Triplicate

Reg 35646 Stff 826

TRIPLICATE

ATTESTATION PAPER.

No. 743165

~~116TH OVERSEAS BATTALION C.E.F.~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? ..... James Read.
2. In what Town, Township or Parish, and in what Country were you born? ..... Norwich. England.
3. What is the name of your next-of kin? ..... Mrs Saline M. Read.
4. What is the address of your next-of-kin? ..... Port Perry.
5. What is the date of your birth? ..... June 19th, 1881.
6. What is your Trade or Calling? ..... Farmer.
7. Are you married? ..... Yes.
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.

James Read (Signature of Man.)

A. B. Macfarlane (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Read., 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.

Nov. 1st, 1915. James Read (Signature of Recruit)

Date ~~11.1.15.~~ 191 . A. B. Macfarlane (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Read., 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.

Nov. 1st, 1915 James Read (Signature of Recruit)

Date ~~11.1.15.~~ 191 . A. B. Macfarlane (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Port Perry this 3rd day of November 1915

E. L. Lundy (Signature of Justice) J.P. Port Perry

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

A. H. Wallace Reid (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

8 NOV. REC'D

Description of James Reed on Enlistment.

Apparent Age 34 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 ins.

Chest measurement: Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Grey

Hair Brown

Religious denominations:
- Church of England X
- Presbyterian
- ~~Wesleyan~~ Methodist
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Nov. 10th 1915. James Moore

Place Port Perry Ont. Capt.

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.

James Reed 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.

Dave Sharpe (Signature of Officer)

APR 15 1916

Date 191 .

DISCHARGE DOCUMENTS

R. O. No. .....

H. Q. No. .....

Name Reade James.

Regt. No. 745165 Rank Pte.

Corps Cas. C. E. F. M.D. No. 2 (late 116th & 18th Bn.

Physically Unfit

SC. 29/8/19. 4.13 Rel 16-10-19

Appd 13/11/19

04033

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate..... 2

Inventory of Kit.....

Last Pay Certificate..... 1

Sent to B.P.C. 11-3-16

Army Form B. 122-1

M.F.W. 60-1

M.F.W. 67-1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

SURNAME. Read. (649-R-7920)

CARD NO. S.O.S. Disc.

30/9/17. FOLL. 2

CHRISTIAN NAMES James.

REGL. NO. 745-165 RANK Pte.

UNIT 116th. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Read Mrs. Saline M.

RELATIONSHIP TO SOLDIER Wife.

ADDRESS R.R. No. 4 Port Perry, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England. Norwich DATE June 19th 1881.

PLACE OF ATTESTATION Port Perry, Ont. DATE Apr. 3rd 1916.

Sailed from Halifax 23/7/16. per. S.S. Olympic

R/B. 1/8/17.

L. L. 6945. M. & D. 6994. M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339. 491/38 H.R.

MARRIED yes. SINGLE WIDOWER

TRADE OR CALLING Farmer. RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 34 YEARS 4 MONTHS

HEIGHT 5 FEET 5 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 3 INCHES

COMPLEXION Fair. EYES Grey HAIR Brown.

DISTINGUISHING MARKS Not stated

MEDICAL EXAMINATION. PLACE Port Perry, Ont. DATE Nov. 1st. 1915

Present Address - R. R. No 4,
Port Perry, Ont.

No. 745165 RANK Pte NAME Read James

James.

T. O. S. 1-11-15 (10.0.23 of 20-1-16) UNIT 116th Battalion

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 1	1915 Nov 30	✓		
1916 Dec	1916	✓		
Jan		✓		
Feb		✓		
Mar		✓		
Apr		✓		
May		✓		
June		✓		
July		✓		

UNIT SAILED
JUL 23 1916

M 84

Number 745165 Rank Pte

Surname READ

Christian Name James

Units 18 Bn Can Inf Theatre of War France

Date of Service 6-10-16

Remarks

Latest Address Port Perry Ont

Roll No B Page 8664

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

NOV 4 1921
DEP
REGN. NO 117590

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

R—122

J.P.

Rank | Name READ, James | Reg'l No. 745165.

Unit 116th Bn. | If in perm. Corps, What Unit? | Married or Single Married.

Place and Date of Enlistment Port Perry. 1st. Nov. 1915. | Place of Birth Norwich. Eng.

Name and Address, Next-of-Kin Mrs. Saline M. Read.

