ORIGINAL

ATTESTATION PAPER.

No. 736030

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Original

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? ..... xxxxx Pxx JOHN REID
2. In what Town, Township or Parish, and in what Country were you born? ..... Glasgow, Scotland.
3. What is the name of your next-of kin? ..... Uncle-John Reid.
4. What is the address of your next-of-kin? ..... 44 McCauley St., Hamilton, Ont.
5. What is the date of your birth? ..... 26th April 1883
6. What is your Trade or Calling? ..... Laborer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? and inoculated J.R. ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... 2Mos. Hamilton Militia.
    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

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x John Reid (Signature of Man.)

H J Toode (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, JOHN REID, 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.

x John Reid (Signature of Recruit)

Date Novr 20 1915. H J Toode (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, JOHN REID, 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.

x John Reid (Signature of Recruit)

Date Novr 20 1915. H J Toode (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 Lethbridge this 20th day of Novr 1915.

Edmonds (Signature of Justice)

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

W B Ball (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-59-841.

Description of JOHN REID on Enlistment.

Apparent Age 33 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 7 ins.

Chest measurement.
- Girth when fully expanded 38 ins.
- Range of expansion 2½ ins.

Complexion Ruddy

Eyes Light Brown

Hair Black

Religious denominations.
- Church of England
- Presbyterian Yes
- ~~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 Novr 20/15 191 . D A Taylor Surg Lieut

Place Lethbridge, Alta.

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

JOHN REID 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 B Ball (Signature of Officer)

Date Nov 20th 1915.

REID, JOHN 736030 113 O BN C.E.F. 06607

MED. UN.

Deceased 27-5-5[illegible]

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APPROVED COPIE

B07
#8168

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

PB

736030	REID	JOHN
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

Deceased 27-5-58

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 8168

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»

ARC-1048 (r. 87/05)

R. 149.

Name Reid, John. *Rank* Private. *Reg. No.* 736030.

Unit 43rd. Battalion.

Next of Kin Camada .

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Date 1916.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
~~23-12.~~	~~Div'l Rest Station.~~		~~P.U.O. A.246.~~	6	Deleted	A/260
6-4-17	No. 6. C. F. A.	Abbeville	Medical	A/322.		
10-4-17	Disc'd to Duty		do	A/327.		

Date		Movement	Place	Casualty	List No.	Notified	W.O. List

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No. 736030 Rank Pte. Name Reid John

T. O. S. 20-11-15
D.O. 10 of 10-12-15

Unit 113th Battalion C.E.F.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov. 20	1915 Dec. 31	✓		
1916	Jan. 1916	✓		
	Feb.	✓		
	Mar.	✓	Forfeits 4 days Pay AWL	D.O. 82 of Apr. Paylist
	Apr.	✓	" 2 " " "	D.O. 124 of 25-5-16
	May.	✓	" 1 " " "	
	June	✓		
	July.	✓		
	Aug.	✓		
	Sept.	✓		
Oct. 1	Oct. 7	✓	Trans. to 17th Bn.	Oct. Paylist

UNIT SAILED
SEP 25 1916

NAME Reid J.

RANK AND CORPS Pte 43rd Bn

REGT'L No 736230

H. Q. FILE No. 649-

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

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L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 246	~~Div Rest Stat.~~	~~23-12-16~~	~~P.U.O.~~
~~A322~~			as per List A260
A322	No 6 Can. Fld. Amb.	6-4-17	Otitis Media.
AB27	No 6 Can. Fd Amb.	10-4-17	" " discharged to duty
A41 1	3 Can. Fld. Amb.	13-10-17	Chr. Bronchitis
A42	No 22 Cas. Clear. Stat	14-10-17	Chr Bronchitis.
A46 2	56 Gen. & Staples	17-10-17	Chr. Bronchitis.
B49 1	2 Mil. at Park. Canterbury	22-10-17	Chr. Bronchitis
B48 2	2nd " can Gen Orpington	16-11-17	
B103 3	Discharged	28-12-17	Chr. Bronchitis

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FORM R. 149.
7106—250m—7/2/17.

Name [redacted] EID John

Rank Pte

Reg. No. 736030

Unit 43 BN

Next of Kin Canada

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Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13-10-17	8. C. F. A.		Chronic Bronchitis	A41		5550
14-10-17	22. C.C.S.		do.	A42		5558
17-10-17	56. G. H. Etaples		do.	A46		H.A.15308/2
22-10-17	2. M.H. Old P.A. Canterbury		do.	B49		7001.4388
16-11-17	16. C.G. Conv. Hsp. Orpington		do.	B68		7001.6154
28-12-17	Discharged			B103		2123
					14-1-18.	

