2839

Original

ATTESTATION PAPER.

No. ~~2[illegible]~~

Folio 500338

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? Thomas Shepperson
2. In what Town, Township or Parish, and in what Country were you born? London England
3. What is the name of your next-of-kin? Thomas Shepperson
4. What is the address of your next-of-kin? 1 Lancashire Cottage Eastern Rd Whittlesea Eng
5. What is the date of your birth? April 2nd 1897
6. What is your Trade or Calling? Butcher
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Do you now belong to the Active Militia? —
10. Have you ever served in any Military Force? —
    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

T Shepperson (Signature of Man).

W F Deeks (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Thomas Shepperson, 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.

Thomas Shepperson (Signature of Recruit)

Date Sept 16th 1915 W F Deeks (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas Shepperson, 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.

Thomas Shepperson (Signature of Recruit)

Date Sept 16th 191 . W F Deeks (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 Winnipeg this 16th day of September 1915

J A Crow JP (Signature of Justice)

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

G. H. Shaw (Approving Officer)
Capt RCE

1 Lancashire Cottage Eastern Rd Whittlesea, Cambridge

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Description of Thomas Shepperson on Enlistment.

Apparent Age 18 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8½ ins.

Chest measurement: Girth when fully expanded 37 ins.
Range of expansion 4 ins.

Complexion Fair

Eyes Blue

Hair Fair

Religious denominations:
- Church of England yes
- Presbyterian
- Wesleyan
- 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 Sept 16th 1915 W. H. Keele

Place Winnipeg Capt Comm
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.

Thomas Shepperson 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.

J. W. Stanker (Signature of Officer)

Date Sept 16th 1915.

2ND. FIELD TROOP
CANADIAN ENGINEERS
HORSE SHOW BUILDINGS
WINNIPEG

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate..... 1

Inventory of Kit.....

Last Pay Certificate.....

A. F. B. 122 - 1

M. B. Eng. 16-10-16

C. R. 28-2-18

cover cascaded

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39 935.

1 R 149

DISCHARGE [illegible]MENTS

R. O. No.....

H. Q. No.....

Name Shepperson Thomas

Regt. No. 500338 Rank Spr

Corps C. E. T. D.

Permanently Unfit

28/3/20

16363

21-4

21-4

6 5

4

EM

Number 500338 Rank Spr B

Surname SHEPPERSON

Christian Name Thomas V

Units E E Theatre of War France

Date of Service 16/1/16 (2)

Remarks Father J. Shepperson Esq

D 30/6

Latest Address 1 Lancashire Cottages Douglas
Eastern Rd., Whittlesea Man
England

Roll No 49 Gracious St.
Whittlesea.
on Receipt

200m.-2-21 M. "B" Page 11194.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date	Remarks

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

DESP. MAR 26 1925

REGN. NO. 11948

Receipt rec'd 1-5-24

S6S 14-4-17 Phy unfit mD10

649-S-8454

500338 Spr. SHEPPERSON, Thomas 1st Can Engrs. Cn. Egnrs.

Medals & Dec. (Father) T. Shepperson Esq.,
1 Lancashire Cottage,
Eastern Rd.,
Whittlesea, Cambs.,
England.

P. & S. (Father) T. Shepperson Esq.,
As above.

Memorial Cross (Mother) Mrs. Drusilla
Shepperson,
As above.

Sur #845395.

not Elig for 1914-15 Star
" " V. M.
" " B.W.M.

S6278

1050

M/ C44084 FEB 4 1921

Scroll Desp. SEP 17 1921 Regn. No. 252723

JAN 31 1923

Plague Desp. Regn. No. Pr 8 2 0 C

649-S-84514.

NAME Shepperson. Thomas. S.O.S. Dis 14-4-17. 10

RANK & NO. Sapper. 500338 2839.

CORPS 1st. Army Troops Co.

ENLISTMENT, PLACE Winnipeg. DATE Sept. 16. 1915. S.

FORMER CORPS Nil.

COUNTRY OF BIRTH England. London.

NEXT OF KIN Shepperson, Thomas.

ADDRESS OF NEXT OF KIN (Lancashire Cottage England.)
Estrea Road. Whittlesea Cambridge.

DISCHARGE, PLACE DATE

O/S 6-11-15- 257
1

R/C. 31-10-16.

L. L. 85093—M. & D. 5952.

F W. 22.—50m.—4-15.
H. Q. 1772—39—839.

REMARKS:

No. 500388. RANK Pte. NAME Shepperson, T.

T. O. S. Trans. from C. E. 9-11-16. (D. O 155 of 10-11-16.) UNIT M. H. C. C. G. Unit.

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916.	1916.			
Date not	stated.	✓	C. E.	

No. 560338 RANK Spr. NAME Shepperson J.

T. O. S. UNIT Discharge Depot Dublin

M. D. S-

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916		C E.	
Nov.	no date	e		

Name Shepperson, T. Rank Sapper. Reg. No. 500338.

Unit 1st Army Corps Troops Company Engineers.

Next of Kin T. Shepperson. 1. Lancashire Cottage.
Eastnia Road. Whittleseas Cambridge.

