ORIGINAL

ATTESTATION PAPER.

ORIGINAL

No. 445257

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1.	What is your name?	Arthur Wesley Totten
2.	In what Town, Township or Parish, and in what Country were you born?	St. John, N.B.
3.	What is the name of your next-of-kin?	Mrs. Susan Totten, (Mother)
4.	What is the address of your next-of-kin?	56 Dorchester, St., St. John, NB
5.	What is the date of your birth?	6th October, 1893.
6.	What is your Trade or Calling?	Laborer.
7.	Are you married?	No.
8.	Are you willing to be vaccinated or re-vaccinated?	Yes.
9.	Do you now belong to the Active Militia?	No.
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	No.
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.

arthur Totten (Signature of Man).

A. J. Brooks (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur Wesley Totten., 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.

arthur Totten (Signature of Recruit)

Date: 16th JULY 1915. A. J. Brooks (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Wesley Totten., 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.

arthur Totten (Signature of Recruit)

Date 16th JULY 1915. A. J. Brooks (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 Sussex this 16th day of July 1915.

A. J. Brooks (Signature of Justice)

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

A. J. Brooks (Approving Officer)

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

Description of Arthur Wesley Totten. on Enlistment.

Apparent Age 19 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height	5 ft. 3-1/2 ins.
Chest measurement: Girth when fully expanded	36 ins.
Chest measurement: Range of expansion	33 ins.
Complexion	Medium.
Eyes	Blue.
Hair	Brown.
Religious denominations: Church of England	Yes.
Presbyterian	
Wesleyan	
Baptist or Congregationalist	
Other Protestants (Denomination to be stated.)	
Roman Catholic	
Jewish	

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 16th JULY 1915 E. Allore

Place Camp Sussex, N. B. Major A.M.C.

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.

Arthur Wesley Totten. 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. R. Kirkpatrick Lt. Col. (Signature of Officer)
O. C. 55th. Bn C. E. F.

Date OCT 2 01915 191 .

Proceedings ... reported Missing on Active Se...

Attestation Papers ... 2 3

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 ... 2

Corps History Sheet ...

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

Parchment Certificate ...

Medical Report for Invalids ... 3

Medical History Sheet ... 3 & 5

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 ... 1

R & O 6064 — 3
A F B 122 — 2
Form 5a — 1
M. F. W. 39a — 1
M. H. C. 51 — 1
DMS 7394 — 1
Q. F. W. 3285 — 1

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

20

M

S

Corps ...

Name Totten Arthur Wesley

Regt, No 445257 Rank, Pte

Corps 20th Bn

Med unfit

Index Card ...
Casualty Card 1
Non-Effective Card ...
Part II Order Card 1
Change of Address Card ...
Honour & Award Card ...

PUBLIC ARCHIVES RECORDS CENTRE

PUBLIC ARCHIVES RECORDS CENTRE

H

15117

Cliam

9-10-19

3

20 — 11
20 — 11
1 12

483470

I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
445257	Totten	ARthur wesley

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 9742

19 Ham

Number 445257 Rank ~~Capt.~~ Pte

Surname TOTTEN

Christian Name Arthur Wesley

Units 20th Bn Can Inf Theatre of War France

Date of Service 28-6-16

Remarks ~~26 Brook St~~

Latest Address ~~156 City Road~~
653 main ~~St~~, St John
N.B.

Roll No. B Cage 11609

200m.-2-21.M.

DESP MAR 9 1922
REGN. NO 17913

NAME Totten. Arthur Wesley S.O.S. Cat. E. I
2-8-18 D.O. 108

RANK & No. Pte. 445257

CORPS 55th 1 Batt. 3-8-18

ENLISTMENT, PLACE Sussex, N.B. DATE July 16, 1915 S.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada. St. John, N.B.

NEXT OF KIN Totten. Susan Mrs. (Mother)

ADDRESS OF NEXT OF KIN 56 Dorchester St.,
St. John, N.B.

DISCHARGE, PLACE DATE

O/S. 30/10/15. 25-3/19.

R.C. 21-7-17: I

Sailed from Montreal Per S.S. Corsican"
30-10-15.

L. L. 85093—M. & D. 5952.

M. F. W. 22.—50m.—9-15.
H. Q. 1772—39—839.

REMARKS:

NAME Totten, Arthur Wesley.

H. Q. FILE

REGT'L. NO. 4 + 5257.

RANK AND CORPS Pte. 20th Batt 39th Bn.

CABLE

NO.	DATE	NATURE OF CASUALTY
		C form 55th Bn
M 10925.	8-8-16	Adm to No 13 Gen Hosp Boulogne July 30th 1916 Wd. Left Arm

BA

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
146.	Moore Barr, Shorn.	27-4-16.	Traumatic Orchitis
149.	" " "	6-5-16	" " Disc.
164	" " "	28-5-16.	" "
166.	" " "	2-6-16	" " Disc.
A288	No. 13 Gen. Boulogne	30-7-16.	GSW L. Arm. (Good)
B125.	Edmonton Mil Edmonton	6-8-16	G.S.W. L. arm.
	London N.		
B162	2/10 Mil. Conv. W'dco Sch. P.K. Epsom.	19-9-16.	G.S.W. L. arm.
B211	Milit Shoreof	26-11-16	VDG & GSW L Arm
B231	" "	15-12-16	" " " " " " Duck
B. 243	Granville Can. Spec. Ramsgate	6-1-17	GSW. Lt. Arm.
B. 244.	Discharged	9-1-17	GSW Lt arm
184	M.H.C.C. Halifax	24-7-17.	Posted as out-P. Rks.

Copied for VB

NAME Totten. Arthur. Wesley.

REGT'L No. 445257

H. Q. FILE No. 649.

RANK AND CORPS Pte 20th Bn. - form 55th Bn.