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

Deceased 27 May 58

Number 736030 Rank P6

Surname REID

Christian Name John

Units 43rd Bn C.M.R. Nearest of kin Friend

Date of Service 27-10-16

Remarks

29563

Ladies Address 44 McCauley St.
Hamilton, Ont.

Roll No. Page 9384 % G.W.V.A. Lethbridge Alta BR

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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

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DEP. MAR 14 1925 REGN. NO. 11510

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

C.E.F. 736030

REID, John 736030 Pte.

Medals prev desp:

Cross to widow: N/A (Soldier single on disch)

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Cross to mother: Deceased

D.M S 1300.

Surname: [illegible]rd Christian Name or Names: J Reg. No. 736030.

Rank: Pte Unit: 43 Bn Co.: Man. Troop Batty.

Hospital: ~~D.R.S.~~ Date of Admission: ~~23.12.16~~

Transferred: 6 Can. Fld. Amb. Hosp. 6.4.17

8 " " " Hosp. 12-10-17

22. C.as. Clg. Station Hosp. 14.10.17.

56 Gen Staples Hosp. 17-10-17

Diagnosis: ~~P.U.O.~~

(1) Later Diagnosis (if changed): Otitis Media Yt

(2) Chr. Bronchitis Rw.

(3)

Additional Diagnosis: if more than one state present

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DISPOSITION Date REMARKS

C.F. 13.1.17 A246 Delete

" 5.2.17 A260 Err. To duty 10.4.17

" 26.4.17 A322 Des 26.12.17

2.5.17 A327

20-10-17 A411(1)

22.10.17 A442

26-10-17 A446 (2)

30-10-17 B449.

21. " 17. B68. (2)

3-1-18 B103 (3)

A.M.D. 2 Dept.

Boh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	2- Mil Old Pk. Canterbury -	22.10.17
	16 Can gen. orpington	16. 11. 17.
2.		
3.		
4.		
5.		
6.		
7.		

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 ...[illegible] Batt'n, C.E.F.

(2) Regimental Number ...736030.

(3) Full Name of Soldier ...Reid, John

(4) Place of Birth ...Glasgow, Scotland.

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

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

(b) Present Postal Address

(7) Are you a widower ? ...No

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

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M. F. W. 67.
300M.—5-16.
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.....

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.

.....

.....

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(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.

Uncle John Reid 444 Macauley Street
Hamilton, Ontario

.....

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

.....

(15) Are you insured ? No

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

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

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

G. H. Ryan-Jones
Officer Commanding.

Date Sept 8th 1916

B60

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Reid Christian Name John

Examined on 20 day of Nov. 1915
at Lethbridge Alta

Approved by
D.A. Taylor
Rank Surg. Lieut. M.O.

Birthplace City or Town Glasgow
County Scotland

Apparent age 33 yrs 2 mos.

Trade or occupation Laborer

Height 5' Feet 7 Inches.

Weight 138 Lbs.

Chest measurement Minimum 35½ inches.
Maximum expansion 38 inches.

Physical development Fair

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Yes
Number Two

When Vaccinated last Child

(a) Marks indicating congenital peculiarities or previous disease

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

Date	Fit or Unfit	Examined for Re-engagement,
		29 OCT 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
24/4/16	Por	G.H. Leach M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
22/3/16	Read	G.H. Leach M.O.
13/4/16	do	W.W. Beeman M.O.
29/7/17	T.A.B. for	W. Miller M.O.
11/1/18	T.A.B.	W. Miller

Enlisted on 20 day of Nov. 1915 at Lethbridge Alta

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	113th Killed Batt	336030		Nov. 20/15
Transferred to..	43rd Bn			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.	19 DEC 1917	Bronchitis	B III Invalided to Can Pro Capt Canada
Calgary Alta	11/3/18	Emphysema	J.H. Leach Captain

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 Reed Christian Name Robert

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No 2 MILITARY HOSPITAL No. 1174 Date OLD PARK, CHATHAM ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.		22	10	17	15	11	17	Bronchitis	25	Transferred to Ontario Mil. H. Orpington	W.C. Penny Capt. R.A.M.C. Registrar
		15	11	17	28	12	17	"	45	France Nov 1916. Invalided Permanent Base there for Chronic Bronchitis of base 3 weeks and returned to Bn. Reported sick 13-10-17 Complaining of chest pains dyspnoea. cough Off & on since Spring 1916. Admitted 8th Fld Amb 13-10-17. 22 C.C.S. 14-10-17. 56 General. 17-10-17 Bn 15-11-17. On admission pale debilitated somewhat barrel shaped chest, slightly hyperaemic. Breath sounds clear. Circulatory. Digestive. Nervous. Urinary system normal. Became of tendency to cough on service conditions. Recommend B.E. (col Fulton)	Invalided home

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ORIGINAL
B. P. C.

