

REGIMENTAL DOCUMENTS

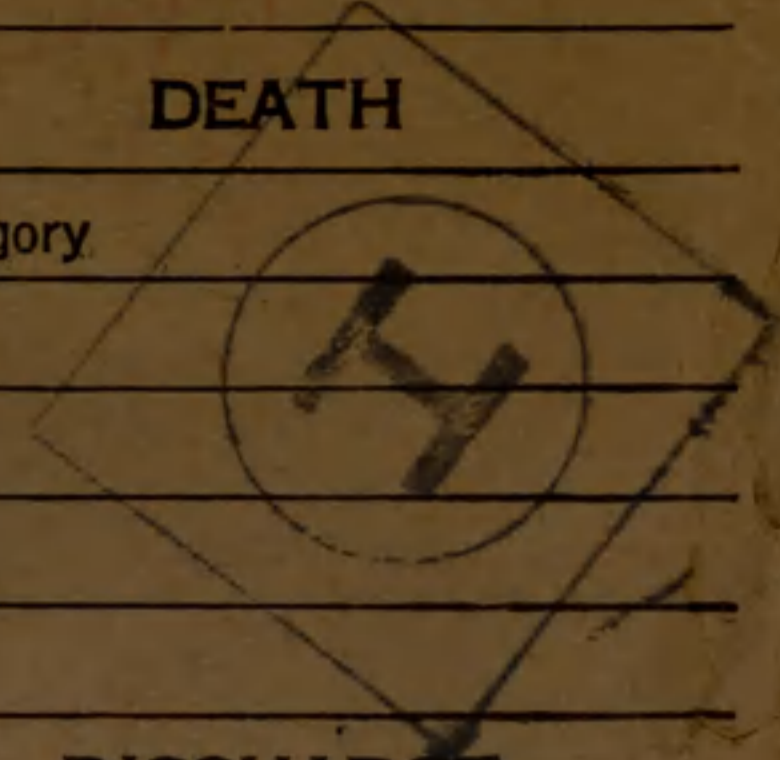
NAME **BARRAND** ^V **CYRIL HENRY** REGT. NO. *Scent* UNIT *H2nd BN* H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ARRESTION PAPER (M.F.W. 23, 133, or 51)				9933	DEATH
GASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					3
PARTICULARS OF CHARACTER (A.F.W. 3226)					10-29
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					10-29
<i>1 M.F.W. 42</i>					<u>3-27</u>
					3

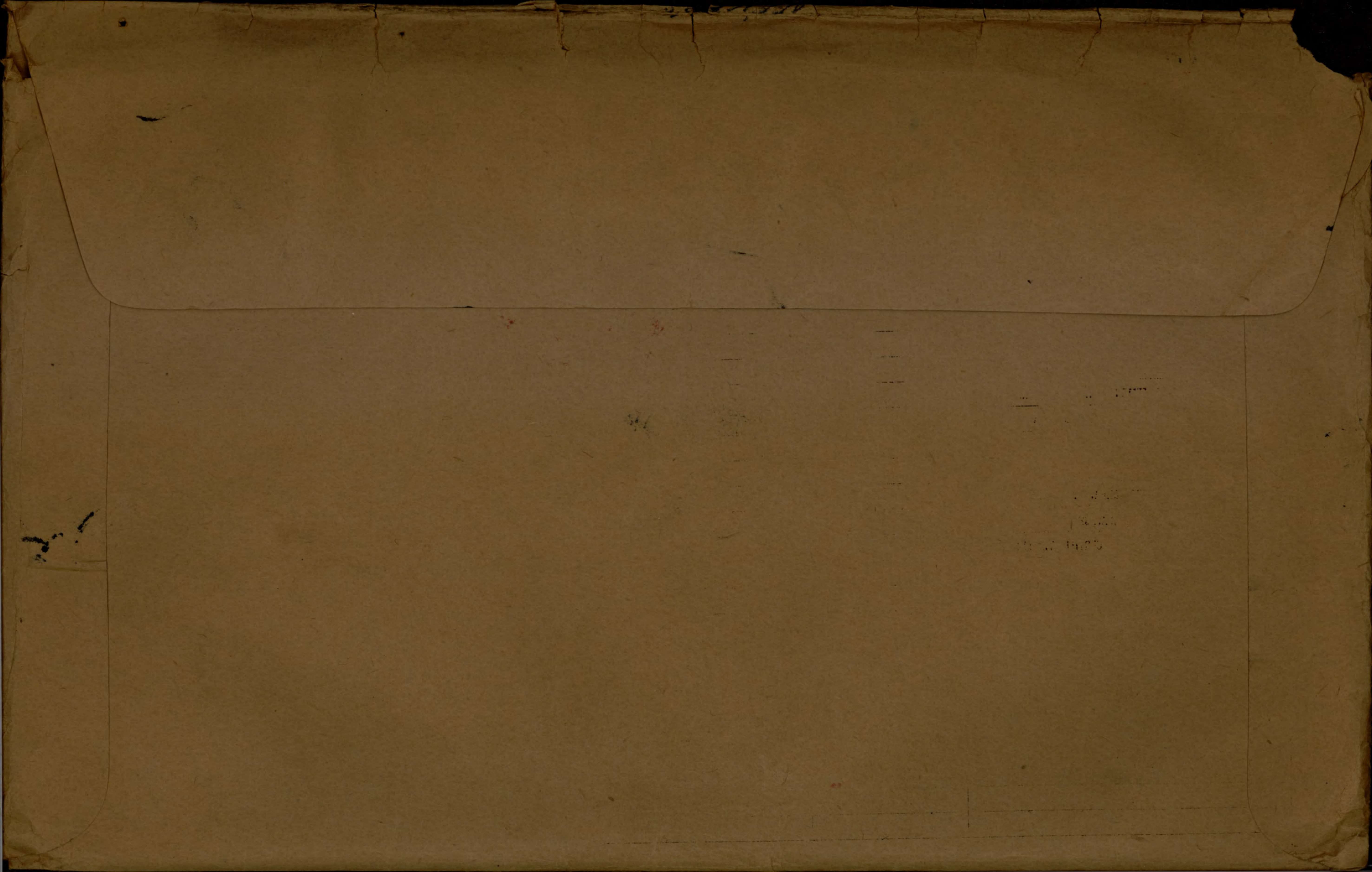
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14-11-19



ATTESTATION PAPER.

No.

Antman

Folio. *←*

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Cyril Henry Barraud*
2. In what Town, Township or Parish, and in what Country were you born?..... *Barnes London England*
3. What is the name of your next-of-kin?..... *Mrs Lucy Barraud (Mother)*
4. What is the address of your next-of-kin?..... *14 Hamilton Road Sidcup Kent Eng.*
5. What is the date of your birth?..... *3/7/1877*
6. What is your Trade or Calling?..... *Artist*
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?..... *Yes*
10. Have you ever served in any Military Force?.. *Artists Corps London Eng.*
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*

Cyril H Barraud (Signature of Man).
A. B. Mowley (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Cyril H Barraud*, 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.

Cyril H Barraud (Signature of Recruit)

Date *28/7/15.* 191 *A. B. Mowley* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Cyril H Barraud*, 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.

Cyril H Barraud (Signature of Recruit)

Date *28/7/15.* 191 *A. B. Mowley* (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 *28th* day of *July* 191 *5*

[Signature] (Signature of Justice)

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

[Signature] (Approving Officer)

Description of Cyril H Barraud. on Enlistment.

Apparent Age 38 years 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 ft. 5 ins.

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

Complexion Fair.

Eyes Grey

Hair Red

Religious denominations. { Church of England
 Presbyterian
 Wesleyan
 Baptist or Congregationalist
 Other Protestants
 (Denomination to be stated.)
 Roman Catholic Yes
 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 28/7/15. 191 ..

[Signature]
 Capt

Place Winnipeg

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.

..... Cyril H Barraud 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.

[Signature]
 (Signature of Officer)

Date 28/7/15. 191 ..

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 Berners Street, London, W.1.

Date 20-12-18.

- 1. Rank and Name Lieut. BARRAUD Cyril Henry.
- 2. Unit 43rd Bn. attached The War Record Office.
- 3. Age 41 4. Total Service 41 mos. War Service { (a) at home 3/12.
(b) abroad 38/12. (France 12/12.)
- 5. Address Warehouse Studio, Rose St., Wokingham, Berks.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability DEBILITY (Following P.U.O.)
- 7. Date of origin of disability May 1917.
- 8. Place of origin of disability Vimy.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This Officer was boarded 3-8-18 and was categorised C.i. four months.

He has been engaged in Art work for the War Record Office and has been feeling fairly well since his last board.

I concur in the findings of the Board of Medical Officers here recorded.

W. J. [Signature]
Captain, D.A.D.M.S.
for D.M.S.
Canadians.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? INFECTION.

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? General condition fair. Complains of tired feeling on exertion.

EXAMINATION: Lungs - depression both apices and retraction on deep inspiration. Expansion fair and equal throughout. Slight dullness right apex and both bases. No adventitious sounds. Heart - Faint reduplication of first sound, no enlargement. He looks anaemic.

BOARD RECOMMENDS:- B. THREE MONTHS.

15. To what degree is the officer disabled at the present time? -
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? Three months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? None.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service. No - three months.
- B.—Fit for service in a garrison or labour unit abroad. Yes.
- C.—Fit for home service:—
 - (i) Active duty with troops.)
 - (ii) Sedentary employment only.)
- D.—For admission to a command depot.)
- E.—Requiring indoor hospital treatment:—
 - (i) In an officers' military or auxiliary convalescent hospital.)
 - (ii) In an officers' hospital.)
- F.—Permanently unfit for any further military service.)

N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? _____

J.H.M. BELL MAJOR CAMC. President.

HAROLD BUCK MAJOR CAMC.

T. CAMPBELL CAPT. CAMC.

Members.

PROCEEDINGS OF A MEDICAL BOARD

8 B 88
June 28/17

assembled at 13 Burners St. on June 28/17
 by order of A. L. M. Lmdm Area
 for the purpose of examining and reporting upon the present state of health of
 (Rank and Name) Lieut. C. H. BARRAUD. (Corps) 43rd BATTN
 Age 39 Service 25 1/2 Disability DEBILITY following R. U. O
 Date of commencement of leave granted for present disability 6-6-17
 Date on which placed on half-pay for present disability —

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This officer reappears after three weeks leave and says that he is feeling better but that still suffers from ~~gas~~ heartburn and feeling of indigestion dyspepsia and that he is easily tired. In France for 15 months. Exam. shows tongue moist & uncoated. Heart & lungs neg. Reflexes increased and generally seems of a nervous disposition. Recommend as below.

