RECRUITING ROOM
186th Overseas Bn. C.E.F.

ATTESTATION PAPER.

Triplicate

No. 880019

Folio. 13

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Nichols
1a. What are your Christian names?	William James
1b. What is your present address?	Eberts Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Sombra Tp. Lambton Ont. Canada
3. What is the name of your next-of kin?	May Nichols
4. What is the address of your next-of-kin?	Eberts, Ont.
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	24th August 1876
6. What is your Trade or Calling?	Mail Carrier
7. Are you married?	yes
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, William James Nichols, 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.

W J Nichols (Signature of Recruit)

Date 7th Feb 1916. Wm Taylor (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William James Nichols, 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.

W J Nichols (Signature of Recruit)

Date 7th Feb 1916 Wm Taylor (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 Chatham this 7th day of February 1916

Neil Smith Lt. (Signature of Justice)

O.C. 186th Overseas Bn. C.E.F.

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of William James Nichols on Enlistment.

Apparent Age 20 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 2 ins.

Chest measurement.
- Girth when fully expanded 35 ins.
- Range of expansion 2 1/2 ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist Yes
- 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).

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 Jan 22 1916. F. W. Hall

Place Chatham Ont.

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.

William James Nichols 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.

Neil Smith Lt. Col. (Signature of Officer)

O.C. 186th Overseas Bn. C.E.F.

Date Feb 7 1916

DISCHARGE DOCUMENTS

R. O. No. .....

H. Q. No. .....

Name Nichols William James

Regt. No. 280019 Rank Pte

Corps #1 Special Services

H. Q 16-1-25. d/31-10-17. By auth

18.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers ..... 2 .....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet ..... 1 .....

Compulsory Stoppages.....

Casualty Forms..... 1 .....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1 .....

Clothing Transfer Certificate .....

Inventory of Kit.....

Last Pay Certificate..... 1 .....

4 y D.C. 1

Enlg. M.B. Bram. 24-8-17.

C.R. 31-1-18.

Payabal - 1

C5205

M. F. W. 62.
50M.—9-16.
H Q. 1772—89 - 935.

P. 559.
MARRIED OR SINGLE Married

PLACE OF BIRTH Sombra Tp Sambton, Ont.

NAME AND ADDRESS OF NEXT OF KIN Nichols May
460 Queen St Chatham, Ont Can.

RELATIONSHIP OF NEXT OF KIN Wife

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. 880019 RANK Pte. NAME Nichols Wm J.O.

IF IN PERMT. CORPS WHAT UNIT } UNIT 186th Bn TRANSFERRED TO 4th Res Bn DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Sub Dis P DATE 31-10-17 AUTHORITY 5/10/17
Dis & Conv

PLACE OF ATTESTATION Chatham, Ont TRANSFERRED TO N.E.B DATE " AUTHORITY "

DATE OF ATTESTATION 7-2-16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1-4-17

PAYABLE TO Nichols Mrs May 460 Queen St. Chatham, Ont. Can. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1. 11. 17 REASON Discharged

DISCHARGE DATE AND PLACE Canada 30.10.17 REASON AND AUTHORITY Med Unfit S.M.S. Bramshott 3/10/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Entered on N.E. Card Index

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) Checked by W.J.W.

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
APR 8 - 1917														39 30	39 30											Balances from Canada						39 30			
5/30	23	1 00/10	25	30											25 30																64 60			
May	31		34	10											34 10	147	26/4							24 34 ✓				20.		44	34	54	36			
June	30		33												33	285	15/5							2 43 ✓				20		32	22	75	64	61			1096 Q.A.D.O.S. 220-19. 14/5
July	31		34	10											34 10									7 30 ✓				20	20		40		58	71			Q.P. Capel
Aug	31		34	10											34 10	533	3-15 / 3-16	472	16/8					9 73 ✓	4 87 ✓			20			41	89	50	92		50 92	
Sept	30		33	-											33 -	664	30/7	723	16/8					9 73 ✓	4 87 ✓			20			49	20	34	72		34 72	
			193	60										39 30	232 90	588	14/7	602	29/8					487 ✓	9 73 ✓			20								
																								58 40	19 46			100	20	32	198	18	34	72		