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

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

MEDICAL HISTORY OF AN INVALID

STATION Calgary, Alta. DATE March 5th. 1918.

1. (a) Unit 113th. Batt. (b) Regimental No. 736030 (c) Rank Pte.

(d) Surname Reid, (e) Christian name John.

2. Age last birthday 36 yrs. Date of birth 26th. April 1882

3. Enlisted at Lethbridge. on 20th. November 1915.

SEPT. MILITIA & DEFENCE
MAR 22 1918
H.Q. CANADA

4. Personal description :—

(a) Height 5' 7½" (b) Weight 140 (stripped) (c) Complexion Dark.

(d) Colour of hair Dark Brown. (e) Colour of eyes Hazel (f) Identification marks -

One vacc. mark upper left arm.

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

44 Macauley St., Hamilton East, Ontario.

6. Former trade or occupation Machinist.

7. (a) Service

	Years	Days	Periods From	Periods To
113th Batt.			20 Nov. 1915	date.

(b) Has he been overseas? Yes, France.

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

(a) Date of origin Feby. 1917 (b) Place of origin France.

(c) Cause* Exposure in trenches.

*(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

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

Unhealthy looking man: undernourished: face is anxious; appetite he says is good: sleep restless. Pulse small volume-96(sitting) Heart; sounds, rhythmical rt. side hyper/trophy Lungs; expiration 35½", inspiration 37½":large subcostal angle; chest barrel shaped: hyperresonant ~~and~~ note over whole chest: breath sounds diminished, anteriorly and posteriorly. Has a dry unproductive cough: dyspnoea on exertion of moderate degree. Can walk two or three miles at his own gait, becomes fatigued and short of breath beyond this distance. Whole body musculature is flabby: muscular strength diminished. No night sweats: no loss in weight he believes.

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

B. P. C. FILES
FALSE DOCKET
4

M. F. B. 227.
75M.-12-17.
1772-39-117.

10. History :

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

When in France in November 1916, was sent to base with diagnosis of chronic bronchitis. Was ill agian in February 1917 and in October 1917 with cough, pains in chest and dyspnoea. Chest expansion less than on enlistment.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

30%

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

13. Was a Court of Inquiry held? No.

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

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

N.A.

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

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

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

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

General Hospital, Etapes. Ontario Hospital, Orpingham.

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

No.

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

20. Recommendations. I would recommend that this man be discharged from the service as permanently unfit.

G. L. Yeamans

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned John Reid 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

John Reid

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

(9). Weight about six pounds less than on enlistment.
Bowels and G.O. systems normal.

Yes.

22. Is the soldier fit for

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

23. It is certified that the soldier
(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).

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

Class"E".

Board recommends discharge as soldier is unfit for service, no further treatment indicated.

G. Baugh Lieut. CAMC President
J. M. Keagh Capt. CAMC
J. P. Cox Capt. CAMC. Members.

STATION Calgary

DATE MCh. 7th/18.

APPROVED BY

DATE 9/3/18

J. A. Bruce Col
Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

B.I.C. FALSE DOCKET

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TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 14. Please read the questions carefully. All questions must be answered.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

Army Form B. 103. ORIGINAL

Regimental Number 736020

Casualty Form—Active Service.

Regiment or Corps 113th (43rd OSB)

Rank Private Surname Reid Christian Name John

Religion Presbyterian Age on Enlistment 33 years 2 months.

Enlisted (a) 20-11-15 Terms of Service (a) 2 fw Service reckons from (a) 20-11-15

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

Extended { } Re-engaged { } Qualification (b) Laborer

or Corps Trade and Rate

Signature of Officer.

Report Date	Report From whom received	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
		Embarked			
		Disembarked			
30.12.17	Man R Depot.	Granted Sick furlo 28/12/17 – 9/1/18 Dft Depot	Selkpk.	28.12.17	Pt 11 D0295
11-1-18	—	—	—	10-1-18	— 11
26-1-18	"	Com. 1 CDD Buxton	do	25-1-18	— — 26
					Lieut. & Adjutant, Manitoba Regimental Depot.