R.R. 4. Port Perry. Ont. Canada. | Relationship Wife.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character Pte

N/E. R.B. No. 303
File R.L.
Category OR Can

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
			H.M.T. 2810.		
		Arr. in ENGLAND	S.S. OLYMPIC	31-7-16	
6-10-16	O.C. 116th	S.O.S. on Tfr. to 18th Bn.	B'shott	5-10-16	Pt II D.O. 25th
6-11-16	18th B'n	Taken on strength.	Field	6-10-16	Part II D52.
27.10.16	CCAC	Rept to from Base T.O.S	Sttam	26.10.16	471
8.11.16	"	S.O.S to Adm Staff	"	7.11.16	492.
8.11.16	66AB Staff	T.O.S. Off. Cas	"	9.11.16	492
28.11.16	18 Bn.	Class "B" & Ins to CCAC	Field	25.10.16	54
4.12.16	66AB Staff	S.O.S. to Off Cas 66AB	Hastings	2.12.16	533
"	CCAC	Retaken on Str from CCAC Staff	do	2.12.16	"
29.12.16	"	Reported O/Seas Cas	"	29.12.16	574

A.F.B. 103 CHECKED 14 OCT. 1916

13/58

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
2.1.17	CCAC	On Com G.D.D. C.3.	Hastings	31.12.16	P.II 579 auth 2 Pl. 710 20
16.1.17	-	Ceases on Com G.D.D. on	"	10.1.17	26
. . .	-	Command H.Qrs Coy. Crowboro	-	.	. .
15.1.17	Hqrs Crowboro	Att to Hqrs & Posted to Garr Duty Coy	Crowboro	10-1.17	—"— 7
6.4.17	Do	Ceases to be att'd trans to Mach Gun Depot	Do	16.3.17	— 47
1.4.17.	C.M.G.D.	Att for Perf Duty Rations &c	✓	16.3.17.	✓ 91.
29.4.17.	"	Cease to be att on return to W.O.R.D. depot.	✓	29.4.17.	✓ 119.
24.4.17	W.O.R.D.	T.O.S. from C.C.A.C. & remains O/Com. at G.D.D.	B'shott.	11.3.17	✓ 41
1.5.17	—"—	Ceases to be O/Com at G.D.D.	"	28.4.17	✓ 47.
11.5.17	—"—	S.O.S. to C.F.C.	"	11.5.17	✓ 56 (C.F.C.B.D. Pt II 14d/15.5.17)
24.7.17	BDCFC	SOS Disch to Canada	S'Dale	18.7.17	— 75

Army Form B. 103. Regimental Number 745165....

Casualty Form—Active Service.

Regiment or Corps .....

Rank ...rivate.... Surname Read ..... Christian Name James .....

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

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

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

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (*b*).....
or Corps Trade and Rate.....

Occupation .... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked...			
11-5-17	W.O.R.D.	T.O.S. Base Depot C.E.F. on transfer from W.O.R.D.	Sunningdale	11-5-17	Pt. 11.14 LT. & ADJT. C.E.F
7 JUL 1917	TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 160		Commanding		McBrian Capt for Lt. Col. Canadian Discharge Depot.
			13 8 JUL 1917		McBrian Capt for Lt. Col. Canadian Discharge Depot.
	EMBARKED FOR CANADA FROM LIVERPOOL		Commanding		

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

W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354. [P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				

Fill in Only.—Unit, Number, Rank and Name. Reg 35646

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Pm 471-27-10-16

Unit, Regiment or Corps 116th Overseas Battalion, C. E. F.

Regimental No. 745165. Rank Private. Name Read, James.

Enlisted (a) 1/11/15 Terms of Service (a) War & 6 Months C. E. F. Service reckons from (a) 1/11/15

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)

CERTIFIED CORRECT, 18 OCT. 1916 CAN. RECORDS, LONDON

26 DEC. REC'D

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax	23/7/16	
		Arrived England	Liverpool	31/7/16	
		Transferred for overseas Service with 18th Battn. B			for O.C. 116th. Battalion.
			OCT 5 1916		
6-10-16	Can Base Depot.	Arrived from 116th Can. Res. Bn, England, & taken on strength of 18th Can Bn.	Can Base Depot	6-10-16	Nom Roll. Pt. II Order 52, 6/11/16.
26-10-16	O.C., Reinf, Havre.	Classified 'P.B' & transferred to C.C.A.C, Shoreham-on-Sea. (Rigidus hallux)	To England	25-10-16	Nom. Roll, No. 1145. Pt. II Order 54, 28/11/16.