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

1. Fit for General Service *no six weeks*
2. Fit for service in a Garrison or Labour Battalion abroad. *No officer likely to be fit for general service within six months should be classed in this category* } *not app.*
3. Fit for Home Service *yes not app.*
4. Fit for Light Duty at Home.....
5. Requiring indoor hospital treatment—
 (a.) In an Officers' Hospital.....
 (b.) In an Officers' Convalescent Hospital.....
6. (a.) Fit for light duty at a Command Depôt.....
 (b.) Fit for treatment only at a Command Depôt.....
7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation } *yes. I concur in the findings of the Board of Medical Officers here recorded.*
8. Was the disability contracted in the service?..... *yes*
9. Was it contracted under circumstances over which he had no control? } *yes*
10. Was it caused by military service?..... *yes*
11. If caused by military service, to what specific military conditions is it attributed? } *active service conditions*
12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions? }

Man

I concur in the findings of the Board of Medical Officers here recorded.
Capt D. B. M. S. Innes, M.D., C.M.D., Canadian Contingents.

Officer's Address { 14 Hamilton Rd.
Lidcup.
Kent.

Signatures { Joseph L. M. S. Innes President.
W. P. M. S. Innes Members.
W. P. M. S. Innes

INSTRUCTIONS.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

Com 2 B - 88

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station Canada

Date June 18

- 1. Rank and Name Lt. BARRAUD (CYRIL HENRY)
- 2. Unit 43 Bns at Can War Record Office,
- 3. Age 40 4. Total Service 3 1/2 War Service { (a) at home 2 1/2
(b) abroad 3 1/2
- 5. Address 9 Can War Record Office, 15 Tudor St E.C.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability DEBILITY following T. U. C.
- 7. Date of origin of disability May 1917
- 8. Place of origin of disability Vimy (Villers au Bois).
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

He was boarded 28-6-17 & found fit for home service. He has been on duty at the War record office since the early autumn (1917). At the last board he had heart burn & was easily tired. He says he has, perhaps, made some improvement.

OPINION OF THE MEDICAL BOARD

I concur in the findings of the Board of Medical Officers here recorded.
 W. H. Sulaway
 A.D.M.S. Invaliding
 for D.M.S.
 Canadian Contingents.

- NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions
- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes
- 11. Was it attributable to military service? Yes
If so, to what specific military conditions is it attributed? Infection

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions?

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? N.A.

14. What is the officer's present condition?

General condition is good. Wt 142, Heart strong regular, Pulse rapid, BP 120-90, Reflexes hyperactive. He is very highly strung, & is not yet fit for front line work.

Recommendation: (A)

15. To what degree is the officer disabled at the present time?

None
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent?

No

17. If not permanent, how soon is re-examination recommended? *Three* months.

18. Is it necessary that the officer should be re-examined by the same Board?

No

19. What treatment is the officer receiving, and where, and from whom?

None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature?

No

21. Does the officer require the constant attendance of another person?

No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service. *No, three months.*
- B.—Fit for service in a garrison or labour unit abroad. *No, three months.*
- C.—Fit for home service:—
 - (i) Active duty with troops. *yes*
 - (ii) Sedentary employment only.
- D.—For admission to a command depot.
- E.—Requiring indoor hospital treatment:—
 - (i) In an officers' military or auxiliary convalescent hospital.
 - (ii) In an officers' hospital.
- F.—Permanently unfit for any further military service.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with?

No

Gilbert Laid Lawe President.
J.H.M. Bell Maj. C.A.M.C.
A. Regusipromic Members.

8 B. 88

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station LONDON . 13 BERNERS ST. W.1.

Date 3-5-18.

- 1. Rank and Name LT. BARRAUD (Cyril Henry.)
- 2. Unit 43rd Bn. Attd. The War Record Office.
- 3. Age 46 4. Total Service 35/12. War Service { (a) at home 2/12.
(b) abroad 33/12. (Fr. 12/12)
- 5. Address c/o Can. War Records Office, 15 Tudor St. St. E.C.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability DEBILITY. (Following P.U.O.)
- 7. Date of origin of disability May. 1917.
- 8. Place of origin of disability VIMY. (Willers au Bois.)
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

He was boarded 28-6-17, & found fit for Home Service. He has been
on duty at the War Records Office since the early autumn (1917)
At the last board he had heartburn & was easily tired.
He says he has, perhaps, made some improvement.

*I concur in the findings of
the Board of Medical Officers
here recorded.*
Lt Col W. S. Slaney
A.D.M.S. Invalid
for D.M.S.
Canadian Contingent

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes
- 11. Was it attributable to military service? Yes
If so, to what specific military conditions is it attributed? Infection.

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? _____

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? N.A.

14. What is the officer's present condition? General condition is good. Wt. 145
Heart & Lungs negative. Pulse rapid. B.P. 120-90. Reflexes hyperactive
He is very highly strung, & is not yet fit for front line work.

RECOMMENDATION C.i.

15. To what degree is the officer disabled at the present time? N.A.
 (Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? three months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service. No - three months.

B.—Fit for service in a garrison or labour unit abroad. . . No - three months.

C.—Fit for home service:—

(i) Active duty with troops. Yes

(ii) Sedentary employment only.

D.—For admission to a command depot.

E.—Requiring indoor hospital treatment:—

(i) In an officers' military or auxiliary convalescent hospital.

(ii) In an officers' hospital.

F.—Permanently unfit for any further military service.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? N.A.

G.G. CORBET LT. COL. CAMC. President.

J.H.M. BELL MAJOR CAMC.

F.E. ROGERS CAPTAIN. CAMC. } Members.

NH.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 BERNERS ST. LONDON W.1.

Date 3-8-18.

1. Rank and Name LIEUT. BARRAUD (Cyril Henry.)

2. Unit 43rd Bn. Attd. The War Record Office.

3. Age 41 4. Total Service 39 mos. War Service { (a) at home 3 mos.
(b) abroad 36 mos. (12 mos. Fr.)

5. Address WAREHOUSE STUDIO, ROSE ST. WOKINGHAM, BERKS.

STATEMENT OF CASE:

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability DEBILITY (FOLLOWING P.U.O.)

7. Date of origin of disability MAY 1917.

8. Place of origin of disability VIMY.

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This Officer was boarded by this Board 3-5-18 and was marked C.1 three months.

Condition unchanged,

One brother died from Pulmon. Tuberculosis.

I concur in the findings of the Board of Medical Officers here recorded.
Major, A.D.M.S.
For D.M.S. Canadian Contingents.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No

(b) in the service? Yes

11. Was it attributable to military service? Yes

If so, to what specific military conditions is it attributed? Yes Infection.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N.A.

If so, by what specific military conditions? N.A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? General condition only fair. Weight

144 lbs. Lips -, slightly pale.

Heart not enlarged, no adventitious sounds. Pulse rate, at rest 95,

after exercise 133. Blood pressure 98 & 140. Complains of some

palpitation. Lungs a few rales heard at left base posteriorly.

Genito-urinary sym. normal. Digestive sym. appetite. Usually good.

Complains of heartburn at times. Bowels regular. Nervous sym. Is very ~~ix~~

highly strung, otherwise normal.

He complains of tiring rather easily.

RECOMMENDATION C.i. FOUR MONTHS.

15. To what degree is the officer disabled at the present time? _____

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? Four months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service No - four months.

B.—Fit for service in a garrison or labour unit abroad No - four months.

C.—Fit for home service:—

(i) Active duty with troops Yes

(ii) Sedentary employment only N.A.

D.—For admission to a command depot N.A.

E.—Requiring indoor hospital treatment:—

(i) In an officers' military or auxiliary convalescent hospital N.A.

(ii) In an officers' hospital N.A.

F.—Permanently unfit for any further military service N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? _____

J.H.M.BELL MAJ. CAMC.

President.

D.R.DUNLOP CAPT.CAMC.

NH

H. BUCK. MAJ. CAMC.

Members.

X

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86, Strand, London. on Oct. 23/1916.

by order of D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. CYRIL H. BARRAUD. (Corps) 43rd Battn.

Age 39. Service 1 4/12. Disability G.S.W. left thigh.

Date of commencement of leave granted for present disability Oct. 23/1916.

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

that this Officer sustained injury as described in

Army Form A.45a 23-10-16.

Wound practically healed. Is suffering from

strain of duties at Front.

5, Spring Grove. Harrogate, Yorks.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? No.
- b. If not so fit, how long is he likely to be unfit? 1 mth.
- (2.) a. If unfit for General Service, is he fit for service at home? No.
- b. If not so fit, how long is he likely to be unfit for service at home? 1 mth.
- c. If unfit for General Service at home, is he fit for light duty at home? No.
- d. If not so fit, how long is he likely to be unfit for light duty at home? 1 mth.
- (3.) Was the disability contracted in the service? Yes.
- (4.) Was it contracted under circumstances over which he had no control? Yes.
- (5.) Was it caused by military service? Yes.
- (6.) If caused by military service, to what specific conditions is it attributed? Shrapnel.
- (7.) If the disability was not caused by military service, was it aggravated by it? Not applicable.

Signatures { (sd) DAVID DONALD, Maj. C.A.M.C. President
 " G.M. DAVIS, Capt. C.A.M.C. Member.

In concurrence in the findings of the Board of Medical Officers here recorded
 [Signature]
 Captain, C.A.M.C.
 For D.M.S.
 Canadian Contingents.

23 OCT 1916

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

Confidential.

To be used in cases of wounds or injuries received in action.
 (For instructions for preparing this report see back of form.)

PROCEEDINGS OF A MEDICAL BOARD assembled by order of _____

D.M.S. Canadians.

for the purpose of examining and reporting on the present state of a wound or injury sustained
 by Lieut. Cyril H. BARRAUD. 43rd Canadians.
 at (Place of injury) Courcelette. on the (Date of injury) Oct. 5/1916.

The Board find that this Officer sustained a perforating
wound through deep hamstring and adductor region, left thigh.
No. nerve injury, shrapnel passed through.

Treated at 8 General Hospital, Rouen; then sent to
1st London General, Oct. 10/1916.

Some muscular stiffness.

The opinion of the Board upon the questions below is as follows:—

- 1.—Has the officer lost an eye or a limb; or has he permanently lost the use of an eye or a limb; or is the injury equivalent to the loss of a limb, and permanent, or likely to be permanent? (Articles 639 to 644 of the Royal Warrant for Pay, &c.)
- 2.—If the case does not come under the category of 1:—
 (a) Was the injury, in the first instance, very severe in character?
 (b) Are its effects still very severe?
- 3.—If the case is classified under category 2, are the effects of the injury permanent, or likely to be permanent? (Article 646.)
- 4.—Injuries that do not come under the above categories should be classified here, making use of the following terms:—*severe* or *slight* and *permanent* or *not permanent*, as the case may be.
- 5.—For what period, calculated from the date of the wound or injury, is it probable that the officer will be incapacitated for military duty by such wound or injury?

