

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... Arthur W Piddock
- 2. In what Town, Township or Parish, and in what Country were you born?..... Cambridge Eng.
- 3. What is the name of your next-of-kin?..... Mrs J Piddock
- 4. What is the address of your next-of-kin?..... 4 Doric St Cambridge Eng
- 5. What is the date of your birth?..... May 23 1888
- 6. What is your Trade or Calling?..... Farmer
- 7. Are you married?..... no
- 8. Are you willing to be vaccinated or re-vaccinated?..... yes
- 9. Do you now belong to the Active Militia?..... no
- 10. Have you ever served in any Military Force?.. no
If so, state particulars of former Service.
- 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

A W Piddock (Signature of Man).
J M Kent (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

A W Piddock (Signature of Recruit)
J M Kent (Signature of Witness)
 Date April 9th 191 5

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Piddock, 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.

A W Piddock (Signature of Recruit)
J M Kent (Signature of Witness)
 Date April 9th 191 5

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 Regina this 9th day of April 191 5

Megan (Signature of Justice)

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

Herbert Snel Lieut. Col (Approving Officer)
 Cmdg. 46th. Battalion, C. E. F.

Description of Piddock A W on Enlistment.

Apparent Age 28 years 10 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height 5 ft. 6 ins.

Chest measurement { Girth when fully expanded 40 ins.
 Range of expansion 5 ins.

Complexion dark

Eyes light blue

Hair dark brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date April 9th 1915

Place Regina

W. J. Macdonnell
 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.

A W Piddock 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.

W. J. Macdonnell (Signature of Officer)

Date April 10 1915

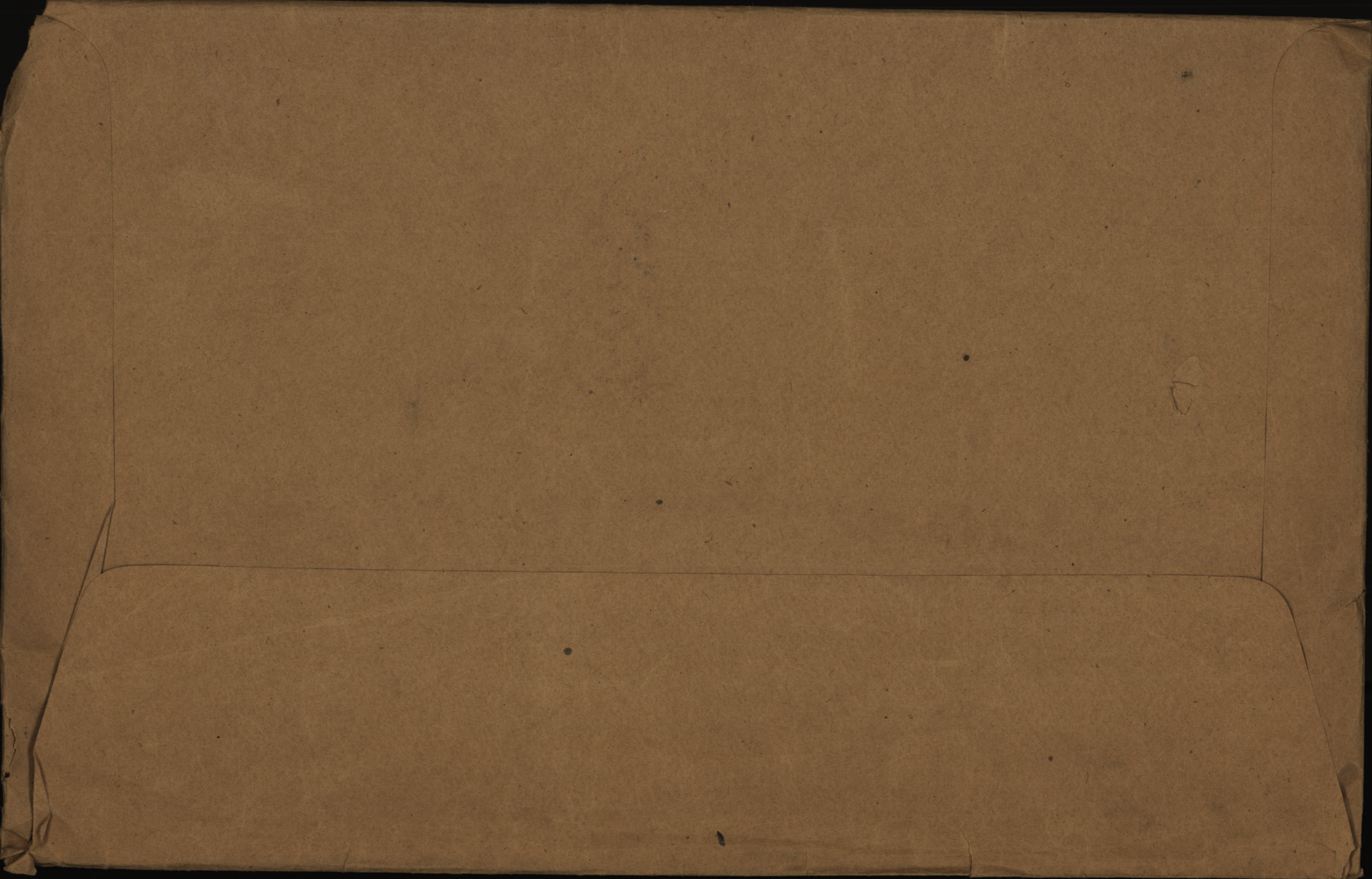
REGIMENTAL DOCUMENTS

Pte NAME Piddock, Arthur, William REG. NO. HC 6561 UNIT H6th Bn FILE NO. 9420-7-19

I

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)	13	M	JUN 12 1920	8096	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
2 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Unfit for Gen. Service</i>
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
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)					
2 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					3
<i>Misc</i>					
<i>man</i>					
<i>Band 1937</i>					25-28
<i>1937</i>					22-28
<i>1937</i>					5-1
					3

H



H. Q. Reference

No. 426561

Rank

Pte

Unit

46th Battn

Surname

Piddock

Christian names

Arthur William

Kindly forward Medals, to which I am entitled by reason of my
service in Belgium & France

(Theatre of War)

with

The 13 BATTALION

(Unit with which served in Theatre of War)

No.

STE 11, SYLVIA, APT-6

Street

TORONTO ST.

Town

WINNIPEG.

County

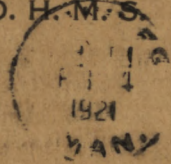
MANITOBA.

Arthur W Piddock

(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

O. H. M. S.



POSTAGE
FREE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

com.

Number, 4 26 561.

Rank Pte.

Surname, PIRROCK.

Christian Name, Arthur William.

Units, 13th Bn. Can. Inf. Theatre of war, France.

Date of Service, 17.6.16.

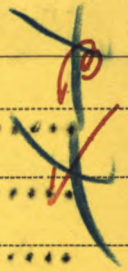
Remarks

Latest Address, 1001 Banning St.

Winnipeg Man.

Roll No.

Page 7866



Port, ship, and date of arrival

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

11681700
OCT 21 1921
DEP. REG. NO. 413411

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

Granville Can. Spl. Hospital, HOSPITAL.

**A. & D.
CARD**

AT Ramsgate.

A. & D. No. A 717 PL. OF ACTION 426561

RANK Dofc UNIT CAME SICK OR WOUNDED

NAME Piddock aw AGE 30 RELIGION C of E

PLACE IN HOSPITAL R 56-1/1/4

DIAGNOSIS Debility. Anaemia

ADMITTED 31 Jul 1917 FROM 15 days

DISCHARGED _____ TO _____

TRANSFERRED _____

SERVICE AT HOME 28/12 IN FIELD 4/12

RESULTS _____

(See Document Card for M.H. Sheet and other Documents.)

(P.T.O.)

REMARKS.

Duty
LCSA 14/8/11

W.