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 20197—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-383.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1	M.H.C.C. St. John	31-8-17	Trans. K. unit M.H.C.C.
1	" " " " " "	31-8-17	Taken on List Out Pat
227	M.H.C.C. Halifax	31-8-17	To G.B. Unit M.H.C.C. to K Unit.
227	M.H.C.C. Halifax	31-8-17	Out to S.O.L. Parks.

R. 149.

Wesley.

Name Totten.Arthur *Rank* Pte. *Reg. No*445257

Unit 20th.Battalion.

Next of Kin Canada.

Copied for VB

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
30-7-16.	No.13 Gen.Hosp.	Boulogne.	GSW.L.Arm.	A288	.M10925.9-8	
6-8-16.	Mil.H.Edmonton.	London.N.	do.	B125		
19-9-16.	Mil.C.H.Wd'cote Pk.	Epsom.	do.	B162.		
26-11.	Mil.Hosp.	Shorncliffe.	V.D.G.&(GSW. L.Arm)	B211		
15-12	Discharged		do	B231		
6-1-17	Gran.Can.Spec.Hosp.	Ramsgate	do	B243	(CCAC)	
9-1-17	Discharged		do.	B244		

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

D.M.S. 1313.

CANADIAN CONVALESCENT HOSPITAL AT Epsom

A. & D. CARD.

Regt. No. 445257 A. & D. No.

Rank Pte Corps 20th

Name Totten Wm. Age 17 Religion C of E.

Service at Home 13/12

" " Front 3/12.

Diagnosis G.S.W. Lt Arm.

Admitted 18-9-16 Edmonton Mil. Hosp.

Discharged

Place in Hospital

M. H. Rec'd (See Document Card)

Transferred 24/11/16 Mil Hosp Shorncliffe

Results

P.T.O.

19/9/16. Lt arm painful - Wrist stiff & painful L.D.

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26/9/16. Continue. 3/10/16 Continue

10/10/16. Arm on Splint dressing & L.D.

16/10/16. Arm in Splint & fingers stiff Splint taken off L.D & Massage.

23/10/16. Fingers responding to massage & electricity. Wrist painful. Elbow in spasm. Splint replaced leaving fingers free. L.D.

Ramsgate.

J. W. Brien capt

REMARKS:

R. 149.

Name Totten A. W. Rank Pte. Reg. No. 445257

Unit ~~39th~~ Batt. 6th Res

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. L
27-4-16	Moore Barracks.	S. Cliffe	Traum. Orchitis	146		
6-5-16	Discharged	"	"	149		
28-5-16	Moore Barracks.	S. Cliffe	Traum. Orchitis	164		
2-6-16	Discharged "	"	"	166		

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

LEDGER NO. ..... SERIAL NO. .....

REG. NUMBER 44527 NAME Dollow A W

RANK Expte CORPS I S C

AGE ..... SERVICE .....

NAME OF HOSPITAL N.B Military PLACE Fredericton

DATE OF ADMISSION 7/1/19?

DISEASE Frac Ulna

TRANSFERRED TO OTHER HOSPITALS .....

.....

OPERATION .....

DISCHARGED TO 11-2-19 IN CATEGORY .....

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

P. T. O.

REMARKS:

Local

*Name TOTTEN Arthur W. Rank Pte. Regtl. No. 445257

Original unit 55th Present unit 25th M. or S. Age 18 Religion C. of E. Fyle Depot T-6 Ref. H.Q.

Port, ship, and date of arrival Halifax, Olympia 21/7/17

Next of kin Mother Mrs. Susan Totten 56 Dorchester St., St. John, N. B.

Address on leave as above

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Student Date and place of enlistment July, 1915 St. John

Diagnosis G.S.W. Right forearm Date of Medical Boards 21/7/17

Date	Remarks	Pt. 2 Order No.
7.8.5		
18-4-18	Posted to Details company	9-1
30-7-18	Posted to Casualty Company	96 105
2-8-18	To Discharge Section C.O. 107	(2-8-18)
2-8-18	Discharged from H.M.S. Niobe D.S.O. 106. (2-8-18	

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192.
60M-3-18. (D.P.) 353.
1772-39-1243.

D.M.S. 1800.

Surname	Christian Name or Names	Reg. No.
Totten	A. W.	445257.

Rank	Unit	Co.	Troop	Batty.
Pte	39th Batt.	20 Bn		

Hospital

Date of Admission

Transferred Moore Barracks. Hosp. 27-4-16

" " " " Hosp. 28.5.16

13 Gen Boulogne Hosp. 30.7.16

Edmonton Mil London Hosp. 6.8.16

Diagnosis

(1) Traumatic Orchitis

Later Diagnosis (if changed)

(2) G. S. Wd L. Arm. (Gd)

(3) & V. D. G.

Additional Diagnoses: If more than one state present

DISPOSITION

Date

Dis:— 6.5.16

" 15.12.16

REMARKS

Disc. 9-1-17

	146.
C.L. 2-5-16	
" 8.5.16	149
" 3.6.16	#164
" 8-6-16	# 166
" 9.8.16	288
" 11.8.16	B125
C.L. 3-10-16	B 162 (2)
" 1.12.16	B.211.
27.12.16	B231.
" 11-1-17	B243
" 12-1-17	B244

25th 13
21st 14
24 16

A.M.D. 2 Dept.

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

P.G.O.

3 Pr 10 Pr 7

B.P.

EPITOME OF HOSPITAL TREATMENT.

Copied 1st VB

	Hospital	Adm.
1.	Epsom Conval.	19-9-16
2.	Shorncliffe Mil.	26.11.16
	Granville Spec. Ramsgate.	6-1-17
3.		
4.		
5.		
6.		
7.		

DEPARTMENT OF VETERANS AFFAIRS

To Copy for H.O. File

Attention of

P.A.

Ottawa, Ont.
Date Nov.24, 1965

NAME TOTTEN, Arthur W.