	Replies		
	As to first wound	As to second wound (if any)	As to third wound (if any)
1.—	/		
2.—	/		
3.—	/		
4.—	Slight, not permanent.		
5.—			

Signatures

(Sd) DAVID DONALDZ, Maj. C.A.M.C.
G.M. DAVIS, Capt. C.A.M.C.

concur in the findings of the Board of Medical Officers here recorded.

W. Macdonald

Captain, C.A.M.C.
 For D.M.S.
 Canadian Contingents.

Station 86, Strand, London.

Date 23-10-16.

[P.T.O.]

23 OCT 1916

INSTRUCTIONS to be observed by the **Medical Board**
preparing the Report.

1. On the occasion of an officer's first appearance before a medical board, the circumstances under which the wound or injury was sustained will be fully detailed.

2. If the injuries be more than one, they should be numbered and described separately; and should it be considered that, though only "severe" or "slight" in themselves, they represent together the equivalent of a single "very severe" injury, such an opinion may be expressed in the columns provided for that purpose.

3. The board will not express any opinion, either to the Officer examined, or in their report, as to whether he is entitled to compensation, or as to the amount of it, nor will it inform the Officer how the wound or injury has been classified.

117108

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86 Strand. London. on 23-11-16
 by order of D.D.M.S. Canadians.
 for the purpose of examining and reporting upon the present state of health of
 (Rank and Name) Lieut. Barraud, C.H. (Corps) 43rd Battalion
 Age 39 Service 15-12 Disability G.S.W. left thigh
 Date of commencement of leave granted for present disability 23-10-16
 Date on which placed on half-pay for present disability _____

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that
he is now recovered.

Address - 17th Res. Battalion, Shorncliffe.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? Yes
- b. If not so fit, how long is he likely to be unfit? -
- (2.) a. If unfit for General Service, is he fit for service at home? -
- b. If not so fit, how long is he likely to be unfit for service at home? -
- c. If unfit for General Service at home, is he fit for light duty at home? -
- d. If not so fit, how long is he likely to be unfit for light duty at home? -
- (3.) Was the disability contracted in the service? Yes
- (4.) Was it contracted under circumstances over which he had } Yes
 no control? }
- (5.) Was it caused by military service? Yes
- (6.) If caused by military service, } Shrapnel wound
 to what specific conditions }
 is it attributed? }
- (7.) If the disability was not caused by military } Not applicable
 service, was it aggravated by it? }

Signatures { (Sgd) David Donald, Maj, CAMC. President.
 M. Brown, Maj, CAMC. Members.
 G. M. Davis, Capt, CAMC. }

I concur in the findings of the Board of Medical Officers here recorded.
 W. B. Macdonald
 Captain, C.A.M.C.
 For D.M.S.
 Canadian Contingents.
 28 NOV 1916

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

Barrand.

9-B-127

165473

Army Form A. 45.

CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

assembled at Boulogne on 21.5.17

by order of D. D. M. S. Boulogne Base.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) St C.H. Barrand. (Corps) 43 Canadians

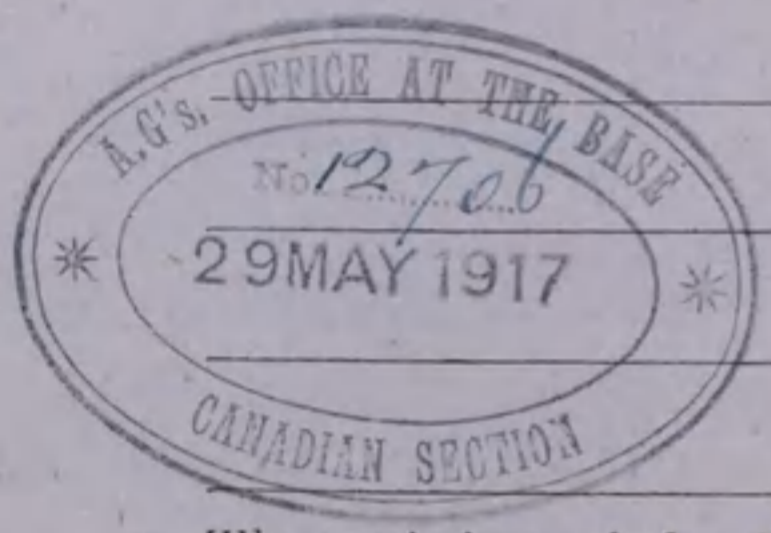
Age 39 Service 12 Disability Influenza

Date of commencement of leave granted for present disability _____

Date on which placed on half-pay for present disability _____

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

he is debilitated after influenza & is recommended for 2 weeks sick leave to England



The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? No
- b. If not so fit, how long is he likely to be unfit? 2 weeks
- (2.) a. If unfit for General Service, is he fit for service at home? -
- b. If not so fit, how long is he likely to be unfit for service at home? -
- c. If unfit for General Service at home, is he fit for light duty at home? -
- d. If not so fit, how long is he likely to be unfit for light duty at home? -
- (3.) Was the disability contracted in the service? Yes
- (4.) Was it contracted under circumstances over which he had no control? Yes
- (5.) Was it caused by military service? No
- (6.) If caused by military service, to what specific conditions is it attributed? -
- (7.) If the disability was not caused by military service, was it aggravated by it? No

Concurs
McLaurie
Signatures
Genl. Am S
D.D.M.S. B.B.

W. L. Wilson President.
W. L. ... Members.

Approved

[P.T.O.]

H. B. ... Colonel,
for Base Commandant

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

PROCEEDINGS OF A MEDICAL BOARD

assembled at.....**13. Berners Street, W.1.**.....on.....**6-6-17**.....
 by order of.....**A.D.M.S LONDON AREA**.....
 for the purpose of examining and reporting upon the present state of health of
 (Rank and Name).....**LIEUT. C. H. BARRAUD**.....(Corps).....**43rd B'n**.....
 Age.....**39**.....Service.....**24-12**.....Disability.....**DEBILITY following P.U.O.**.....
 Date of commencement of leave granted for present disability.....**6-6-17**.....
 Date on which placed on half-pay for present disability.....

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this Officer reported sick to his M.O. in France complaining of aches and pains all over badly. Loss of appetite, insomnia, chills and fever. States temp. 104° for two days. Was evacuated to D.R.S. about 7-5-17. Was detained there 3 or 4 days. From there was sent to C.C.S. Bruay and from there to No. 7 Stationary Hospital, Boulogne, 14-5-17 to 21-5-17. From there sent on leave to England. While on leave in England reported sick to M.O. 3 Southampton Street, and was sent into Q.A.M.H. Millbank, 31-5-17. Sent to Med. Board 6-6-17. Present condition fairly good but complains of gastric disturbance and feels rather weak, looks debilitated. Heart action rapid (90) sounds faint. Slight tremor finger tips. Board recommend as below.

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

- 1. Fit for General Service **No - 3 weeks**
- 2. Fit for service in a Garrison or Labour Battalion abroad. *No officer likely to be fit for general service within six months should be classed in this category* }
- 3. Fit for Home Service..... **No - 3 weeks**
- 4. Fit for Light Duty at Home..... **No - 3 weeks**
- 5. Requiring indoor hospital treatment—
 - (a.) In an Officers' Hospital..... -
 - (b.) In an Officers' Convalescent Hospital..... -
- 6. (a.) Fit for light duty at a Command Depot..... -
- (b.) Fit for treatment only at a Command Depot..... -
- 7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation }
- 8. Was the disability contracted in the service?..... **Yes**
- 9. Was it contracted under circumstances over which he had no control? }
- 10. Was it caused by military service?..... **Yes**
- 11. If caused by military service, to what specific military conditions is it attributed? } **Infection**
- 12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions? }

I enclose the findings of the Board of Medical Officers here recorded.
 A.D.M.S. Invaliding For B.M.S. Canadian Contingents.
[Signature]

Officer's Address { **14 Hamilton Road,**
SIDCUP. KENT.

Signatures { **T. H. MACDONALD. MAJ. CAMC.** President.
F. E. ROGERS. CAPT. CAMC. } Members.
W. B. MACDERMOTT. CAPT. CAMC.

INSTRUCTIONS.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

PROCEEDINGS OF A MEDICAL BOARD

assembled at.....**13. Berners Street, W.1.**.....on.....**28-6-17**.....

by order of.....**A. D. M. S. LONDON AREA**.....

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) **LIEUT. C. H. BARRAUD**.....(Corps).....**43rd B'n**.....

Age.....**39**.....Service.....**25-12**.....Disability.....**DEBILITY following P.U.O.**.....

Date of commencement of leave granted for present disability.....**6-6-17**.....

Date on which placed on half-pay for present disability.....

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this Officer reappears after three weeks leave and says that he is feeling better but that still suffers from heartburn and feeling of dyspepsia and that he is easily tired. In France for 15 months. Examination shows tongue moist and not coated. Heart and lungs neg. Reflexes increased and generally seems of a nervous disposition.

Recommend as below.

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

- 1. Fit for General Service **No - 6 weeks**
- 2. Fit for service in a Garrison or Labour Battalion abroad. *No officer likely to be fit for general service within six months should be classed in this category* } **Not applicable**
- 3. Fit for Home Service..... **Yes**
- 4. Fit for Light Duty at Home..... **Not applicable**
- 5. Requiring indoor hospital treatment—
 - (a.) In an Officers' Hospital..... **-**
 - (b.) In an Officers' Convalescent Hospital..... **-**
- 6. (a.) Fit for light duty at a Command Depôt..... **-**
- (b.) Fit for treatment only at a Command Depôt..... **-**
- 7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation } **-**
- 8. Was the disability contracted in the service?..... **Yes**
- 9. Was it contracted under circumstances over which he had no control? } **Yes**
- 10. Was it caused by military service?..... **Yes**
- 11. If caused by military service, to what specific military conditions is it attributed? } **Active Service conditions**
- 12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions? } **-**

concur in the findings of the Board of Medical Officers
 are recorded.
 Capt. D.A.D.M.S. I.P.L.D.
 Canadian Contingents

Officer's Address { **14 Hamilton Road,**
Sidcup, KENT.

Signatures { **A.W. MCPHERSON. MAJ. CAMC** resident.
J.A. MCKEE. CAPT. CAMC } Members.
H.P. WRIGHT. CAPT. CAMC.

