ORIGINAL

11 M. D. 1st Depot Battalion B.C Regiment

Regtl. No. 2023643

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname: PICKLES
2. Christian name: Arthur Lawrence
3. Present address: Hornby Island B.C. Canada
4. Military Service Act letter and number: 310351
5. Date of birth: October 29th 1896
6. Place of birth (town, township or county and country): Denman Island B.C. Canada
7. Married, widower or single: single
8. Religion: Adventist
9. Trade or calling: Farmer
10. Name of next-of-kin: Annie Louise Pickles
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: Denman Island B.C. Canada SUFFICIENT ADDRESS
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None
15. Medical Examination under Military Service Act:—
    (a) Place: Vancouver B.C. (b) Date: May 20th.1918 (c) Category: "A2"

DECLARATION OF RECRUIT

I, ARTHUR LAWRENCE PICKLES, do solemnly declare that the above particulars refer to me, and are true.

A L Pickles (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 21 yrs. 7 mths.

Height: 5 ft. 8½ ins.

Chest measurement: fully expanded 36 ins.; range of expansion 3 ins.

Complexion: fair

Eyes: blue

Hair: brown

Distinctive marks, and marks indicating congential peculiarities or previous disease: scar dorsum of left foot and front of left knee

per dupster Maj Lieut-Col.

O. C. 1st Depot Btln.

B.C. Regt.

Place: Vancouver B.C. Date: May 17th. 1918

L

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class 1

1. Surname	
2. Christian name	
3. Present address	
4. Military Service Act letter and number	
5. Date of birth	
6. Place of birth	
7. Married, widower or single	
8. Religion	
9. Trade or calling	
10. Name of next-of-kin	
11. Relationship of next-of-kin	
12. Address of next-of-kin	
13. Whether at present a member of the Naval or Military Forces	
14. Particulars of previous military or naval service, if any	
15. Medical Examination under Military Service Act	

(a) Place ..... (b) Date .....

DECLARATION OF RECRUIT

I ..... do solemnly declare that the above particulars are true, and are true.

..... (Signature of Recruit)

DESCRIPTION ON JOINING UP

Apparent age	
Height	
Chest measurement	
Complexion	
Eyes	
Hair	

Marks, Indentifying Scars, Peculiarities or Deformities and Wounds

Scar on left foot and front of left knee

Place ..... Date .....

M.F.W. 1182.
500 M.—8-17.
3172—50—1182.

REGIMENTAL DOCUMENTS

NAME Pte. PICKLES, ARTHUR LAWRENCE REGT. NO. 2023643 UNIT 11th Bn. C.G.R. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	2/4/19				~~DEATH~~
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
1	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	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
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
4	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med. Unfit.
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				7971	
	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~~
2	LAST PAY CERTIFICATE (M.F.W. 44)					
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)					

33 — 29
24 — 29
16 — 29

2.

W. 2589
100M-11-18
1772-39-1377

H. Q. 492

M. D. No. 11

Surname Pickles

Christian names Arthur Lawrence

Regtl. No. 2023643 Rank Pte

Unit B.C. Regt 1st Depot Bn

T. O. S. May 17th 1918

D. O. Pt. II 136 of 16/5/18

S. O. S. His 24-2 1919

Reason "M.21"

Auth. W.O. 56 of 25-2-19 II/68 GR

Next of kin Pickles Mrs Annie Louise Relationship Mother

Address Denman Island, B.C.

Also notify:

BORN—Place Canada Denman Is. B.C. Date Oct 29th 1896

ATTESTED—Place Vancouver, B.C. Date May 17th 1918

O/S

R/C

W. 22—75M-5-18. 1772-39 839.

M. F. W. 71—500M.—5 18.
1772—39—961.

NAME Pickles, Arthur Laurence.

REGIMENTAL NO. 2023643. RANK Pte.

ENLISTED AT Vancouver. B.C. PROMOTIONS, &c. AND DATE

DATE May 17th 1918.

IF SERVED PREVIOUSLY, STATE UNIT, &c. None.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Annie Louise Pickles RELATIONSHIP Mother

ADDRESS OF Denman Island, B.C.