J. O. Hogan Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

(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				
8/1/15	C.S.D.D.	Transferred to Hdq Cavalry	Rathwood	8/1/15	Pt. II. O. C.S.D.D.
16-3-17.		Ceases to be attached A.Q. Can. Crowborough on transfer to C.M.G. Regtl Depot, effect 16-3-17. Auth. Pt II D.O. No 47 of 6-4-17. P. J. Jennings Capt. OC C.M.G. Corps Depot Co			
29-4-17		Ceases to be attached C.M.G.D. Pt II D.O. 119 of 29-4-17. P. J. Jennings Capt OC C.M.G. Corps. Depot Co			
2.8.4.17.	C.M.G.C.	T.O.S. west. Ont. Regt. Depot.	Bramshott.	2.8.4.17.	Pt. II D.O. 47. Francis W for OC Overseas.
11.5.17.	W.O.R.D.	Transf'd to Can Forestry Corps	Bramshott.	11.5.17.	D.O. 36. [illegible] for O.C. W.O.R.D.

Duty

C III

Form to be used instead of Blank Space on Army Form 179.

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

DEPT. MILITIA & DEFENCE
AUG 17 1917
H.Q. 249-R-7120
CANADA

***

No. 745165 Rank Pte Name and Cosps of disabled Soldier: Read James 116th Batt.

Previous civilian occupation:- Farmer

Cause of Disability:- Osteo-Arthritis both Big Toes

Condition, in detail, which prevents the soldier earning a full livelihood:-

Soldier states that he never was troubled with his feet before Enlistment but that in France he began to have pain in his big toes. He is a healthy man of 40 in good general condition – The metatarso-phalangeal joints of both big toes are stiff & enlarged & nodular He cannot march & is only fit for C III

OPINION OF THE BOARD

Degree of incapacity. (Please state in fractions) 1/10

Probable duration of incapacity:- permanent

Does it render him permanently unfit for Military Service? no

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

Signature:- C A Robertson Capt. President

Station:- Quebec

W J Coghlon Capt.
Ramsay Capt. } Members

APPROVED.
Date Aug 9/17 W W Carter Major
Asst. Director Medical Services.

Date 22/8/17 J W Murchison Col
Director General Medical Service

2

R188

BRC 15824 649-R-7920

C.C.A.C. ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

116th OVERSEAS BATTALION C.E.F. 745165

Surname Read Christian Name James

Examined on 3rd day of November 1915 at Uxbridge

Birthplace City or Town Hanwich County England

Apparent age 33

Trade or occupation Farmer

Height 5 Feet 5 Inches.

Weight 135 Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. X Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by James Moore Rank Capt M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
20/4/16		James Moore M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
13/4/16	OK	James Moore M.O.
29/4/16	OK	James Moore M.O.
22/8/16	OK	James Moore M.O.
31/1/16	TAB	M.M. Gunion

Enlisted on 1st day of November 1915 at Uxbridge Ont. Can.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	116th. Batt. C.E.F.	745165		1st. November 1915
Transferred to..	18th Bn W.O.R.D. 28417 W.O.R.D. 11.5.17.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Shorncliffe	3-11-16	Hammer toes	Fit
Hastings	Dec 28 '16	Arthritis toes	Fit

Major President

PRESIDENT, STANDING MEDICAL BOARD.

CANADIAN

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

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Read Christian Name James

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

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. 745165 Rank Pte Name J. Read

Corps Casualties who was* Discharged

On Sep 30th 1917, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Sep 1 1917 to Sep 30 1917, the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month	11	04	Bal. Cr. from prev. month		
Advances by Cheques } No.			Regt'l Pay 30 days at $ 1 c	30	
} No.			Field Allow. 30 days at $ c 10	3	
Assigned Pay No.			Other Allowances* Sub	25	20
Other Charges*					
Payment on transfer or discharge No. 9948	55	16	Other Credits* Clothing	8	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	66	20	Total	66	20

*Give Particulars.

A monthly stoppage of $ 20 04 (†) has ..... (‡) been paid on account of Assigned Pay for the month of Aug 1917 to (Assignee) Mrs J. M. Read

(Address) Shirley, Port Perry Ont

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

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment

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

(3) cause of discharge and authority DO 225

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

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

Date 30/9/17

Place Toronto

L. Murse Capt

Paymaster

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

M. F. W. 44.

150M.—4-17.
H. Q. 1772 39-903.

DUPLICATE

To be made out in duplicate. H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 116TH OVERSEAS BATTALION C.E.F.

(2) Regimental Number 745165

(3) Full Name of Soldier James Read

(4) Place of Birth Norfolk England

(5) Are you married, or not? yes

(6) If married, state,
(a) Full name of your wife May Selina Read

(b) Present Postal Address Port Perry, Ont., Can.