Date 1916.	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
25-1-	No 2 Canadian Field Amb.		Infected Heel	A2		
27.2.	Discharged.		—	A.5.		
12-3.	No 5. Can Fld Amb.		Diarrhoea	A.9.		
13-3.	Div. Rest Stat. No 6. C.F.A.		do	A.9.		
17.3.	Discharged to Duty.		do.	A.14		
2 4	No 2. Can. Field Amb		V.D.S	A22		
2.4.	No. 8. Cas. Clearing Station.		V.D.S.	A.19.		
3.4.	No. 5. Ambulance Train.		V.D.S.	A19.		
3.4.	No. 1 Con. Depot.	Boulogne.	Sick ?	A.17.		
4.4	Transferred to No 9 Stat. Stamp	Havre.	Do ?	A.17.		
24 5	No 12. Camp. Harfleur		V.D.S.	A40		
28. 5	Can. Base. Depot. Sarne.		V.D.S.	A.42		Over.
30 5	Rejoined Unit.		V D S	A45		

Date		Movement	Place	Casualty	List No.	Notified N/KO.		W.O. List
1916				Wounded				
July	5	Rept'd from. Base		Shell Fire	A 53		16/9687	
"	9	Norfolk War. Hosp	Norwich	Shrap Wd Ear & Lt. Hand	B 6			
Sept	3	Con. Hosp W'Coli Pk.	Epsom	Do. Do.	B26	5/9/16		
"	7	W. Cliff Can Eye & Ear Hosp	T'stone	Do. Do.	B30	12/9/16		
19	9	Discharged		Do. Do.				

Name SHEPPERSON T. Rank Pte. Regt. No. 500338 Unit G.

Battn. C.E. Camp or O. S. O File M. H. C. C. H. Q. File 649-S-8454

Next of kin Mrs. D. Shepardson, Whittlesea Eastard Peterboro Eng.

Discharged to Class 3 D. of D. Conduct Good

Pension awarded #$192.00 Date of first payment 15-14-17

Address on discharge.

Diagnosis Date boarded

DATE	CLASS	REMARKS	Part 2 Order
9-11-16	2	GRANGE	Nom. Roll 31-1-17
22-1-17	2	GRANGE	#48
5-2-17 15-2-17		A.W.L. 10 days C.B. Ffts. 10 days pay	#50 #96
26-3-17	2	St. Boniface Outpatient	#90
31-3-17	2	M.M.C.H. Outpatient	#117
14-4-17	3	DISCHARGED	#82 #105

L. L. Job 24571 M.H.C. F. 29. 75-7-17.—50M.

DATE	CLASS	REMARKS	Part 2 Order

D.M.S. 1800.

Surname: Shepperson
Christian Name or Names: T.
Reg. No.: 500338
Rank: Spr.
Unit: Can Eng.
Co.
Troop: 1st Can. Army Corps
Batty.
Hospital
Date of Admission

Transferred No 5 Can Fld Amb Hosp. 25.1.16
#5 " " " Hosp. 12-3-16.
to Div Rest #6 " " " Hosp. 13.3.16
#1 Conval Depot Boulogne Hosp. 3-4-16.

Diagnosis
(1) Infeclid Hell
Later Diagnosis (if changed)
(2) Diarrhoea
(3) V.D.S.
Additional Diagnoses: If more than one state present
Shrap. Wd. ear & L. hand.

DISPOSITION
Disch. 27.2.16
Dis. to Duty. 17.3.16.
Can. Base Depot.
" " " To Unit. 28.5.16.
REMARKS
O'C repts Rej Unit. 30.5.16
Dis 19.9.16

Cl. 2.3.16 # a/2	
" 16.3.16	A.5.
" 30.3.16	A9.
" 11.4.16	A14.
" 15.4.16	A17.
" 19.4.16	A19.
" 27.4.16	A22.
" 1.6.16	A40.
" 3.6.16	A42.
" 13.6.16	A45.
" 13.7.16	A
14.7.16.	B6.
" 6.9.16.	B26
12.9.16.	B30.

A.M.D. 2 Dept.
Bch. of D.G.M.S.O.M.F.C. London

J Gr 10 Gr
P.T.O.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Trans. to Havre #9 Stat.	4.4.16
2.	#8 Cas. Clear Stat:	2.4.16
3.	to #5 Amb. Train	3.4.16.
4.	#2 Cas. Fld Amb.	2.4.16.
5.	#12 Camp Harfleur.	24.5.16.
	Norfolk War. Norwich.	9.7.16.
6.	Woodcote Pk. Epsom	3.9.16
	Westcliff Egyptian.	7.9.16
7.		

Lv. 23. 12. 16 B/S 3

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.
28/5/16	Base	Left Base to join Unit	Field	28/5/16	N.R of D = D.C.S. 40 = 31/5/16
24/5/16	No. 9. Staty. H.	Forfeits 50¢ per day while in Hospital from 6/4/16 to 24/5/16	9 Staty Hospital	24/5/16	auth = O.S.B. Paymaster 4-21 of 5/10/15. P 8.2 Orders 19 - of 7/6/16.
25/5/16	Base	Taken on strength	Base Depot	25/5/16	N.R of A = D.C.S. 41 = 8/6/16.
24/5/16	9 Staty	U.D.S. D'Chgd.	12 Camp	24/5/16	W.3034
3/6/16	O.C.	Rejoined Unit	Field	30/5/16	B.213 = D.C.S. 44 = 8/6/16
6/7/16.	O.C.	Wounded by shell fire.	Field.	5.7.16.	K.G. 137/429. D.C. 551. 9.7.16
8/7/16.	A.S. St. David	Wounded Transferred to	Can. Cas. Ass. Centre	8/7/16	W.3083 P.II O.25 of 21/7/16

17/7/16 Taken on strength C.C.A.C. Pt. II D.O. No. 276

20/9/16 ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO CDD Bath PART II D.O. No.