SL No. 49. 6.11.17 Cr Bal 23.39

850019 Pte Nichols Wm J

DATE	PAY: No. of Days	PAY: Rate	PAY: Amount $	PAY: Amount c.	FIELD ALLOWANCE: No. of Days	FIELD ALLOWANCE: Rate	FIELD ALLOWANCE: Amount $	FIELD ALLOWANCE: Amount c.	WORKING OR SPECIAL PAY: No. of Days	WORKING OR SPECIAL PAY: Rate	WORKING OR SPECIAL PAY: Amount $	WORKING OR SPECIAL PAY: Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1: No.	1: Date	2: No.	2: Date	3: No.	3: Date	4: No.	4: Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE: Credit	BALANCE: Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS						DR. 1	DR. 2	DR. 3 DR. 4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.																	
					~~31 72~~																														
Oct							Can. A.F.									20																		
✓ 1/30	30	1/10			33	00																												
																								47 72										
							Pte 16226 11th H.L.I. 4-9-17						WORD	12	16																				
														12	16	20																		
Nov					33	00	~~Pte A.R. 1143~~ 26/9/17								3543																			
							~~Pte A.R. 1st Res~~						13.10.17		4 87																			
							~~.162~~ WORB						31/10		4 87																			
															17 1/7																			
																								23 39										
Balance transferred to Canadian Liability A/c																																		
Balance transferred to N. E. Branch.																Nil.																		

A3M. FORM REN'D Stopped EFFEC. 31/10/17
DISCHARGED TO Canada DATE 30/10
PAYBOOK VERIFIED 30.10.17
brcir BAL 23.39 L.P.C. REN'D 30/10
AUTHY. 2MB Brantford 5/10/17.

Does Unfit

Checked Grantham

SURNAME. Nichols

CHRISTIAN NAMES William James

REGL. No. 880019. RANK Pte.

UNIT ~~186th~~ No. 1 Spec. Serv. Co., T.O.S. 29-11-1917 Batt.

FORMER CORPS. Mil D.O. Pt. II No 145-7-12-17

CARD No. ✓

FOLL. I

S.O.S. Dis. 11/2/18

NEXT OF KIN.

NAMES IN FULL Nichols Mrs. May.

RELATIONSHIP TO SOLDIER Wife

ADDRESS ~~Alberta, Ont.~~

460 Queen St, Chatham, Ont.

L.S.A.P. 5-10-16. M.F.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Sombra Tp., Ont. DATE Aug. 24th, 1876

PLACE OF ATTESTATION Chatham, Ont. DATE Feb. 7th, 1916

O/S. 28-3-17. Emb. R/C. 6-11-17.

L. L. 90589.—M. & D. 6312.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

From Halifax Per, S.S. "Lapland" 28/3/17

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Mail carrier RELIGION Congregationalist

DESCRIPTION.

APPARENT AGE 39 YEARS 5 MONTHS

HEIGHT 5 FEET 2 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Fair EYES Blue HAIR Brown

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Chatham, Ont. DATE Jan. 22nd, 1916

Hd. 13

Number 680019 Rank Pte.

Surname NICHOLS

Christian Name William James

Units 186th Bn Can Inf Theatre of War England

Date of Service 7-4-17

Remarks

Latest Address 460 Queen St.
Chatham
Ont.

Roll No A Page 1309

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks

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

No. 88009. RANK Pte NAME Nichols V. J.

T. O. S. UNIT No 1. Special Service Co

Transfd. A.D.Ord. 29-11-17.
do 45-4-12-17)

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Dec.	no. p/c	n.		
1918	1918			
Jan.	no. p/c	n.		
Dec 1.	Std 11.	n.	Discharged 11-2-18.	do 40-9-2-19.
Mar.	no p/c			

P. not claimed n.

No. 880019. RANK Pte. NAME Nichols W. J.

T. O. S. 7-2-16 (20-1-9 2-16). UNIT 186th Battalion C. E. F.

M. D. 1.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916. Feb. 7th	1916. Feb. 29th	N.		
	Mar.	〃		
	Apr	〃		
	May.	〃		
	June	〃		
	July.	〃		
	Aug	〃		
	Sept.	〃		
	Oct.	〃		
	Nov.	〃		
	Dec	〃		
	1917.			
	Jan.	〃		
	Feb.	〃		
	Mar.	〃		
apr. 1.	apr. 7.	M.	d/s.	

