10		A.R. 706 129 Coy 15-7-18	1947				458 54	390	
		34 10			1947						
Aug	do	34 10		A.R. 1005 Coy. 20.7.18.	1 7 9						
				A.R. 923. 129. 15-8-18	1947				471 38	405	
		34 10			21 26						
Sept.	do	33		A.R. 1237, 24.9.18, 129th Co.	19 47				484 91	420	
		33			19 47						
Oct.	do	34 10		" 1358, 14.10.18 ✓	1947				499 54		
		34 10			19 47						
Nov.	✓	33		" 1697, 21.11.18 ✓	1947						
Dec	✓	34 10		" 1840 12/12/18 ✓	1947						
Jan	✓	34 10							561 80		
		101 20			38 94						
Feb	✓	30 80									
Mar	✓	34 10									
	Code 4516 Amt recovered from O/C Hosp (Mental case.		87 60						714 30		
		64 90	87 60								

P 850 Invalided effec 30.9.18

181

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Forward.								714 30		
Apr.	P. P.	33 -		24005, #141, 6-1-19, 129 Coy.	1 46						
May		34 10							779 94		
	Int on Def Pay 31/5/19	44 62							821 56		
		108 72			1 46						

A.F.W. FORM REN'R ✓ EFFEC.
DISCHARGED To Canada DATE 31/5/19
PAY BOOK VERIFIED 7/5/19
Cr. BAL 821 56 L.P.C. REN'R 7/5/19
AUTHY.

COMPILED BY J. Ferguson
CHECKED BY S.H.W. Williams

M625

War Service Badge Class.....

No.....Issued

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 299209

2. Rank Private

3. Name McDOUGALL, John

4. Unit No. 3 District Depot.

5. Date of Discharge 30-6-19 | Place Kingston, Ont.

6. Reason for Discharge "Medically unfit, and in order that further treatment may be carried on by the S.C.R. (Custodial Care)R.O. 1080"

7. Authority 3DD-3-Mc-575 D/28-6-19

8. Proposed Residence after Discharge Edmonton, Alta.

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. ? 39.

Not applicable (mental)

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ont.

Date 30-6-19

Medical Documents Forwarded to S.C.R. ~~or B.P.C.~~ on Date JUL 25 1919

Signature [signature] Captain (O.C. Discharging Unit.)

O. C. Discharge Section
No. 3 District Depot

M.F.B. 218a—150M-3-19—1772-39-113.

Zp.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 293209

2. Rank Private

3. Name McDONALD, John

4. Unit No. 3 District Depot.

5. Date of Discharge 30-6-19 Place Kingston, Ont.

6. Reason for Discharge "Medically unfit, and in order that further treatment may be carried on by the S.C.R. (Custodial Care) R.O. 1080"

7. Authority 3DD-3-No-575 D/28-6-19

8. Proposed Residence after Discharge. Edmonton, Alta.

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. 2 39.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ont.

Date 30-6-19

Signature

O. C. Discharge Sec. Unit.

No. 3 District Depot.

Medical Documents Forwarded to S.C.R. or B.R.C. on Date JUL 25 1919

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

CANADIAN FORESTRY CORPS.

104801

I, John McDougall, Reg. No. ~~19876~~ 299209, serving in 224th Battalion of the Canadian Expeditionary Forces, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my Real Estate unto My Mother, Mrs D. McDougall of West Gore, Hants Co, Nova Scotia, absolutely, and my personal Estate I bequeath to My Mother, Mrs D. McDougall, West Gore, Hants Co. Nova Scotia.

In witness whereof I have hereunto set my hand this 28th day of November, 1916

John McDougall

Signed and acknowledged by the testator as and for his last Will in the presence of us both present at the same time, who in his presence at his request, and in the presence of each other have hereunto subscribed our names as witnesses

Henry Hansen
224th Can. Forest. Batt.

Charles F. Broadhurst
224th Canadian Foresters Batt

Gen. Hdls.
Edmonton

"Araguaya" 30-5-19.

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 299209 RANK Pte. NAME (IN FULL) McDOUGALL John. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: nil. RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID: nil RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
$1.10		
~~Cobourg~~		
Pte J McDougall		
Bank of Montreal Savings		
Granville & Dunsmuir		
~~[illegible]~~ Vancouver		
~~[illegible]~~ BC.		
17/3/20		

ORIGINAL UNIT C.E.F.: C.F.C. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION: 4-4-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $: nil. DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ✓

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE: nil. EFFECTIVE

SOS SCR — 31-10-19.