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O. No.	PART II. D. O. Date	REMARKS IF IN HOSPITAL, NOTE NAME, &c.
T.O.S. 11th Bn. 18-12-18.	241	27-12-18	1st Depot Battn
S.O.S. 11th Bn. 24-2-19	56	25-2-19.	Discharged

LEDGER NO. 1/36.-2/1134 SERIAL NO. B.42 B.38986 28

REG. NUMBER 2023643 NAME Pickles A D 21

RANK Pte CORPS 1st Dep

AGE 21. SERVICE C & M 4/12

NAME OF HOSPITAL Military PLACE Vancouver

DATE OF ADMISSION 10-9-18 26.6.18

DISEASE Myalgia (1) Bronchitis. Lumbago.

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 25-2-19. IN CATEGORY

M. F. W. 2553.
50m.—6-18.
1772-39-1334.

P. T. O.

REMARKS:

ORDERLY ROOM
FEB 24 1919
11th BATTALION
CAN. GARRISON REGT. C.E.F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2023643 (Rank) Private

Name (in full) Arthur Laurence Pickles enlisted in

the 1st Depot Battn B.C. Regt.

CANADIAN EXPEDITIONARY FORCE at Vancouver B.C. on the 17th

day of May 1918.

HE served in Canada.

and is now discharged from the service by reason of MEDICALLY UNFIT under

A.G. Telegram, 7556, dated 18-11-18.

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

Age 22 yrs.

Height 5 ft. 8 1/2 in

Complexion Fair.

Eyes Blue.

Hair Brown.

Arthur L Pickles
Signature of Soldier

Marks or Scars Scar dorsum of left foot and front of left knee.

R. G. Macneith
Issuing Officer

Major
Rank

11th Batt'n Canadian Garrison Regt. C.E.F.
Appointment

Date of Discharge 24-2-19.

Signed at Vancouver B.C. this 24th day of February 1919.

in Military District No. XI

File Reference No.

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.
250m —6-18.
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 .....

.....

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

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

.....
Name of Officer

.....
Rank

.....
Appointment

M.D. 11
No. 47

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 2023643 Rank PTE. Name PICKLES Arthur Lawrence
11th. C. G. R.
Corps Vancouver, who was* Discharged
On 24-2-19 191..., to .....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 191...,
to 24-2-19 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	224	40
Advances by Cheques No. 10612	20	00	Regt'l. Pay 24 days at $ c.	24	00
Advances by Cheques No.			Field Allow. 24 days at $ c. 10	2	40
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Clothing	35	00	Other Allowances* Clothing	35	00
Payment on transfer or discharge No. 9511	230	80	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	285	80	Total	285	80

*Give particulars.

A monthly stoppage of $..... (†) has ..... (‡) been paid on account of Assigned
Pay for the month of N I L. 191...
and Sep'n Allce. for month of ..... 191...
(to) Assignee N I L.
(Address) .....

(†) 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.

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

REMARKS:—

State (1) date of enlistment 17-5-18

(2) if married and if a Separation Allowance Card has been submitted No.

(3) cause of discharge Medically unfit. authority D.C.O. XI MD. 34-P-617 20-2-19.

(4) authority for transfer D.O. 56. Part 3. Feb. 26th

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 ...February 25th., ...1919
Place VANCOUVER, B. C.

Barnardo Lt.
Paymaster, 11th Batt'n C. G. Reg't C.E.F. Paymaster.

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.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 11

NAME OF SOLDIER Nicholls Arthur

REGIMENT C.D.S. RANK Pte. No. 202 3643

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919																					
Jan	15	6 5 13 15 14 19 32									17 1 1 4 18 30									Examined by Lieut Forsyth	11	4 Cavities 3 4 31 32

M.F.B. 465. 200m.—6-18. 1772-39-950.

PICKLES

Report of Medical Board.

Classification by Categories.

1. Station Vancouver BC. 6. Age. 2023643
2. Unit or Corps 1st D.B. B.C.R. 7. Enlisted on 17 may 1915
3. Regimental No. 2023643. 4. Rank Pte at Vancouver BC
5. Surname Pickles Christian Name Arthur Lawrence
8. Has he been Overseas? no
9. Former Category A2
10. Nutrition good
11. Physique good any deformity or lameness? If so describe.
12. Nervous System mentality poor
13. Respiratory System normal
14. Cardio-Vascular System tachycardia.
15. Digestive System
16. Genito-Urinary System
17. Skin, Ear, Eye, Nose & Throat.
18. Conditions present, necessitating change of Category.