D. C. Lemmer

DISCHARGED. under Para 392, Sec. 16, K.R. & O. 1912. Being no longer physically fit for war service.

G. C. Edridge. ~~Jr. Adj.~~ CCAC

R. M. Harelton Jr. for Commandant. Canadian Casualty Discharge Depot, BATH.

9243J —W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

O Eng 689

CERTIFIED CORRECT

Army Form B. 103.

Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 1st ARMY CORPS TROOPS COY. CAN. ENGRS.

Regimental No. 500338 Rank Sapper Name T. Shepperson

Enlisted (a) 16/9/15 Terms of Service (a) war Service reckons from (a)

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)

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.
30-1-16.	2 Fd. Amb.	Unflected Heel	2 C. Fd. Amb.	25-1-16	A36-30-1-16 Dcs. 2-26-2-16
4/3/16.	O.C. Unit	Rejoined from Hospital	Field	27/2/16.	165/Engrs/9/2.
		Arrived in	France	18/1/16	
17/3/16	O.C.	Rejoined from Hospital	Field	17/3/16	B.213 = No 8 = 17/3/16. Dcs 11 = 24/3/16
18/3/16.	5 C.F.A.	Diarrhoea adm Trfd.	5 C.F.A. DRS. 6 F.A.	12/3/16 13/3/16	A 36 = Dcs. 12 = 26/2/16.
18/3/16	DRS. 6 F.Amb.	do adm Trfd	DRS. 6 F.A. To Duty	13/3/16 17/3/16	A 36 = Dcs. 17 = 7/4/16
5/4/16	9 Stotys	K.Y.D. Slight adm	9 Stotys	5/4/16	W. 3034
3/4/16.	8 C.C.S.	Syphilis adm Trfd	8 C.C. Stn 5 Train	2/4/16 3/4/16	A 36 = Dcs. 21 = 13/4/16
8/4/16	4 C.F. Amb	Chancre adm Trfd	4 C.F. Amb 8 C.C. Stn	2/4/16 2/4/16	A 36 = Dcs. 26 = 22/4/16

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O

CLINICAL CHART.

(To be attached to Case Sheet.)

NORFOLK WAR HOSPITAL, THORPE, NORWICH

Army Form B. 181.

Corps 1st Anglo Indian Div. Military Hospital The Norfolk War Hosp.

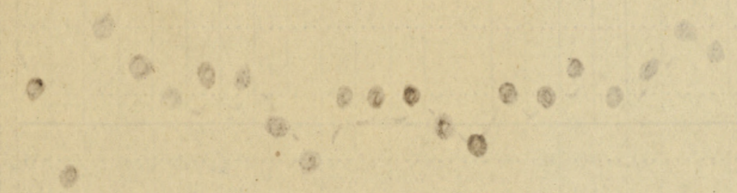
No. 500,338 Rank and Name Thos. Shepperson, Sap. Age 19 Service 10 months.

Disease _____ Date of admission 9th July 1916 Date of discharge _____ Result _____

Dates of Observation	July 1916																																
Days of Disease	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8		
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																																	
106°																																	
105°																																	
104°																																	
103°																																	
102°																																	
101°																																	
100°																																	
99°																																	
98°																																	
97°																																	
Pulse per Minute	92	84	68																														
Respirations per Minute	20	22	20																														
Motions per 24 Hours																																	

(3103.) W 7204-1542. 750,000. 8/15. H. & Sp. Forms/B. 181/3.

Signature _____ In charge of case.



Forms
I. 1237
10

NORFOLK WAR HOSPITAL,
THORPE, NORWICH.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	500338	Spr	Shepperson	Thos

Year	Unit.	Age.	Service.
1916	Canadian Engineers	19	10/12

Station and Date. Disease Shell wd. rt. ear & left hand.

July 10 Received by accidental explosion of a bomb on a transport waggon.

13.7.16 There is a small perforating wound of cornea in L.E. with a traumatic cataract.
Please have L.E. X rayed to prove presence or absence of f.b. in globe.
G Master

20.7.16. Has the Eye been X rayed? May I have the X ray report sent with the patient? G.M.
To have shade over Eye.

Aug 11 X Ray - F.B. in skull over left ear & fairly deep. Finger doing well

~ 31 Convalescent

2-SEP 1916 Sent to Mil Hospital Epsom
Francis Hesage
[illegible]

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

(J 3521.) Wt. W 5600 -2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.

RELIGION:
X Church of England
Roman Catholic
Presbyterian
Congregationalist
Wesleyan
Baptist C of E

NORFOLK WAR HOSPITAL

Ward 5 B.
Bed 25

Admitted into Hospital: 9/7 1916

Visiting Medical Officer
Resident Medical Officer Dr Thomas

Discharged from Hospital: 2/9 1916

REGT. NO.	RANK	NAME (SURNAME FIRST)	CORPS	AGE	A & D NO.	RESULT OF TREATMENT
300338	Spr	Shepperson Thos	Canadian E.	19		

Disease or Injury: Shell wd. rt. ear & left hand.

Operation:

Complications:

Skiagram Report: No.

Pathological Exam. Report: No.