UNIT SAILED

MAR 28 1917

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

TRIPLICATE

Mar 1-17-7

ID. 30-N-51.

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 480019 Rank Pte Name Nichols William James

Corps No. 1 Special Service Co'y who was* Discharged

On 11-2-18 191..., to —

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from on 11-2-18 191...,
to ...191..., the inclusive date of transfer or discharge. as per Mar. p. l.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	15	06
Advances by Cheques No.			Regt'l Pay ... days at $ 1 c.		
Advances by Cheques No.			Field Allow. ... days at $ — c. 10		
Assigned Pay and Sep'n Allce. No. 2223 DEC. FEB. JAN.	39	82	Separation Allowances* (Monthly) DEC. JAN. FEB.	39	82
Other charges Kit deficit	1	54	Other Allowances*		
Payment on ~~transfer or~~ discharge No. 2224	71	47	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	54	—
Total	112	88	Total	112	88

*Give particulars. Clothing cr. in Feb. Eligible 3 mos. Jan. Feb. Mar.

A monthly stoppage of $ 2.00 (†) has (‡) been paid on account of Assigned Pay for the month of Jan 30th to Feb 191... and Sep'n Allce. for month of 39.82 DEC JAN FEB 191... (to) Assignee Mrs May Nichols

(Address) 460 Queen's St. E. Chatham Ont

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment 7-2-16

(2) if married and if a Separation Allowance Card has been submitted Yes Yes

(3) cause of discharge H.Q. 16-1-25 authority ID 30-N-51 dd 8-2-18

(4) authority for transfer No. 1 S.S. Coy. O.O. 40 dd 2-2-18

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date Mar 8-/18

Place LONDON, ONT.

Capt.
Paymaster.
Paymaster, No. 1 Special Service Co., C. E. F.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

100M.—12-17.
H. Q. 1772-39-903.

BPC 28624

ORIGINAL

880019

B

MEDICAL HISTORY SHEET.

Surname Nichols Christian Name William James

Examined on 22 day of Jan 1916
at Chatham wilkspart N.B.

Birthplace City or Town Newcastle N.B.
County Lambton

Apparent age 39 5/12

Trade or occupation mail carrier

Height 5 Feet 2 Inches.

Weight 135 Lbs.

Chest measurement Minimum 32½ inches.
Maximum expansion 35 inches.

Physical development

Small-Pox Marks none

Vaccination Marks Arm Right. Left.
Number 2

When Vaccinated last 1886

(a) Marks indicating congenital peculiarities or previous disease —
None

(b) Slight defects but not sufficient to cause rejection —
None

Approved by F. W. Hall

Rank Capt M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
8/8/18	C III	J. J. McNally Capt Can A.M.C. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
3-14-16	Taken	Dr. E. Cruickshank M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
July 1/16	am Bradley	M.O.
" 15/16	am Bradley	M.O.
" 20/16	am Bradley	M.O.
1916	14-6-17	C W Nolan

Enlisted on 7th day of February 1916 at 23 Chatham N.B.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	186 Os. Bn.	880019		7/2/16.
Transferred to	4th CAN. RES. BATTALION. WORD 1st I. S. Sch.			28/8/17 29-11-17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Camp Border Chatham Bramshott.	Sept 13/16	Routine exam	Rec. appendectomy unfit for infantry 7th Fd Amb Catterick
Bramshott.	2-3-17. 24 AUG 1917	Myalgia	C III (One month)
	5-10-17	Myalgia.	C III permanently

London 8/7/18 myalgia C III permanently

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.

PRESIDENT. MEDICAL BOARD, BRAMSHOTT.

PRESIDENT. MEDICAL BOARD, BRAMSHOTT.

M. F. B. 313.
20M—11-15.
H. Q. 1772 39-439.

Surname Mitchell Christian Name James

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.

C-11

Duty

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 880019 Rank Private Name and Corps of disabled Soldier:— 186 Bn
Nichols William James.

Previous civilian occupation:— Farmer.