INSTRUCTIONS.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

PROCEEDINGS OF A MEDICAL BOARD

assembled at SHORNCLIFFE - (19, Westbourne Gardens, Folkestone.) on 20-8-17

by order of A.D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. C.H. Barrand. (Corps) 43rd. Bn. 14th. Res. Dibgate.

Age 40 Service 27/12 Disability Debility following P.U.O.

Date of commencement of leave granted for present disability 6-6-17.

Date on which placed on half-pay for present disability.....

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

This Officer has now recovered.

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

- 1. Fit for General Service **Yes.**
- 2. Fit for service in a Garrison or Labour Battalion abroad. *No officer likely to be fit for general service within six months should be classed in this category* } ---
- 3. Fit for Home Service..... ---
- 4. Fit for Light Duty at Home..... ---
- 5. Requiring indoor hospital treatment—
 - (a.) In an Officers' Hospital..... ---
 - (b.) In an Officers' Convalescent Hospital..... ---
- 6. (a.) Fit for light duty at a Command Depot..... ---
- (b.) Fit for treatment only at a Command Depot..... ---
- 7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation } ---
- 8. Was the disability contracted in the service?..... **Yes.**
- 9. Was it contracted under circumstances over which he had no control? } **Yes.**
- 10. Was it caused by military service?..... **Yes.**
- 11. If caused by military service, to what specific military conditions is it attributed? } **Active service conditions.**
- 12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions? } ---

I concur in the findings of the Board of Medical Officers here recorded
J. Keabell
Captain, D.A.D.M.S. for D.M.S. Canadians

Officer's Address { 14th. Res. Bn.
Dibgate.

Signatures { S. Nixon. Davis. Major. CAMC President.
H. Coppinger. Capt. CAMC Members.

INSTRUCTIONS.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 BERNERS ST. LONDON W.1.

Date 3-8-18.

1. Rank and Name LIEUT. BARRAUD (Cyril Henry.)

2. Unit 43rd Bn. Attd. The War Record Office.

3. Age 41 4. Total Service 39 mos. War Service { (a) at home 3 mos.
(b) abroad 36 mos. (12 mos. Fr.)

5. Address WAREHOUSE STUDIO, ROSE ST. WOKINGHAM, BERKS.

STATEMENT OF CASE:

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability DEBILITY (FOLLOWING P.U.O.)

7. Date of origin of disability MAY 1917.

8. Place of origin of disability VIMY.

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This Officer was boarded by this Board 3-5-18 and was marked C.1 three months.

Condition unchanged.

One brother died from Pulmon. Tuberculosis.

I concur in the findings of the Board of Medical Officers here recorded.
Major, D.A.D.M.S.
For D.M.S. Canadian Contingents.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No

(b) in the service? Yes

11. Was it attributable to military service? Yes

If so, to what specific military conditions is it attributed? Yes Infection.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N.A.

If so, by what specific military conditions? N.A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? General condition only fair. Weight 144 lbs. Lips -, slightly pale.

Heart not enlarged, no adventitious sounds. Pulse rate, at rest 95, after exercise 133. Blood pressure 98 & 140. Complains of some palpitation. Lungs a few rales heard at left base posteriorly. Genito-urinary sym. normal. Digestive sym. appetite. Usually good. Complains of heartburn at times. Bowels regular. Nervous sym. Is very highly strung, otherwise normal.

He complains of tiring rather easily.

RECOMMENDATION C.I. FOUR MONTHS.

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? Four months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service No - four months.

B.—Fit for service in a garrison or labour unit abroad No - four months.

C.—Fit for home service :—
(i) Active duty with troops Yes

(ii) Sedentary employment only N.A.

D.—For admission to a command depot N.A.

E.—Requiring indoor hospital treatment :—
(i) In an officers' military or auxiliary convalescent hospital N.A.

(ii) In an officers' hospital N.A.

F.—Permanently unfit for any further military service N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? _____

J.H.M.BELL MAJ. CAMC. President.

D.R.DUNLOP CAPT.CAMC.

NH

H. BUCK. MAJ. CAMC. } Members. X

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station LONDON . 13 BERNERS ST. W.1.

Date 3-5-18.

1. Rank and Name LT. BERRAUD (Cyril Henry.)
2. Unit 42nd Bn. Attd. The War Record Office.
3. Age 46 4. Total Service 35/12. War Service { (a) at home 2/12.
(b) abroad 33/12. (Fr. 12/12)
5. Address c/o Can. War Records Office, 15 Tudor St. St. E.C.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability DEBILITY. (Following P.U.O.)
7. Date of origin of disability May. 1917.
8. Place of origin of disability VIMY. (Villers au Bois.)
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

He was boarded 28-6-17, & found fit for Home Service. He has been on duty at the War Records Office since the early autumn (1917) At the last board he had heartburn & was easily tired. He says he has, perhaps, made some improvement.

I concur in the findings of the Board of Medical Officers here recorded.

Lt. Col. A.D.M.S. Invaliding for D.M.S. Canadian Contingents.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes
11. Was it attributable to military service? Yes
If so, to what specific military conditions is it attributed? Infection.

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? _____

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? N.A.

14. What is the officer's present condition? General condition is good. Wt. 145

Heart & Lungs negative. Pulse rapid. B.P. 120-90. Reflexes hyperactive

He is very highly strung, & is not yet fit for front line work.

RECOMMENDATION C.i.

15. To what degree is the officer disabled at the present time? N.A.
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? three months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? None

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service. No - three months.

B.—Fit for service in a garrison or labour unit abroad. No - three months.

C.—Fit for home service:—

(i) Active duty with troops. Yes

(ii) Sedentary employment only.

D.—For admission to a command depot.

E.—Requiring indoor hospital treatment:—

(i) In an officers' military or auxiliary convalescent hospital.

(ii) In an officers' hospital.

F.—Permanently unfit for any further military service.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? N.A.

G.G. CORBET Lt. COL. GAMB. President.

J.H.M. BELL MAJOR GAMB.

F.E. ROGERS CAPTAIN GAMB. } Members.

NY.

CONFIDENTIAL.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 Berners Street, London, W.1.

Date 20-12-18.

- 1. Rank and Name Lieut. BARRAUD Cyril Henry.
- 2. Unit 43rd Bn. attached The War Record Office.
- 3. Age 41 4. Total Service 41 mos. War Service { (a) at home 3/12.
(b) abroad 38/12. (France 12/12.)
- 5. Address Warehouse Studio, Rose St., Wokingham, Berks.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability DEBILITY (Following P.U.O.)
- 7. Date of origin of disability May 1917.
- 8. Place of origin of disability Vimy.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

This Officer was boarded 3-8-18 and was categorised C.i. four months.

He has been engaged in Art work for the War Record Office and has been feeling fairly well since his last board.

I concur in the findings of the Board of Medical Officers here recorded.

[Signature]
Captain, D.A.D.M.S.
for D.M.S.
Canadians,

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? INFECTION.

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

X X

14. What is the officer's present condition? General condition fair. Complains of tired feeling on exertion.

EXAMINATION: Lungs - depression both apices and retraction on deep inspiration. Expansion fair and equal throughout. Slight dullness right apex and both bases. No adventitious sounds. Heart - Faint reduplication of first sound, no enlargement. He looks anaemic.

BOARD RECOMMENDS:- B. THREE MONTHS.

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? Three months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? None.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service. No - three months.
- B.—Fit for service in a garrison or labour unit abroad. Yes.
- C.—Fit for home service:—
 - (i) Active duty with troops.)
 - (ii) Sedentary employment only.)
- D.—For admission to a command depot.)
- E.—Requiring indoor hospital treatment:—) N.A.
 - (i) In an officers' military or auxiliary convalescent hospital.)
 - (ii) In an officers' hospital.)
- F.—Permanently unfit for any further military service.)

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with? _____

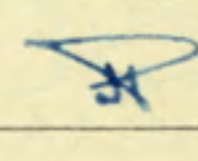
J.H.M. BELL MAJOR CAMC. President.

HAROLD BUCK MAJOR CAMC.

T. CAMPBELL CAPT. CAMC. } Members.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>Y.R. 554</i>	Regimental No.	Rank.	Surname.	Christian Name.
	<i>—</i>	<i>Lieut</i>	<i>Barrand</i>	<i>Byril H.</i>
Year <i>1916</i>	Unit.	Age.	Service.	
	<i>43/Canadians</i>	<i>39 $\frac{2}{12}$</i>	<i>1 $\frac{4}{12}$</i>	

Station and Date.	Disease
<i>10 OCT 1916</i>	<i>Cat-5-16. Fracture Shrapnel</i>
	<i>Penetrating Perforating wound through deep hamstring + adductor region in upper part of left thigh.</i>
	<i>No injury to nerves or bone.</i>
<i>23.10.16</i>	<i>Discharged </i>