Name **Piddock. Arthur** Rank **Pte.**Reg. No. **426561**Unit **C.A.M.C. RAMSGATE**Next of Kin **Mrs. J. Piddock. 4 Davis Street. Cambridge. Eng.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
1-8-	Granville C. Spec. Hosp.	Ramsgate.	Debility.	61		
13-8	DISCHARGED:-		Do	76		
	Name corrected	Cas.	List.No.	84		

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

.....HOSPITAL.

A. & D. No. T 5103 Ward F 6a.Unit 13 Ben Sick or Wounded.Regtl. No. 426561 Pl. of Act'nRank Pte Name Piddock A. W.Age 30 Religion CofE.Service Compl'd 22/12 Time with Field Force 3/12Diagnosis GSW back func. paraplegiaAdmitted 2 MAR 1917 Discharged 12 JUN 1917 {103

Transferred

1st Quebec Regt. S. Shoreham.

REGT'L No 426561

H. Q. FILE No. 649-

NAME Piddock, Arthur W.

RANK AND CORPS Pte., 13th Battalion

FOLLOWS

No.

CABLE

No.

DATE

46th Battalion

NATURE OF CASUALTY

FOLLOWS

0870

16-9-16

Adm No 2 Gen Hosp Brighton
Sept. 14th 1916. (shrapnel back)

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 443	No 2 Cav. Hd. Amb.	12-8-16	Myalgia
A 445	Rep. from Base	15-8-16	" Rejoinit.
B 164	No. 2. C. Gen. Brighton	14-9-16	Shrapnel wound back
B. 307	Granv. Can. Spec. Rams.	3-3-17	S. W. Back June Paraplegia
No. 61	Granville Can. Spec. Portsmouth	1-8-17	Debility
" 76.	" Dis " "	13-8-17	"

NAME

Piddock, Arthur W.

So. S. Dis 57-19 70
D.O. 183 of 2-7-19 General
#10A/D 426561
Battalion

RANK & No.

Pte.

CORPS

46th

ENLISTMENT, PLACE

Regina, Sask.

DATE

April 9/15

S.

FORMER CORPS

Nil

COUNTRY OF BIRTH

England, Cambridge

NEXT OF KIN

Piddock, Mrs. J.

ADDRESS OF NEXT OF KIN

4 Doric St., Cambridge, Eng.

DISCHARGE, PLACE

DATE

Sailed from Halifax 23-10-15 pr

S.S. Lapland 244

M. F. W. 22. 100 m.-9-15.

L. L. 85779-M. & D.-6011.

R/e 2-2-19 261/38 Pte

H. Q. 1772 39 839.

REMARKS:



1 1 1 1 1

*Name Piddock, Arthur W. Rank Pte. Regtl. No. 426561

Original unit CAMC Present unit 46th Bn. W or S. Age 30 Religion C of E Fyle Depot..... Ref. H.Q. ●

Port, ship, and date of arrival..... Sailed 24-1-19 S.S. Grampian, St. John.

Next of kin..... Mrs. J. Piddock, 4 Doric St., Cambridge, Eng.

Address on leave.....

Address on discharge.....

Transportation issued Yes No Date..... Character on discharge.....

Previous occupation..... Farmer Date and place of enlistment..... Regina, Apr. 9th 15

Diagnosis..... Date of Medical Boards..... 24/7/19 *pmc*

Date.	Remarks	Pt. 2 Order No.
<u>24-1-19</u>	<u>T.O.S. # 10 D.D. & posted to Cas. Coy.</u>	<u>D.O. 46-2</u>
<u>1/2/19</u>	<u>14 days landing leave with subs.</u> <u>Las Co Staff.</u>	<u>- Ordub - 102</u>

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

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192
150M-6-18.
1772-39-1243.

Surname

Christian Name or Names

Reg. No.

Piddock ✓

A.W.

426561

Rank

Unit

Co.

Troop

Batty.

Pte. 13th Bn. C.A.M.E. Cong.

Hospital

2 Can. Fld. Amb.

Date of Admission

12.8.16

Transferred

2 Eastern Gen Brighton

14.9.16.

Granville Special

Hosp.

3.3.17

Do

Hosp.

1.8.17

Hosp.

Diagnosis

Myalgia

(1)

Shrap. w. Back

Later Diagnosis (if changed)

(2)

sev. Back. Punc. Paraplegia

(3)

Debility ^{rw.}

Additional Diagnoses: If more than one state present

DISPOSITION

Rej. unit. 15.8.16

Date

Dis. 13.8.17.

C.L. 28.8.16 A443

REMARKS

30.8.16 A443-

18.9.16. B164.

10.3.17 B307

4-8-17 61

22.8.17. #76.

31.8.17 #84 Note. Re Name.

A.M.D. 2 DEPT.

Beh. of D.G.M.R. O.M.F.C. London.

*DMV
R*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank Name **PIDDOCK Arthur W.** Reg'l No. **426561**
 Unit **46th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Regina. Sask. 9th April. 1915** Place of Birth **Cambridge. Eng.**
 Name and Address, Next-of-Kin **Mrs J. Piddock, 4, Doric Street,**
Cambridge, England. Relationship

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

D.S.
R. 133 B 4624
111
 N/E. R.B. No. *5227*
 File R.L.
 Category **OR CAN**
o/s

29-9

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		<i>S.S. Lapland</i> <i>Arrived in England.</i>		<i>2 1/5</i>	
<i>22-6-16</i>	<i>Adft 46th Bn</i>	<i>Proceeded overseas for service with 13th Bn</i>		<i>16-6-16</i>	<i>Letter 8/6/16.</i> <i>PT II DS 148. Auth 10th Bn.</i>
<i>30.6.16</i>	<i>13th</i>	<i>Taken on strength</i>	<i>Fild</i>	<i>17.6.16</i>	<i>" 26</i>
<i>28.8.16</i>		<i>Adm & Can. Fild Amb.</i>		<i>12.8.16</i>	<i>C.H. A443 Myalgia</i>
<i>30.8.16</i>		<i>Rejoined Unit</i>		<i>15.8.16</i>	<i>C.H. A445 Do</i>
<i>18.9.16</i>	<i>13th</i>	<i>2nd Eastern Gen Hosp.</i>	<i>Brighton</i>	<i>14.9.16</i>	<i>C.H. B164 Shp. Wd. Back.</i>
<i>18.9.16</i>	<i>13th</i>	<i>transferred to C.O.A.C., Folkestone</i>		<i>13.9.16</i>	<i>PT II 044 W</i>
<i>20-9-16</i>	<i>66th B.</i>	<i>Taken on strength.</i>	<i>F stone</i>	<i>14-9-16</i>	<i>PT II 0 407</i>
<i>10.3.17.</i>	<i>66th B.</i>	<i>D.O.D. to 1st Quebec Regt.</i>	<i>Hastings</i>	<i>10.3.17.</i>	<i>PT II 0. 116.</i>
<i>13-3-17</i>	<i>Ist Que</i>	<i>RD T O S From CCAC</i>	<i>Shoreham</i>	<i>10-3-17</i>	<i>PT 2 0 N04</i>

426561

Piddock, A. W.