SERVICE NUMBER 445257 WW1

C.P.C. No. 43250
W.V.A. No. 219832

NAVY
ARMY XXX
R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. Lancaster, N.B. Tele-Memo d/Nov.10, 1965

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death November 10, 1965
Cause of Death
Place of Death Lancaster Hospital, Lancaster, N.B.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~XXXX~~
~~XXXX~~
H.O.

Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

DVA 24

44[illegible]257 Pte Totten A.W.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOK.

[illegible]te of [illegible]ment	No. of Acq. Roll.	AMOUNT. Francs	£	s	$	¢	Place of Payment.	Name of Paymaster	Remarks.
15-[illegible]-17	49		1	-	4	87	Sandling	Darmstrong	Oct ✓
[illegible]-17	188		1	-	4	87	"	"	Chge Sept. ✓
14-15-17	281		1	-	4	87	"	D.H. Alexander	✓
30-5-17	517		2	-	9	93	"	✓	✓
12-6-17	25		1	-	4	87	"	W. Lorimer	✓
					29	21			

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 445257 (Rank) PRIVATE

Name (in full) ARTHUR WESLEY TOTTEN enlisted in the 55th Battalion

CANADIAN EXPEDITIONARY FORCE at Sussex, N. B. on the 16th day of July 19 15

HE served in France from 14-7-16 to 6-8-16

and is now discharged from the service by reason of being no longer fit for War Service. K.R.& O. 1912. Para. 392. Sec. XVI.

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

Age	19 years 10 months
Height	5 feet 4 inches
Complexion	Dark
Eyes	Blue
Hair	Brown
Marks or Scars	Two scars left forearm

DISTRICT DEPOT No. 7. FREDERICTON, N.B.

Signature of Soldier

J. J. Buee Major
Issuing Officer

Lieut. Colonel
Rank

O. C. District Depot No. 7
Appointment

Date of Discharge August 2nd., 1918.

Signed at FREDERICTON, N. B. this second day of AUGUST 19 18

in Military District No. 7

File Reference No. D.D.7 86-T-6

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 445257 (Rank) Private Name ARTHUR WESLEY TOTTEN

Unit 20th Battalion

Address on Discharge 156 City Road, St. John, N. B.

Character and Conduct - - G O O D - -

Former Occupation Student

Special Qualifications of Value in Civil Life

Medals and Decorations - - ONE CASUALTY STRIPE - -

Remarks

DISTRICT DEPOT No. 7. FREDERICTON, N.B.

Signed at FREDERICTON, N. B. this second day of AUGUST 1918

J. J. Bruce Major
Name of Officer

Lieut. Colonel.
Rank

O. C. District Depot No. 7.
Appointment

O Inf 23309

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

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number 445257

Regiment or Corps 55th Battalion, C.E.F.

Rank Pte. Surname Totten Christian Name Arthur Wesley

Religion Church of England Age on Enlistment 19 years 9 months.

Enlisted (a) 16-7-15 Terms of Service (a) Dur of War Service reckons from (a) 16-7-15

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

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

~~or Corps~~ Trade ~~and Rate~~ Labourer

_____ Signature of Officer i/c Records.

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 ...			
7-4-16	55th Bn. C.E.F.	Transferred to 39th Bn C.E.F.	W. Sandling	7-4-16	
28-6-16		Drafted to 20th Bn			
29/6/16	C.B.Dep	Taken on strength 20th Bn 29/6/16 NR Pt 2 O'rs 27d7/7/16			
12/7/16	do	Left for unit	In Fld	12/7/16	NR DCS 191
21/7/16	20th Bn	Joined unit	do	14/7/16	B213 DCS 197
30/7/16	13 Genl	GSW Arm L. adm	13 Genl	30/7/16	W3034.
29/7/16	6 Can FA	do adm	6 Can FA	29/7/16	A36 DCS202
		trsfd	17 C.C.S.	29/7/16	
6/8/16	HS JanBreydel	To England. adm	HS JanBreydel	6/8/16	W3083.
6/8/16	13 Genl	GSW Vill (4) Ulna trsfd	To England	Pt 2 O'rs 32d14/8/16	W3034.

C.L. Cameron Capt for Lt.-Col.
Commanding 39th Battalion, C. E. F.

30 AUG 1916

J.W. Hogan ~~Lieut~~ Capt.
for Lieut-Col. A.A.G.

(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.

(938). Wt. 15012/5156. 1,000,000. 1/16. P. P. Ltd. Forms/B.103/3.

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
Hastings 17/2/17	14/8/16	Taken on strength C.C.A.C. Pt. II D.O. No. 332 ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO G.D.D. PART II D.O. No. 1A2			Deacon Lt for O.C.C.C.A.C.
26/3/17	CCAC	Trans 1st Central Ont Reg Depot	Shorncliffe	26/3/17	Part II D.O. 81 Lieut
					O. i/c Records & Dispatch, For Lt. Col. Commanding, Canadian Garrison Duty Depôt.
20.6.17	1st CORD	Att to 1st C.D.D. Buxton	W Sandling	20.6.17	Pt II D.O. 103. H S Cleverley Staff 1st CORPS
21/6/17	TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 146				N E O'Brian Capt for O.C.C.D.D.
	EMBARKED FOR CANADA FROM LIVERPOOL 10 JUL 1917				N E O'Brian Capt for O.C.C.D.D.
18-4-18	K Unit M.H.C.C.	TAKEN ON STRENGTH D.D #7 PART II. ORDER No. 9	Fredericton	26-4-18	T R Rand McNally Capt, & Adjt, For O. C. District Depot No. 7.
	"DISCHARGED" FROM HIS MAJESTY'S SERVICE K. R. & O. 1912 Par 392 Sec. XVI.				R. W. Lindsay Lieut.
2-8-18		D.S.O. # 106 (2-8-18)	Fredericton	2-8-18	O. C. Discharge Section For O. C. District Depot No. 7.

Copied for VB

R—122.