W. P. P. P.

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

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 43 Canadian

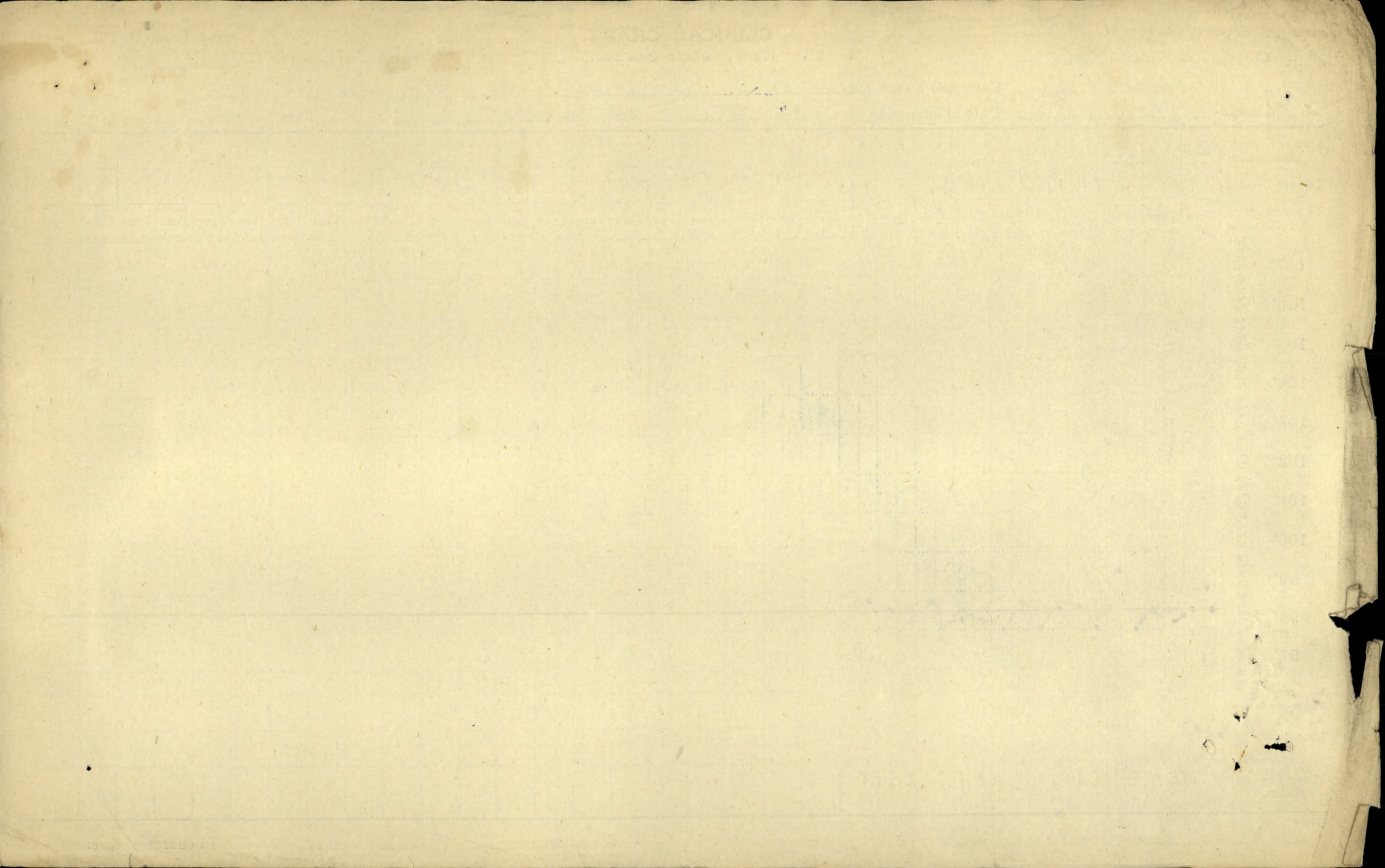
1st LONDON GENERAL HOSPITAL R.A.M.C. (T.F.)
Military Hospital

No. _____ Rank and Name Lieut Barrand, Cyril H Age 39 1/2 Service 14/12

Disease _____ Date of admission 10 OCT 1916 Date of discharge _____ Result _____

Dates of Observation	Oct.																												
	Days of Disease																												
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.
107°																													
106°																													
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99°																													
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97°																													
Pulse per Minute																													
Respirations per Minute																													
Motions per 24 hours	1000	1010	1010	1000	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	1010	

Signature [Signature] In charge of case.



CLINICAL CHART.

(To be attached to Case Sheet.)

R.C.

Army Form B. 181.

Corps

43rd Canadian Bn.

Military Hospital

General

No.

Rank and Name

Lieut. Davant

Age

39

Service

12 years

Disease

Date of admission

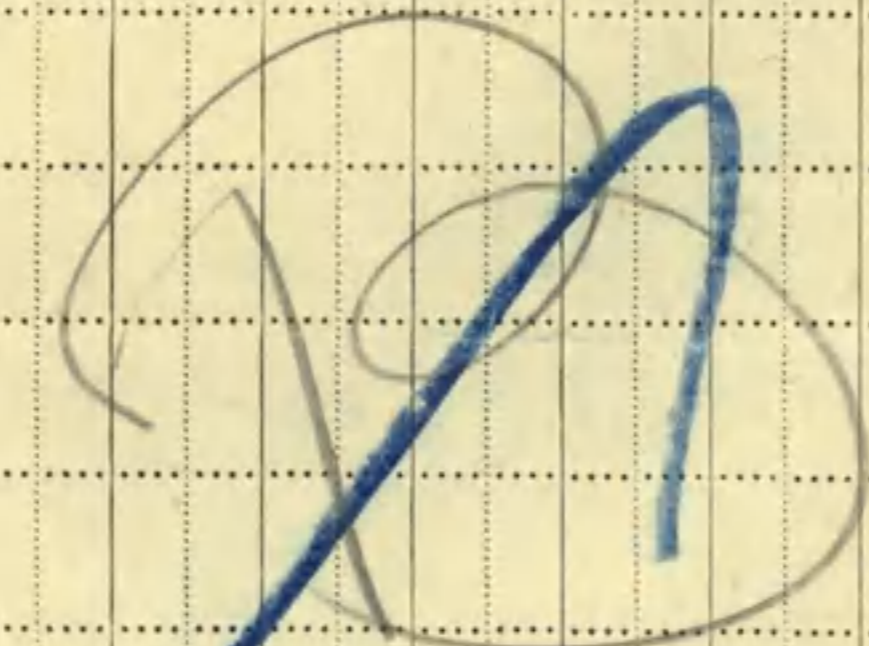
7.10.16

Date of discharge

Result

Dates of Observation	Days of Disease																												
	7	8	9	10	11	12	13	14	15	16	17	18	19	20															
Temperature Fahrenheit	Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		Time		
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	
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98°																													
97°																													
Pulse per line																													
Respirations per Min																													
Motions per 24 hours																													

Radon in



Signature

In charge of case.

CLINICAL CHART

(To be filled in by the physician)



101
102
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55

ORIGINAL

Lieut.

MEDICAL HISTORY SHEET

Surname Barraud, Christian Name Cyril Henry

Examined on 28th day of July 1915 at Winnipeg.

Approved by [Signature]

Birthplace City or Town Barnes, County London, Eng.

Rank C.A.M.C. M.O.

Apparent age 38 yrs. --

Trade or occupation Artist.

Height 5 Feet 8 Inches.

Weight Lbs.

Chest measurement Minimum 36 inches, Maximum expansion 3 inches.

Physical development

Small-Pox Marks

Vaccination Marks (Arm, Right, Left, Number)

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Table with columns: Date, Fit or Unfit, EXAMINED FOR RE-ENGAGEMENT. Includes dates 19 OCT 1916 and 9 JUN 1917.

Table with columns: Date, Result, VACCINATIONS. Includes dates 4/8/15 and 13/8/15.

Table with columns: Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes names F.T. CADHAM.

Enlisted on 28th day of July 1915 at Winnipeg

Table with columns: Corps, REG'T NUMBER, RANKS, DATE. Includes 79th C.H. of C., Lieut., 43rd Bn., and date 28/7/15.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT. Includes stations like 13 Berners St. and dates like 6-6-17, 3/8/18, 20-12-18, 25.8.19.

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

Vertical text on the right side: CANADIAN, Lieut.-Col. In Charge of Records, Canadian Contingent.

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BARRAUDCH.

REGIMENT 43rd British RANK Lieut No. —

Date of Examination in England 26-8-19 Date of Examination in France —

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2

2. EXTRACTIONS —

3. CROWNS —

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

} no

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

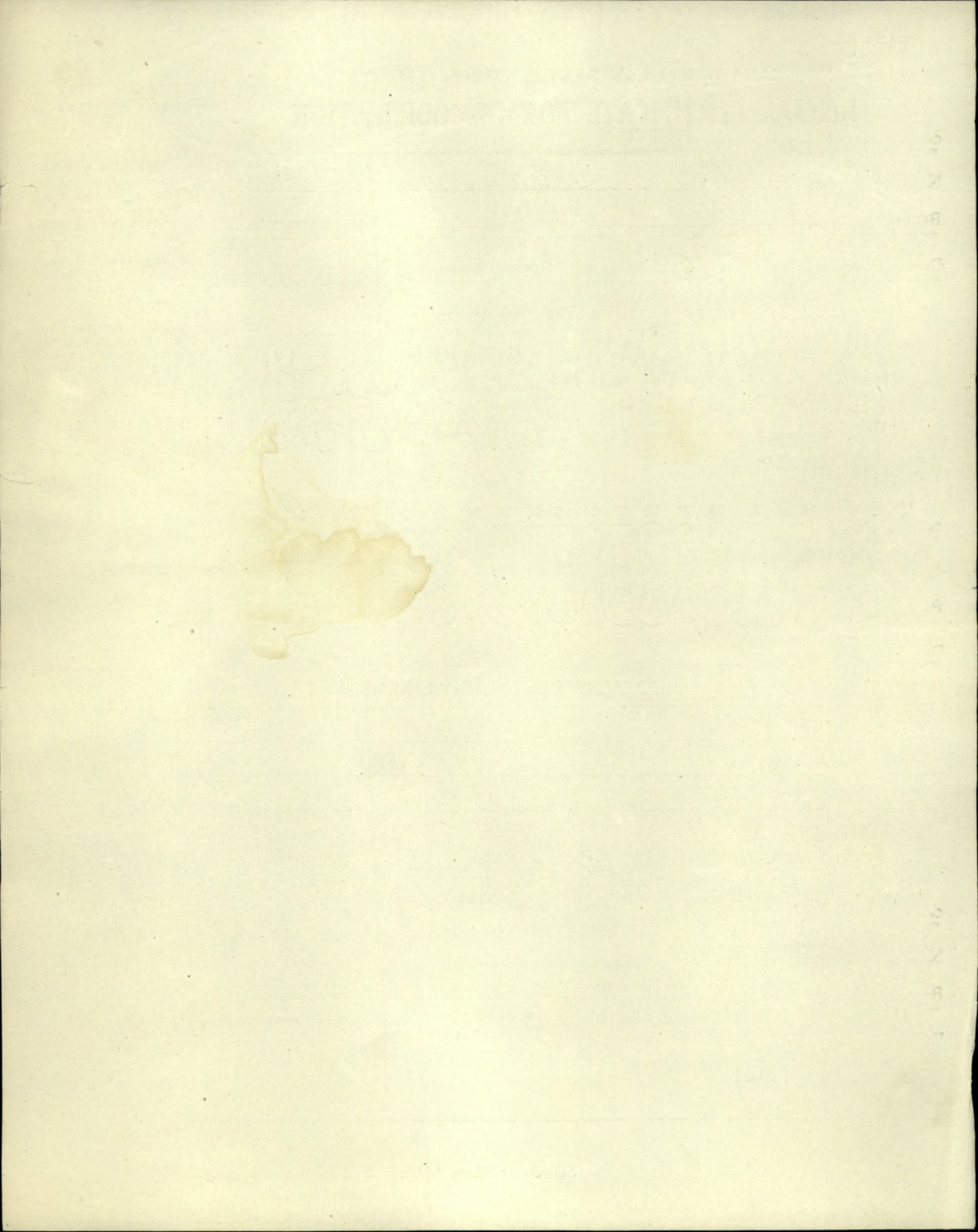
(a) In Canada no

(b) In England no

(c) In France no

Signature of Dental Officer

W. S. Smith
Capt. C.A.D.C.



WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to BARRAUD. Cyril Henry.
Address 14, Hamilton Road
Sidcup Kent

Lieut. Wife Mrs Gladys. Barraud.
Dependent
Address 5 Spring Grove.
Harrogate Yorks.