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				
10-3-17	OC 13 ¹	Transf ^d to Granville Cansp ^{ct} of Ramsgate	Ramsgate	5.3.17	CLB. 307 sw back June Parafflogia
27-6-17	1 QRD	S.O.S. to came Westernhanger	Shoim	26.6.17	PL II. 99. + PL II DO 182A 30.7.17 camecd
30.6.17	G.C.S.H.	posted from camecd	Ramsgate	28.6.17	PL II 0181.
4.8.17	C.A.M.P. ENG	adm Graw Can Spe Hp	- do	PL 1.8.17	CL 61 Debility
22.8.17	do	Discharged	do	PL 13.8.17	CL 76
4-10-17.	No 10 G.S.H.	attcd from G.C.S.H. Ramsgate	Eastbourne	PL 28-9-17	PL II DO 258.
17-10-17.	do.	ceases to be attcd on proceedg: to G.C.S.H. Buxton.	do.	PL 15-10-17	" - 260. G.C.S.H. PL II DO 288. 4/21-10-17.
18-4-18	G.C.S.H.	Granted Good Conduct Badge	Buxton	PL 9.4.17	" 74
6-1-19	G.C.S.H.	SOS to camecd	Buxton	PL 4-1-19	- 28 camecd 8 th /10-1-19
10-1-19	camecd	of to 1 st exp Buxton	Schiff	PL 10-1-19	- 8
10-2-19	camecd	ceases to be attcd to SOS to C.C.A. Canada M.D. 10	Schiff	PL 24-1-19	- 34

CERTIFIED COPY, 103.
Canadian Record Office,
 Westminster House,
 7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 46th Battalion C. I.

Regimental No. 426561 Rank Pte Name Piddock, Arthur W.

Enlisted (a) Apr 9/15 Terms of Service (a) D. W. Service reckons from (a) April 9/15

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) Grenade (Framer)

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.
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Embarked, Halifax, Canada. 21. Octr. 1915.
 Disembarked, Devonport, England. 30. Octr. 1915.

~~Proceeded overseas for service with 13th Batta 16/6/16~~ Merford **LIEUT: COLONEL**
COMDG: 46th BATTN: CANADIAN INFANTRY.

	O. C. C. B. D.	Landed in France. Taken on strength	13 th Cdn. Bn.	17/6/16	Nom. Roll Pt. 1026	30/6/16
18/6/16	- do -	Left for Unit		18/6/16	Nom. Roll	
23/6/16	O. C. Bn.	Arrived Unit for duty		19/6/16	B. 213 d/	
14/8/16	O.C. 13 th Bn	Sickness				7/8/16 /3213
12/8/16	36 th Amb.	Myalgia	Adm 36 th Amb	8/8/16		} At 36 Dec 391, 23/8/16
			Trans. to 16 th Amb.	8/8/16		
13/8/16	16 th Amb.	Myalgia	Adm 16 th Amb	8/8/16		} At 36 Dec 391, 23/8/16
			Trans. to 26 th Amb	12/8/16		
20/8/16	26 th Amb	Myalgia	Adm 26 th Amb	12/8/16		} At 36 Dec 391, 7/9/16
			Disce to Field	15/8/16		
18/8/16	O.C. 13 th Bn	Rejoined Unit.	Field	15/8/16		/3213 Dec 392, 26/8/16

(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.

28 SEP 1916

[P.T.O.]

426061. Pte Piddock, Arthur. ^{P 5. 13th Bn} ^{T of Pt II 4. 13/3/17} 13th Bn

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				
9/9/16	X1 Cav. Co. Lin.	Gld. Barch & Wrist	X1 Cav. Cpl	4/9/16	} Atk Det 404, 16/9/16
		Trans. to 22 A. L.		10/9/16	
11/9/16	2 Quat Coy	SW Barch & Wrist R.	2 Quat Coy	11/9/16	W3084
13/9/16		Trans. to England	St. David	13/9/16	W3083. P II Ord. 44, 18/9/16
					J. Hogan Capt. Lt. FOR LT COL. A.A.G.
20 9 16	ceae	T.O.S.	Folkestone	14 9 16	P II 407
10 3 17	"	S.O.S. G.I.Q.R.	Hastings	10 3 17	" 116
13 3 17	IQRD	T.O.S. from ceae	Shoeburyness	10 3 17	" 4 K. Meadows Lieut.
					7. R. II B. 15. 6. 17.
					13. 3. 17. TAKEN ON STRENGTH 1st. Que. Regt. Depot, SHOREHAM. P II. D.O.
30.6.17	1st. Que. Regt'l. Depot.	TRANSFERRED To	Camb. Grenville Spl. Hosp.		P II. D.O. 102. 30. 6. 17
30-6-14	ob. G.B.H.	Taken on strength	Ramsgate	28-6-14	Part II. D.O. 181
2-8-14	"	Adm. Hosp. Andemia	"	31-7-14	Part II. D.O. 211
14-8-14	"	Reich to Ducky.	Ramsgate	14-8-14	Part II. D.O. 212
29-9-14	"	Att. C. 1st Eastbourne	"	29-9-14	Part II. D.O. 242 27 24.
					Majors M. Major, C.A.M.C.
13-10-17	Ad A.M.S. Seaford	Ceases to be attached on proceeding to Grenville Cav. Spl. Hospital Buxton	Eastbourne	13-10-17	P II 260- 17-10-17
21-10-14	ob. G.B.H.	to be att'd. Eastbourne	Buxton	13-10-17	Part II. D.O. 268 MAJOR, C.A.M.C. FOR LT COL. 10 HOSPITAL.

Casualty Form—Active Service.

Regiment or Corps C.A.M.C.

Regimental No. 426561. Rank Private. Name Piddock, Arthur H.

Enlisted (a) 9-4-15. Terms of Service (a) War of War. Service reckons from (a) 9-4-15.

Date of promotion } _____ Date of appointment } _____ Numerical position on } _____
 to present rank } _____ to lance rank } _____ roll of N.C.Os. } _____

Extended _____ Re-engaged _____ Qualification (b) Garmer.

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				
18-4-18	O.C. C.A.M.C.	One Good Conduct Badge	Paignton	9-4-17	Pl. H.C. 7th.
4-1-19	" "	S.O.S. to C.A.M.C. cas co	"	4-1-19	Pl. H.C. 2
10-1-19	Came cas coy.	T.O.S. from C.G. H.	Shorncliffe	4-1-19	Pl. H.C. D.O. 8.
10-1-19	do	On command. 1 st C.D.D. Buxton	do	10-1-19	" " 8.
11-1-19					J. Massey Cpt CAME. cas Coy..
Attached G.D.D. Buxton for return to Canada, Part II Order No. 9 Ceases to be attached G.D.D. Buxton on embarking for Canada.					
Lt. for Lt. Col. Commanding Canadian Discharge Depot. Embarked Liverpool. R.A.M.S. Crampian. J. Massey 71016. T.A.C.S.					

(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.

24 JAN 1919

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				
24.1.19	T. O. S. of No. 10 District Depot, Part 2 Order No. 46 Para 2 <i>S. Morgan</i> Lt.-Col. O. C. No. 10 District Depot.				
	Discharged/ 5-7-19, D.O, 183 Para 3				
	<i>[Signature]</i> Major Officer Commanding No. 10 District Depot				



Veterans
Affairs

Affaires des
anciens combattants

NC

DEATH NOTIFICATION — AVIS DE DÉCÈS

FILE NO — DOSSIER N°

1196005

NAME — NOM

Riddock Arthur William

SERVICE NO — MATRICULE

426561 army WW1

DATE OF DEATH — DATE DU DÉCÈS

2/11/81

CPC NO — CCP N°

1520774

WVA — AAC. N°

PLACE OF DEATH — ENDROIT DU DÉCÈS

Kenora, Ont.

INFORMATION RECEIVED FROM — INFORMATION RECUE DE

DVA 93 Winnipeg

Y.S.

25/3/82

FOR RECORDS MANAGER — POUR LE GESTIONNAIRE DE DOSSIERS

DATE

NO. 10
DISTRICT DEPT. **CANADIAN EXPEDITIONARY FORCE**

JUL 5 1919

DISCHARGE CERTIFICATE

DISCHARGE SECTION
M.D. 10. WINNIPEG

H. Blues

THIS IS TO CERTIFY that No. *426561* (Rank) *Pte*

Name (in full) *Arthur William Peddock* enlisted in
the *46th Batt*

CANADIAN EXPEDITIONARY FORCE at *Regina* on the *9th*
day of *April* 19*15*

HE served in *13th Batt. France & Belgium 3 months*

and is now discharged from the service by reason of *on Demobilization. Med Unfit for*
★ *D.O. 183 - Para. 3.* ★ *Medical Unfitness. General Service*

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

Age *31*

Height *5'6"*

Complexion *Dark*

Eyes *Light Blue*

Hair *Dark Brown*

A. W. Peddock
Signature of Soldier

Marks or Scars *S S W*

Right Wrist

" Thigh knee

+ chest

Right Back

L. Wood
Issuing Officer

Date of Discharge

5. 4. 1919

L. M. **Major**
Officer Commanding No. 10 District Depot

Date *July 5th* 19*19*

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.