26 JAN 1918 TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 22 Lieut.-Col. Commanding Canadian Discharge Depôt.

31 JAN 1918 EMBARKED FOR CANADA FROM LIVERPOOL Lieut.-Col. Commanding Canadian Discharge Depôt.

(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.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

736030 Reed J

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				

R—122

LTR

Rank | Name REID, John | Reg'l No. 736030

Unit 113th, Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Lethbridge, Novr 20th, 1915. | Place of Birth Glasgow, Scotland.

Name and Address, Next-of-Kin John Reid.

44 McCauley St, Hamilton, Ont. | Relationship Uncle.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—7165-16.

N/E. R.B. No 10041.
File R.L.
Category ORC.

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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.
C.		Arrived in England S.S. Tuscania 6-10-16.			
9 OCT. 1916	113th Bn	SOS Trans 17th Res. Bn	E. Sandling	8-10-16	DO Pt ii 249
9.10.16	17th Bde	Taken on strength.	do	8.10.16	A.F.B. 103 CHECKED 14 NOV. 1916 A.H.D.O. 23
27.10.16	"	S.O.S. to 43rd Bn	"	27.10.16	" 291
17-1-17 11.11.16	OC 43	Taken on strength. 43	Field.	28-10-16 3.11.16	" S " 61.
5.2.17. 13.1.17	"	Cancelled. Divisional Rest Stn	"	23.12.16	C.L.A 260. C.L.A 246. 132. P U O
26.4.17	"	Adm No 6. Can. Fd. Amb.	"	6.4.17	C.L.A 322 Abitis Medin
2.5.17	"	Discharged to Duty.	"	10.4.17	" A 327. " "
19.10.17	Mk 43 Bn	# 3 Can Field Ambulance		13.10.17	" 40 Ch Bronchitis
20.10.17	"	# 22 Cas Clg Station	"	14.10.17	" 42 " "

736030 Reid. J.

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.
25.10.17	MR 436	#56 General Hosp	Etaples		17.10.17	Ch A46 Chr Bronchitis
29.10.17	"	Adm No 2 Mil Hosp Ch Park	Canterbury		22.10.17	B49 " Pte D 2379 1-11-17 MRD
3-11-17	—"—	Inv. sick posted to MRD Field			22.10.17	Pte D 101
20.11.17	"	Hd Qrs 16 Can Gen Hosp	Orpington		16.11.17	Ch B68 Chr Bronchitis
26-1-18	MRD.	on Com 1st C.M.D. Buxton	Seliffe	Pte	25-1-18	Pte D 26.
10.2-18	MRD.	Ceased on Com. ——	Seliffe	Pte	31-1-18	Pte D 41.
10.2-18	—"	SOS to Canada. Disposal. A.G.	——	Pte	31-1-18	
	D's Depot	For Duty.	M.D. 13 Calgary		9/2/18	MR 442.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 113th O. Batt, C. E. F.

Regimental No. 736020 Rank Private C. E. F. Name Reid, John

Enlisted (a) Nov. 20, '15 Terms of Service (a) Period of War Service reckons from (a) 20-11-16

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

Extended | Re-engaged | Qualification (b) Rifle

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
			Embarked Halifax 26/9/16 per ~~Disembarked~~ Liverpool, 6/10/16 Tuscania.		
9/10/16		Trans. to 17th Bn. 113th Bn.	ExSanjling. 8/10/16. Part II. 1249		A. Adjt. Lt. Col a/Major & Adjt. 113th Bn. C.E.F.
9/10/16		O.C. Taken on strength, 17th Bn.	E. Sanjling, 8/10/16. Part II. 273		
27/10/16		O.C. 17th Overseas to 43rd Bn	"	27/10/16	O/C 291 Lieut. Asst. Adjt. 17th Res. Bn.

CERTIFIED CORRECT. 15 NOV. 1916 CANADIAN RECORDS, LONDON.

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O. C. C. B. D. Landed in France. Taken on Nom. Roll d/ 3.11.16

strength 43rd Cdn. Bn. 3.11.16 P.III.D.O.6 d/ 11.11.16

— do. — Left for do 19.11.16 Nom. Roll d/ 19.11.16.

O.C. Bn. Arrived do 22.11.16 B 213 d/ 25.11.16 Cl. 175 d/ 2/12/16.

4.3.17 O.C. 43 Bn To CBD Havre 27.2.17 B 213 Auth Depts 4445 M 19.1.17

3.3.17 CBD IOS Class TB CBD. 3.3.17 A.F.B. 3 Can Div 3/10 d/ 25.2.17

C.S. 207 14.3.17

(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.