Rank Pte. Name TOTTEN Arthur Wesley Reg'l No. 445257

Unit 55th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Sussex. N.B.16th July.1915 Place of Birth St John. N.B.

Name and Address, Next-of-Kin Mrs Susan Totten, 56, Dorchester Street, St John. N.B. Relationship Mother

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

N/F R.B. No 5785
File R.L.
Category Can Md Oseas Cas

Copied for VB

R 139.43

Discharge, Date and Place Reason Character R133 B 279

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
		Arrived in England.		9 NOV 1915	
6-4-16	Adj 55th	Awd 14 days. C.B. for Als fr 7 am.	Westenhanger	6-4-16	P II. 83
8-4-16	Do	Tfd. Bde Sig Base (39th Battn)	W. Sandling.	7-4-16	P II. 85.
.	OC 39th	Taken on strength 39th Bn	.	.	P II 86
26-4-16	.	Adm Moore Barr Hope	Scliffe	26 4/16	P II 100 CL 146 Traumatic Orchitis
8-5-16	CR 39th	Discharged to Unit	W Sandling	6 5/16	C.L. 149 P II 109 ditto
26-5-16	OC 39th	Adm Moore Barr Hope	Scliffe	26 5/16	P II 125
2-6-16	CL 39 Bn	" "	"	28-5-16	CL 164 TRAUMATIC ORCHITIS
7-6-16	" "	Discharged		2-6-16	— 165 NSO PBO 131 6/6/16
26-6-16	" "	Q.M. Stores issues 1/4	W. Sandling		P II 151.
28-6-16	O.C. 39 BN.	SOS to reinforce 20th BN	France	28-6-16	P. II 153
7-7-16	20th Bn	T.O.S. from 39th Bn	"	29-6-16	. 27.

Copied for VB

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
9-8-16	20th Batt	Adm No 13 Gen Hosp	Boulogne	30-7-16	GSW L Arm M.R. 925
11-8-16	"	Edmonton Mil Hosp.	Edmonton	London	6-8-16 " B 125 "
14-8-16	"	Wd and Transferred to C.C.A.C., Folkestone;		6-8-16	Gt 032 W
3.10.16	20 Bn	Hd Qrs Mil Hosp	Epsom Woodcote Park Epsom	19.9.16	C.I.B 162
14.6.16	CCAC	S.O.S	Folkestone	6.8.16	P.U. 332
1.12.16	20th Bn	Hs. mil Hosp.	Schiffe	26.11.16	C.R.B 211 D.D.H.S. to L Arm
18.12.16	CCAC	Repld from Etchinghill	Hastings	16.12.16	P.U. 557 + C.I.B 231
6.1.17	"	Adm Gran Spec Hosp	Ramsgate	5.1.17	P.U. 10 + C.I.B 243 G.S.W L arm
12.1.17	20 Bn	Discha " " "	Ramsgate	9.1.17	C.I.B 244
17.2.17	CCAC	Repld from Etchinghill	Hastings	16.2.17	P.U. 82
19.2.17	"	On Com S.D.D for "C 3"	"	17.2.17	P.U. 84
133.17	C.C.A.C.	S.O.S. on transfer to 1st Can Inf Regiment	Hastings	10.3.17	Pt. II D.O 119
19.3.17	Hd Qrs	I.O.S from 6 C.M.R.C.	Sandling	10.3.17	P.U. 10# 10
20-6-17	"	On Com C.D.S. Base for duty to Canada	"	20-6-17	— 103
16-7-17	"	S.O.S. to Canada for Casualty to the Front C.D.S	"	10-7-17	— 129 Obtain rank
	Hosp Ship	To Convl. Home.	H.M.C.	Halifax	21.7.17 M.R. 328.

Temporary

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. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Potter A.W. Christian Name A45257

TABLE I.—General Table.

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

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

Declared Age ..... 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		A45257
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
Mar 16.	P. Ramsgate Julius Caesar Capt.
16-2-17	Hastings C.3. W.A.M.O. Lt. Maj. Colonel
17 FEB 1917	TAB (2) N.M. Union Coy.
17 Apr 17	(1)
18-5-17	W Sanatorium Discharge J.B. Ward Capt. PRESIDENT, STANDING MEDICAL BOARD.
19 APR 1917	Approved S Wilbraham CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

TABLE IV.—Service Table.

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

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1111] W7179/M838 200m 9/16a 45 59

Forms B. 178. 48

[P.T.O.

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				
CANADIAN HOSPITAL ETCHINGHILL, LYMINGE.	30	11	16	15	12	16	Gon.	16	Discharged to Unit	
Gen Hosp Ramsgate	8	1	17	6	1	17	Gon.	1.	Sclipse Med Board	
MILITARY HOSPITAL SHORNCLIFFE.	7	1	17	8	1	17	do	2	Trans to Etchinghill	Capt. C.A.M.C., Registrar for O.C., Granville Can. Sp. Hosp., Ramsgate.
Etchinghill	6	1	17	14	2	17	Gonorrhea	40	Discl. to Unit.	Capt. C.A.M.C.

TEMPORARY

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. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Totten *Christian Name* Aw

TABLE I.—General Table.

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

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

Declared Age ..... 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	20th Canadians	445259
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

W. P. GRIFFITH & SONS LTD., Printers, Old Bailey, E.C. 4.
[1308] W15368/M1384 300m 4/17B 45 59

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				
EDMONTON MILITARY HOSPITAL EASTERN COMMAND No. ..... LONDON, N.	6	8	16	18	9	16	SW forearm fract ulna	44	Treated & Sent to Epsom	Wlove
(CANADIAN DIVISION), CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM	18	9	16		24	11.16	Do	67	Harm painful, wrist stiff and painful. Electric massage. Trans. Ramsgate	[signature] Capt. C.A.M.C.
G C S H Ramsgate	5	1	17	8	1	17	G S W Lt Arm	4	Transferred to Mil Hosp Shorncliffe	Registrar, Capt C.A.M.C.
Military Hosp. Shorncliffe	8	1	17	8	1	17	Gonorrhoea	–	Transferred to Etchinghill	Registrar, for [signature] Hosp., Ramsgate.
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE,	6	1	17	15	2	17	Gonorrhoea	4	Disch'd to duty	Lieut C.A.M.C.