DISCHARGE CERTIFICATE

JUL 2 1919

REGIMENTAL QUARTERS
MILITARY WINDING

H. Jones

THIS IS TO CERTIFY that *H. Jones* (Rank) *Private*

enlisted in the *1st Canadian Expeditionary Force*

on the *1st* day of *July* 1918

HE served in *the 1st Canadian Expeditionary Force* and is now discharged from the service by reason of *Demobilization* Medical Unfitness *Medical Unfitness*

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

Age	<i>27</i>
Height	<i>5' 6"</i>
Complexion	<i>Light</i>
Eyes	<i>Blue</i>
Hair	<i>Dark</i>
Signature of Soldier	<i>H. Jones</i>
Date of Discharge	<i>1 July 1919</i>
Learning Officer	<i>H. Jones</i>
Date	<i>1 July 1919</i>

WAR SERVICE BADGE
CLASS "A" *83038*

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it to the nearest post office, or to the Secretary, Militia Council, Ottawa, Canada.

Rank *Private* Name **PIDDOCK Arthur W.**

Reg'l No. **426561**

Unit **46th Bn.** If in perm. Corps, What Unit?

Married or Single **Single**

Place and Date of Enlistment **Regina, Sask. 9th April. 1915**

Place of Birth **Cambridge, Eng.**

Name and Address, Next-of-Kin **Mrs J. Piddock, 4, Doric Street, Cambridge, England.** Relationship

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Grannell

Discharge, Date and Place Reason Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
<i>1915</i>																	
<i>Nov</i>	<i>30th</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>		<i>33</i>			<i>31 63</i>			<i>31 63</i>	<i>1 37</i>	
<i>Dec</i>	<i>31st</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>1 37</i>	<i>35 47</i>			<i>34 06</i>			<i>34 06</i>	<i>1 41</i>	
<i>Jan</i>	<i>31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>1 41</i>	<i>35 51</i>			<i>19 46</i>			<i>19 46</i>	<i>16 05</i>	
<i>Feb</i>	<i>29</i>	<i>29</i>	<i>1</i>	<i>29</i>	<i>29</i>	<i>10</i>	<i>2 90</i>	<i>16 05</i>	<i>47 95</i>			<i>17 03</i>			<i>17 03</i>	<i>30 92</i>	
<i>Mar</i>	<i>31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>30 92</i>	<i>65 02</i>			<i>19 46</i>			<i>19 46</i>	<i>45 56</i>	
				<i>152</i>			<i>15 20</i>		<i>167 20</i>			<i>121 64</i>			<i>121 64</i>	<i>45 56</i>	<i>Checked J.A.</i>

BALANCE TRANSFERRED TO NEW LEDGER.

426561

Piddock A.N.

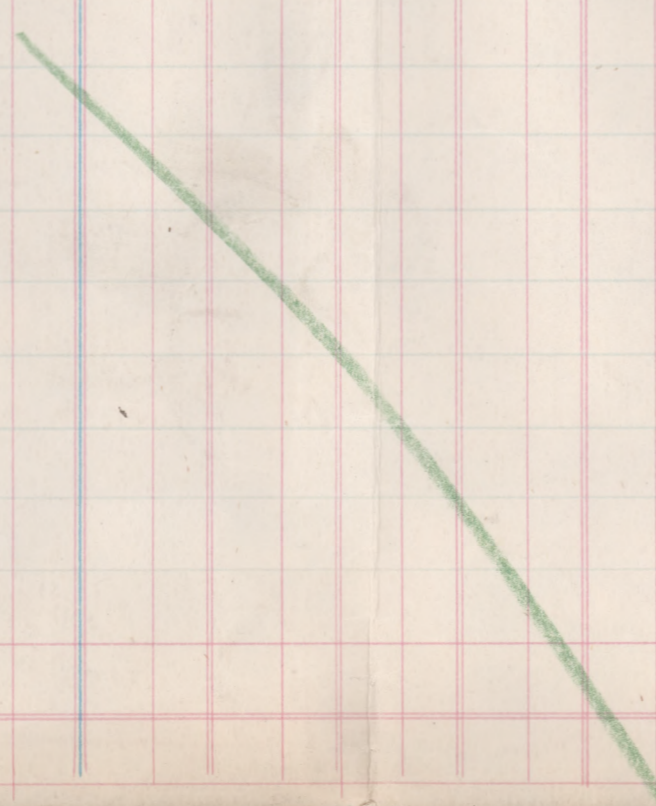
DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	c.						\$	c.																
									534 60.					22 27 26 96.		121 69		170 87	363 73	1575							
March 31	1 ¹⁰							34 10.										4 87.	392 96.	225							
April 30								33 -											423 96	240							
May 30								33 -											458 96 2								
June 1								1 10	179 19 1/2					4 80.				4 86	455 20 255	255			with Route A.R. Capital Remuneration Returns 4/3/17				
July 31								33	360 16 1/2					4 86.				4 86	483 34	270							
Aug 31								34 10											517 46	285							
Sept 30								33											551 54	300							
Oct 31								33	504 13 1/2					48 66.				48 66	535 88	315							
Nov 30								770						80 65 31 83		121 69		237 12		330							
Dec 31																			345	345							
1917																			260	375							
Sept 30																			390	390							
Oct R.P.																			525	525							
Nov																			517 12	517 12							
Dec																											
Jan																											
Feb																											
March																											

with Route A.R. Capital Remuneration Returns 4/3/17

555
5265
3660
1065
37
15
185
37
555
240) 0545 (43-93)
960
945
726
2250
2160
900

15
38
120
45
570
18
4530
570 (112)
1026
240) 960
7660

AR 1164 4/3
" 1249 2/3



Strike out where inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	

NAME:- *PIDDOCK Arthur W.*

NUMBER:- *426561*

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

RPL comp 14/1/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Private</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:-