Cause of Disability:— Myalgia

Condition, in detail, which prevents the soldier earning a full livelihood:—
Ever Since arrival in England has been unable to carry on physical training on account of intense pains in the instep & legs. also suffers from severe pain in right arm. No Physical indications
No marked flat feet.
Heart & Lungs normal.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 10% Do

Probable duration of incapacity:— Probably 3 months

Does it render him permanently unfit for Military Service? No

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? No

Signature:— K C Cairns Capt.
President.

Station:— Quebec

C Baig Capt.
Ralph B Coy Capt.
Members

Date 26/11/17

3

APPROVED.

Date 26/11/17 W McCarrick Major
Asst. Director Medical Services.

Date .....
Director General Medical Service.

Duplicate

To be made out in duplicate.

ORDERLY ROOM
186th Os. Bn. C.E.F.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

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(1) Name of Overseas Unit which Soldier joins ..... 186th. Os. Bn. C.E.F.

(2) Regimental Number 880019

(3) Full Name of Soldier ..... NICHOLS, William James.

(4) Place of Birth ..... Wilkesport, Sombra, Ont., Canada.

(5) Are you married, or not ? ..... yes

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

(b) Present Postal Address ..... 460 Queen St., Chatham. Ont., Canada.

(7) Are you a widower ? .....

(8) Have you any children ? ..... yes

If so, give number of boys and girls ..... six boys and two girls.

Also their names and ages ..... Ray Nichols, 21 yrs.

William Nichols, 19 yrs. Margaret Nichols, 11 yrs.

Ross Nichols, 17 yrs. Lawerance Nichols, 5 yrs.

Worden Nichols 16 yrs. Bessie Nichols 3 yrs.

Glenn Nichols, 13 yrs.

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....yes.....(step father)

If so, state name and address David W. Morden Dufferin Ave, Chatham, Ont.

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

If so, state name and address.....Charlottee

.....Dufferin Ave., Chatham, Ont., Canada.

(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.

.....

.....

.....

(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.

.....yes.....

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

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

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

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

Neil Brown Lt Col

.....

Officer Commanding.

Date.....SEP 27 1916.....

ORDERLY ROOM 186th Os. Bn. C.E.F.

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 186th Overseas Bn., C. E. F.

Regimental No. 880019. Rank Pte. Name NICHOLS, William James.
C. E. F.

Enlisted (a) 7-2-16 Terms of Service (a) C.E.F. Service reckons from (a) 7-2-16

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) (mail Carrier)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked. Canada.	Halifax.	25.3.17.	"Lapland".
		Debarked. England.	Liverpool.	7.4.17	
	C.C, Seg. Camp.	T.O.S. Segregation Camp.	Bramshott.	7.4,17	Geo Ribblin Capt.& Adj. for. C.C. Segregation Camp Bramshott.
7-4-17.	O.C. 186th Bn.	Transferred to 4th Can Res Battalion,	Bramshott.	7-4-17	Pt. 2, Order 71 ... D.P. Adams Capt. ~~Lieut~~. Actg. Adjt. 186th Battalion.
7-4-17.	O.C. 4th CanRes Bn.	T. O. S. 4th Can Res Bn.	Bramshott.	7-4-17	Pt. 2 Order 93.
27-8-17	do	S.O.S. 4th Res. Bn. to W.O.R.D and taken on attached Strength 4th Res. Bn. from W.O.R.D. with effect 24-8-17.	do	24-8-17	Pt 2 order Nº 203.
23-10-17	do	Struck off attached Strength 4th Res. Battn, retd to W.O.R.D.	do	23-10-17	Pt 2 order Nº 252. A. Thornton Lieut. CAPTAIN. ADJUTANT 4th CANADIAN RESERVE BATTALION