736030 Reid J.

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				
31.3.17	CRD	Left for duty	3 Can Con Bn	31.3.17	NR
3.4.17	"		" "	3.4.17	NR.
8.4.17	3 Can Con Bn	Sick 6	Hosp.	8.4.17	B 213 Ca. 219 d/19.4.17.
7.4.17	6 Fd Amb	Capt M. Lear Sup. M. Adm 6 Fd Amb		6.4.17	A 36/3384 220 21.4.17.
8.4.17	6 Fd Amb	D A H Adm 5/4/17 6	6 Fd Amb	6.4.17	A 36/3325 " "
15.4.17	3 Can Con Bn	rejoined	3 Can Con Bn	10.4.17	B 213 222 26.4.17.
22 AVR 1917		LEFT FOR UNIT	22 AVR 1917		
29.4.17	43 Bn	JOINED UNIT		22.4.17	NR
14.4.17	6 Fd Amb	Capt Reid Lear (Sup) 6	6 Duty	10.4.17	B 213. D. C. S 227 dated 8.5.17.
16.10.17	22 Stat Hosp Fd Ambs	Bronchitis Adm	22 Stat Hosp Fd Ambs	14.10.17	A 36/E 3461 223 28.4.17.
14.10.17	8 Fd Amb	" Chronic Adm 13/10/17	22 Fd Ambs.	14.10.17	A 5725 corrected.
17.10.17	22 Fd Ambs.	" Adm 14.10.17	6 A.T.	17.10.17	A 5716 do
"	56 Can	Sick Adm.	56 Can.	"	A 6667
22.10.17	"	" 6	England	22.10.17	A 6667.
21.10.17	43 Bn	" 6	Hosp.	13.10.17	A 7230
22.10.17	A.P. Belle de Liege	Debility 6	England	22.10.17	B 213
		Posted To Manr Regtl. Depot Shorncliffe			W 3083/4174 11.11. 101 d/3.11.17.
					Lieut- for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
1.11.17	Mandy	T.O.S. as posted from 43 Bn	Dibgate	22.10.17	Pte 237 31.12.17 LIEUT: FOR LT: COL: I/C RECORDS. C.O.M.F.

P.697-25M.
89-31-19-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

102 20
342 10
444 30

936030 Pte Reid J.

e of ment.	No. of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
4/1/19	1294		2		9	72	Brighton	H Gayley	
1/2/19	1379		2		9	72	"	"	
1/2/	[illegible]		[illegible]		[illegible]	[illegible]	"	"	
1/4	750		3		14	58	Etaples	A Pain	
4/8	763		2		9	72	"	E S Rudy	
					102	20			

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12

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

18639/371

15-206-J-11.

Name Reid, John (Surname, Christian Name)

Regimental Number 736030 Rank Pte.

Unit 113th Bn.

Original Unit

District where paid M.D.13.

Date of Discharge 16-3-18.

P. D. P. Filing Number 16-110-13.

Address (in full) 44 Mc Cauley St., E.
Hamilton, Ont.

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	1816	17-3-18	33 00	1806	17-4-18	33 00	1801	17-5-18	34 10		100 10
2192 1st $400060	26-3-19	70 00									
1894 a 2nd $47984	25/3/19	7000									

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M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks:

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Dec'n No 18639/37 W. S. G. File No 0.15205 J-148

Award ..... days at $ 1.00 per day $ 350.00

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

Less P, D. P. Credited $ 100.10

$

Less further debit balance $ .....

Net due paid as below $ 249.90

	TO SOLI			TO		ENT
	Ag No			urt		mount
1	2192	400060	70 00			
2	1894A	47984	70 00			
3	1290B	429924	70 00			
4	1265C	443868	39.90			
5						
6						

16/3/19
25/3/19
15.5.19

GEN'L AUDITOR
Posting checked by
Hiebert
Date 11/19

Box 848
Lethbridge Alta

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. 736030 Rank Pte. Name Reid, J.

Corps 113th Battn. who was* Discharged.

On 16-3-18 191..., to xxxx

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 27-1-18. 191..., to 16-3-18 191..., the inclusive date of ~~transfer or~~ discharge.