Abstract: Wounded Inf 5 Shrapnell Rt Ear & left hand

DATE	DIET	EXTRAS	TREATMENT "BED" "UP, BED DOWN" "UP" or "OUT"
July 10	ord	pnd	Will O.S. please see. S.S.
		13.7.16	Gutt Atrop Sulph 1% t.d. L.E.
			✓. Pad & bandage.
			To attend next week
			Gth
		20.7.16	Rep Gutt. D.
		27.7.16.	Rep Gutt. O.m. L.E. (14)
Aug 19	Do	Do	

Army Form W. 3172.
(In pads of 50.)

NORFOLK WAR HOSPITAL, THORPE, NORWICH

N. W. Hospital.

Ward V^b No. of Bed _____ Date 30/7/16

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
500 338	Sgt. Shepperson	Canadian E	L. Orbit.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

P.S.W.

Signature of M.O. [illegible]

Date 30/7/16.

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 2073

There is an F.B. in this man's skull. In side view it appears over L ear, but must be fairly deep

Signature of Radiographer _____

Date _____

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2046	500338	Spr	Shepperson	Thos

Year	Unit.	Age.	Service.
1916	CCAC CE.	19	12/12 7/12

Station and Date.

Sep 19

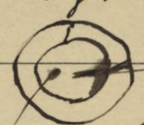
WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.

Disease GSW R Eye

Morning of July 5. was struck c̄ shrapnel in head. just behind R. Ear.
Does not remember being struck in Eyes
~~[illegible]~~ ~~Was~~ not ~~[illegible]~~ able to see well for three days after which R. Eye improved but L. Eye. did not, ~~[illegible]~~ L. Eye was red & inflammed. for two weeks.
Has been treated at Norfolk War Hospital where xray was taken of L. Eye. and nothing found.
Sight of L. Eye now very misty.
R. H. 6/12. L V c Fingers at 9 inches.
gutt. Atrop (?). 3 D L. eft eyes

L. Eye.

X. Ray.



opacity in lens capsule c̄ iris adherent
corneal scar

Sept. 15 Magnet negative
To C C A C. Fit
To have Board papers made out. W. G. Fraser

CCAC
16.9.16

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.

Original not available.

Army Form B. 178

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178[A] to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Shepperson *Christian Name* I

TABLE I.—General Table.

Birthplace { Parish..... / County .....

Examined { on.....day of.....191 , / at .....

Declared Age .....19.....years.....days.

Trade or Occupation.....

Height.....feet.....inches

Weight .....lbs.

Chest Measurement { Girth when fully Expanded .....inches / Range of Expansion .....inches

Physical Development .....

Vaccination Marks { Arm..... RIGHT | LEFT / Number ..... | .....

When Vaccinated .....

Vision { R.E.—V= ..... / L.E.—V= .....

(*a*) Marks indicating congenital peculiarities or previous disease—

.....

.....

(*b*) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at..... / on..... day of .....191...

	Corps	Regtl. No.
Joined on enlistment	.....	500338
Transferred to	.....	.....
	.....	.....
	.....	.....

Became non-effective by .....

.....

on..... day of .....191...

(*Signature*).....

(*Rank*).....

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Woodcote Park	2	9	16	7	9	16	G.S.W. Head Lt Hand & Eye	31	Transferred to Westcliffe for treatment	[illegible]
	7	9	16	16	9	16	G.S.W. Rt. Eye	10	Visn. OD 6/12. O.S. Fingers at 9" Cell.	[illegible]

WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, FOLKESTONE.

REGISTRAR.
WEST CLIFF CANADIAN EYE AND EAR HOSPITAL.

DISCHARGED.
under
Para 392, Sec. 16, K. R. & O. 1912.
Being no longer physically fit for war service.

R. M. Harel Tong
for Commandant. Lieut
Canadian Casualty
Discharge Depôt,
BATH.

Ward 5 B (P) 2/9/16 ORIGINAL Ramsgate 7/9/16 2839

MEDICAL HISTORY SHEET.

Spr

Surname Sheppeson Christian Name Thomas

Examined on 16th day of September 1915 at Winnipeg

Birthplace City or Town London County England

Apparent age 18 4/12

Trade or occupation Butcher

Height 5 Feet 8½ Inches.

Weight 155 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number 2

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by [signature] W W Ruth

Rank Temporary M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		15 JUL 1916 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 16 day of September 1915 at Winnipeg

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Can. Engineers	~~2839~~		16.9.15
Transferred to	C.E.T.D.	500338		

APPROVED
CAPTAIN C.A.M.C. FOR D. OF R. & O. FOR BRIGADIER GENERAL COMMANDING CANADIAN TRAINING DIVISION.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
CCAC	19 SEP 1916	Defective Sight Fracture of Skull (?)	Discharge Whereon [illegible]
19 SEP 1916	Approved D. F. McIntyre CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE.		

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.
100M.—5-15.
H. Q. 1772-39-439.

Surname Shepperson Christian Name Thomas

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	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.
Can Base Depot	Havre.	28	5	16	30	5	16	V.D.D.	2	Rej. unit.	A42 A45
NORFOLK WAR HOSPITAL, THORPE, NORWICH.		9	7	16	1	9	16	GSW. Rh. Ear Left hand	54	Refuses operative treatment	Chesep Thetta Lane
(CANADIAN DIVISION), CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM		2	9	16	7	9	16	do.	6	Transferred to ~~Ramsgate~~ Westcliffe for treatment.	J.W. Rogers Capt. C.A.M.C. REGISTRAR, (CANADIAN DIVISION), CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM.
WEST CLIFF CANADIAN EYE AND EAR HOSPITAL, WESTCLIFF. 2046		7	9	16	16	9	16	GSW R Eye.	10	Visini. OD 6/12. O.S. Fingers at 9" C.C.A.C.	G. Marlow Capt. REGISTRAR WEST CLIFF CANADIAN EYE AND EAR HOSPITAL

DISCHARGED.
under
Para 392, Sec. 16, K.R. & O. 1912.