Date	Cheque No.	Gratuity	Paymen	Balance Due	Remarks
Sept 29 Sept 29	77305.		18 9 10		First Gratuity
Sept 29	77306.		8 4 4		C.A.
" 22	Grat.	112 16			
" 22	"	49 6			
" 22	101654		18 9 10		2 Inst.
" 22	101655		8 4 4	108 14	"
Oct 7	109553	162 2 6	18 9 10		3 "
" 7	109554		8 4 4	820 0	3 "
Nov. 7	119788		18 9 10		4 " (18.9.10)
" 7	119789		8 4 4	555 10	4 "
Dec. 6	138287		18 9 10		5 "
" 6	138288		8 4 4	28 11 8	5 "
Jan. 15	149695		20 7 1	0	Final
" 15	149696		8 4 4	0	"
		162 2 6	162 2 6		

RECEIVED BY THE NATIONAL ARCHIVES

ASSIGNED PAY and/or SEPARATION ALLOWANCE

Payable to Mrs. G. Barrand. Wife. Name BARRAND, C. H.

Address 6, Spring Grove,
Harrogate, Yorks. From Canada: No. Rank Unit

	Rank	Authority	Unit
ASSIGNED PAY			
Authority..... Dol..... Effect.....	Lieut.		43 Bw
"			
"			
"			

Month	Cheque No.	Assigned Pay	Amount Separation Allce.	Total A.P. and S.A.	REMARKS
JAN.	191				M.C. Prod 15-2-16
FEB.					Married 25-1-16
MARCH					Application 8-2-16
APRIL					Pay from 1-2-16
MAY					
JUNE					
JULY					
AUG.			570.	570	
SEPT.	18558		30	30	
OCT.	23061		30	30	
NOV.	27560		30	30	
DEC.	31561		30	30	
JAN.	35561		30	30	
FEB.	1086	—	30	30	
MARCH	9987	—	30	30	
APRIL	1050	—	30	30	
MAY	3526	—	30	30	
JUNE	2994	—	30	30	
JULY	8368	—	30	30	
AUG.	10734	—	30	30	
			930		

Name Barrand, C. H.

Rank Pvt.

Unit _____

Month	Cheque No.	Assigned Pay		Separation Allowance		Total A.P. and S.A.	
Forward				930			
SEPT.	13186	-		30		50	
OCT.	12963	-		30		30	
NOV.	18338	-		30		30	
DEC.	20282	-		70		40	4 adj.
JAN. 1919	24079	-		40		40	
FEB.	26576	-		40		40	
MARCH	28826	-		40		40	
APRIL	821	-		40		40	
MAY	3160	-		40		40	
JUNE	5185	-		40		40	
JULY	6650	-		40		40	
AUG.	8095	-		40		40	
SEPT.							Retired 31/8/19.
OCT.							
NOV.							
DEC.							
JAN. 1920							
FEB.							
MARCH							
APRIL							
MAY							
JUNE							
JULY							
AUG.							
SEPT.							
OCT.							
NOV.							
DEC.							

02

MILITIA AND DEFENCE.
SEPARATION ALLOWANCE.

15-2-16.
9.8.

Name *Barraud, Mrs. Gladys*
Address *5, Spring Grove,
Harrogate,
Yorkshire.*

Name of Soldier *Barraud, Cyril H.*

FILE.
Regt. No. *9-B-127.*

Rank *Lieut.:*

Corps. *43rd Battn.*

Relation to Soldier }
wife, child or mother } *Wife*

To what Corps belonging }
when called out } *49th Cam. Hdqrs of Cam.*

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p>Marriage Certificate Produced 15 FEB. 1916 MARRIED. 25.1.16. Application made 8.2.16. Consent of O.C. obtained.</p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.		<i>I 17139</i>	<i>30</i>	
March		<i>I 18241</i>	<i>30</i>	
			<i>60</i>	

8903 8374

SEPARATION ALLOWANCE.

Name of Dependant Barnaud, Mrs. Gladys
 Relation to Soldier Wife
 1 5, Spring Grove 3
Harrogate
 R.O. Yorks. P.O.
 2 P.O.
 P.O. P.O.

Name of Soldier Barnaud, Cyril H.
FILE
 Regt. No. 9-B-127
 Rank Lieut.
 Corps 43rd Battrn.
 To what Corps belonging
 when called out 49th Highlanders of Canada

Month.	Year.	Cheque No. or Postal Draft Book No.	Amount.		Date.	REMARKS.		
			£	s. d.		£	s.	d.
		Brought Forward ...	60					
Apl.	1916	59	30					
May		1336	30					
June		2674	30					
July		4539	30					
Aug.		6035	30					
Sept.		8034	30					
Oct.		10045	30					
Nov.		12549	30					
Dec.		14549	30					
Jan.	1917	17132	30					
Feb.		19855	30					
Mar.		21559	30					
Apl.		560	30					
May		3206	30					
June		560	30					
July		9558	30	540				
Aug.		14059	30					
Sept.		18558	30	600				
		Carried Forward ...						

Extra Copy.

43 L to
43 cash
43
43

B.K. 7010 173
BARRAUD Cyril Henry, Lieut.

43 Bn A 4 B 158 1-11-15

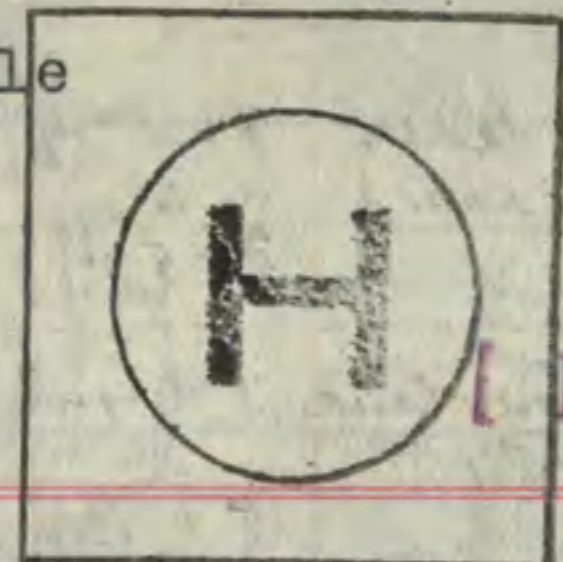
Rank and Name
Regimental No.
Unit 79th C.H. of C. to 43rd Bn.
Date of enlistment Winnipeg, 28 July 1915
Place of birth Barnes, London, England.
Married (Yes or No) Single
If in Permanent Force

Name and Address of Next-of-kin
~~Mrs. C.H. Barraud~~
14 Hamilton road, Sidcup, Kent, Eng.
Mrs. C.H. Barraud, (WIFE) (Mother) 159, 5, Spring Grove, Harrogate, Yorks.

43 1 DEC 1915
43 176
FEB 1 1916
MAR 1 1916
APR 1 1916 43 B

(see A.P.).
Date and place of discharge
Reason for discharge 43 1-7-16
Character on discharge 43 1-7-16

14 Hamilton Rd
Sidcup
Kent



LEFT CANADA-



MAY 1 1916

Date	Remarks	Place	Date	Remarks
		MANITOBA		
11-2-16	Exp. qualified as 1st Class Instructor		11-2-16	RO 231 DO. 598 50664
27/4/16	S.O.C. granted certificate as Instructor for Grenade work		22/2/16	A.O. 2127
11-10-16	W.O. Reported from Base as wounded		5-10-16	6L492
11-10-16	W.O. Adm #8. Gen. Hosp Rouen		4-10-16	6L492
12/10/16	2d Med Adm 1st Lon Gen. Hosp Lamberwell		23-10-16	C 1542
16-10-16	43 Bn wounded. Hd Hq C 24. P'cliffe		10-10-16	6L493
16-10-16	Wounded		9-10-16	P 11 094 51
16-10-16	TAKEN ON STRENGTH & POSTED TO GEN. LIST		10-10-16	DO 5386
28-11-16	Brighton att'd to 1st Bn as Dy Bn		23-11-16	RO. 260
26-11-16	C.D. Att'd for duty with effect		25-11-16	Ph. Ord 28
13-12-16	Con Camp B'ton proceeded up to 43 Bn		11-12-16	RO. 524
21-12-16	43rd Bn Having arrived from England		12-12-16	P 11 094 77-80. amended
18.5.17	C.R.O. adml. 7. Staly H.P. Boulogne.		13.5.17	C 2677. Ugd

A.F.B. 103
31 OCT. 1916

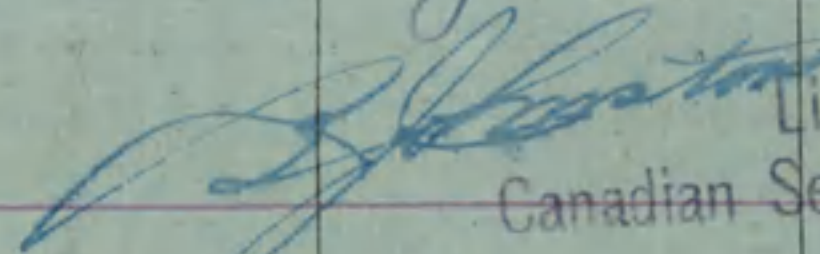
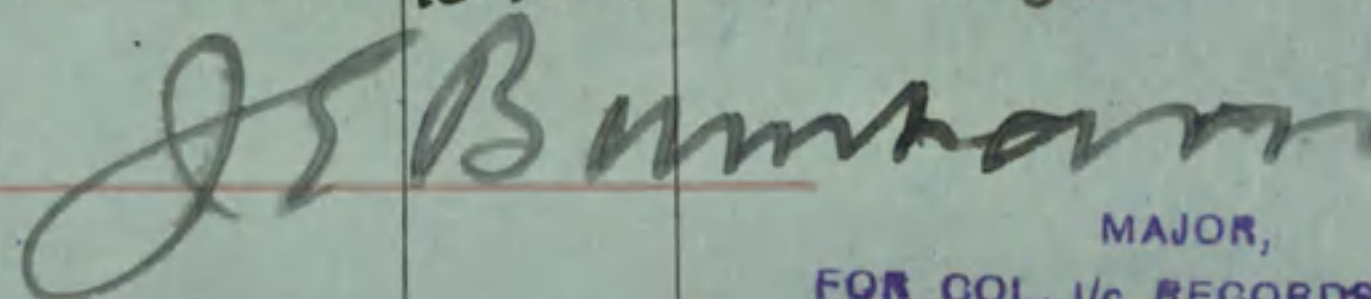
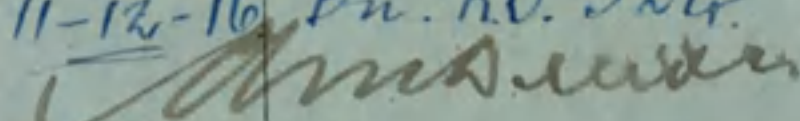
1017 1210