(7) Are you a widower? no

(8) Have you any children? four

If so, give number of boys and girls One boy three girls

Also their names and ages James Read aged 2
Violet Read aged 5 months
Grace aged 4
Gertrude aged 7

M. F. W. 67
200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....no.....

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

(10) Is your Mother alive ?.....no.....

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

.....

(11) If your Mother is a widow..... no.....

Are you her sole support, or not ?.....

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

.....xxxxxx.....

.....

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

.....xxxxxxx.....

.....

.....

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

.....yes.....

(15) Are you insured ?.....no.....

If so, in what Company ?.....

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

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

.....
Officer Commanding.
116TH OVERSEAS BATTALION C.E.F.

Date June 30th 1916.....

L. L. Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

Wife.

To Whom Mrs. Salina May Read.

Address Port Perry. Ont.

Rate 20 00

AUG 1 1916

By Whom Assigned Read, James.

Regtl. No. 745165.

Rank Pte.

Corps 116 Batt.

PAYMENTS

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

CONSOLIDATED ACCOUNT 2

L. L. Job 8 095—M. & D. 5953.

1-11-15

MILITIA AND DEFENCE

M. F. W. 11.
10m—9-15
H. Q. 1772—39-818.

SEPARATION ALLOWANCE

Name May Read

Address Shirley
Port Perry
Ont.

Relation to Soldier wife, child or mother } Wife

Name of Soldier Read Jas

Regtl. No. 745-165

Rank Pte Cas Mn #2. 1/9/17.

Corps ~~116th Battn~~ #2 Bn 12/9/17

To what Corps belonging when called out } Sunny 11/10/17

PAYMENTS

Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1914				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1915				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.		713274	20		20
Dec.		015791	20	—	20
Jan.	1916	K 184959	20		20
Feb.		215750	~~20~~	—	20
March		732967	20		20

CONSOLIDATED ACCOUNT 4

ACCOUNT CLOSED
DATE..... PER..... W

ACCOUNT CLOSED
DATE..... PER..... L

Sunny

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—6-16.
1772—39—818.

Sheet No. 2. May Read Wife

Name of Soldier Read Jas

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	L 3399	20	
May		J 6756	20	Dis 30-9-17 (P.K) #2 D P M L. 21/9/17
June		W 5729	20	Gnov 6/9/17
July		K 13027	20	
Aug.		S 13828	20	Reopen a/c without loss of
Sept.		O 17647	20	time and Continue payments
Oct.		S 20661	20	until further advised as per P.M.L.
Nov.		A 24118	20	H-Q 649-R-7920 25/9/17
Dec.		A 27401	20	File No. 15206-J-79 F.X.L.C. 5/a 28/9/17
Jan.	1917	W 30186	20	
Feb.		W 33055	20	Ret'd per Justicia
March		X 36340	20	Date 18/7/17 F. X 29/8/17
April		Y 2365	20	Clerk J. A. Lynch
May		W 5566	20	
June		W 9086	20	Retd for duty
July		H 12316	20	
Aug.		H 15508	20	Dis 30/9/17 Dom 21/9/17
Sept.				Saver 11/10/17
Oct.		U 19209	40 480	40 R mailed 1/10/17
Nov.				
Dec.				Return 20.00 overpaid requested 24/10/17 Formerly
Jan.	1918			
Feb.				5.00 Refunded as per Credit Slip 2984 - 28/1/18
March				ACCOUNT CLOSED
April				LP 27
May				DATE..... PER.....
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—812.

Sheet No. 2. Mrs. Salina May Read. (Wife) Name of Soldier Read, James.

L. L. Job 310.—Req. 6574.

PAYMENTS. 745165 Pte. 116 Batt

AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
				20.00
April	1916			A.P. overpayment. 20.00 Aug 1917
May				recorded by C.P. auth. HQ 2646 R. 7920
June				C.P. letter 27/9/17 on file 15206-J-79
July				A.P. this 10/10/17
Aug.		X15021	20	~~7.00 recovered per C.S. 29984.~~
Sept.		E18203	20	
Oct.		G22816	20	
Nov.		F28597	20	
Dec.		X29799	20	
Jan.	1917	M40735	20	
Feb.		M46636	20	
March		Z52395	20	20 6
April		Y4290	20	20 6
May		Y11508	20	
June		X17088	20	20 T.
July		O Y24547	~~20~~ 260	Bx
Aug.		32067	20	
Sept.			~~20~~	A/c Closed 31/8/17
Oct.				260.00 Ret'd per Justicia
Nov.				Date 18/7/17 F. X. 29/9/17
Dec.				Clerk
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

PAYMENTS.