Being no longer physically fit for war service.

R. M. Hazelton Lieut
for Commandant.
Canadian Casualty
Discharge Depot,
BATH.

P-59

Rank ~~Pte.~~ Spr Name SHEPPERSON, Thomas. Reg'l No. 500338.

Unit ~~1st A.T. Co.C.E.~~ CCAC If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg, Sept 16th 1915. Place of Birth London, Eng.

Name and Address, Next-of-Kin Thomas Shepperson,
Castle
~~Eastern~~ Rd. Withernsea England. Relationship

Entered on N.E. Card Index K.H.M.

Checked by

NOV 21 1916 — MILITARY SERVICES BRANCH — CANADIAN CONTINGENTS

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place 4-10-16 Canada. Reason Character

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	Balance	Remarks, Casualties, etc
1915																	
Nov 17	Nov 30	14.	1.00	14.	14.	10¢	1.40		15 40			19 47.			19 47	4 07	D' Bal ce
Dec 1	Dec 31	31.	1.00	31.	31.	.10	3 10		34 10			43 81		4 07	47 88	13 78	" "
Jan 1	16	16		16 –	16		1 60		17 60			7 30		13 78	21 08	3 48	To 1st Ass Pay II 14
17	Feb 29	44		44.	44		4 40		48 40			7 83		3 48	11 31	37 09	
Mar 1	31	31		31.	31		3 10	37 09	71 19			6 10			6 10	65 09	
				136.			13 60		149 60			84 51			84 51		

Checked W.S. Allen

BALANCE TRANSFERRED TO NEW LEDGER.

CANADIAN
ASSIGNED PAY AUDITED
Jul
AUDIT CLERK
DATE 19 16 19

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

M. F. W. 41.
10m.—4-16.
1772-39-889.

Name Shepperson Thos. Spr.

Regimental No. 500338

~~Name and~~ address ~~of next of kin~~ Douglas Man.

Unit 1st. A. T. Col. E.

Date of enlistment

Con. Home rec. 3/11/16.

Place of " Sd. nil

Married (yes or no) no

Date and place discharged

Amount of pay assigned monthly $ nil

Reason for discharge 649-S-8454

To whom payable ✓

Character on discharge

S.S. Lake Manitoba 31/10/16 Class II

L. L. Job 502 M. & D. 6578.

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.
	7 10/16							21733								E. L.P.C.
8 10/16	30 11/16	54	1-	54-	54	.10	540		27673					243		A.R 4082
														4867		A.R. 4464
														973		 5229
														973		Pd. on Board
														100 -		D.D. Que Pd
														Bal. Cr. on Trans	10617	27673

Pd. by Fm. "G" Unit M.H.C.C. To apl. 14/17

Discharged Class III

Int on DP to 31 10/16 C P Mlist No 11 256

From 1 12/16 10/M.D.

PWP 5-9-17 [illegible]

E.A.P. nil

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.

16629 - T - 1.

Name Shepperson, Thomas
Surname Christian Name

Regimental Number 500338 Rank Spr.

Unit C.E.T.D. 1st Army Troops Co.

Original Unit

District where paid M.D.10

Date of Discharge 14-4-17

P. D. P. Filing Number 14 - 40 -10

Address (in full) 1002 -12th St.
Brandon, Man.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 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	
100	10	532	11-10-17	33	00	514	11-11-17	33	00	508	11-12-17	34	10			100	10

M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks:

File No.....

WAR SERVICE GRATUITY.

Register No.....

1

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Clerk .....

Dependent.....

Address.....

.....

.....

.....

.....

Pay Dependent $.....

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.....

Net.....

Dec'n No..... W. S. G. File No.....
Award.....days at $..... per day $.....
S. A.....months at $..... per mo. $.....
Less P. D. P. Credited
Less further debit balance
Net due paid as below

TO SOLDIER — TO DEPENDENT

O	Ag. No	Ch No	Amount	Ch No	Amount
1					
2					
3					
4					
5					
6					
		Total			

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

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

GEN'L AUDITOR
Posting checked by
.....
Date.....

MARRIED OR SINGLE S.

PLACE OF BIRTH London Eng.

NAME AND ADDRESS OF NEXT OF KIN Thomas Shepperson,
Eastne Road, Withernsea, England.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

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
	31-10-16		1
	137.50.		2.56

REG'L NO. 500338 RANK Spr. NAME Shepperson. Thomas

IF IN PERMT. CORPS WHAT UNIT — UNIT 1st A.T.C. C.C. TRANSFERRED TO C.C.A.C. DATE 17/7/16 AUTHORITY Cas list B6/1476

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Winnipeg — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 16th Sept. 1915. — TRANSFERRED TO — DATE — AUTHORITY

RECORD OFFICE & ADMINISTRATION NOV 21 1916 CANADIAN CONTINGENTS

ASSIGNED PAY MONTHLY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

Entered on N.E. Card Index 7.11.16.

ASSIGNED PAY MONTHLY $ — DATE EFFECTIVE

Checked by .....

PAYABLE TO — RELATIONSHIP

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

DISCHARGE DATE AND PLACE 7/11/16 Canada, — REASON AND AUTHORITY Cable L2542 3/11/16

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 8/10/16.