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
1-6-19	CR.O	Transf. to England on 14 days sick leave		22-5-17	OL. 689 Influenza
8-6-19	do	adm 2 A. Mil. Hosp. Millbank W.D.		31-5-17	OL. 700 Discharged OL. 695 Ability
5-6-19	4 th Bn	Granted sick leave of absence to England		5-6-17	OL. 654
11-8-19	do	Med Board on leave due to Right Leg		6-6-17	OL. 654
1-8-19	all	Sole S. B. E. of finding of Medical Board		1-8-17	OL. 654
15-8-19	Ranking	205. Reg. Dep. with effect		15-8-17	OL. 654
4-7-19	Ranking	Reported to depot for duty (P.H.S. Cwks)		28/6/17	OL. 654
do	do	Attached on command to 14 Res Bn		29/6/17	do
22-8-19	do	S.O. Hon. Regt. Dep. posted to 14 Res. Bn (H.S.)		20/8/17	OL. 654
27-11-19	CR.L.	205 on arrival in France for duty with Can War Records, Can. Corps		26-9-17	OL. 654
20-11-19	do	Proceeded to England on duty		2-11-17	OL. 654
6-3-18	CR.Hist	205 on proceeding to England		3-11-17	OL. 654
29-1-18	CR.Hist	Provided on board to Can Regt's Purveyor		7-1-18	OL. 654
26-1-18	CR.S.O.	orders to be attached on being S.O. with rank of Lt in transfer from 18 Res Bn		23-1-18	OL. 654
19-2-18	H.Q. M.C.	Seconded for duty to Can War Records		21-11-17	RO. 3514 34110.57 - MR. Dep.
12-9-19	WO	Retires in British Isles		31-8-19	AK 8714931549
22-9-19	H.Q. M.F.C.	Sol Can War Records on returning in B. Isles proceeding to Canada		31-8-19	PF ² -219

OK

23268

Lieut. **BARRARD** Cyril Henry

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
25/3/16	OC. Bn	Arrived in France	Havre	22/2/16	L.R. 4710
15-7-16	do	to course at no. 1 Grenade School		26/3/16	} B 213.
9-10-16	ag. GHO	rejoined on command 9 th Bde Doubers	Wit- de Doubers	21/3/16	
do	AS Maheno	Wounded in field	England	4-7-16	B 213 Des 103 of 23-7-16
		to High		5-10-16	Des 767 Des 155 of 14/10/16
				9-10-16	W 3083/6084 M II 51 of 16-10-16
		 Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			
16-10-16	COCC 10	TAKEN ON STRENGTH & POSTED TO GEN. LIST		10-10-16	D.O. 5386
		 MAJOR, FOR COL, 1/c RECORDS, C.E.F.			
28-11-16	G.O.C. Bn: Area	Attached 1 st Canadian Casualty Training Bn:	Hastings	23-11-16	Bn. R.O. 260.
13-12-16		Struck off strength General list on proceeding for service with 43 rd Bn:	Overseas.	11-12-16	Bn. R.O. 524.  Lieut. for Director of Personal Services C.E.F.
		6			

CERTIFIED CORRECT

1 - NOV. 1916

CANADIAN RECORD OFFICE

Casualty Form—Active Service.

Regiment or Corps ¹⁹¹⁵ 43rd Canadian Batta. Cameron Highlanders of Canada

Regimental No. _____ Rank Lieut. Name Barnaud Cyril Henry

Enlisted (a) ~~28-7-15~~ Terms of Service (a) Mobilization Service reckons from (a) ~~28-7-15~~ 29-8-15

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

Extended _____ Re-engaged _____ Qualification (b) _____

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

Embarked for Overseas Service with 43rd Batta. 20/2/15, Ajt.
43rd. Bn. C.E.F., C.H. of C.

Handwritten: Paul Maxwell
Major
P.T.O.

Handwritten: J. B. ...
for Lt-Col. I/c. Records, C.E.F.

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

Casualty Form—Active Service.

8 B 88

Man B. 06.

Regiment or Corps 49th C. of C. to 43rd Bn.

Regimental No. _____ Rank Lt. Name Barand C. H. Cyril Henry

Enlisted (a) _____ Terms of Service (a) Das 46 months 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 (i) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
20/8/17.	Field J. G. S. from date (M.B. F. Stone)	Lt. B. 5729/5-20/8/17 L. (M.R.D. No 166-22/8/17.)			
20/8/17.	S.O.S. M.R.D. & posted to 14 th Res Bn.				(do do do) Lieut. & Adjutant Manitoba Regimental Depot.
20/8/17	14 th RES. BATTN.	Taken on strength	DIBGATE.	20/8/17	PT 2 D.O. 230.3
OCT 6 1917	14 th RES. BATTN.	S.O.S. Posted to M.R.D. <i>Success to be in Command from this unit to Hdqrs. London</i>	DIBGATE.	5.10.17	PT 2 D.O. 276.10
5-10-17	J.O.S. M.R.D. on posting from 14 th Reserve Bn. and att'd on Command to H.Q. London	Authy. 14 th Res D.O. 276-6-10-17. M.R.D. D.O. 222-17-10-17. " 192-47-9-17.			R. Godfrey, Assistant Adjutant assist adjt 11 th Can Res Bn.

[Signature]
Lieut. & Adjutant,
Manitoba Regimental Depot.

(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.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
9-11-17.	HQOM79C	Attached to HQOM79C for Duty with Can War Records.	London.	1-11-17.	Pt II D.O. 205.
20-2-18	HQOMFC	Seconded for duty to the Can War Records from Man Regtl	London	21-11-17	Pt II D.O. 43
		Refs in B. 1.31 Aug 19			

~~Lieut. & Adjutant,
Manitoba Regimental Depot.~~

Lieutenant Barrand, G. H.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
From whom received					
15.12.16	OC. Cdn	left for	3 Cuir Brn	15.12.16	NR
16.12.16	OC. 3 Cuir Brn	arrived	" "	16.12.16	NR
8.2.17	" "	left for	4 th Cuir Brn	8.2.17	NR
11.2.17	" 4 th Cuir Brn	arrived	" "	"	B.213 Lt. 201 22.2.17
25.3.17	" "	Command	Special Works Park	25.3.17	B.213 (auth. 3 Cuir Brn A4-82/21.3.17)
8.4.17	" "	rejoined	Unit	3.4.17	B.213
15.4.17	" "	Command	3 rd Cuir Brn	13.4.17	B.213
6.5.17	" "	rejoined	Unit	29.4.17	"
12.5.17	M.D.S. 8 Cuir Brn	Adm to	1 Lt. Cuir	11.5.17	A.36/3998 Lt. 233 25/5/17
"	22 Cuir	Pyrexia Adm & to	24 AT	12.5.17	A.36/63976 236 2.6.17
21.5.17	ADMS Boulogne	Sick leave to England	22.5.17 to	5.6.17	AF.45 P. II 52 d/5.6.17
12.5.17	7 th Cuir	Wyt. Sick Adm	7 th Cuir	12.5.17	W.2034/W.1093 2 KD 2/17
1.8.17	a.g. Canadians	Medically boarded when on leave and detached to Manitoba Regt'l Depot. Shorncliffe	leave Regt'l	6.6.17	A.G. 3a. 1. a.g. Cdn. 8. B-88 of 1.8.17. Can. Sec. Ref. K.D. 12706. P. II 73 d/ 11.8.17.
<p><i>[Signature]</i></p> <p>for Lieut. Colonel A.A.G. Can. Sec. 3rd Cuir G.H.B.</p>					
4.7.17	Miss Roy Depart	Reported to Depot for duty Fort H.S. weeks		28.6.17	3 P. II 117
"	"	act "On Command to 14 th Res Bn		29.6.17	

Surname
BARRAUD.Christian Name
C.H.Reg. No.
DMS. 4-B-135.Rank
Lieut.Unit
43rd Battn.

MEDICAL BOARD held at

Date

Serial No.

(1) D.M.S. Office. 23-10-16. (7) London Area.
3-5-18.

Other Medical Boards at

Date

Serial No.

(2) D.D.M.S. Office 23-II-16 (8) London Area
3-8-18.

(3) Boulogne 21-5-17 (9) London Area

(4) London Area 6-6-17. (10) London Area
20-12-18

do. 28-6-17 25-8-19

(5) Shorncliffe 20-8-17.

Condition found by Board

G.S.W. left thigh.

Same Influenza

Disposition Recommended P. U. & Debility Anaemia.

(1) Unfit for any service - 1 mth.

(2) Fit for General service.

(3) Unfit any service 2 weeks. sick leave to Eng.

(4) Unfit any service 3 weeks. 22-5-17 to 5-6-17.

(5) Fit Home ser. Unfit Gen. ser. 6 weeks.

Fit General service.

PENSIONS & CLAIMS BOARD held at Date

Fit Home ser. unfit Garr. Duty, Gen. ser. 3 months

Fit Home ser. unfit G.D. & G.S. 4 months.

Fit Garr. Duty, unfit Gen. ser. 5 months.

Disposition

Fit Home ser. unfit G.D. & G.S. 6 months.

Remarks

5, Spring Grove, Harrogate, Yorks.

17th Res. B'n, Shorncliffe.

Barraud. C. H.

Lieut. 43rd. Battn.

No. 8. Gen. Hosp. Rouen. 7-10-16.
1st. London Gen. Camberwell. 10-10-16.
No 7 Sta. Hosp. Boulogne 13-5-17
tr. to England on 14 days sick leave 22-5-17
(X) Queen Alex Mil. Hosp. 1-6-17
Queen Alex. Mil. Hosp. Millbank. 31-5-17

Reported. Wounded. 5-10-16.

G.S.W. lt. thigh. slt.

N.Y.D. Sick slt.

Influenza *R*

Debility (Trench fever slt.) *R*

(Sick Leave expires 5-6-17)

Discharged: -. 23-10-16.

Disch.: -6-6-17.

C.L. 11-10-16. 492. C.L. 14-6-17 700-3

11-10-16. 492-2.

12-10-16. 493-4.

A.M.D. 2 DEPT.

8-12-16. 542-3.

18-5-17 677-2.

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

(X) 1-6-17 689
1-6-17 Hosp. report
8-6-17 695-3.