Complains of persistent + severe pain in back. Is highly neurotic – There does not appear to be any organic cause for his complaints. Has been under observation in hospital for 3 weeks. The Board is of opinion that ~~there~~ his is purely functional + largely imaginary

19. Category to which recommended A – to be kept on light duty for a couple of weeks and tried out

Station MEDICAL BOARD OF REVIEW VANCOUVER

Date DATE Aug 17 1915

W B Wedderburn President.
W A Bryden Jack
J N Macdermot Members

This form is to be used in all cases for categorization when the individual is being placed in a higher or lower Category.

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 1st Depot Battalion, B. C. Regt. C.E.F. VANCOUVER, B. C.

Regimental No. 3023643 Rank Pte Name Pickles Arthur Lawrence

Enlisted (a) 17. 5. 18 Terms of Service (a) C.E.F. Duration Service reckons from (a) 17. 5. 18

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) Cond. Farmer Military.

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				
18.12.18	1st Depot Battn	T.O.S. 11th B'n C.G.R. C.E.F.	VANCOUVER, B.C.	18.12.18	PART II. ORDER NO. 241 .27.12.18
24-2-19.	11th Bn. C.G.R.	S.O.S. 11th Bn. C.G.R. C.E.F.	Vancouver B.C.	24-2-19.	Part II Order No. 56 25-2-19
Discharged "Medically Unfit" A.A.G. Telegram dated 18-11-18. Auth:- D.G.M.S. M.D. 34-P. 687 dated 20-2-19. Certified correct in so far as it concerns					11th Batt'n Canadian Garrison Reg't C.E.F. A.A. Baker Lieut.

(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				

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname PICKLES Christian name ARTHUR LAWRENCE.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule Hastings Park.

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any)

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the MAY 20 1918 day of 1917, by the undersigned medical board sitting at VANCOUVER B.C.

5. Age as stated 21 Years 7 Months. 6. Apparent age 21 Years Months

7. Height 5 Feet 8½ Inches. 8. Weight 148 Pounds.

9. Chest measurement { Minimum 33 Ins. / Maximum 36 Ins. } 10. Complexion fair { Eyes blue / Hair brown }

11. Physical development. good { Good / Fair / Poor } 12. Smallpox marks 0

13. Number of vaccination marks { Right arm 0 / Left arm 3 } 14. When vaccinated last childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar dorsum of left foot and front of left knee.

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }
(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

H. Bullock Capt. President.

G. B. Murphy Capt. Member. W. F. Mackay Capt. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
22/6/18		W F Luton M.O.	20/5/18		W F Luton M.O.
		M.O.	4/6/18		W F Luton M.O.
		M.O.	15/6/18		W F Luton M.O.

Joined 17th day of May 1918 at Vancouver

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Battalion, B. C. Regt. C.E.F. VANCOUVER, B. C.	2023643		17-5-18
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
	MEDICAL BOARD OF REVIEW VANCOUVER DATE August 17 1918		

N.B.—This sheet is to be disposed of in accordance with instructions in the Regulations for Military Medical Service on the man becoming non-effective; the date and cause being stated on next page.

VISION: Right 20/32 Left 20/32 Hearing: Normal R.L.

Vancouver 17-2-19 myalgia nervous debility

Signature of Man A. L. Pickles

Surname PICKLES Christian Name ARTHUR LAWRENCE

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.
Van Nil Annex		26	7	18	15	8	18		20	Complains of persistent pain in back. Mentality of very low Order - doubtful if he will make an efficient Soldier. Brought to the trial on light duty	F Brodie Capt. C
V.D.H.M.A		9	9	18	13	1	19	Myalgia		Improvement Reasons to Convalescent Hosp.	F. Brodie Capt
Fairmont Sect.											
S. W. H.		13	1	19				Neuro Hyd. Debility		Unchanged. Complains of pains in back, shoulders & leg. Is mentally rather immature.	J. Bickford Capt

CASE HISTORY SHEET.