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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
Mar															149 60														84 51	65 09		45		
Apr 1/30	30	1.-	30.		30.	10	3.								33.														- -	98 09				$10.- Ca Blee from Canada 6/11/15
May 1/31	31		31		31		3 10							11. 10.	55 10			CBD 3347	29/5/16				4 26						4 26	148 93		5-		$11.- P.A. 7/11/15-14/11/15 not credited
June 1/30	30		30		30		3.								33.		178	15/6/16				2 55				29 40		31 95	149 98		7 50		$29.40 O.C. 6/4/16 - 24/9/16 = 49 days at 60¢
Checked W. L. Allen July 1/9	9		9		9		90								9 90														- -	159 88				Trans to C.C.A.C Cas list B6/1476
" 10-31	22		22		22		2 20								280 60 24 20														120 72	184 08				
Aug 1-31	31		31		31		3 10								34 10								Rem 22/8						14 60	203 58				
Sept 1-15	15		15		15		1 50								16 50								Rem 12/9						24 33	195 75				* Tramway Book.
Checked Posting Clerk 16/9/16	22	1	22		22	10	2 20								24 20			* 1957 1/7 fwd				2 62							2 62	217 33				Disc'ge to Canada. C.E. 25/4 23/5/16
Checked Pay Clerk																Batt 4463 30/6/16		Batt 4082 7/9/16		Batt 5229 11/10/16				48 67 2 44 9 73						48 67 2 44 9 73	168 66 166 22 156 49				Pay Book Verified Trans N.E 8/10/16
																														156 49				Cr: Bal: 156 49 Transf to "Canada Disc'ge a/c"
N.Z. Jan 1917																												156 49	156 49				
Sept 1917														2 56	2 56													2 56	2 56				$2.56 Int on Def Pay Ltr 11-11

Balance transferred to N. Z. Branch

Transf to "Canada Disc'ge a/c"

CANADIAN ASSIGNED PAY AUDITED O.K. AUDIT CLERK DATE

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY -	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			

Rank ~~Pte.~~ Spr. Name SHEPPERSON, Thomas. Reg'l No. 500338. R-122.

Unit 1st A.T. Co.C.E. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg, Sept 16th 1915. Place of Birth London, Eng.

Name and Address, Next-of-Kin Thomas Shepperson,

1 Lancashire Cottage, ~~Eastern~~ Eastrea Rd, ~~Withernsea~~ Whittlesea, Cambridge England. Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

M X
28-1-21
M A S

CCAC
N/E. R.B. No. 1441
File R.L.
Category M U Can
R 133 B 11

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
17-11-15	O/C C.E. T.D.	Taken on Strength	S'cliffe	17/11/15	Pt II Do. 7
17-1-16	"	Trans ~~to 1st A.C. Troops~~ Co Engineers	France	16/1/16	" " " 14. Page 2.
1-3-16	1st A.C.T. Coy Engrs	Adm to No 2 Can Fld Amb	"	25-1-16	C.L. A.2. Infected heel.
16-3-16	" "	Discharged from above	"	27-2-16	C.L. A.5 " "
30-3-16	" "	Adm to No 5 Can Field Amb.		12-3-16	C.L. A9 Diarrhoea Page 3.
"	"	Trans to Div Rest Station No 6 Can Fld Amb.		13-3-16	" " "
11-4-16	"	Discharged to duty	France	17-3-16	" A14 "
27-4-16	"	Adm to No 2. Can Field Amb.	—	2-4-16	" A.22. V.D.S.
15-4-16	"	Adm No I Convalescent Depot	Boulogne	3-4-16	C.L. A17 Sick Page 4
"	"	Trans to — —	Havre	4-4-16	C.L. A17 "
19-4-16	"	" to No 8 Cas Clearing Station		2-4-16	C.L. A19 V.D.S.

P.T.O.

500338 Spr Shepperson. 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
	1st A.T. Co.				
19-4-16	C.C.	Trans to No 5 Ambulance Train		3-4-16	C.L.A 19 V.D.S.
3.6.16.	1st a.T. Co C.E.	Left to Reporn Unit	Can. Base Depot Havre	26-5-16.	C.L.A. 42
1-6-16	1st a.T.C.C.E.	Discharged to No 12 Camp	Harfleur	29-5-16	C.L.A 40
7-6-16	as 1st A.T.Co C.E	Forfeit 50¢ per day while in Hospital 6-4-16 to 24-5-16	from In the Field	6-4-16 to 24-5-16	Part II No 19 1st A.T.B.C.E 7-6-16
13-6-16	" " "	Reported Unit	"	30-5-16	C.L.A. 45.
13.7.16	" "	Wounded. Shell Fire	Reported from Base	5.7.16	C.L.A 53
14.7.16	" "	Adm. Norfold War Hospital	Norwich	9.7.16	C.L.B 6 Wound Ear & Lft Hand
17.7.16	C.C.A.C	T.O.S. C.C.A.C		9.7.16	Part II 276.
21.7.16	1 A.S.C.E.	Invald & Trans to C.C.A.C.	Field	9.7.16	P II O 85.
6.9.16.	1st a J C C E.	Trans to Conv Hosp Woodcote Park	Epsom.	3.9.16.	C.L.B 26. Shot Wd. Ear & Lft Hand
12.9.16.	1st a J Coy C C E.	" " West Cliffe Can Eye & Ear Hosp.	Ft, stone	7.9.16	C.L.B 30 " " Ear & Lft HAND
23-12-16	1st a J C C E.	Discharged Can Eye & Ear Hospital	Westcliffe Ft Stone.	19-9-16	C.L.B 53 " " " " " "
20.9.16.	C C A C.	Reported as Ofsea Cas	Folkestone	19.9.16	Pt II 0407.
22.9.16.	C C A C.	on Conv to C.D.D for Discharge	Bath.	21.9.16	Pt II 0 413

CHECKED. 5th Dec, 1916.