Registrar, for [signature] Hosp., Ramsgate.

13572

Forms I. 1237 10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
13572	44527/5	Pte	Totten	Arthur
Year 1916	Unit. 39th Res Batt'n	Age. 19	Service. 6/12	

Station and Date.	Disease
M.B.C.H. 27/4/16	Orchitis Epididymitis

Complaint,

Patient has painful & swollen Epididymitis

Patient states he did not injury himself or had connection with a women within the last 3 months

Examination

shows the Globus major of the testicle swollen & enlarged & very tender.

General health & good

Urine normal

L.A. Palmer Capt.

DISCHARGED

6 MAY 1916

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

(J 3521.) Wt. W5606—2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

Forms
I. 1237
10

15036

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
15039	44 5257	Pte	Lotten	Arthur W
Year 1916	Unit. 39 Res. Batt.		Age. 18	Service. 12/12.

Station and Date.

M.B.C.H.
May 24

Disease Traumatic Arthritis

Admitted for pain and swelling

Present Complaint

Swelling and pain —

Past history - neg.

Present Illness.

When on duty 24th April, he hurt himself by jumping in a trench 2 days after the L/F testicle started to swell and it was very painful on the march.

Phy. examination ?

No swelling — very painful at present?

R. T. Gauthier

DISCHARGED
2 - JUN 1916

*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.	

DISTRICT DEPOT No. 7

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. 445257 Rank Pte. Name Totten A.W.

Corps 55th Bn. who was* Discharged

On 2/8/18 191..., to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/8/18 191..., to 2/8/18 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 2 days at $ 1 c. 00	2	00
No.			Field Allow. 2 days at $ c. 10		20
Assigned Pay and Sep'n Allce. No. F.B. Edgecombe & Co. 3723	35	00	Separation Allowances* (Monthly) Subs. 1/8-2/8/18	1	60
Other charges			Other Allowances*		
Payment on transfer or discharge No. 3725	36	80	Other Credits* Clo. Allce.	35	00
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	33	00
Total	71	80	Total	71	80

*Give particulars.

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

(Address)

Made By FRW
Checked By RHS
No. M.D.O.
2/8/18.

M.D. No. 7 No. 10

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

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment

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

(3) cause of discharge authority O.C.D.D.# 7.

(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 2/8/18

Place Fredericton, N.B.

Paymaster District Depot No. 7 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.

300M—2-18.
H. Q. 1772-39 903.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Totten, A.W. 309/7.
Surname Christian Name

Regimental Number 445257 Rank Pte. Address (in full) 156 City Road, St. John, N.B.

Unit 55th Bn.

Original Unit

District where paid M.D. 7.

Date of Discharge

P. D. P. Filing Number 14-29-7.

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

Com 20/1/19 CD

L. L. 22573—M. & D. 8009.

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	344	30-8-18	22 00	326	30-9-18	22 00	298	30-10-18	23 10	33 00	67 10
1st	G 0797	24/1/19	70 00								
1863A 2nd	G49649	21-3-19	70 00								

over

M. F. W. 127.
50M—6 17.
1772-39-1140.

Remarks:

15 5/19 CRK.

67 Acadia St.,
St John N.B.

Dec'n No 309/7 W.S.G. File No 18131-A-8

Award ..... days at $ 70.00 per month $ 420.00

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

Less P, D. P. Credited $ 100.10

$

Less further debit balance $ .....

Net due paid as below 319.90

	TO SOLDIER			TO DEPENDENT		
0	Ag. No.	Ch. No	Amount	Ag. No	Ch No	Amount
1	19	0797	70 00			
2	1863a	49644	70 00			
3	194B	408856	70 00			
4	24C	444765	70 00			
5		488656	39 90			
6						
	Total			Total		

24/1/19
21/3/19
1.5.19

GEN'L AUDITOR
Posting checked by
W Blair
Date 18.10.19

~~67 Acadia St.~~
~~St. John N.B.~~

New Address.

S.
c/o Mrs Earl.
653 Main St.
St. Johns N.B.

JAB

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Totten Pte A.W.

Regimental No. 445257

Unit 55 Bn.

Date of enlistment

Place of "

Married (yes or no) No.

Amount of pay assigned monthly $20.00 1 11/15 – 31 7/17

To whom payable Mrs Susan Totten
Olympic 21 7/17. 56 Dorchester St. St John N.B.

Name and address ~~of next-of-kin~~ 56 Dorchester St., St John. N.B.

Date and place discharged

Reason for discharge Class II Med unfit.

Character on discharge

H.Q. 649-T.-1741

b 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
																L.P.C No.
	25 6/17							✓ 5 49	✓ 5 49							✓ E.L.P.C.
26 6/17	31 7/17	36	1.00	36 00	36	.10	3 60		45 09					' 4 87		' AR 3374.
						Dr Bal			19 52					° 4 87		° AR 3216.
														× 4 87		× On boat.
												✓	20 00	^ 30 00		^ DD Halifax.
									64 61						64 61	✓ July 1917.

Tfd to Bunt MHC Halifax 1-8-17
Let 30-8-17 SAAP
July 1917 O/P

E.A.P. 30-6-17

M. F. W. 41
1 0M—'-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

L. L. JOB. 85506 M. & D. 5997.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

2nd. Contingent

To Whom Mrs. Susan Totten,

Address 56 Dorchester St,
St. John,
N.B.

By Whom Assigned Totten, A.

Regtl. No. 445757

Rank Pte.