Dr.	$	c.	Cr.	$	c.
			L.F.C.		
Bal. Dr. from prev. month			Bal. Cr. from prev. month	252	.37
Advances by Cheques No. 4151	200	.00	Regt'l Pay 49 days at $ 1 00	49	.00
No.			Field Allow. 49 days at $ c. 10	4	.90
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Furloughchgs.5dys @10c 21-2-18 xx to4-3-18		.50	Other Allowances* ClothingAlce.	13	.00
Payment on ~~transfer or~~ discharge No. 4152	118	.77	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	319	.27	Total	319	.27

*Give particulars.

A monthly stoppage of $ N.I.L. (†) has (‡) been paid on account of Assigned

{Pay for the month of 191...
and Sep'n Allce. for month of 191...} (to) Assignee

(Address)

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

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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 xxx Single

(3) cause of discharge authority D.O. #71

(4) authority for transfer

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

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

Date March 13th, 1918.

Place Calgary, Alberta.

C. J. Warren Capt.
Paymaster No. 13 Casualty Unit, C. E. F.
Paymaster.

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

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

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

M. F. W. 44.

10M.—12-17.
H. Q. 1772-3)-903.

This space to be for numbers.

Proceedings on Discharge.

M

28-1

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

No.	736030.
Rank	Private.
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	John Reid.
Corps (Squadron, Battery or Company)	113th.O.Bttn.C.E.F.
Date of Discharge	March 16th.1918.
Place of Discharge	Calgary Alta. Canada.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 36 years ------ months.	Descriptive Marks
Height 5 feet 7 1/2 inches.	
Complexion	Dark.
Eyes	Hazel.
Hair	Dark brown
Trade	Machinists.
Intended place of residence (To be given as fully as practicable.)	44 McCauley Str. Hamilton,E.Ont.

-- Nil --

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

Medically unfit for further war service.
Auth.K.R.&.O. para.392.sec.16.

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

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

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

Very Good.

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

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

Nil.

Deceased 27-5-58

C.E.F. Comp. RCAD 17-1-20

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

(OVER)

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

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Nil.

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

6. Medals and Decorations.....

Nil.

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

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

(Place) Calgary, Alta. Canada.

(Date) March 16th. 1918.

Geo Sharp Lt.
District Casualty Officer, M. D. No. 13
Commanding .....

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) Calgary, Alta. Canada. John Reid *(Signature of Soldier.)*

(Date) 16.3.18 E. Elliott Sallis *(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) 2 years 114 days.

Total 2 years 114 days.

11. **Confirmation of Discharge.**

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

(Place) Calgary, Alta. Canada.

(Date) March 16th. 1918.

Geo Sharp Lt.
District Casualty Officer, M. D. No. 13
(Signature) .....

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.)

John Reid

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(OVER)

List of Discharge Documents.

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

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

Form D.M.S. 1394
M-1147 17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT. 19 DEC 1917 1917.

No. 736030 Rank Pte Name REID John

Local Unit ..... Overseas Unit 43 Bn Age 35

Examination held at ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.

DISABILITY.
Overseas-Local
(SCRATCH ONE OUT).

BRONCHITIS

PRESENT CONDITION.

Reported sick 13-10-17 with pain in chest cough & dyspnoea. Somewhat pale and debilitated. Coughs at night and in morning. Chest barrel shaped

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BOARD RECOMMENDS:-

1. Fit for Duty Bill
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge Likely to be raised in Category within 6 months

Signatures:-

(Maunsell Capt RAMC President.
(- A B Greenwood Capt RAMC
Members (
(
(
(

APPROVED
ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT,
Dated ..... 1917. Maunsell Capt RAMC For A.D.M.S.

19 DEC 1917

Canadians London Area

PATIENT DOCUMENT 2

Form D.M.S. 1394
M-1-14/8[illegible]-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1917.

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 ..... 1917. ..... for A.D.M.S.

Bed 33

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
DET 3946	136030	Pte	Reid	J
Year 1918	Unit. 43 Can Inf	Age. 37		Service. 29/12

Station and Date.

Disease Bronchitis.

15-11-17 Enlisted Lethbridge Nov 18. 1915.
Labourer. To England Sept 1916.
To France Nov. 6. 1916. Marched
Permanent Base for Bombing in
March 1916 Duties of Bomb 3 weeks
and returned to Bn. 13-10-17
reported sick with chest pains &
dyspnoea. Admitted to 5th Can Field
Ambulance 13-10-17 to 22 C.C.S. 14-10-17
to 56 General 17-10-17 No ~~Tuberculosis~~
T.B. found in Sputum here.
to Canterbury ~~Dec 17~~ 21-10-17 to
Duty. 15-11-17.