18.10.16.	C.D.D.	S.O.S. proceeding to Canada M.U.	Shoreham	14.10.16	Pt. II. O. 211.
	Dis. Depot	To Convol. ~~Home~~	M.D. No. 10 Winnipeg	31.10.16	Nom. Roll 79.
21-3-17.	C.C.A.C.	S.O.S. proceeding to Canada M.U.	Hastings	14-10-16	P II O 127

NORFOLK WAR HOSPITAL

DISCHARGE NOTICE

2 38

To the Sister of Ward 5b

Arrangements have been made for the discharge of Shepperson

Rank Spr Regt. San Eng

To Epsom

on Date Sept 2 a.m.

For Officer in Charge.

CLINICAL CHART.

(To be attached to Case Sheet)

NORFOLK WAR HOSPITAL
THORPE, NORWICH.

Army Form B. 181.

Corps 10. Dl. Fus — Military Hospital N. W. H.

No. 8th 804. — Rank and Name L. Sgt Reynolds Frank — Age 41 — Service 1 - 11 -

Disease _____ — Date of admission July 27th 1916. — Date of discharge 2/9/16 — Result _____

Dates of Observation	27	28	29	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26
Days of Disease																															

Temperature, Fahrenheit — Time A.M.P.M. (each day)

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

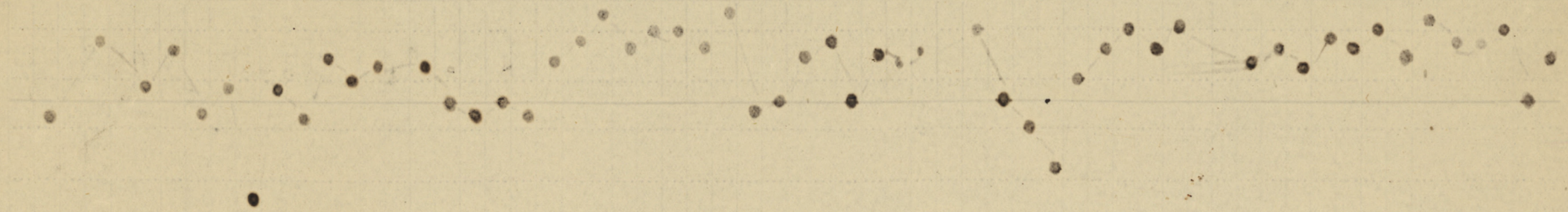
Pulse per Minute

Respirations per Minute

Motions per 24 Hours

(3103.) W 7204-1542. 750,000. 8/15. H. & Sp. Forms/B. 181/3.

Signature _____ In charge of case.



0038.

CERTIFICATE re DISCHARGE DOCUMENTS.

Reg'tl. No. 500338

(When forwarded for confirmation the documents named on page 4 should be attached hereto.)

No. 500338 Army Rank Sapper

Name Thompson Thomas
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C.A.C.

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge April 14th 1917

Place of discharge Winnipeg Man

1. *Description at the time of discharge.*

Age 19 years 5 months
Height 5 feet 8 inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion Fair
Eyes Blue
Hair Brown
Trade Butcher
Intended place of residence (To be given as fully as practicable) Douglas P.O. Manitoba

Descriptive marks.
2 Vaccine marks L. arm
Scar Head

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Para. 392, Sec. 16, K. R. & O. 1912.
Being no longer physically fit for war service.
Commandant,
Canadian Discharge Depot, BATH.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— Good

Character awarded in accordance with King's Regulations :—

CANADIAN DISCHARGE DEPÔT,
Lieut.-Col.,
A.P.M.
Officer Commanding,

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* And that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

A1933 Wt. W. 13141/283 70,000 3/15 D. D. & L. Sch. 39 Forms B. 268 39

* Strike out if not applicable.

[OVER.

1

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations

Service in Flanders

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

CANADIAN DISCHARGE DEPOT, BATH SEP 25 1916 FILE

(Place) _____

(Date) _____

CANADIAN DISCHARGE DEPÔT,

Cornelius Major

Commanding ..... Battn. for Lieut.-Col., A. D. of R. & O., Officer Commanding, Regiment.

8. *Certificate to be signed by the soldier on discharge.*

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) Winnipeg Man T Stefferson (Signature of Soldier.)

(Date) March 29th 1917. C. J. Weale (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 at 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 towards engagement to _____ (the date to which the record of service is completed) 1 years 179 days.

Further service " " _____ (the date of confirmation of discharge) ... ... — " — "

Total ... 1 " 179 "

14-4-17.