M. A. Vancouver General Hospital. Vancouver B.C. Station.

No. 202367 3 Rank Pte. Name Matthew L. Pickles Age 21 yrs.

Unit 1st Def Bn. Completed years of service Where and how long } May 17 2 - 1918.

Date of admission June 26 1918 Date of discharge 15. 8. 18.

Diagnosis Bronchitis + Lumbago. Place of origin Hastings Park Vancouver B.C.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Complaints - Pain in back, cough, dyspnoea & chest pain on chest, headache, sensitiveness over thyroid. Admitted 23-6-18. Patient considerably run down, blood pressure abnormal, tonsils enlarged & ~~tender~~ painful, ~~generally~~ ~~run down~~ ~~Confined to bed~~ ~~Res Dept~~

Examination on admission: Emaciated & run down, blood pressure left 120 right 90, tonsils enlarged & painful, ~~Chest~~ Abdomen & ~~Chest~~ Nervous System negative. Urine ~~negative~~ negative.

July 1st. P. T. & R. N. Bronchitis much improved.
July 10th Developed acute Lumbago.
July 20. Hyperaesthesia in back. Patient is mentally not very bright and answers are very unreliable.
July 30. Considerable improvement able to be dressed & go out.
Aug. 10. Still improving.

FAMILY HISTORY. Mother & brother Tuberculosis also nervous trouble.
(Tuberculosis, mental or nervous diseases.) Father died (accidentally) aged 21 years.
Negative for T.B. Ca, malignancy, insanity & mental ~~disease~~ disorders.

TREATMENT. Expectorants, massage & ~~medicine~~ ~~massage~~.
(Especially any specific or special form.)

CONDITION ON DISCHARGE, Still complains of slight pains in back
(and disposal made of case.) Other systems normal, Bronchitis cured.
Returned to unit and recommended that he be discharged as he will not make an efficient soldier.

Date 14. 8. 18 J. Brodie Capt
Medical Officer i/c case.

M. F. B. 313a.
200M.-5-18.
1772-39-439.

C
B 38986

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. 2023643.

Rank Pte.

Surname Pickles.

Christian Name Arthur Laurence.

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

Corps (Squadron, Battery or Company) 11th Batt'n Canadian Garrison Regt. C.E.F.

Date of Discharge 24-2-19.

Place of Discharge Vancouver B.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years ..... months.	Descriptive Marks
Height 5 feet 8 1/2 inches.	Scar dorsum of left foot and front of left knee.
Complexion Fair.	
Eyes Blue.	
Hair Brown	
Trade Farmer.	
Intended place of residence (To be given as fully as practicable.) Denman Island, B.C.	

2. The above-named man is discharged in consequence of MEDICALLY UNFIT under A.G. telegram 356 dated 18-11-18. Auth: 20 C.C. 11 M.O. 34-P-617 dated 20-2-19.

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.

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

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

Farmer.

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

MEDICAL DOCUMENTS FORWARDED TO ~~N. C. R.~~ OR B. P. C. ON 20-3-19.

(OVER)

Of Sweden

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) Vancouver B.C. R. J. Monteith Major

(Date) 24-2-19. *Commanding* 11th Batt'n Canadian Garrison Reg't C. E. F.

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) Vancouver B.C. C. L. Pickles *(Signature of Soldier.)*

(Date) 24-2-19. F. W. Frederickson *(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.

..... *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) ✓ years 283 days.

Total ✓ years 283 days.

11. **Confirmation of Discharge.**

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

(Place) Vancouver B.C.

(Date) 24-2-19. *(Signature)* R. J. Monteith Major.

11th Batt'n Canadian Garrison Reg't C. E. F.

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.)

No Reservations
A L Richter

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a.
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia Form B. 313	
Medical Report for Invalid*	"	B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	"	D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form B. 235.	
Proceedings on Discharge	"	B. 218.

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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.

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.

Fairmont

STATION Vancouver B.C. DATE 17.2.19

1. 1 (a) Unit 11th CGR (b) Regimental No. 2023653 (c) Rank pte

(d) Surname Pickles (e) Christian name Arthur L.

(f) Home address Denman Island, B.C.

(g) Next of Kin Mrs A.L. Pickles (h) Relationship mother

(i) Address of Next of Kin Denman Island B.C.