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

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. May Read Wife

Name of Soldier Read Jas.

L. L. Job 89002.—Req. 6213.

Jas Read
Regt 745165
Eng
unas.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	L 3399	20	20	
May		J 6756	20	20	116 Bn
June		W 5729	20	20	
July		K 13027	20	20	
Aug.		X 13828	20	20	
Sept.		O 17647	20	20	
Oct.		S 20661	20	20	
Nov.		A 24118	20	20	
Dec.		A 27401	20	20	
Jan.	1917	W 30186	20	20	
Feb.		W 33055	20	20	
March		X 26340	~~20~~	20	
April		G 2365	20	20	
May		W 5566	20	20	
June		W 9058	20	20	
July		W 12316	20	T	Dis. 30/9/17 (P.U.) #2 Dpmt 21/9/17 Emov 6/9/17
Aug.		H 15508	20	m	
Sept.			~~20~~		
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

440 00

A/c Closed

Rec'd per Justice

Date 29-8/17

Clerk J Lynch

ACCOUNT CLOSED

DATE ..... PER W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Pte J. Read

Regimental No. 745165

Unit CFC 116th Bn

Date of enlistment

Place of "

Married (yes or no) Yes

Amount of pay assigned monthly $ 20.00 Pd Aug

To whom payable Mrs S. M. Read

Shirley, Port Perry Ont

Name and address of next-of-kin

Date and place discharged

Reason for discharge Dis Notfd 29/9/17

Character on discharge

Sub from Sept 4th DO 210

CPC.

Form 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
								9	9	CF						DO 195
																Sub Aug 13-27 DO 195
														Dr Bal		
Sep 1	Sep 30	30	1	30	30	10	3	9 16 20 8	66 20	9948	55/16			11 04		Dis Phy. Unfit DO 225

M. F. W 41
1 0M—7.16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

M. F. W. 41
1 0M—7-16
1772-39 889.

Ex Pte. Name Read James.

Regimental No. 745-165

Unit 116th Bn.

Date of enlistment 1-11-15

Place of " Uxbridge Ont.

Married (yes or no) Yes.

Amount of pay assigned monthly $20 f 1-8-16 to 31/8/17 $260

To whom payable Mrs Salvia May Read. Shelley. Port Perry. Ont.

~~Name and~~ Home address ~~of next of kin~~ Port Perry. Ontario Co. Ontario

Med Board. 9-8-17. Ret Duty.

S. A f 1/11/15 to 31/8/17 $440 Cont by S.A.A.P.

Date and place discharged

Reason for discharge Returned for Duty.

Character on discharge

Justice 1-8-17. #2. 649 P— 7920

Job 5351—M. & D. 6890.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
																L. P. C. #
	13 7/17							*4 79								*English L. P. C.
14 7/17	31 8/17	49.	1.00	49 00	49	.10	4 90		58 69.					v9 73		v8261 a R. 24.
														y40 00		y D. D. Quebec.
					Debit Balance				11 04				1 20 00		69 73.	1 August 1917.
									69 73.						69 73	

Transf to MD #2. for 1-9/17 with Dr Bal

Pensioned 1-10-17 S.A.A. Pond Rec of A.P. 20.00 Aug/17

R.S.P. 6/10/17 J.W.M.

MILITIA & DEFENCE OTTAWA CASUALTIES C.E.F. SEP 11 1917 Pay & Accounts Branch, Militia Dept.

Vpol.

English Lee Pay charged to. 31-7-17 24.00

M. F. W 41
1 0M—7.16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

27953/558
015096-J-4

Name READ, James
Surname Christian Name

Regimental Number 745165 Rank Pte.

Address (in full) Port Perry, Ont.

Unit 18th Bn.

Original Unit 116th Bn.

District where paid M.D.2.

Date of Discharge 30-9-17.

P. D. P. Filing Number 2-142-2.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 20.00 per month.

L. L. 22573—M. & D. 8000.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
160	10	2121	16-11-17	53	00	2137	15-12-17	53	00	2076	15-1-18	54	10			160	10
~~2686~~	~~1d~~	~~942~~ 7818	15-4-19	70	00			Can. Sus. a/c						15	00		
~~2686~~	~~1d~~	~~942~~ 7819	~~15-4-19~~	~~30~~	~~00~~												

Remarks:

M. F. W. 127.
50M—6 17.
1772 39-1140.

Port Perry.
Ont.