Corps 55th Bn. A. Co

Rate $20.00

NOV 1 - 1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		Y4521	20	
Dec.		X7203	20	
Jan.	1916	M1921	20	
Feb.		N 14919	20	
March		S/15812	20	

Pte Jas Vokes
x 12.04
See Eng Ledger

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs. Susan Totten

L. L. Job 89002.—Req. 6213.

Name of Soldier Totten A.

445257 55th Bn D-Co.

Month.	Year.	Cheque No.	Amt.	$20.00 Remarks.
April	1916	R1916	20	A.P. overpayment 20.00 July 1917
May		R4029	20	recovered by C.P. auth HQL 649 I-1741
June		R8434	20	C.P. letter 13/9/17 on file 18131-A-8
July		A8923	20	O. Atkins 17/9/17
Aug.		O15842	20	
Sept.		H18901	20	
Oct.		H23627	20	
Nov.		B29171	20	
Dec.		T33451	20	
Jan.	1917	B41966	20	
Feb.		J48518	20	
March		U49299	20	20 K
April		P5478	20	
May		P12086	20	
June		O19715	20	B.
July		F30781 C ~~25181~~	~~20~~ 20	B Cancel 23/7/17 LC
Aug.		~~R32862~~	~~20~~	C cancelled
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

42000 A/c Closed 31-7-17

Ret'd per Olympic

Date 21-7-17 F. X 17-8-17

Clerk G.M.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

P—56

Rank Pte. Name TOTTEN Arthur Wesley Reg'l No. 445257

Unit 55th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Sussex. N.B. 16th July. 1915 Place of Birth St John. N.B.

Name and Address, Next-of-Kin Mrs Susan Totten, 56, Dorchester Street, St John. N.B. Relationship Mother

Assigned Pay Monthly $ 20.00 Payable to Mrs Susan Totten 56 Dorchester St St John NB

Relationship

Separation Allowance $ Payable to

Relationship

NOV 27 1918

Discharge, Date and Place 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 1	Nov 30	30	1.00	30	30	10	3	10	43			12 16	20		32 16	10 84	Clothing Credit
1915	Dec 1	Dec 31	31	1.00	31	31	10	3 10	10 84	44 94			14 60	20		34 60	10 34	
1916	Jan 1	Jan 31	31		31	31		3 10	10 34	44 44			17 03	20		37 03	7 41	
	Feb 1	Feb 29	29		29	29		2 90	7 41	39 31			2431 487	20		27 30	12 01	
	1/3/1916	31/3/1916	31		31	31		3 10	12 01	46 11	399 450		2431 2431	20		24 86	21 25	China
					152			15 20	10	144 20			55 95	100		155 95	21 25	Fd 39th Bn Signal Base

Checked CDS

BALANCE TRANSFERRED TO NEW LEDGER.

Ck'd 5/12/17

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						

This space to be for numbers

M

2-2-40

Proceedings on Discharge.

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

No. 445257

Rank PRIVATE

Surname TOTTEN

Christian Name ARTHUR WESLEY

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

Corps (Squadron, Battery or Company) 20th Battalion

Date of Discharge August 2nd., 1918.

Place of Discharge Fredericton, N. B.

H

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 119 years 10 months.

Height 5 feet 4 inches.

Complexion Dark

Eyes Blue

Hair Brown

Trade Student

Intended place of residence (To be given as fully as practicable.) 156 City Road, St. John, N. B.

Descriptive Marks

Two scars left forearm.

2. The above-named man is discharged in consequence of being no longer fit for War Service. K.R.& O. 1912. Para. 392. Sec. XVI.

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.

GOOD

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

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

K.C.D.

M. F. B. 218. 9-10-19 A.D.

100M.—1-17.
H. Q. 1772-39-113.

W.S.G. Completed 15/7/19 RM

(OVER)

G.D. 24.12.65

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

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

6. Medals and Decorations..... ONE CASUALTY STRIPE.

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) Fredericton, N. B. J. J. Buell Mayor

(Date) August 2nd., 1918. O. Commanding D.D. No 7

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) Fredericton, N. B. A. W. Tatten (*Signature of Soldier.*)

(Date) August 2nd., 1918. R. W. Emerson (*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).....3.....years.....17.....days.

Total.....3.....years.....17.....days.

11. **Confirmation of Discharge.**

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

(Place) Fredericton, N. B.

(Date) August 2nd., 1918. (*Signature*) J. J. Buell Mayor for O.C. D.D. No 7

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.)

None

A. W. Gathers

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.		
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.		
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		
*Only if discharged "Medically unfit."			
Attestation Paper,	Militia Form B. 235.		
Proceedings on Discharge	" B. 218.		

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

(a) Proceedings on Discharge.

(b) Attestation.

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

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

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 44527 Army Rank Private

Name Totten, Arthur Wesley.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 1. C. O. R. D.

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

Place of discharge

1. *Description at the time of discharge.*

Age 18 years - months
Height 5 feet 4 inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade Laborer
Intended place of residence (To be given as fully as practicable) St. John. N. B.

Descriptive marks.

G. S. W. L. Arm

(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.

(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 :—

4. Character awarded in accordance with King's Regulations :—

Commanding Lieut.-Col. Canadian Discharge Depôt.

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 Wt. W17176/M291 500,000 2/16 Sch. 39 Forms B. 268 40

[OVER.

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 — France 3. Months

Certificate of education .....

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

CANADIAN DISTRIBUTING DEPOT
22 JUN 1917
BUXTON

(Place) _____

(Date) _____

for Lieut.-Col.
Commanding Canadian Discharge Depot.
Commanding _____ *Battn.* _____ *Regiment*

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

I 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*) _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*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) _____ years _____ days.

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

Total ... _____ " _____ "

11. *Confirmation of discharge.*

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

(Place) _____

Signature _____

(Date) _____

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.)

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 depot 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, dispatch, 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.

Form W. & O. 6045
N38-130M-29/11 16.

74T922

CK c78

140925

N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings Feb 16 1917.