2. Age last birthday 22 Date of birth 29.Oct.1897

3. Enlistment, or Appointment (if an Officer) (a) Place Vancouver. (b) Date 7.5.18

4. Personal description:

(a) Height 5'8" (b) Weight 154 (stripped) (c) Complexion fair

(d) Colour of hair fair (e) Colour of eyes blue (f) Identification marks, Scars, etc. two scars on left knee.

5. Former trade or occupation farmer.

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
	A.D.M.S., M.D. XI. FEB 18 1919	
	Periods	
	From VICTORIA, B. C. To	
Canada	7.5.18	present
England		
France or other theatres of War		

7. Original disease, or injury 1. Myalgia. 2. Nervous debility 3. Mentally rather defective.

(a) Date of origin 1. & 2. Prior to enlistment. 3. Unknown. (b) Place of origin 1. 2. 3. Canada.

(c) Cause 1. Fall off horse. 2. 3. Mentally defective.

M. F. B. 227.

300M.—8-18.
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.)

1. Myalgia, lumbar. 2. Nervous debility. 3. Mentally defective

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.)

A young man, worried expression quite anaemic, nutrition fair. Myalgia-apparent tenderness on pressure over lumbar muscles. Stoops with difficulty Can only reach to about 12" from toes. Straightens up with apparent discomfort. Can walk on the level pretty well he asserts, but with difficulty up and down grades. X Ray eport of spine, negative findings. Throat-specialist's report attached. Complains of pains in left shoulder and both legs. Work- should be able to do light work on the farm.

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

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

Special Senses....no....Respiratory System....no....Integumentary System....no....

Disturbances of Mentality....no....Digestive System....no....Muscular System....no....

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

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

Fall off horse back over three years ago. Six or eight weeks later noticed pains in his back and it has never been right since.

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

Bronchitis-in adolescent period

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

scars, one on left knee and one about 4" above knee joint.

11.—(a) Did the disabling condition have its origin before enlistment? 1.2.3 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.)

no.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 1.2.3. a. and 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? 1.2.3. More or less permanent.

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

rest and observation.

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

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

no

16. Can the former trade or occupation be resumed? yes. light farming.

(If not, briefly state why)

17. Recommendations Category E absolutely unsuitable to make an efficient soldier.

J. R. Dingwall Capt

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.....

A.R.T.

A L Pickles 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.

9 a. There is very marked tachycardia with no apparent cause beyond the anaemia (thyroidnormal) which is of a moderate grade. Pulse 120 standing quietly, 156 after swinging arms 10 times, returns to 120 in 2½ minutes. There is marked general tremor after exercise, for a minute or so. Is depressed and inclined to weep.
10 a. Has been as he is now practicaly since enlistment.

19. Is the invalid 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.)	no
(*d*) Temporarily unfit.	(" D)	(Yes or No.)	no
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	Yes E

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.)

no

(*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.)

Yes, category E for discharge

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.

A. P. Thomson Capt. *President.*

PLACE Vancouver B. C.

J. A. MacDermot Capt. } Members

DATE Feb. 17. 1919.

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.....

DATE..... } Members

APPROVED BY

For Assistant Director of Medical Services.

DATE FEB 19 1919

APPROVED BY

Director-General of Medical Services.

DATE.....

NEUROLOGICAL REPORT

10.2.19

#2023643 Pte. PICKLES, A.L.

Patient is a young man of 22, fairly well developed, fair complexioned with a tired apathetic expression of face. Is hyper-emotional and is very easily moved to tears.

Mentality: Of somewhat immature developement which has led to a feeling of great inferiority and incapacity and he has felt out of place in the army and lacked the power to adapt himself to Military life.

He has never been to France nor out of Canada, but ever since enlistment in May 1918 has been ailing in one way and another and been treated in hospitals up to the present without improvement, rather the reverse.

There is no evidence of any organic disease of the nervous system whatever.

There is some general debility brought on by his continued residence in hospitals.

In my opinion the patient is a mental defective and suffering now from some nervous debility.

He is not fit for Military service and will not improve by further hospital treatment.

Recommendation: Category "E".

(Sgd) G.H.Manchester, Capt.C.A.M.C.

NEUROLOGIST.

Specialist's report

Throat. Feb.10.1919.