Claim No 27953 558 W. S. G. File No 15206 — 9-79.

Award ..... days at $ 70.00 per day $ 400.00

S. A. 4 months at $ 30 per mo. $ 120 $

Less P. D. P. Credited $ 160.10

$

Less further debit balance $.....

Net due paid as below 239.90

TO SOLDIER TO DEPENDENT

	Ag. No	Ch No	Amount		Ag. No	Ch No	Amount		
0									
1	2680	427818	70 00		2680	427819	30	00	15.4.19
2	2302	422887	49 90		1980	305887	30	00	21-7-19
3					✓	✓	30	00	
4					1632	476663	30	00	23.5.19
5									
6									
	Total		119 90		Total		120	00	

15.4.19
21/4/19

GEN'L AUDITOR
Posting checked by
.....
Date 14-10-19

P. 55#.

MARRIED OR SINGLE: Married

PLACE OF BIRTH: Norwich. England

NAME AND ADDRESS OF NEXT OF KIN: Mrs Salina M. Read. R.R.#4. Port Perry. Ont. Can.

RELATIONSHIP OF NEXT OF KIN: Wife.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

0-5244

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 745165 RANK Private NAME Read, James

IF IN PERMT. CORPS WHAT UNIT — UNIT 116th Batt.

TRANSFERRED TO 18th Bn DATE ~~10.10.16~~ 11.11.16. AUTHORITY DO 257 6.10.16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO CEAC DATE 1.1.17 AUTHORITY AD.54.28th

PLACE OF ATTESTATION Port Perry, Ont. — TRANSFERRED TO C.E.F.D. DATE 21-4-17 AUTHORITY Dr notes

DATE OF ATTESTATION Nov. 1-1916 — TRANSFERRED TO L. Branch D.O.A. Can. DATE 14.7.17. AUTHORITY T.L.D. 338 12.7.17.

N.E.B. —

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE Aug 1-1916.

PAYABLE TO Mrs Salina M Read, Port Perry Ontario Canada RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 14/7/17 EFFECTIVE 1/8/17 B. REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada 13/7/17. REASON AND AUTHORITY T.L.D. 338 12/7/17.

Entered on N.E. Card Index

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) — Checked by H. Hoyle

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C.S.

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
July 31														8 60	8 60										Balance from Canada						8 60				
Aug 31	31	1	31		31	10	3 10								34 10													20		20	22 70				
Sept 30	30		30		30		3								33	7	68.16	104	318.16					730	487			40		41 91	13 79				
																31	308.16	160	154.16					487	487										
Oct 15	15		15		15		1 50								16 50													20		20	10 29				
" 31	16		16		16		1 60								17 60					199	309.16					244		-		244	2545				
Nov. 10	10		10		10		1								11													20		20	16 45				Trans. 18 Bn. DO.257. 6/10.
11.30	20		20		20		2								22					Rouelles 766 7/0; 1358 ceac 1/6; 1036 " 3/0; 932 " 2/10					4 36		-			4 36	34 09				
																										9 73		80							
																										9 73									Trans to CEAC effec 1.1.17 AD.54.28.11.16
Dec	31	1.00	31		31	10	3 10								34 10											2 44		20		41 90	26 29				
Qmr			15 30				1 530																												
1-31	31	1.00/10	34 10												34 10	Hash 1762 24/12				S 1445 13/1				487		9 74		20		34 61	25 78				
Feby																				CETD 2954 18/1						9 73									
1-28	28	"	30 80												30 80					" 3085 31/1						4 87		20		34 60	21 98				
Mar																				" 3236 14/2						2 43									
1-31	31	"	34 10												34 10					" 3493 15/3						4 87		20		29 43	26 35				
Apl.																				" 3320 29/3						2 43									
1-20	20	"	22												22													20		20	28 35				Trans CETD 21/4/17 Auth Dr notes
			269 30											8 60	297 90									17 04	9 74	62 77		180		269 55					
20.30	10		11												11																39 35				
May	31		34 10												34 10													20		20	53 45				
			334 40											8 60	343 00									17 04	9 74	62 77		200		289 55	53 45				
			334 40											8 60	343 00									17 04	9 74	62 77		200		289 55	53 45				

Date of Payment ... Checked ...