(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 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
~~8-10-17~~	~~O.C.4th. Can.Res. Bn.~~	~~Ceases to be attached to 4th.Res.Bn. on posting to Western Ont Regt'l Depot. Cat "C"3.~~	~~Bramshott~~	~~5-10-17~~	~~Pt.2.Order No. 239.~~ A. Lothian ~~Lieut.~~ A/Adjt for O.C.4th.Canadian Res.Bn.
~~2-8-17~~	~~W.O.R.D.~~	~~T.O.S. posted from 4th Can Res Bn~~	~~Bramshott~~	~~25/8/17~~	~~Do = 149~~
~~2/8/17~~	~~W.O.R.D.~~	~~Reported Depot Camp~~	~~Bramshott~~	~~8/8/17~~	~~Do = 184~~
~~2/8/17~~	~~W.O.R.D.~~	~~Re attached 4th Res Bn.~~	~~Bramshott~~	~~8/8/17~~	~~Do = 184~~
28.8.17	W.O.R.D.	T.O.S. from 4th Res. & Shown on Command of 5th unit	Bramshott	28/8/17	Do # 149
24-10-17	W.O.R.D.	Reported to Canada from 4th Res.	Bramshott	23/10/17	Do # 197
1-11-17	W.O.R.D.	Shown on Command C.D.D. Buxton Pending Return to Canada	Bramshott	31-10-17	Do # 204
1.Nov.1917.		Taken on Strength C.D.D.	BUXTON. Pt.11.O.259		P. Vine Capt. P.Vine Lt. Lt.Col Commanding Canadian Discharge Depot
6 NOV 1917		Embarked for CANADA from	LIVERPOOL		P.Vine Lt. Lt.Col Commanding Canadian Discharge Depot

Discharged from No.1.Special Service Co.Under H.Q.16-1-25,d/31-10-17.With effect 11/2/18
By Auth.1.D.30-N-51,d/8-2-18.D.O.40.Para A.

med Unfit

for O.C. No 1 Special Service Co.

Gerald Lieut.

Form R 122.
2353—100M—9-12-16.

LTR

Rank | Name NICHOLS, William James | Reg'l No. 880019

Unit 186th Bn. | If in perm. Corps, What Unit? | Married or Single Married.

Place and Date of Enlistment Chatham, 7th, Feb, 1916. | Place of Birth Sombra Tp, Lambton Ont, Canada.

Name and Address, Next-of-Kin May Nichols. Elberts. Ontario. | Relationship Wife.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—9546-16.

N/E. R.B. No. 3321
File R.L.
Category Can OR

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.		Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND 7 4 17 S.S. LAPLAND.				
		20 4 17 4th. Res. T O S From CANADA				B, SHOTT 7417 Pt. II 93
27-8-17	4 Res	Posted to W.O.R.D. Watt 4 Res	B'shott	Pte	24-8-17	Pte 2039 W.O.R.D. Pt II 1493 29.8.17
23-10-17	"	Ceases to be attd from W.O.R.D.	"	"	23-10-17	" 252 " 197 24-10-17
31-10-17	W.O.R.D.	On command C.D.D pending despatch to Canada for disch	Buxton		5-10-17	Pt II 203
2/11/17	"	Ceases on comm C.D.D & SOS on proceeding to Canada	Bshott		6/11/17	Pt II 221
	Disdepot	Fit. for Duty	W.D.O. London		14/11/17	N R 402 Chatham Ont.

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.					

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

13599-W-3.

Name Nichols, William James
Surname Christian Name

Regimental Number 880019 Rank Pte.

Unit # 1 S.S. Co.

Original Unit

District where paid M.D.1.

Date of Discharge 11-2-18.

P. D. P. Filing Number 16-83-1.

Address (in full) 460 Queen St.,
Chatham, Ont.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	1568	16-3-18	58 00	1527	16-4-18	59 10				58 00	117 10

Remarks: Bal. Dr. from L.P.C.

M. F. W. 127.
50M—6 17.
1772 39-1140.

File No. 13599-W-83.

WAR SERVICE GRATUITY.

Register No. M-388

Reg. No. 880019. Ple

Name Nichols, Wm Jas.

Address 460 Queen St.

Chatham Ont.

Dependent Mrs Mary Nichols, (wife)

Address Same

Dec'n No. ... File No. ...

Award ... days at $ ... per day $ ...

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

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

Less further debit balance $ ...

Not due Sold as below

Pay Soldier $ ✓

Pay Dependent $ ✓

Imp. J. W. Gluck

Ckd W. C. Hayden

Clerk Jas Humphrys

Days 153 Rate 100.00 Due 300.00

Less P.D.P. credited 175.10

Less further Dr. Bal. or overpayment.