Pte Pickles A.L.
1st Depot.Bn
Pathological condition present. Tonsils have been removed, throat negative.
To what extent in percentages does this condition disable patient?...
Is this condition due to service? YES
If not due to service has it been aggravated by service?...
If aggravated by service state in percentages how much?...
Will further treatment be of benefit? NO
Prognosis....

W.E.Ainley.Capt.

Vancouver General Hospital

X Ray department. Feb.12.1919.

Pte A.L.Pickles
Attdg Phys. Dr J.L.Telford.
Region for examination. Lumbar spine.
Finding and diagnosis. NEGATIVE FINDING.
A.R.T.

Dr Whitelaw.

10.2.39

CASE HISTORY SHEET. 12. 2

V.G.M.Annex. Hospital. Vancouver. Station.

No. 2025643 Rank Pte. Name Pickles.Arthur L. Age 21

Unit 1st Depot. Completed years of service (Where and how long) 4/12 Canada.

Date of admission 9-9-18 Date of discharge 13-1-19 25-2-19

Diagnosis Lumbago Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE

About three weeks ago patient was discharged from the V.G.M.Annex where he had been admitted on account of influenza and subsequent lumbago. He was then returned to his Unit with a recommendation that he be discharged from the service as he will not make an efficient soldier. The present exascerbation of the condition is said to have begun several days before admission, although only for a few days since his discharge has he been entirely free from pain.
On Examination: Mentality very low.
A few teeth are carious. Tonsils enlarged.
Examination of back reveals doubtful tenderness on deep palpation.
Other systems normal.
Oct. 20th Feeling chilly pains all over body and headache. Temp. 103 Pulse 100 Resp. 20. Transferred to Ward 6
Oct. 23rd Slight cough - no pains. Condition improved. Temp. 100 Pulse 78 Resp. 20. ~~Transferred to Fairmont.~~ Capt F. Brodie R.A.M.C.

Nov. 28. Utley - Has had attacks of tonsilitis at intervals for some years -
Present condition - Chronic hypertrophic Tonsilitis -
Nov. 30. Throat healed - Transfer to ward 7 - Capt. Greenwade major -
Jan 11. Pain in back much improved. Able to walk 1-2 miles. Suffering from chronic enteritis. Transfer to Convalescent Hospital. F. Brodie Capt

13-1-19 Admitted from Convalescent Hospital 27-1-19 G.C.
Pain - Back much improved 3-2-19 G.C. Fair. P.T.O.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Rest and massage.

(Especially any specific or special form.) 21 Nov. - Tonsillectomy - Greenwade

CONDITION ON DISCHARGE, (and disposal made of case.) G.C. unchanged. Still complains of severe pains in back. At this time has been for some days - no change in the condition since admission. Mentally seems on verge of development mental condition of a low order mentally

Date 24-2-19

J. Bedford Capt.
Medical Officer i/c case.

M. F. B. 313a.
200M.-5-18.
1772-39-439.

B.424

7-2-19. Patient of Low type mentally. Apparently finds it very difficult at times to explain his condition. Shows a tendency to cry at times. States that his back condition has been weak him for over three years & long previous to joining the army. States that he fell off horseback & landed on his back at six weeks later he felt this pain in his back develop & has never been right since.
10-2-19 Boarding

AUDITOR 2nd | PAYMASTER

M. OR S.

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

REGT. No. 2023643 RANK Pte NAME (IN FULL) Pickles A. L. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

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

PLACE OF ATTESTATION Vancouver — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 17.5.18 — 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 — EFFECTIVE

DISCHARGED — PLACE Vancouver. — DATE 24-2-19 — REASON Medically Unfit. — AUTHORITY D.O. 56. — IF ENTITLED TO POST DISCHARGE PAY No

1919 MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							224	40																											
Feb. 1													9511																						
" 24	24	1.10	26	40	3	5			285	80			10612						265	80											285	80			Bank	D.O. ~~55~~ 56 Disch. 24.2.19. entitled to clothing allwce. 35.00
																			20	-															No W.I.L.

Certified that all payments have been made on this account for which covering authority has been received to date.

A. Lamb Lieut.,
Paymaster, Demobilization Pay.
M.D. No. 11

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	