No. 445257 Rank Pte Name TOTTEN A.W.

Local Unit C.C.A.C. Overseas Unit 20th Bn Age 17

Examination held at SMB.

Gsw. R. forearm

DISABILITY.
Overseas—Local.
(scratch one out)

2 mos in France

PRESENT CONDITION.

Was wounded at St Eloi July 29 '16.
Left ulna fractured. Scar over middle of anterior aspect left forearm 3" long healed.
Pronation and supination practically lost.
Extension & flexion good. Strength greatly impaired in forearm & hand

BOARD RECOMMENDS:—

1. Fit for Duty C3.
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members { W.A.W. Intosh Maj. Camp President.
D.B. Chazzer Capt. Camp
.....

APPROVED

16 FEB 1917

Hastings, Sussex

Dated at ..... 1916.

D.F. McIntyre

for A.D.M.S. Canadians

For A.D.M.S.

N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 1918

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

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

Examination held at .....

DISABILITY.
Overseas—Local.
(cancel one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

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

Signatures:—

..... President.

..... Members

.....

APPROVED

Dated at ..... 1918.

For A.D.M.S.

Form D.[illegible]. 1394.
7004.—10[illegible].—5/2/17.

Copied for VB

PROCEEDINGS OF A MEDICAL BOARD.

Dated at West Sandling 4 April 1917.

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

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

Examination held at .....

DISABILITY.
Overseas—Local
(scratch one out).

PRESENT CONDITION.

11

Please prepare 179 for discharge
H Coppington Capt.

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 :—

Members { .....President.
.....
.....

APPROVED

Dated.....1917. .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 1917

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

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

Examination held at .....

DISABILITY
Overseas—Local
(Duration one year)

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.

R. & O 6045 (Revised).
8778—10M—31/10/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 18-4-17 1916.

No. 445257 Rank Pte Name Totten A.W.

Local Unit 1st CORD Overseas Unit 20th Bn Age 17 6/12

Examination held at W Sandling. apr 18.-17

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

G.S.W in left forearm & wrist.

PRESENT CONDITION.

Was wounded in France 29th July 1916 -
wounds entirely healed - The wound in wrist very
sensative - Pronation and Supination good -
Flexion & Extension good. Not able to use hand or
arm - Says he is not feeling well: No evidence of any
other disability -

BOARD RECOMMENDS:—

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

Signatures:—

.....President.

Members .....

.....

APPROVED

Dated at.....1916.

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

PROCEEDINGS OF A MEDICAL BOARD.

FORM D.M.S. 1312.
A.F.B. 179 Canada.
4703—15m—11/1/17.

+

N.F

1st Bgde
West Sandling

Medical Report on an Invalid.

Station W. Sandling

Date ~~18 April~~ 30th April 1917

1. Unit. 20 Battn
2. Regimental No. A. 45257
3. Rank Private
4. Name Totten A. W.
5. Age last birthday 17.
6. Enlisted on 15 July 1915 at
7. Former Trade or Occupation —

8. **Disability.** Gun shot wound in wrist.

11

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 29 July 1916.

10. Place of origin of disability. St Eloi

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

During an action with the Enemy on the above date he sustained a gun shot wound of Left Forearm & wrist. He was operated on in the 13th General Hospital Boulogne where he remained nine days thence to Edmonton Military Hospital for five days thence to Durham House V.A.D. for nineteen days thence to Epsom Convalescent Camp for 13 weeks thence to C.C.A.C. Hastings thence to 1st C.O.R.D. West Sandling.

12. (*a*) Give your opinion as to the causation of the disability. Gun Shot wound

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

(1) Yes.

(2) Yes.

30

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at England, on the day of 191 .

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at *this* *day*

of , 191 .

President.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

a1 yes a2 yes.

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it?

Gsw in action

21. Has the disability been caused or aggravated by

(*a*) Intemperance? no

(*b*) Misconduct? no

22. Is the disability permanent? yes.

23. If not permanent, what is its probable minimum duration?

not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

4/5 for 6 months
Should decrease

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable

26. Do the Board recommend

(*a*) Fit for duty? no

(*b*) Fit for base duty? no

(*c*) Invalided to Canada? no.

(*d*) Discharge as permanently unfit? yes

27. Remarks.

Remarks.
There is a scar 4 in long in flexor surface upper ⅓ forearm. Scar at middle third also a scar 2 in. Scar ½ in. above ankle outer surface. This is the wound & exit. Bone & muscle wounds.
J.B. Thomson Capt.
23/5/17

This man's arm is not improving any. He has practically no flexion or extension of the wrist. Provisional ankylosis limited. Has no power in hand. Which is useless at present.
J.B. Thomson. Capt

Signatures:—

Major David Major President.

Station Sandling

J.D. Burch Capt

J.B. Thomson Capt Members.

Date 18-5-17

Approved.

Station _____

S. Lblackw CAPT.
FOR A.D.M.S. CANADIANS, Administrative Medical Officer.

Date SHORNCLIFFE—
19, Westbourne Gardens, Folkestone.
19 APR 1917
May 23rd/17

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Is unable to use left arm or hand for any practical purpose. The left arm & forearm are ~~smaller~~ not so well developed as Right.

He states that this is result of the G.S.W.

Other systems nothing to note

Left forearm shows two long linear scars on flexor surfaces resulting from G.S.W. Total loss of function of hand & forearm. No anaesthesia or atrophy of muscles. Condition improving very slowly & slightly

14. If the disability is an injury, was it caused

(a) In the presence of the enemy? Yes.

(b) On active service? Yes.

(c) On duty? Yes.

(d) Off duty?

15. Was a Court of Inquiry held on the injury? Not applicable

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what? Yes. to extract the shrapnel.

17. If not, was an operation advised and declined? Not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

19. Do you recommend

(a) Fit for duty? — no

(b) Fit for base duty? — no

(c) Invalided to Canada? — no.