Net 324.90

R W109
10-11-19

Date mailed	Ck. Order	Ck. No.	Amount		Remarks.
1 3-9-19	13808	511810	140	00	
2	—	—	—	—	
3 18-9-19	26900	521650	34	90	
4					
5					
6					

Date mailed	Ck. Order	Ck. No.	Amount.	
1 3-9-19	13809	511811	60.	00
2	—	—	—	—
3	—	—	30	00
4 18-9-19	26601	521651	30	00
5	—	—	30	00
6				

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

GEN'L AUDITOR
Posting checked by
M. B.
Date 26-8-19

M. F. W. 41
1 0M—7-16
1772-39 889

L. P. C. No. N. 494

Pte Name Nichols William James.

Regimental No. 880019

Unit 186th. Bn.

Date of enlistment 7.2.16

Place of " Chatham

Married (yes or no) yes.

Amount of pay assigned monthly $20.00 1.4/17 30.11/17 = 160.00

To whom payable Mrs Mary Nichols 460 Queen St Chatham Ont.

Name and address of next-of-kin Hond. 460 Queen St Chatham Ont.

M. B. 26.11.17 Duty

$1.20 00 — 6.31 12/17 = 440.00

Date and place discharged

Reason for discharge

Character on discharge

Cate 6th 9.12. 649-N-3504

Olympic 14 11/17 = Queen St Chatham Ont.

Form 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	30.10.17							2339								E. L. P. C.
31.10.17	30.11.17	31	1.00	31 00	31	10	3.10		57.49					9.73		Boat 39
														50.00		C.P.R.
					Dr Bal				22.24				20.00		79.73	Nov/17
									79.73						79.73	L. P. C. rend on 10 17/19 showing already 6.30 11/17 and 4.11.6 M. D. No I
																Less Soap Meat

J.O.M. 6.12.17

Emp A. P. C. 1.4/17 31 10/17 = 140.00

M. F. W. 41
1 0M—'-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H.Q. 1772-39-819

To Whom Mrs May Nichols (wife)

Address 468 Queen St. Chatham Ont

Rate 20.00

By Whom Assigned Nichols Wm James

Regtl. No. 880019

Rank Pte

Corps 186 Battn

APR 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				

CONSOLIDATED ACCOU 2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs May Nichols (wife)
(Assignee)

Name of Soldier Nichols Wm James

Pte 880819 186 Batt

L. L. Job 5470—Req. 6888.

2000

APR 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		V 9956	20 15 -	
May		A 9594	20	20 Ch.
June		P 18145	20	By ..... A/c Closed C.P. 30/11/17
July		R 24043	20	to C/P $160.00 Ret'd per Olympic
Aug.		9 31154	20	Date 6/11/17 F. X. 28/11/17
Sept.		I 38439	20	..... Clerk J. Clarke C.P.
Oct.		B 44869	20	
Nov.		R 57884	20	160 00 RH
Dec.		W 57955	~~20~~	W 57955 Cancelled
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

L. L. Job 310—M. & D. 6574.

1. 3. 16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Send Dec cheque to Ebenezer unless otherwise ordered

Name Mrs. May Nichols

Address ~~Eberts~~ 460 Queen St Ont. Chatham

Relation to Soldier wife, child or mother } Wife

Name of Soldier Nichols Wm James

Regtl. No. 880019

Rank Pte

Corps 186 Batt.

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED 6 UNIT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Mrs Mary Nichols Wife

Name of Soldier Nichols Wm James.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	R/2	Remarks.
April	1916	Q2612	40	40	
May		07376	20	20	
June		Z3942	20	20	
July		6.7426	20	20	
Aug.		013796	20	20	
Sept.		D 15675	20	20	
Oct.		Z 19745	20	20	better address ?
Nov.		~~G 23701~~	~~20~~	20	↑ G-23701 Cancelled
Dec.		9 26694	40	40	address to Eberts as no information
Jan.	1917	H 29879	20	20	of change in address can be found
Feb.		32795	20	20	
March		T35998	20	20	
April		M1966	20	20	
May		T 5173	20	20	
June		T 8793	20	20	
July		T 11977	20	20	
Aug.		D 16888	20	20	
Sept.		L 18564	20	20	
Oct.		P 21181	20	20	
Nov.		A14482	20	20	
Dec.		Z25969	20	N 440.00	
Jan.	1918				
Feb.			440.00	A/c Closed 31/17	
March				Ret'd per, Olympia	
April				Date 6/1 29/17	
May				Clerk L Lewis	
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	880019
Rank	Private
Name	Nichols, William James
Corps (Squadron, Battery or Company)	No. 1 Special Service Co.
Date of Discharge	11-2-18.
Place of Discharge	London, Ontario