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Previous illness.
Empetigo 10 years ago ill month.

T. History - negative.

Present illness.
Since Spring 1916 Off & on dull work in
wet weather has difficult breathing
tightness in chest. Slight cough.

Gen. - Thin not well nourished & looks
slightly like chronic illness.

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.&S. Forms/I. 1237/12. (E238)

P.T.O.

Station and Date.

Rather yellow. Teeth- Has upper plate + lower plate +

Respiratory.
Chest is barrel shaped, limited expansion, V.F generally decreased. Percussion general hyperresonance, Diaph. B. S. heard with difficulty. No râles.
About dorsal spinal region is a marked local kyphosis involving 4-5 vertebrae, no tenderness of muscle spasm or tenderness

Circulatory.
Pulse F2. Full Volume. Some irregularity. No cardiac enlargement. Sounds
Heart sounds heard with difficulty seem to be clear.
Radials palpable easily.

Abdomen.
Normal. Liver + spleen not palpable

Emphysema. No acute condition.
Recapitulation:
14-11-17 Urinalysis - Color. Amber. Reaction Acid
Sp. 1025. Alb. 0. Sugar 0.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	736030	Pte	Reid	J.
	Unit.		Age.	Service.
	43 Can Bn.		37	24/12

Station and Date.

Disease

Lt Col Fulcher

21/11/17 Rather thin.

Thorax - somewhat narrow. Expansion fair about equal. Has a definite kyphosis of the spine prominence most marked at 10 D spine.

Rt Lung

Clear on percussion and auscultation.

Lt lung

Clear on percussion and auscultation ~~Resp~~ probably very slight hyperresonance on both sides.

Heart clear not enlarged

No visible enlargement Vessels bounds then natrils freely.

Impression -

Tendency to slight emphysema may have a Chr Bronchitis also no present signs.

Dec 4. Cautions about smoking.

Dec. 6. Repers in for re-examination B... W Fulcher

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

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

P.T.O.

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Station and Date.	

OTTAWA, 20-1-21

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From;

The Adjutant-General,
Canadian Militia.

To ; J. Reid
44 McCauley St.
Hamilton

Sir;-

Enclosed herewith please find Military Will executed by you while in the C.E.F., and returned, the same being your own property.

Lieutenant.
for Lieut,Col..
Director of Records
for Adjutant-General.

D-1a.
L.H.P.

ONTARIO MILITARY HOSPITAL,
ORPINGTON, KT

CAL CHART.

(Attached to Case Sheet.)

Army Form B. 181.

Corps 43 Bn Can. Military Hospital

No. 736030 Rank and Name Pte Reed J. Age 32 Service 2yrs

Disease Bronchitis Date of admission 15-11-17 Date of discharge 28/12/17. Result Duly

Dates of Observation	15	16	17	18	19	20	21	22	23	24	25	26
Days of Disease	1st											
Temperature, Fahrenheit	Time A.M.P.M.											
107°												
106°												
105°												
104°												
103°												
102°												
101°										Chart		
100°												
99°												
98°												
97°												
Pulse per Minute	76	96	96	96	72	78	88	76	88	80	76	80	80	80	76	80	76
Respirations per Minute	20	20	24	18	20	20	18	20	18	20	20	20	20	20	18	20	20
Motions per 24 Hours												

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Wt. W3738/M2218—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature _____ In charge of case.

Army Form

CLINICAL [illegible]

(To be attached to C[illegible]

Corps_____ [illegible]tary Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

of Disease

Temperature, Fahrenheit

Time A.M.P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W[illegible] —4,000,000—4/17—H. & Sp. (16000)—A.F.P. 1614 (H. 728)

Signature_____ In charge of case

D.M.S. 1394
478-17-4-17.

295-63

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ONTARIO MILITARY HOSPITAL ORPINGTON, KENT. 19 DEC 1917 1917.

No 736031 Rank Pte Name REID John

Local Unit ..... Overseas Unit 43 Bn Age 35

Examination held at ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.

DISABILITY.
Overseas-Local
(SCRATCH ONE OUT). BRONCHITIS

PRESENT CONDITION.

Reported sick 13-10-17 with pain in chest cough & dyspnoea. Remarkably pale and debilitated. Coughs at night and in morning. Chest barrel shaped

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BOARD RECOMMENDS:-

1. Fit for Duty BTIT
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge Likely to be passed Category within 6 months

Signatures:-

(Lieut-Colonel Capt. Canada President.
(Members (C B Kenwood Capt Can A M C 13
((.....