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place) Winnipeg Man

(Date) March 29th 1917

Signature _____

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

- nil -

T Shepherson

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge (Army Form B. 268)
2. Proceedings on transfer to reserve (if any) (Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name (if any)
6. Re-engagement paper (if any) (Army Form B. 136)
7. Authority for continuance, or extension, of service (if any) (Army Form B. 221)
8. Court of Inquiry on an injury (if any) (Army Form A. 2)
9. Regimental conduct sheet (Army Form B. 120)
10. Company conduct sheet (Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet (Army Form B. 178)
13. Medical report on invalid (if any) (Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge)
18. Descriptive return (Army Form D. 400), where required

See section 11 on second page

19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority)
2. Medical history sheet (if any) (Army Form B. 178)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

YELLOW RECORD FORM

NORFOLK WAR HOSPITAL

NORFOLK WAR HOSPITAL 12 JUL 1916 REGISTRAR'S OFFICE

6303/16

A. & D. No. ~~20444/16~~ Ward 5b.

Regimental No. 500338 Rank Spr. Name Shipperson Thos.
(Surname first)

Regiment Canadian Engineers. Squadron, Troop, Battery, or Company 1/ Army Troops

Date of Admission 9.7.16 Date of ~~Discharge~~ or Transfer 2-SEP1916

Age 19. Service 11/12. Service with the Field Force 6m. Religion C of E.

*Home Address Lancashire Cottages
Eastrea Rd
Whittlesea Cambs.

Admitted or Transferred from B.E. Force

*Rail Station _____ on _____ Line

	No.	Regional Injury (To be filled in on admission.)	No.	Extent of Injury (To be filled in before discharge.)
†Wounds Received in Action	R			
†Disease or Injury	1197	Bronchitis. Left Lung.		

10 JUL 1916

†Disease or Diagnosis changed to _____ Date _____

Signature of Resident Medical Officer _____

REMARKS :—

M.H.S. Rec'd. ✓

Refuses Operative treatment

‡1. To be Discharged : Fit for Duty *(a)*
Light Duty *(b), (c) or (d)*

Condition on Discharge

‡2. To be Transferred to : Military Convalescent Hospital : _____
Auxiliary Hospital "A."
Auxiliary Hospital "B."
(No Dressings or Massage).
Special Hospital : _____
Canadian Military Convalescent Hospital.
(No Dressings or Special Treatment).

NORFOLK WAR HOSPITAL 2 SEP 1916 REGT

‡3. To be recommended for Discharge from the Army.

Date 2/9/16 Signature of Senior Resident Surgeon, or Physician C/L

This Form is to be filled in by the Registrar, except where marked otherwise.
*To be filled in by the Ward Sister.
†To be filled in by the Resident Medical Officer.
‡To be filled in by the Senior Resident Surgeon, or Physician.

X. Ray Department,
Moore Barracks, Canadian
Hospital, Record No.....
12/9/16.

Record No. 1727

Capt. W.G.Fraser,
West Cliff Canadian Eye & Ear Hospital.

#500338 Pte. Shepperson, T. C.E.

No evidence foreign body,

orbit, left.

W H Bryan

Capt. C.A.M.C.

O. i/c X. Ray Department,
Moore Barracks, Canadian
Hospital.

Capt. C.A.M.C.

O. i/c X. Ray Department.

Moore Barracks, Canadian

Hospital.

See card 2.

REGT'L No 500338

NAME Shepperson, Thomas

H. Q. FILE No. 649-

RANK AND CORPS Spr. 1st. Army Corps Troop Comp. Engs.

FOLLOWS No. 8438

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M9687	12-7-16	Reported Wounded July 5th 1916
J277		Sailed for Canada Oct 14th 1916
		G.S.W. left eye.

L. L. Job 90581—M. & D. 6314.

M F. W. 42—50M—1-16.
H. Q. 17-2-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A. 2	No. 2 Can. Fld Ambl.	25-1-16	Infected Heel.
A 5	No 2. Can Fld. Ambl.	27-2-16	Discharged, Infected Heal.
A 9	No. 5 " " "	12.3.16	Diarrhoea.
A 9	Trans. to D. R. Stat: No. 6 C. F. A.	13-3-16	"
A. 14	D. R. Stat: No. 6 C. F. A	14-3-16	Diarrhoea. Disch to Duty
A. 17	No. 1 Convlt: Depot, Boulogne.	3-4-16	Sick.
	ey. Another Hosp.		
"	Trans. to Havre.	4-4-16	Sick.
A. 19	No. 8 Cas. Clr. Stat:	2-4-16	V. D. S.
"	Trans. to No. 5 Ambl. Train.	3-4-16	V. D. S.
A 22	No. 2 C. F. Ambl.	2-4-16	V. D. S.
A 40	No 9 Sta. Havre	[redacted]	"
	Disch: 12 Camp Hardelot	24-5-16	

See Card 1.

H. Q. FILE No. 649-

NAME Shepperson, T. REGT'L. No. 500338.

RANK AND CORPS Spr. 1st. Army Corps Troop Co. Eng.

CABLE		NATURE OF CASUALTY
NO.	DATE	

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 42.	Can. Base Dep. Havre	28-5-16	V. D. S. Left to re-join Unit.
W 45	O. C. Reports	30-5-16	Rejoined unit V.D.S.
A 53	Wounded	5-7-16	Shell Fire
B 6	Norfolk War Norwich	9-7-16	Shrp. Wd Ear & Lf Hand
B 26	to Conv. Wds C. Pk. Epsom	3-9-16	" " " "
B 30	West Cliff Can. eye & ear Folkestone	7-9-16	Shrp Wd Ear & Lf Hand
B 53	" Disch.	19-9-16	Shrp. to out-patient
90	M.H.C.C. Winnipeg	26-3-17	Trans St. Bon. Hosp.
82	M.H.C.C. Winnipeg	14-4-17	Rec. Dep. "C" Disch'd 3/good

M.D. 10. #21