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Military District No. 1
MAR 13 1918
I. D. 30-N-51

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	44 years 6 months.
Height	5 feet 3 inches.
Complexion	Fair
Eyes	Blue
Hair	Brown
Trade	Mail Carrier
Intended place of residence (To be given as fully as practicable.)	460 Queen Street Chatham Ont.

Descriptive Marks

Nil

2. The above-named man is discharged in consequence of H. Q. 16-1-25, 1m d/31-10-17, By Auth: I.D. 30-N-51, d/8-2-18. With effect. med Unfit 11-2-18.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

"Very Good"

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Mail Carrier

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

5. He is in possession of the following number of G. C. Badges:

Nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... Nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) London. Ont. ..... Gerrard Lt.

(Date) 11th February 1918 *Commanding* O.C. No. 1 Special Service Co.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) London Ont. W J Nichols *(Signature of Soldier.)*

(Date) 11th February 1918 Gerrard Sgt *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

W J Nichols *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

2 years. 5 days. Total..2..years..5..days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) London Ont.

(Date) 11th February 1918. *(Signature)* Gerrard Lt.

O.C. No. 1 Special Service Co.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

I have received all just demands due me

Signed

W J Nichols

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Form D.M.S. 1348 (Revised).
20[illegible]om—2/12/16.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

24—8— 191 7

No. 880019 Rank pte Name Nichols W. J.

Local Unit 4th Res Bn (186 Bn) Overseas Unit ~~/~~ Age 44

Examination held in Bramshott area.

DISABILITY. MYALGIA

Overseas—Local.
(scratch one out)

PRESENT CONDITION.

This o.r. has been falling out repeatedly while on training and his M.O. states that he cannot carry on - physical training. No objective symptoms - complains of severe pain in both instips and shins - especially after being a short time on his feet. Cannot route march. Should have treatment in this Unit - Will make B1 or A.

Board recommends :

1. Fit for Duty. City (One month for observation).
2. Fit for duty after ..... weeks physical training.
3. Fit for Base duty ..... weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures :

Maj. Can. C.

Members { F.H. Maywood Pres.
J.A. Dickson Maj
N. Fraser Capt

Approved.

Bramshott 24 Aug. 191 7

H L Burris major Can

for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

19

No. Rank Name

Local Unit Overseas Unit Age

Examination held in Bramshott area.

DISABILITY.

Overseas—Local
(scratch one out)

PRESENT CONDITION

Board recommends:

1. Fit for Duty.
2. Fit for duty after weeks physical training.
3. Fit for Base duty weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

Pres.

Members

Approved

Bramshott 19

for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

Form D.M.S. 1348 (Revised).
[redacted]m—2/12/10.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

5-10-1917

No. 18019 Rank Pte Name Nichols W.J.

Local Unit 4 Res Bn. (186) Overseas Unit Age 44

Examination held in Bramshott area.

DISABILITY. MYALGIA

~~Overseas~~—Local.
(scratch one out)

PRESENT CONDITION.

This man does not improve after persistent treatment. His M.O. asserts that he is quite unable to do any marching - will probably not improve in this climate. Shows no other disability

Board recommends: C iii Permanently

1. Fit for Duty.
2. Fit for duty after ..... weeks physical training.
3. Fit for Base duty ..... weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures: Maj. Cans.

H. Maylood Pres.

Members { W. Fairfax Capt.

Approved.

Bramshott 5 OCT. 1917 W. L. Burndrayor
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

19

No. Rank Name

Local Unit Overseas Unit Age

Examination held in Bramshott area.

DISABILITY.