Sailing List 42. 18/7/17 6th Bal 4th

745165 Pte Read James. ASP. $20.00

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits
			334	40										8 60	343 ..
June	30	1.10	33	..											33
July	13		14	30											14 30
			341	70										8 60	390 30
Sept															

DATE	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
									17 04	9 74	62 77		200 ..		289 55	53 45				
June													20 ..		20 ..	66 45				
July													20 ..		20	60 75				Trans to "L" Branch. Div Acct DRD. 338. 12.7.17
									17 04	9 74	62 77		240		329 55	60 75				
Sept											7 30				7 30	53 45				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct 17									53 45		
				Mach 105 Cmg D Chno. 30/4/17	7 30						
				23 lb 6 d 6 Eng 29/5	7 30						
				10 Chg D Cond 14/4	7 30						
				27 pg 6 F.C. 7/7	9 73						
				mr. 6 d 6 16/5	4 87				16 95		
NOV 1917				2561 18/7	36 50				4 78		
					12 17						

Balance trans to Con Liability a/c

Balance transferred to N. E. Branch. Nil.

A3M. FORM REN'D 14/7/17 EFFEC. 1/5/17
DISCHARGED TO Canada DATE 14/7/17
PAYBOOK VERIFIED 14/7/17
Cr. BAL $4.79 L.P.C. REN'D 14/7/17
AUTH. T.S.D. 338 12/7/17 Checked J. H. Williams L.P.C.

R. & O. 6045 (*Revised*).

129343

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings Dec 28 1916.

No. 745165 Rank Pte Name 18th Bn

Local Unit CCAC Overseas Unit READ J. Age 37

Examination held at SMB.

DISABILITY
Overseas—Local.
(scratch one out)

6 weeks in France.

PRESENT CONDITION.

Arthritis metatarso-phalangeal joints of both great toes. Right most marked. Joints swollen and irregular enlargements over dorsum of joint. Incapable of marching in present condition

BOARD RECOMMENDS:—

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

APPROVED CAPT. C.A.M.C. FOR ADJ. GENERAL AND FOR O.C. TROOPS.

Signatures:— R Harvey Capt. President.

Members { W A McDougall Major

APPROVED Hastings

Dated at ..... 1916. 29 DEC 1916 A. J. McIntyre

Captain, C.A.M.C.
for A.D.M.S., Canadians. Boulogne Area

For A.D.M.S.

R. & O. 6045 (Revised).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at.....1916.

No.....Rank.....Name.....

Local Unit.....Overseas Unit.....Age.....

Examination held at.....

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty.....

2. Fit for duty after.....weeks' physical training.

3. Fit for Temporary Base Duty.....weeks.

4. Fit for Permanent Base Duty.....

5. Discharge.....

Signatures:—

.....President.

Members .....

.....

APPROVED

Dated at.....1916.

.....

For A.D.M.S.

Next of Kin:- (Wife)Mrs May Read.
Port Perry.Ont.

Examined by.
Cap't J.Moore

MEDICAL HISTORY OF AN INVALID.

B.P.C.

Mans address the same. _____

1. Station. Camp Borden Ont,
2. Regiment or Corps. II6th B'n
3. Regimental No. and Rank. 745I65.Private.
4. Name. READ'James.
5. Age last Birthday. 37.Years.
6. Enlisted on November.Ist.I9I5.
   at Port.Perry.Ont.
7. Former Trade or Occupation. Laborer.

8. General remarks on his :—
   (a) Conduct. Good,
   (b) Habits. Good.
   (c) Temperance. Good.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date. September.Ist.I9I7.

DEPT MILITIA & DEFENCE
OCT 27 1917
H.Q. CANADA

9. Service.	Years.	Days.
II6th.B'n.	PERIODS.	
	FROM.	TO.
II6th.B'n.	November,Ist.I5.	July.I2th.I9I7.
Casualties.	July.I2th.I9I7.	Todate.

10. (a) Disease or disability. Osteo-arthritis Ist Metatarso-Phalangeal Joint Both feet.
    (b) Date of origin. October.I9I6.
    (c) Place of origin. Bramshott camp.
    (d) Cause. Exposure to wet in camp life.

11. Present Condition. (Most Important) (To include full description of present disabling condition or conditions.) Began to have slight pains in Ist. Metatarso-Phalangeal joints before going to France. was in France 2 I/2 Months.Pain and swelling has gradually become worse the joints are hard swollen and nodular. they are practically ankylosed and the right is very tender.Is unable to March and walking even a few steps is painful and causes a limp.Heart and Lungs apparently normal.

12. (a) Is the disability the result of service or climate? Yes Service.
    (b) Has it been aggravated by intemperance, vice or misconduct? No.