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
	<i>1/4/19</i>	<i>16/4/19</i>	<i>Edith Buxton Canada</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.P.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.P.	UNIT PAID BY	AMOUNT
<i>9/1/19</i>	<i>3212</i>	<i>Carnoc R. 10</i>	<i>24.45</i>				
		<i>25.0.6</i>					
		<i>L.P.C. Bae</i>	<i>677.61</i>				
		<i>Ledges Bae</i>	<i>702.06</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Transf to Canada 6/11/19. A.M. 10/1/19 11/67 m.d. 10.*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Mar</i>	<i>Balameford</i>								<i>517.12</i>	<i>HDS</i>	
<i>Apr</i>	<i>R.P.</i>	<i>33</i>							<i>550.12</i>		
				<i>AR 26. 13/4. Buxton P1.</i>	<i>9.73</i>				<i>540.39</i>		
				<i>" 136 27/4 " P12</i>	<i>9.73</i>				<i>530.66</i>	<i>H20</i>	
<i>May</i>	<i>P.O.</i>	<i>33</i>			<i>19.46</i>				<i>564.76</i>		
		<i>34/10</i>		<i>AR 248 7/5 Buxton P1</i>	<i>9.73</i>				<i>563.99</i>		
				<i>" 333 15/5 " P3</i>	<i>9.73</i>				<i>554.06</i>		
				<i>" 454 29/5 " P15</i>	<i>9.73</i>				<i>544.33</i>	<i>H35</i>	
<i>June</i>		<i>34 10</i>			<i>20.43</i>				<i>527.33</i>		
		<i>33</i>		<i>AR. 565. Buxton 13/6 2</i>	<i>9.73</i>				<i>567.60</i>		
				<i>✓ 656 " 27/6 7</i>	<i>9.73</i>				<i>557.87</i>	<i>H50</i>	
<i>July</i>		<i>33</i>			<i>19.46</i>				<i>591.97</i>		
		<i>34/10</i>		<i>AR 747. " 15/7. 3</i>	<i>14.60</i>				<i>577.37</i>		
				<i>" 857 " 29/7 10</i>	<i>9.73</i>				<i>567.64</i>	<i>H65</i>	
<i>Aug</i>		<i>34 10</i>			<i>24.33</i>				<i>601.74</i>		
		<i>34/10</i>		<i>✓ 956. " 15/8. 2</i>	<i>9.73</i>				<i>592.01</i>		
				<i>✓ 1047. " 29/8 9</i>	<i>9.73</i>				<i>582.28</i>	<i>H80</i>	
<i>Sept.</i>		<i>34 10</i>			<i>19.46</i>				<i>615.28</i>		
		<i>33</i>		<i>✓ 1104. " 14/9 1</i>	<i>9.73</i>				<i>605.55</i>		
				<i>✓ 1219. " 28/9 9</i>	<i>9.73</i>				<i>595.82</i>	<i>H95</i>	
<i>Oct.</i>		<i>33</i>			<i>19.46</i>				<i>629.92</i>		
		<i>34/10</i>		<i>✓ 1317. G.S.H. " 15/10 1</i>	<i>9.73</i>				<i>620.19</i>		
				<i>✓ 1363 " 29/10 3</i>	<i>9.73</i>				<i>610.46</i>	<i>510</i>	
		<i>34 10</i>			<i>19.46</i>						

FORD *FORD* *FORD*

NUMBER 426561 RANK

NAME *PODOCK Arthur N.*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	<i>Balance Forward</i>								610.46		
NOV		33.							643.46		
				<i>Dr. 1452. GCSNBux 12/11</i>	<i>973.</i>						
				<i>✓ 1594 ✓ 28/11.</i>	<i>1460</i>				619.13525		
	<i>Dec 3410</i>				<i>24.33</i>				653.23		
				<i>✓ 1728. ✓ 2/12⁶⁶</i>	<i>2920</i>				62403540.		
<i>Jan.</i>	<i>Interest on Def Pay. to 31/1/19.</i>	<i>3410</i>							658.13		
		<i>14393.</i>							70206555.		
		<i>14513</i>			<i>55.53</i>						
<i>Feb.</i>				<i>✓ 3212 Camca 9/15</i>	<i>2445</i>				677.61		
					<i>2445</i>						
				<i>SL 9. come.</i>							
				<i>206 on trans to Canada. M.D 10. 24/19</i>							

53 53
24 45
77 98

677.61
755.59

ORIGINAL.

48

MEDICAL HISTORY SHEET.

20 SEP 1916

Greenblatt's
Ramsfald

Surname Pidcock Christian Name Arthur W.

Examined { on 19 day of April 1915 Approved by W.P. Mac Dermott
at Regua
Birthplace { City or Town Cambridge Rank Capt. M.O.
County England

Apparent age 28 yrs 10 mo.
Trade or occupation Farmer
Height 5 Feet 6 Inches. M.O.
Weight _____ Lbs. M.O.
Chest measurement { Minimum 35 inches. M.O.
Maximum expansion 2 inches. M.O.
Physical development _____ M.O.
Small-Pox Marks _____ M.O.

Vaccination Marks { Arm Right Left
Number _____
Date Result VACCINATIONS.
31/12/15 C.C.P. M.O.
When Vaccinated last _____ M.O.
(a) Marks indicating congenital peculiarities or previous disease _____ M.O.

(b) Slight defects but not sufficient to cause rejection
Date Result ANTI-TYPHOID INOCULATIONS, ETC.
5/5/15 _____ M.O.
13/5/15 _____ M.O.
13/7/15 _____ M.O.

Enlisted on 19 day of April 1915 at Regua

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>46th O.B.</u>	<u>426561</u>	<u>Good</u>	<u>19/4/15</u>
Transferred to.....	<u>13th Bn</u> <u>6. R. W. G.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>G.S.H. Ramsfald.</u>	<u>15/19</u>	<u>450. Back: psychogenetic</u>	<u>Fit</u>
<u>G.S.H.</u>	<u>Feb 10/18</u>	<u>varicella</u>	<u>Caused</u>
<u>GRANVILLE-CANADIAN SPECIAL HOSPITAL BUXTON.</u>	<u>14-5-18</u>	<u>do</u>	<u>Caused</u>
<u>"</u>	<u>2/11/19</u>	<u>Stomach</u>	<u>Fit</u>

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

CANADIAN

The Medical History Sheet of a man returning from overseas, must be returned by the Officer commanding the unit to the Medical Board when they leave England.

In the event of a man being discharged from the service, the Medical History Sheet must be returned to the Medical Board.

Approved: L. S. Allen
A.D.M.S. CANADIANS, SHORN CLIFFE AREA.

Christian Name

Surname

AD

Paddock

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from: whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
No 2 Can. Fd. Amb. and E. Can. Hosp.		12	8	16	15	8	16	Myalgia C.S.W. Back Shall-Shock.	3	Rey. unit Need for Tooting	A443-445 N.B. Frowe Capt.
G.C.S.H. Ramsgate		2	3	17	12	6	17	ditto.	113	Heart, lungs and nervous systems. nit. Uremia: negative Blood. Erythro. Hg. 75% of 100. R.B. Cells 5,800,000. W.B.C. 10,000. Wounds healed. "Psychomotoric simple" Psychomotoric simple General condition weak Nervous. endeavours to do his best. Bland's Pills ordered.	W. H. Gould Capt C.A.M.C.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Winnipeg, Man. ND 10 DATE Feb. 26, 1919

1. 1 (a) Unit CAMP 10 B.S. (b) Regimental No. 426562 (c) Rank Pte.
 (d) Surname PIDDOCK (e) Christian name Arthur William
 (f) Home address 1001 Banning St., Winnipeg, Man.
 (g) Next of Kin Miss F. Pidcock (h) Relationship Sister
 (i) Address of Next of Kin 4 Dorrie St., Cambridge England.

2. Age last birthday 30 Date of birth May 23, 1888

3. Enlistment, or Appointment (if an Officer) (a) Place Regina, Sask. (b) Date April 5, 1915

4. Personal description:
 (a) Height 5' 7" (b) Weight 148 (c) Complexion Fair
 (d) Colour of hair Dark (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Scar lower end sternum, scar to right 10th dorsal vertebra, scar over right ant. sup. of iliac spine. Small scars right thigh and left knee cap. 2 scars on right hand and one scar left index finger.

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
	<u>3</u>	<u>322</u>

	PERIODS	
	From	To
Canada	<u>April 5, 1915</u> <u>Jan. 24, 1919</u>	<u>Oct. 18, 1915</u> <u>Feb. 26, 1919</u>
England	<u>Oct. 13, 1915</u> <u>Sept. 13, 1916</u>	<u>June 10, 1916</u> <u>Jan. 24, 1919</u>
France or other theatres of War	<u>June 10, 1916</u>	<u>Sept. 13, 1916.</u>

7. Original disease, or injury Fracture left second rib outer C.S., right side of chest, causing paralysis of both legs.

DISTRICT DEPOT NO. 10

(a) Date of origin Sept. 4, 1916 (b) Place of origin France.
 (c) Cause Shrapnel



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

1. Impaired function left side of chest 2. Flat feet. (a) 1.2. No (b) 1.2. Partial loss of function (c) 1.2. No (d) 1.2. No.

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.)

1. Thickening at site of fracture left 2nd rib just external to costochondral junction. Slight tenderness here on deep pressure.