Overseas—Local.
Scratch one out)

PRESENT CONDITION.

Board recommend

1. Fit for Duty

2. Fit for duty after weeks physical training.

3. Fit for Base duty weeks.

4. Fit for Permanent Base Duty.

5. Discharge.

Signature:

Pres.

Members:

Approved:

Bramshott 19

for A.D.M.S. and G.O.C.
Canadian Troops, Bramshott.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION London, Ont. DATE 6/2/18.

1. (a) Unit #1 S.S. (b) Regimental No. 880019 (c) Rank Pte.

(d) Surname NICHOLS (e) Christian name Wm. James.

2. Age last birthday 44 Date of birth Aug. 24/73

3. Enlisted at Chatham, Ont. on Feb. 7/16.

4. Personal description :—

(a) Height 5'2" (b) Weight 135 (stripped) (c) Complexion Fair.

(d) Colour of hair Fair. (e) Colour of eyes Blue. (f) Identification marks

Scar from herniotomy left groin.

5. Address after discharge (for the use of the Board of Pension Commissioners.)

460 Queen St. Chatham, Ont.

6. Former trade or occupation Farmer.

7. (a) Service

	Years	Days	Periods From	Periods To
186 Bn. 4th Res. Bn.			7/2/16.	Mar. 1917.

(b) Has he been Overseas ? Yes.

8. Present disease or disability (use authorized nomenclature if possible). Myalgia.

(a) Date of origin July 1917. (b) Place of origin Bramshott Eng.

(c) Cause* Marching.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

This man has severe crampy pains in each foreleg and foot. Pain is most severe in calf of leg and is constant night and day walking or standing. Forelegs have been swollen at times. Arches are slightly flattened Heart, lungs and other organs normal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

CASUALTY CARD INDEX MILITARY DIST. No. 1 FEB 1918

M. F. B. 227.
15 M.-6-17.
1772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Herniotomy scar 3" long in left groin.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced ? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

20% (twenty per cent.)

12. Did the disability arise on or off duty ? On duty.

13. Was a Court of Inquiry held ? Not applicable.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service ?

~~Yes~~ No. Not applicable.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? No.

(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.)

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

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

Nil.

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

No.

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

20. Recommendations Category "C" III

J. B. Mervol Capt RAMC

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned W. J. Nichols. have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Pte W. J. Nichols

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Agree but would add that symptoms complained of are all subjective being no objective signs such as soreness of muscles to confirm this. As this trouble arose after he went to England the Board is of the opinion that it was due to climate conditions in England. Mh does not complain of any pain only slight aching excppt after rapid walking. Disability 10% for six months.

22. Is the soldier fit for

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

23. It is certified that the soldier

(a) ~~Does require treatment~~.
(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).

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

placed in some unit in Category "C" III.

J. J. McNally Capt. C.A.M.C. *President.*
H. H. Sutherland Capt. C.A.M.C.
D. W. Gardner Capt. C.A.M.C. } *Members.*

STATION London, Ont.

DATE 5/2/18.

APPROVED BY

DATE 7-2-18

O. C. Bell Major
Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

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

INSTRUCTIONS

1. In using this Form the " Instructions issued for the guidance of Medical Officers serving on Medical Boards " will be carefully followed.

2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.

3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.

4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.

5. The nomenclature of diseases to be followed is that 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 and Sons.

Date of Enlistment

1-3-16

3 L 3 N 10 pp

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

April 1917.

RATE OF SEPARATION ALLOWANCE

20			

RATE OF ASSIGNMENT

20.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 880019.

Rank Pte Promoted Reverted Discharge

Soldier's Name Wm James Nichols

Battalion 186. Battn.

Beneficiary Mrs May Nichols

Relationship Wife

Address

PARTICULARS OF ASSIGNMENT.

Name Mrs May Nichols (wife)

Address 460 Queen St. Chatham Ont.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31	—	440 —	160 —	~~440~~ 600 —	a/c closed 31/12/17. last cheque ap. " 30/11/17. " 7 K 29/11/17. → last cheque 7 K 28/11/17.

Retd per Olympic 6-11-17 $20 overpayment for Nov-17 received by Cas. Br.

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 1933.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.