APPROVED
ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.
Dated ..... 1917. Lieut-Colonel For A.D.M.S.

19 DEC 1917

Canadians London Area

D.M.S. 1904.
A73-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1917.

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 ..... 1917. ..... For A.D.M.S.

3

Dat
Pay

P. 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH: Glasgow, Scotland.

NAME AND ADDRESS OF NEXT OF KIN: John Reid
44 Macauley St, Hamilton, Ont

RELATIONSHIP OF NEXT OF KIN: Uncle

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 136030 RANK Pte NAME Reid John

IF IN PERMT. CORPS / WHAT UNIT — UNIT 113th Btn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Lethbridge, Alta, Can

DATE OF ATTESTATION 20-11-15

TRANSFERRED TO 17th Res	DATE 8-10-16	AUTHORITY Long Pt 11	
TRANSFERRED TO 43rd Btn	DATE 1-11-16	AUTHORITY Do 291.27/10/16	
TRANSFERRED TO Non eff C.	DATE 13.3.18	AUTHORITY	
TRANSFERRED TO	DATE	AUTHORITY	

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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21 SEP 1918

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE 26/1/18 Canada REASON AND AUTHORITY AG 5-1-22 For Disposal

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked W.H. Hill

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
														18	18-									Balance from Canada.							1800				
Oct 1-7	7	1.00	7	00	7	10	7	70							770																2570				
8-31	24		24		24		2	40							2640													1946			3204				
Nov 1-30	30		30		30		3								33																9233	5641		2641	
Dec	31		31		21		2	10							2410									10 47							10 47	8004		3504	
			9	20			9	20																											
1917 Jan	31	10.10	34	10											3410									349							3349	11065		5065	
Feb	28		30	80											3080									523							5523	13622			
Mch	31		34	10											3410									523							19 17	15115		90	
Apr	30		33	00											3300									261								18415			
May	31		34	10											3410									268								21825	120	9825	
Jun-			33												33									536							13.27.	23198	105		
Jul			34	10											2210																	27508	150	13308	
			334	40										18 00	3534 0									35 07	19 46	25 79					80 39				

1st Can 43rd Btn 1/1/16 Do. 291.27/10/16

11/4

136030. Pte - Reid John. A.P. -

DATE 1917	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
Forwd.			324	40										18 00	359 40
Aug 31	1	1"	34	10											34 10
Sept 30	-		33	00											33 00
															£19 50

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		210	3/7				
		1116	18/6				
291	25/7	347	10/8				
		427	22/6				

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE
35 07.	19 46.	35 19.				80 33	2/9 08.		150 00	130 08
	5 35					5 35	300 83			
	267									
268	268					13 39	320 44			
37 15	30 52									

REMARKS

A 3 M. FORM REN'R. EFFEC.
DISCHARGED TO Saw DATE 24/1/18
PAY BOOK VERIFIED, O 24/1/18
Cr BAL 342 L.P.C. REN'R 26/1/18
AUTH'Y AG 5-1-22

Checked H.V. Williams 2 P.C.

Supply L.P.C. 9/8/14
by Bal. 350 87

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MONEY PARTICULARS 1917		CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3 DR. 4 BALANCE	SER. VICE R.A.F. ENG.
Balance Forward	330 44					330 44	
Acto Pte Pay. 31 days	34 10		AR/0026 - 3/9/17 - Canteen Comp. Salad	2 68		351 86	
	34 10			2 68			
Nov. " "	33		AR 110 3 B.D.T.R.R 5.10.17	3 57			
			656 43 Sm. 13.10.17	3 57			
			D/N AR 2634 888 20.9.17	268			
Dec. P. Pay.	34 10					409 44	225 00
1918	34 10			9 84			
Jan 1/18 26. P.Pay.	28 60					437 44	
Interest on deferred pay to 30/11/17	6 56					444 30	
			AR ✓ DN/1094 28/11. 16.0.914	973			
	34 23	RAM.		973		434 64	Estimate for 1d.
S.J. Noon 28/12 to 9/1 12 Days	876	✓	✓ AR. AR. 1426 Cmth. 28-12-17	48 67		385 97	
BO. 395. 30/12 MRD.				48 67		76	
						73	
						77	
			✓ AR 750. 18/1/18. MRD.	2133.			
			✓ 763. 25/1/18 "	973			
			✓ 1379. 19/12/17. AR.	973			
	876			43 79		350 84	
April Error in addn Jan 17.			Error in addn Jan	03	03	350 87	
July			2	350 84		nil	
				350 87			