Has gripping choking sensation across chest at site of fracture. Excitement aggravates the the condition, also exertion causes aching sensation over rib at site of fracture. No undue dyspnoea on moderate exertion. Disability due to fibrosis, chest wall and pleura at site of fracture.

2. Marked degree of flat feet, right more marked than left. Non rigid in character, after walking 3 miles or standing still for a long period of time feet ache.

(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
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).)

Sept 4, 1916, bullet entered lower part Sternum just to right middle line and made exit 1 1/2" to right 10th dorsal. Vertebra. Fell at same time causing fracture left 2nd rib. Following wound of chest had complete paraplegia including loss of control of bladder and bowels. Was first able to move toes in bed, Feb. 4, 1917. Steadily improved from that date. During April 1917, when he first got on his feet, he first noticed that feet were flat and tired easily. No previous history of flat feet.

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).)

July 1916 had superficial wounds of right thigh and left knee cap right hand and left index finger. Good recovery. No disability.

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

Use Quest. 4 (f).

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

No

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

N.A.

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

(a) No No (b) No

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

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

Minimum period of 6 months. 2. Permanent. should improve slightly in 6 months.

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

Hospital France one week.

Hospital England 9 1/2 months.

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

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

No

16. Can the former trade or occupation be resumed?

(If not, briefly state why)

No, work too strenuous.

17. Recommendations.

Category C. (3).

[Handwritten Signature]

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, Arthur W. Piddock, 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

[Handwritten Signature]

Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes.

Recommend discharge

June 30 1919

Arthur C. [Signature]

19. Is the invalid fit for

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

20. It is certified that the invalid

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

No Category C. (3).

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.

[Signature] President.

PLACE Winnipeg, Man.

DATE Feb. 21, 1919.

[Signature] Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

President.

PLACE

Members

DATE

APPROVED BY [Signature] Assistant Director of Medical Services.

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

DATE

DATE

1001 Banning St Winnipeg

man.

W.A. 10

No. 426561 L/Cp. A.W. Piddock,

46th. Batt. C.E.F.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 426561

Name L. Cpl. A.W. Piddock

Unit 46th Battalion C.E.F.

Military Will.

In the event of my Death
I give the whole of my
Property & effects to my
Sister, Miss Florrie Piddock
4 Doric St
Cambridge
England

Signature L. Cpl. 426561. A.W. Piddock.

Rank and Regt. 46th Batt., C.E.F.

Date Feb 28. 1916.

(W)

12872

898

No. 1001 J. C. A. W. Hibdon
1888. Part. C. F. 1.



Name **PIDDOCK** *Rank* **Arthur W.** *Pte.* **Pte.** *Reg. No.* **426561**

Unit **THIRTEENTH BATTALION.**

Next of Kin **Mrs. J. Piddock 4, Dorie St. Cambridge Eng.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
12-3-16	2 C.F.A.		Myalgia	A443		
15-8-16	<i>Rejoined Unit</i>		<i>do</i>	<i>A445</i>		
<i>14/9</i>	<i>2nd Lt. Brighton</i>		<i>Pro Back.</i>	<i>B164169</i>		<i>169</i>
3-3-17	Gran. Can. Sp. H. Rams.		<i>do</i> Func.			
			Paraplegia	B307.9-3		

Reserved for M.H.C.

Regt. No. 405561 Rank PTE Surname PIDDOCK Christian Name ARTHUR WILLIAM
 Unit or Corps—(a) Overseas from United Kingdom 13th R.H.C. (b) in United Kingdom C.A.M.C.
 Born at—Town CAMBRIDGE County or Province CAMBRIDGESHIRE Country ENGLAND
 Date of Birth—Day 29 Month MAY Year 1888 Age 30 yrs. 7 months.
 Joined at REGINA, SASK Date APRIL 9th 1918
 Former trade or occupation FARMER

Permanent Marks or any peculiarity that will serve for future identification:—
SMALL SCARS G.S.W. FRONT AND BACK RIGHT CHEST
AND OVER CRIST OF RIGHT ILLIUM INTERMAX
ASPECT RIG HT HIGH AND OVER RIG HT
PATELLA

Height—feet 5 inches 6 Colour of eyes BROWN
 Signature of Soldier (for identification purposes) [Signature]

Medical Report

Read carefully the instructions on last page of this form.

1. DISABILITY.
- Group the disabilities, placing those resulting from separate causes in separate groups.
- Disabilities Group (a) 1. FLAT FEET. BOTH
2. FRACTURE. 3rd LEFT RIB
 - Disabilities Group (b) N.A.
 - Disabilities Group (c) N.A.

2. CAUSE OF DISABILITY

	Place of origin.	Date of origin.
(i) As to Group (a) above.	<u>1. DON'T KNOW</u> <u>2. G.S.W.</u>	<u>SOMME SEPT 3/16</u>
(ii) As to Group (b) above.	<u>N.A.</u>	<u>N.A.</u>
(iii) As to Group (c) above.	<u>N.A.</u>	<u>N.A.</u>

3. Is the disability due to disease contracted or injuries received prior to Active Service?
- (i) As to Group (a) above? NO If yes, has Active Service aggravated it? N.A.
 - (ii) As to Group (b) above? N.A. If yes, has Active Service aggravated it? N.A.
 - (iii) As to Group (c) above? N.A. If yes, has Active Service aggravated it? N.A.

4. Is the disability due to disease contracted or injuries received while on Active Service?
- (i) As to Group (a) above? YES
 - (ii) As to Group (b) above? N.A.
 - (iii) As to Group (c) above? N.A.

5. MEDICAL HISTORY.

Resected for M.H. Was wounded first at Sanctuary Wood in August 1916. Light wounds healed rapidly leaving no disability. On the Somme on 3rd Sept 1916 was shot through chest. Entrance through lower extremity of sternum. Exit one inch to right of 10th dorsal vertebra. The 3rd left rib was fractured at the same time. I.D. No. 79 C.C.S. # no 2 Australian General. 10 days; # no 2 Eastern General, Brighton Guis, I.P.C.S.H. Ramsgate 4 mos. Categorized BIII as Ramsgate. After wound patient had paraplegia for about 3 mos. Functions of Bladder & rectum only partially lost and quickly returned. Complaints now of pain in feet & legs and in left shoulder. These started after patient first got up. Feet are improving. Has pain in region of left clavicle on exertion and taking a deep breath.

6. PRESENT CONDITION.

Well nourished patient. General condition good. Scars of wounds above described above. Small & cause no disability. Movements of shoulder complete. Expansion of chest equal on both sides but patient states that it causes a dull ache below left clavicle. Moderate flattening of both feet. Other systems apparently normal.

7. OPERATION.

(i) Was one performed? **no** (ii) If so, state what. **N.A.**
 (iii) Was one advised and declined? **NO**

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

(i) Is there loss or decay of teeth attributable to Active Service? **yes**

(ii) If so, describe. **two upper**

9. DO YOU RECOMMEND:—

(a) Fit for duty? **Yes**
 (state category) **Category BIII**

(b) Invalid to Canada? **no**
 (c) Discharge from the Service as permanently unfit? **no**

Date of Report. **Dec 31 1918**

Station. **G. C. S. H. Buxton**

Signed. **[Signature]**
 Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

(Officer if Hospital) Strike out one of these
 (S.M.O. Brigade)

Dated at Station, on 1918

*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

(This is to be completed only in the case of the Soldier who has been found to be disabled by the Medical Board (Sections 1, 2, 3, and 6 are to be read in connection with the instructions to Medical Board members.)

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

11. Is the cause of the disability fully described in Part I. (2)?
If not, describe it.

yes

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? Aggravated?

yes

(b) Misconduct of the Soldier { Caused? Aggravated?

yes

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

4.9

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

4.9

15. Permanency of the Disability due to Service estimated next above in (14).
(i) Is it permanent?

yes

(ii) If not permanent, what is its probable minimum duration (in months)?