Dis. Sec 23/10/17

M. F. B. 227.

150 M—5-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.) 4 Vaccination scars left arm

"Tattoo marks. Pansies right forearm

Sailor

"Pansies left forearm.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? Does not apply.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. Exposed to wet damp ground

14. Treatment None.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? Does not apply.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? Permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. 3/5.

18. State if for discharge on account of unfitness for Service. Yes for discharge.

A. D. Lapkept

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. Yes.

12. Yes.

15. Yes.

16. Yes.

17. No 1/6

18. Is he unfit for Military Service.

Yes.

Recommendations:

That he be placed in Category E., andbe discharged as Physically unfit and pass under his own control.

Further treatment will not benefit his condition nor reduce disability.

Signatures:—

W E Brown — President.
Capt. A.M.C.

A R Adams — Lieut. A.M.C.

W L Graydon — Lieut. A.M.C.

Members.

Station. Camp Borden.

Date. Sept. 5, 1917.

Date. Sept. 6th/17

Charles Carter Lt Col. — Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

14

Militia Form B. 227.

150 m—5-16.
H. Q. 1772—89—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.

(At Station or Hospital where finally disposed of.)

Station and Hospital ..... Arrived from .....

Date.....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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.....

.....

Date of final Medical Board or decision. .....

Administrative Medical Officer.

R. & O. 6045 (revised).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Shoreham Nov 3rd 1916.

No. 74565 Rank Pte Name READ, JAS

Local Unit 19th Bn Overseas Unit 18th Bn Age 37

Examination held at C.C.A.C.

DISABILITY. Overseas—~~Local.~~ (scratch one out) Hammer toes

(1)

PRESENT CONDITION. In France 1½ mos

Right foot painful & swollen, says he cannot march.

BOARD RECOMMENDS:—

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 Yes
5. Discharge.....

Signatures:—

W. B. Mc Dill Capt ..... President.

Members { M. A. Connell Capt

APPROVED

Dated at.....1916.

For A.D.M.S.

17

Dis. Sec. 23-10-17 A.B.

R. & O. (Overseas).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1916.

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty .....

2. Fit for duty after ..... weeks' physical training.

3. Fit for Temporary Base Duty ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures:—

..... President.

Members ..... }

.....

APPROVED

Dated at 1916

For A.D.M.S.

Date of Enlistment 1-11-15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment Aug. 1/1916

RATE OF SEPARATION ALLOWANCE

20.			

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 745165

Rank Pte Promoted Reverted Discharge

Soldier's Name James Read

Battalion 116 Battn

Beneficiary Mrs May Read

Relationship wife

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Salina May Read (Wife)

Address Port Perry Ont.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31	—	480	260	740		

A/cs closed 31-8-17
Ret.d per Justicia 18-7-17 F x 29-8-17
Last A/P cheque issue Aug 17-

This acct was paid to 31/10/17 & Discharged 30/9/17 as per D.P.m 21/9/17 making an over payment of $20.00/- Refund req 24/10/17
Refund of 5.00/- made as per Credit Slip 2984. 21-28/1/18

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

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

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. 745165.

Rank Private.

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

Corps (Squadron, Battery or Company) Casualties, C.E.F., M.D.#2. (late 116th & 18th Bn

Date of Discharge September 30th, 1917.

Place of Discharge Toronto, Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 36 years 3 months.
Height 5 feet 5 inches.
Complexion Fair
Eyes Grey
Hair Brown
Trade Farmer
Intended place of residence (To be given as fully as practicable.) Port Perry, Ont.

Descriptive Marks

N I L

Cleared 29-11-20

2. The above-named man is discharged in consequence of

PHYSICAL UNFITNESS.

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

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

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

"Very Good" HGB.

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

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

F A R M E R.

W. S. G. Comp.

M. F. B. 218.
50m.—3-16.
H. Q. 1772-39-113.

23-2-1920.
K.C.D.
16-10-1920

(OVER)

Dis Sec
23-10-17

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

N I L.

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

6. Medals and Decorations ..... N I L.

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) Toronto, Ont.

J. G. Beemer Lieut.
For O. C. Casualties, C. E. F., M. D. No. 2
Commanding .....

(Date) Sept. 30th., 1917.

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) Toronto, Ont. James Read (*Signature of Soldier.*)

(Date) Sept. 30th., 1917. W. M. Ryan (*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.....days.

Total 1 years 338 ys.

11. **Confirmation of Discharge.**

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

(Place) Toronto, Ont.

J. G. Beemer Lieut.
For O. C. Casualties, C. E. F.
(*Signature*) .....

(Date) Sept. 30th., 1917.

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.)

(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.