DISCHARGED — PLACE: Kingston — DATE: 30/6/19. — REASON — AUTHORITY: 3- mc- 575 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. No. of Days	Rate	Amount $	c.	Other Credits $	c.	$	c.	Total Credits $	c.	Acquittance Rolls / Cash Payments	Assigned Pay $	c.	Regimental Charges $	c.	Other Charges $	c.	$	c.	Total Debits $	c.	Balance Debit $	c.	Balance Credit $	c.	Particulars or Remarks
BALANCE FROM PREVIOUS ACCOUNT May 31/19							821	56	821	56														821	56	AR
June 30	30	1.00	33	-	35	-			68	-														889	56	✓
											War Service Gratuity															
183 dy					$30	.			$30	.				$20	.					$20	.		0			1844501. MAR 19 1920
19-6-20					420	-			420	-														420	-	Chq 1844501 for 420.00 retd by MD 3 & deposited to Cr Rec Gen DR 16873 - 17/6/20 AP 12296 - J - 128
Amended Award AP 12296 - J-128									$20	00	C.O. 58684			$20	00					$20	00	—				Chq No 1819576. W&G Ottawa CCB 13/7/20.

183

Ottawa

200M-3-19.—L. L. 58788-... & D. 9985.
M. F. W. 296.
1772-39-1390.

THIS MAN HAS NOT SERVED WITH AN EXPEDITIONARY FORCE

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 Warrington DATE April 3rd 1919.

1. 1 (a) Unit 129 Co. Can. Foresty C. (b) Regimental No. 299209 (c) Rank Pte

(d) Surname Mc Dougall (e) Christian name John

(f) Home address Edmonton Alta. Canada.

(g) Next of Kin Mrs Heather Donald Mc Dougall (h) Relationship Father

(i) Address of Next of Kin West Gore, Hants. N.S. Can.

2. Age last birthday 40 years. 11 months Date of birth April 19th 1878

3. Enlistment, or Appointment (if an Officer) (a) Place Vancouver. Can (b) Date April 4th 1916

4. Personal description:

(a) Height 5 ft. 9 1/4 in (b) Weight 160 lbs. (stripped) (c) Complexion Florid

(d) Colour of hair Black (e) Colour of eyes Grey blue (f) Identification marks, Scars, etc. Large scald scar on left forearm.

5. Former trade or occupation Logger - axeman.

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

	Periods	
	From	To
Canada	April 4th 1916	June 1916.
England	June 1916	Present date.
France or other theatres of War		

Patient's statement for A.S.

7. Original disease, or injury (Paranoid) Dementia Praecox.

(a) Date of origin about 1899-1900. (b) Place of origin Canada

(c) Cause Constitutional Psychopathic tendency.

M. F. B. 227.
400M.—11-18.
1772-39-117.

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

Marked mental disability: requiring observation: unable to follow occupation on this account.

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.)

First shewed symptoms of Paranoia when 20yrs of age: he became nervous & introspective. Gave up college & became a lumber man on this account. Has been able to earn his own living & owns a quarter section of land. Physical condition has been good throughout. Enlisted April 1916. & came to England with the Forestry Corps a month or two later. Has not been to France. ~~He could only be employed on special jobs as he~~ is well built & well nourished. Heart & lungs clear. Other systems normal. Wassermann negative. Persecutive delusions marked: thinks people are plotting against him: admits having knocked two men down on one occasion because they were conspiring against him. Unlikely to be able to resume ordinary occupation unless in carefully selected environment.

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

Nervous System No. Cardio-Vascular System No. (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System No. (Albumen and Sugar will be excluded.)

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

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

First shewed symptoms when aged 20- became nervous & introspective. Gave up college and became a lumber man on this account. Physical condition has always been good & he has earned his own living & owns some land. Enlisted april 1916. & came to England a month or two later. Has not been to France. Could only be employed on special jobs as he quarrelled with most of his comrades & before admission he did bodily harm to two of them. admitted 8/1/19.

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 since enlistment, and not included in Section 10 (a).)

None.

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

Large scald scar on left forearm.

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

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

Yes: invalid was of markedly paranoid mentality at enlistment

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

The regimental documents will be referred to.

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

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

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

Hospital

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? Yes.

(If the answer is "yes" state nature of treatment required and probable duration)

Mental Hospital treatment.

16. Can the former trade or occupation be resumed? not at present: mental weakness.

(If not, briefly state why)

17. Recommendations Repatriation to Canada.

[signature] Capt RAMC

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.....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.....

.....Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes but his delusions appear well systematised & he may be a case of Paranoia.

19. Is the invalid fit for

(a) General service,	(Category A)	(~~Yes or~~ No.)
(b) Service abroad, not general service,	(" B)	(~~Yes~~ or No.)
(c) Home service (Canada only),	(" C)	(~~Yes~~ or No.)
(d) Temporarily unfit.	(" D)	(~~Yes~~ or No.)
(e) Unfit for service in Categories A, B and C	(" E)	(Yes or ~~No.~~)

20. It is certified that the invalid

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

Institutional treatment in mental Hospital for prolonged & indefinite period.

(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.)

Repatriation to Canada.

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.

The Lord Derby War Hospital
24 APR 1919
WARRINGTON

D. P. Napier Pearn Capt. R.A.M.C. *President.*

PLACE ..... Ernest J. Jones Capt R.A.M.C.

DATE ..... A H Firth Capt RAMC } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

..... *President*

PLACE ..... } Members

DATE .....

APPROVED BY

Geo. F. L. Fuller Capt Cause

Assistant Director of Medical Services.

for DATE 26.4.19

APPROVED BY

Director-General of Medical Services.

DATE .....