4.9

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

4.9

17. Can the former trade or occupation be resumed?

4.9

18. REMARKS:—

Remarks should be made from all entries on the Medical History Card. It answers to Nos. 2, 3, or 4 show that the Soldier is suffering from some condition which is not being attended by treatment as far as possible by treatment obtained from the Soldier showing history of previous illness or injury. As the greatest priority intended for the Medical Officer's report to answer the show clearly the condition of the Soldier at the time of examination. It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual findings. Specimens' reports bearing on the PRESENT CONDITION should be attached. In addition to description of the disability, a report on "all systems" is required in order that the whole which comprised the new part of the Soldier's condition. The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be with in the handwriting of the Medical Officer. The copies may be prepared but must be signed by the Medical Officer who must be responsible that these are true copies of the original. Finally the C. Hospital which reads as follows:—

19. RECOMMENDATION:—

(a) Fit for duty?
(state category)

yes

(b) Invalid to Canada?

(c) Discharge from Service as permanently unfit?

no

Form containing Date of Board (2 - JAN 1919), Station (G. C. S. A.), Signatures of Board, Approved (Wallace A. Scott), Dated at (A.D.M.S. CANADIANS, SHORNCLIFFE AREA), Station (A.D.M.S.), and Station (191).

Proceedings of a Medical Board
Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned..... 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:—

Signature of Soldier examined.
From the medical information now furnished was the disability caused or aggravated by the Soldier's Negligence or Misconduct in the Service? Aggravated? Caused? Misconduct in the Service? Aggravated? Caused?

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. (It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—NOTE—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows:—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RE-CATEGORIZATION

Table with 8 columns: Date, Station, Category, Signature of M. O., Date, Station, Category, Signature of M. O. Includes handwritten entries and a date stamp '191'.

W.

C.A. 171

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 75103 Year	Regimental No.	Rank.	Surname.	Christian Name.
	426561	Pte	Piddock	A. W.
		Unit.	Age.	Service.
		13 Bm	30	22/12
Station and Date.	Disease			
	<p>G. S. W. back Psychometric - fracture assumed Enlist - April 9th 1915 - Regina To England 30th October 1915 To France June 11th 1916 Wounded Sept 3rd 1916 Somme Hosp. # 76 C.C. Station 3 days. 2nd Sorbin Ambulance General Boulogne 3-day. 2nd Sorbin General Noye Rd Brighton 13th Sept to 5th Nov. St. Marks Hosp. Brighton 5th Nov to March 3rd 1917.</p>			
	<p>History was wounded by shrapnel in back & buried at Somme. "Wounded Farm" wound four inches to right of spine ant-level of 9th Rib., shrapnel removed through original wound at C.C. Station. Has received Electrical talks & massage. Has been bed patient with functional paralysis from hips down. Has full use of legs but claims he cannot walk without support. Well nourished, sleeps well, on liquid diet. To Broad Home.</p>			

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

Station
and Date.

6-MAR. 1917

Return tomorrow. Maj Russel

7-MAR. 1917

Exam blood. Hg.

Rbc.

Wc.-

Getting better control of himself. Recommended Ben rasnic

Return daily: walking better. CR.

7. 3. 17.

Urine Test Report

Color. Light Amber

Reaction Alkaline

Spec. Gravity 10.28

Albumen Nil

Sugar Nil

7. 3. 17.

Blood test report

Hg. Hgb. 65%

R.B.C. 5,420,000

W.C. 8000

8/3/17

Would suggest dig. paraffin for bowel condition
doing very well. Return to-morrow.

13 MAR. 1917

Carry on. Doing well. work in garden. CR.

14th Mar 17

Camp on Maj Russel

27. 3. 17.

Improving, doing light duty on ward also
Gardening. CR.

10-4-17

Improving in strength, not sleeping
well. feels jiddy on stooping 10-4
G. C. Backs & Massage

11-4-17.

Weight. 144 lbs

11-4-17.

Blood Test - Report

Hgb. - 75 %

R. B. Cells. 5,800,000

W. B. Cells. 10,000

27. 4. 17.

Carry on. Improving some. W. B. Cells 10,000

10

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

DENTAL CERTIFICATE FOR, DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

Piddock A.W.

REGIMENT

C.A.M.C.

RANK

Pt

No.

426561

Date of Examination in England

6/1/49

Date of Examination in France

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

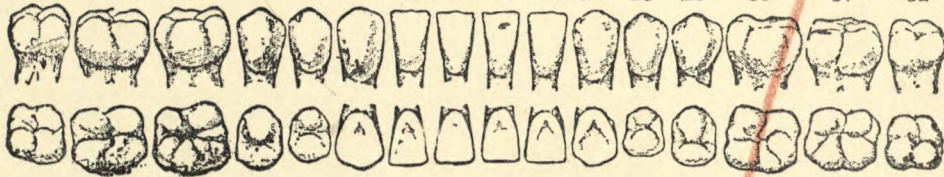
2. Figures as per chart will be used to designate teeth concerned.

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

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

No

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

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

J. R. Rogers

C.A. 171

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. Year	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
T. 5103	426561	Pte.	Piddock	a.w.
1914.	13 th Battalion			
Station and Date.	Disease <u>G. S. W. Back Psychogenetic. Simple Anemia</u> <u>Arthritis</u>			
Ramsgate				
27/4/17	Urinalysis - Col. h.c. deac. ac. Str. 1034			
4.5.17.	Examining Room. <u>Wm H. Gould Capt</u>			
5E MAY 1917	<u>Gymnasium (Sedalia 102)</u> <u>4715</u>			
11.5.17.	Report from Gym. <u>Wm H. B.</u>			
Gym Report. 16/5/17.	General condition weak. Nervous, endeavours to do his best.			
19.5.17.	Carry on. Bland's Pills gr. III. T. i. d.			
30.5.17.	Examining Room. <u>Wm H. B.</u>			
30 MAY 1917	X-ray of right wrist for foreign body. localising. return tomorrow			
31 MAY 1917	Should be fit for C III CR.			
31 MAY 1917	Small f. b. outside capsule anterior to joint. no indication for interferences			
Return Friday pm. for disposal C III CR				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RAM. MED. BOARD 1 JUN 1917 G. O. S. H. RAMSGATE </div>				
4/6/17	X Ray Report Minute I.B. 1" below base of R. thumb			
12.6.17	Discharged to Reserve. <u>Wm H. Gould Capt</u> <u>as above</u>			

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

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
7146	426561	Pte	Piddock	
Year 1916	Unit.		Age.	Service.
	13 th R. Highland Canada		30	1 ⁶ / ₁₂
Station and Date.	Disease <u>G. S. wound of back</u>			
2 nd Eastern 13-9-16.	Sept 29 th 1916 laceration. Imperforated abscess, anal. Anal myalgia from being buried then stated before being buried Unstable wound of back. F. B. removed. Small wound Wound - only substance 2 nd my Anal abscess Sept 1 st 16. No evidence of F. B. or Fracture X Ray.			
Sept 29	Danced some blood ^{for return} which looked recent. T. 101. Some abd pain.			
Oct Oct 20 th	No blood since last note. getting stronger pain in the groin. The legs are very weak and have a marked tremor.			
Jan 18 th	General condition somewhat improved. Can stand and take a few steps with difficulty if supported on each side. Has had massage & galvanic baths.			
	Recommended for <u>tooting</u>			H. B. Frouse Capt
	2/3/17			

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

Station
and Date.

EXAM. MED. BOARD
1 JUN 1917
G. C. S. H.
RAMSGATE

PROCEEDINGS OF A MEDICAL BOARD.

Dated at..... 1917

No. 426561 Rank PG- Name Piddock G. W

Local Unit 20th Reserve Overseas Unit 13th Bata Age 30

Examination held at Granville Can. Spl. Hospital, Ramsgate

DISABILITY:
Overseas Local
(scratch one out).