(d) Discharge as permanently unfit? — Yes

A Arthur Capt.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, ~~except~~†

Station W Sandling

W K Collins Capt

Officer in charge of Hospital.

Date April 30/17

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Report No. 757 B

Class II. D-3

Totten, Arthur W.,
56 Dorchester St.,
St. John, N.B.

No. of M. H. C. File	No. of Local File	No. of H. Q. F

No. 445257 Rank Pte. Original Unit 55th Present Unit -

Age 18 Height 5 ft. 4 ins. Complexion ruddy Eyes blue Hair dark Character good

Date of enlistment July 1915 Where enlisted St. John Where seen service France

Ship returned by Olympic Date of arrival 21.7.17 Port of arrival Hfx.

Birthplace St. John Religion C. of E.

Name and address next of kin Mother, Mrs. Susan Totten, above address,

Cause of disability G.S.W. left forearm

Condition which prevents the soldier from earning a full livelihood Complains of useless hand and forearm (left) result of G.S.W. Entrance wound is on ulnar side of forearm just above wrist joint. Exit wound is in middle of palmar aspect of forearm. Pronation and supination lost. Flexion and extension of wrist joint lost. Movements of fingers lost. Power lost in all fingers except in thumb. Circulation is sluggish in hand. No loss of sensation in hand. Movements at elbow joint normal. Patient's condition is otherwise good.

Degree of incapacity (Please state in fractions) Eng. Board - Canadian Board 50% DDS 50%

Probable duration of incapacity Permanent

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board Convalescent Home

Destination to which transportation issued Halifax

Members of Board Major Gorston and Lt. Sieniewicz.

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1	single				
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession Student

Average earnings previous to enlistment Any other income

Name and address of last employer

Rent per month If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness I declare that the above statement is correct.

Date W.B. MacCoy 21.7.17 Signature A.W. Totten.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment date.....

Form No. 5a.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

CLASS 2.—Men whose condition may be benefited by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 3.—Men having a permanent disability which would not be benefited by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

Report No. | Class II | No. of M.H.C. File | No. of Local File | No. of H.Q. File

No. | Rank | Original Unit | Present Unit

Age | Height | Complexion | Eyes | Hair | Character

Date of enlistment | Where enlisted | Where seen service

Ship returned by | Date of arrival | Port of arrival

Birthplace | Religion

Name and address next of kin

Cause of disability

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Eng. Board | Canadian Board

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHOLE—OR EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment? | Any other income

Name and address of last employer

Rent per month | If purchasing property amount due and annual payment, $ | $

Taxes | If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance, name of society | Amount per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? | What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness | I declare, that the above statement is correct

Date | Signature

Recommendation by Interviewer as to classes likely to be of [illegible] and general remarks

Last Pay Ctf. Gr. $ | Dr. $ | Amount paid at Depot H.Q. $ | L.P.C. leaving Depot, $

Amount forwarded to H.Q. Unit, $ | Credit Clothing allowances, $

Transf'd to | Unit—Date | Transf'd Class 1—Date | Transf'd Class 1—Date

PENSION—Class | Amount per year, $ | Period granted for | Dating from

First payment date

Form No. 5a.

(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 St. John, N.B. DATE March 26/18

1. (a) Unit 55th Bn. (b) Regimental No. 445257 (c) Rank Pte.

(d) Surname Totten (e) Christian name Arthur W.

2. Age last birthday 17 years Date of birth Oct. 6/1899

3. Enlisted at St. John, N.B. on July 15/15.

4. Personal description :—

(a) Height 5' 4" (b) Weight 127 (stripped) (c) Complexion Dark

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks Two Scars left arm.

5. Address after discharge (for the use of the Board of Pension Commissioners)
156 City Road, St. John, N.B.

6. Former trade or occupation Student

7. (a) Service

	Years	Days
55th Bn	July 15/15 to April /16.	
39th Bn.	April 1916 to June 1916	
20th Bn.	June 1916 to July 21/17	
"K" Unit	July 27/17 to March 26/18.	

(b) Has he been overseas? Yes France

8. Present disease or disability (use authorized nomenclature if possible) (1) Under age
(2) Weakness and limitation of the movement in the left arm.

(a) Date of origin (2) 7/29/16 (b) Place of origin (2) St. Elci

(c) Cause* (2) G.S.W. left arm.

*(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).

Slight boy complaining of little pain and weakness in left arm and inability to pronate and supinate it. Wound of entry on the ulnar side left wrist exit fleins surface forearm middle third i regular scar 3" long fracturing ulna. Elbow movements are perfect, pronate on and supination hurt, movements are limited 10%. Hand movements are full. All the movements of wrist and the hand are only ½ normal strength. Arm is smaller than the other Heart, lungs and nervous systems are normal. Sens ations in the hand is normal

[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.]

M. F. B. 227.

75M.-12-17.
1772-39-117.

Copied for VB

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.

Wounded at St. Eloi July 29th 1916 forearm and fractured ulna healed with little deformity, and limitation of movement except for loss of supination and pronation. Is under age. No birth certificate.

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.

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

13. Was a Court of Inquiry held?

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

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

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).

Boulogne, epsom Conv. Hisp. Ramsgate Conv. Edmonton Mil. Hosp. Durham Mil. Hosp. Shorncliff Mil. Hosp.

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 That # 445357, Arthur W. Totten 55th Bn. be placed in Cat. "E" discharged from the service and allowed to pass under his own control.

Sgd. Ralph B. Cox Captain.

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 Arthur W. Totten 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

Arthur W. Totten

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.

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).

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

Yes

W.E.R. Coad *President*

E. W. Lunney } Members.

G. A. Minorgan }

STATION St. John, NB.

DATE March 28/18

APPROVED BY

DATE 16-7-18

Sgd. C. M. Pratt Captain
for *Assistant Director of Medical Services.*

APPROVED BY

DATE

Director-General of Medical Services.

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.