S. S. W. Bach - Psychogenic -

PRESENT CONDITION.

Blood still a little under normal.
Weight also below normal.
No need for further hospital care but
will not be fit for more than base duty
for a month or so.

BOARD RECOMMENDS:-

Cu

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

Signatures:-

Colin Russell President.

Members

G. H. Mansel

EXAM. MED. BOARD
1 JUN 1917
G. C. S. H.
RAMSGATE.

APPROVED

4 JUN 1917

Dated..... 1917.

S. L. Walker

CAPT.
FOR A.D.M.S. SHORNCLIFFE

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

No. 1234
Local Unit
Examination held at
City of
Overseas
Date

PRESIDENT'S REPORT

BOARD RECOMMENDATIONS:

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

Signature

Members

APPROVED

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. A 717 Year	Regimental No.	Rank.	Surname.	Christian Name.
	426561	Pte	Piddock	A.W.
		Unit.	Age.	Service.
		C.-I. M.-C. Staff.	30	28 1/2 4/12.
Station and Date.	Disease			
	Debility			
	Civil Occupation Farm Labourer			
	Enlisted at Regina April 9th 1915			
	Came to England Oct 31st 1915			
	Went to France June 10th 1916			
	Wounded Ypres June 13th 1916			
	Wounded Moquet. France. Sept 3rd 1916			
	Category C 3			
	<p>H. P. O. Has been bothered by constipation & stomach trouble since Sept 3rd 1916 when he was buried. Last Tuesday started to vomit white material streaked with blood. Passed dark tarry stools passed great quantity of this. Quite severe pain in stomach.</p>			
	<p>Present Condition: Tongue clean. Small area of tenderness just below xiphoid cartilage. Bowels somewhat tympanitic. Think there is some thickening in appendix. No tenderness in this area.</p>			
	Treat continue with diet			
	<p>On admission July 21/17, complained of pain in epigastrium. He states that onset of pain was sudden and pain of sharp "knifing" character felt in epigastrium and in inter-axillary region also in left side of chest. Immediately with onset of pain he vomited a brown "saw-dust" like vomitus. Previous health has been good. No stomach symptoms. Pulse 120. Sae shows a slight pallor.</p>			

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

Station
and Date.

History of several principal attacks since being blown up. Same
as before as the present ones.
Resistance + tenderness in epigastrium.

Aug 7/17 Improved condition - much better pulse has slowed down to 86

Aug 8/17 Improving, no tenderness to epigastrium. C. H. Robson M.D.

Aug 12/17 No complaints, feels fit for discharge to duty. - History of onset
suggestive of hemorrhage into stomach but since admission there
have been no signs or symptoms to confirm this.

AUG 13 1917

Discharge to duty

C. H. Robson M.D. Camp

NO. 10
DISTRICT DEPOT
JUL 5 1919
DISCHARGE SECTION
M.D. 10. WINNIPEG

SHORT FORM. WAR SERVICE BADGE
PROCEEDINGS ON DISCHARGE.
(Demobilization.) CLASS "A." NO 319038 ISSUED

18-7-32

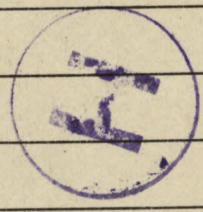
1. No. 426561

2. Rank Pte.

3. Name Arthur William Piddock

4. Unit 46th Bn.

5. Date of Discharge 5-7-19 Place Winnipeg



6. Reason for Discharge *On Demob. Med Unfit for Gen Service*

7. Authority R.O. 1420 (c) ☆ D.O. 183 - Para. 3. ☆

8. Proposed Residence after Discharge *1001 Banning St. Winnipeg Man.*

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

AW Piddock

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Winnipeg

Date 5-7-19

Signature *[Signature]*
for (O.C. Discharging Unit.)

MEDICAL DOCUMENTS
FORWARDED TO
or P. B. C.
on
JUL 11 1919

WAR SERVICE BADGE
SHORT FORM
PROCEEDINGS ON DISCHARGE
CLASS "C" NO. 12345 ISSUED

DISTRICT DEPT
NO. 10
JULY 3 1918

1. Name		Arthur William Tibbock	
2. Rank		Pvt.	
3. Unit		48th Bn.	
4. Date of Discharge		E-7-18	
5. Reason for Discharge		Discharged for lack of sufficient service	
6. Authority		R.O. 1488 (c) & D.O. 183 - Para. 2	
7. Proposed Residence after Discharge		1601 Broadway St. Minneapolis Minn.	
CERTIFICATE TO BE SIGNED BY SOLDIER			
I hereby acknowledge that at the underlined place and date I received my discharge certificate in E-7-18.			
Signature of Soldier		<i>Arthur Tibbock</i>	
CONFIRMATION			
The discharge of the above named man is hereby confirmed.			
Place		Minneapolis	
Date		E-7-18	
Signature		<i>[Signature]</i>	
(O.C. Discharge Unit)			

LIST OF DISCHARGE DOCUMENTS

Medical Form W. 23	Attestation Paper, Tripartite
Medical Form W. 138	or Partisans of Return
Medical Form W. 178 or A.F.E. 132	Field Contact Sheet
Medical Form W. 04 or A.F.E. 103	Casualty Form
Medical Form W. 44	Last Pay Certificate
	Certificate that missing documents are undelivered
Medical Form H. 513 or A.F.E. 178	Medical History Sheet
M.T.E. 27, A.F.E. 173 or A.L.A. 48	Proceedings of Medical Board
Medical Form H. 305	Final History Sheet
M.F.W. 129 or D.M.S. 137B	Medical Report
Medical Form H. 203	Formal Contact Sheet
Medical Form H. 203a	Company Contact Sheet

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LIST OF DISCHARGE DOCUMENTS.

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

A-T.S.

Prophylactic ~~NO~~
with E.F. YES

DATE.. 6.. 9.. 16..

Date 18-9-16 Units 500

Date..... Units.....

Date..... Units.....

Date..... Units.....

P.T.A.

P. 1302

AUDITOR 16 PAYMASTER 9 #6

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

M. OR S. _____ REGT. No. 126561 RANK Plt NAME (IN FULL) Piddock A

ORIGINAL UNIT C.E.F. 1st Co Bn IF IN P.F. WHAT UNIT? _____ (BLOCK LETTERS SURNAME FIRST)

ADDRESS 1801 Banning St. Wpg PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION 9-4-15 TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS _____

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED _____ PLACE W. H. 10 DATE 5-7-19 REASON 10 AUTHORITY 10. O. 183 IF ENTITLED TO POST DISCHARGE PAY Yes

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT	\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	\$		C.
					617	61	617	61										617	61	Cr. 617 61 For pay on 1-2-19
1/2-19/2	28	1 ¹⁰	30 80	11	20	617	61				197	64		659	61		659	61	21 20 11 9	
1/3-31/3	31	1 ¹⁰	34 10			34	10				27	619		34	10		34	10	21 20 11 9	
1/4-30/4	30	1 ¹⁰	33 00			33	00			30	30/4			33	00		33	00	21 20 11 9	
1/5-31/5	31	1 ¹⁰	34 10			34	10			23	23/5			34	10		34	10	21 20 11 9	
1/6-30/6	30	1 ¹⁰	33 00			33	00			21	35/6			33	00		33	00	21 20 11 9	
1/7-5/7	5	1 ¹⁰	5 50	35	-	40	50			2	1/7			40	50		40	50	21 20 11 9	
			170 50	46	20	235	22				145	192		834	31		834	31	617 61	
July 183						420				786	296	70					368	70	10/11/19	
										1206	356	70					280	70	2nd	
										1230	990	70					210	70	3rd	
										1679	225	70					140	70	4	
										1696	221	70					70	70	5	
										1828	023	70					NIL	70	6	
						420											420			

Continued War Serv. Gratuity Account Completed

AUDITED DEC 2 1919

100

21