R

NAME *Barrand C**H*

REG'T'L. No.

RANK AND CORPS

*Lieut.**43rd Battr.*

CABLE

No.

DATE

NATURE OF CASUALTY

*02453**9-10-16**Adm. 8 Gen. Hosp. Rouen, Oct. 7th 1916,
wounded left thigh. ✓*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS



NAME

Barrand Cyril Henry

REGT'L No.

RANK AND CORPS

Lieut. 42nd. Inf. (143rd Bns. Form. 79th 2nd. P.M.)

CABLE

NATURE OF CASUALTY

NO.

DATE

C. H. J. C.)

Q. 2555

10-10-16

Reported shell shock on Oct 5th/16

Q. 2453

9-10-16

Adm. to #8 Gen. Hosp. Rouen, Oct. 7th 1916

R 581

14-10-16

(wounded left thigh) ✓

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
492 ⁽¹⁾	Rep. from Base (T.G.L.)	5-10-16	Wounded.
492 ⁽²⁾	#8 Gen. Rouen (W.O.)	7-10-16	G.W. L. High Sgt.
493 ⁽⁴⁾	1st London Gen. Camberwell.	10-10-16	" " " "
542 ⁽³⁾	Discharged	23-10-16	" " " "
477	#7 St. Antoine	13-5-17	myd Sick. Sgt.
489	Transferred to Eng. Sick Base 14 Days	22-5-17	Influenza
695, 2	Alex. Millbank Lond.	3-5-17	Debility (Trench Fever)
41	" " " "		Sgt. (Sick leave expired 5-1-17)
700	" " " " " "	6-6-17	Trench Fever

G.S. 10607. 5M-23-5-18.

Name. *C. H. Barrand*

File No. *8-B-88*

Regtl. No. Rank *Lieut*

Unit *Man. Regt.* O' seas Service

Reported Unit sent to

For Canadian *to no. 8-9-19* For Imperial *Regt 571*

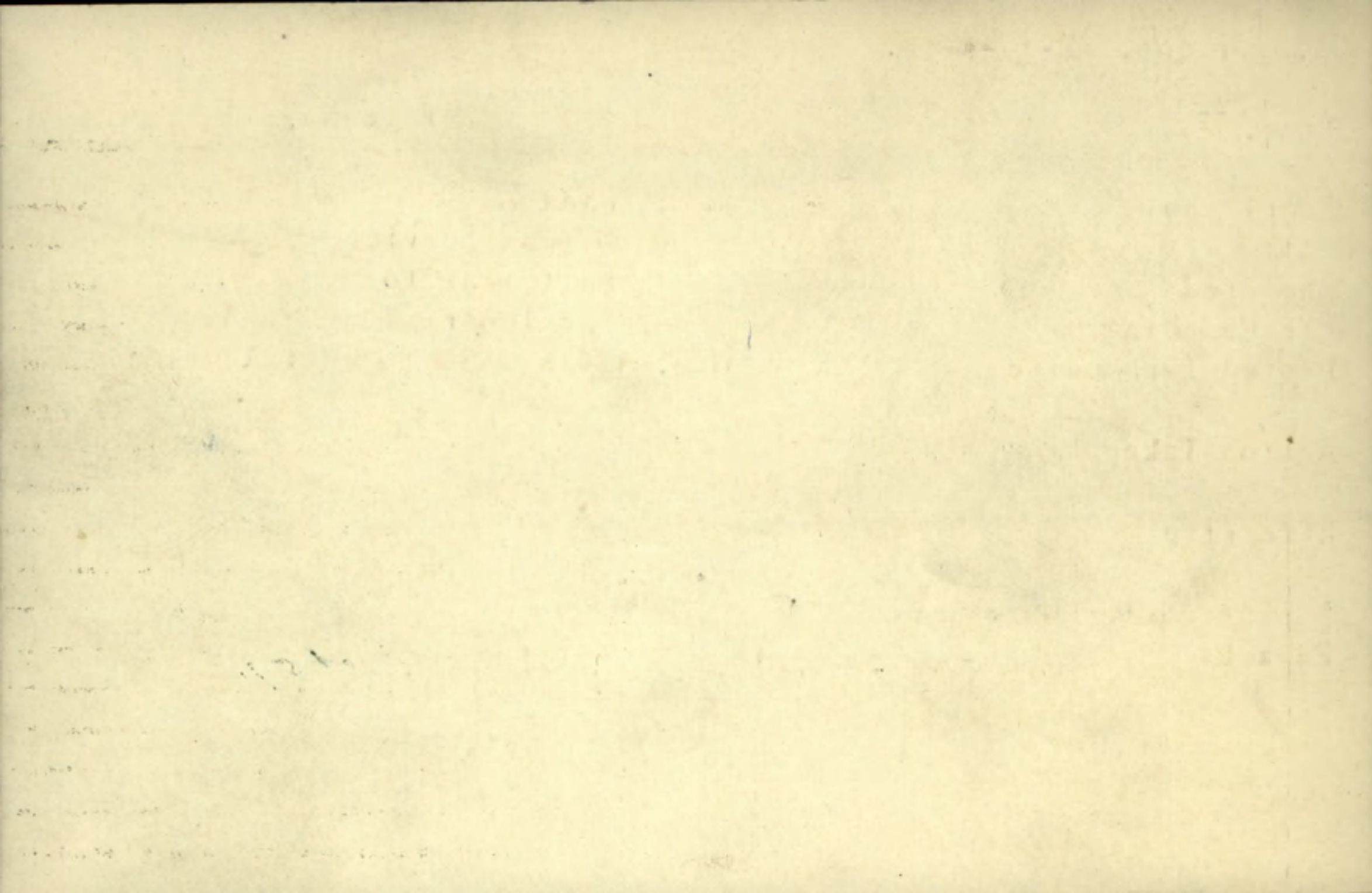
Listed for Course G.S. Advised Unit Advised

Action Taken *Retires in B.I.*

Effective *31/8/19* *R.G. 12/9/19 31049/11540*

Forwarded for Gazettement

Remarks *Address: - 14, Hamilton Rd, Sidcup, Kent.*



Number..... Rank *LIEUT* ~~*B*~~

Surname..... *BARRAUD*

Christian Name..... *CYRIL HENRY* ~~*V*~~

Units..... Theatre of War..... *FRANCE*

Date of Service..... *22.2.16*

Remarks.....

Latest Address..... *14 Hamilton Road*

Sidcup, Kent, Eng

Roll No. *B Page 13504*

200m.-2-21.M. *Man Reg*

DESP. MAY 26 1922

REGN. No. *11617408*

No

RANK

Lieut

NAME

*Barraud C.**6*

T.O.S.

28-7-15

D.O.

6 of 8-8-15

UNIT

79th Cameron Highlanders

M. D. 10

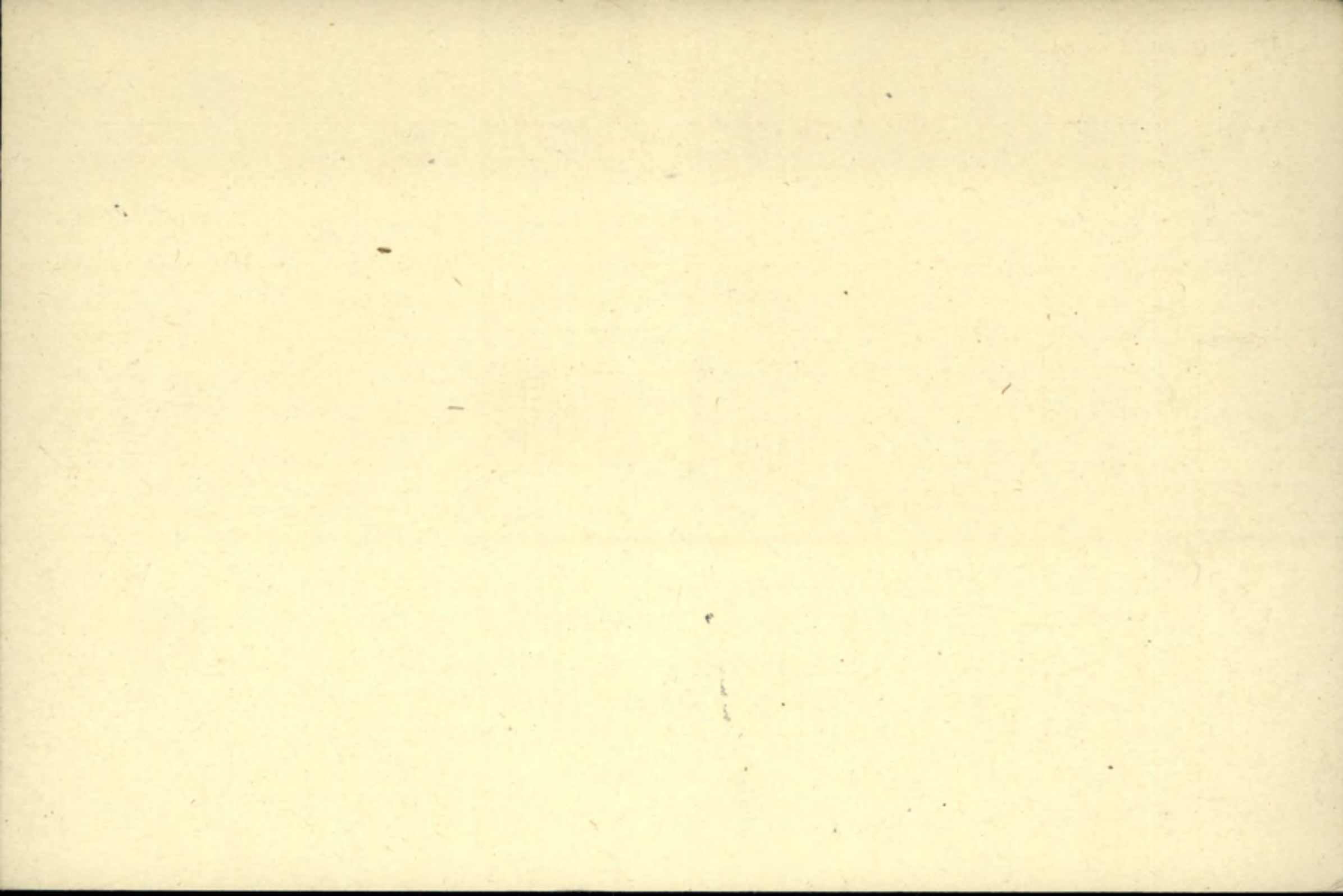
PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

*1915**1915**July 28**Aug 31**v**To overseas 24-8-15**D.O. 9 of 29-8-15*



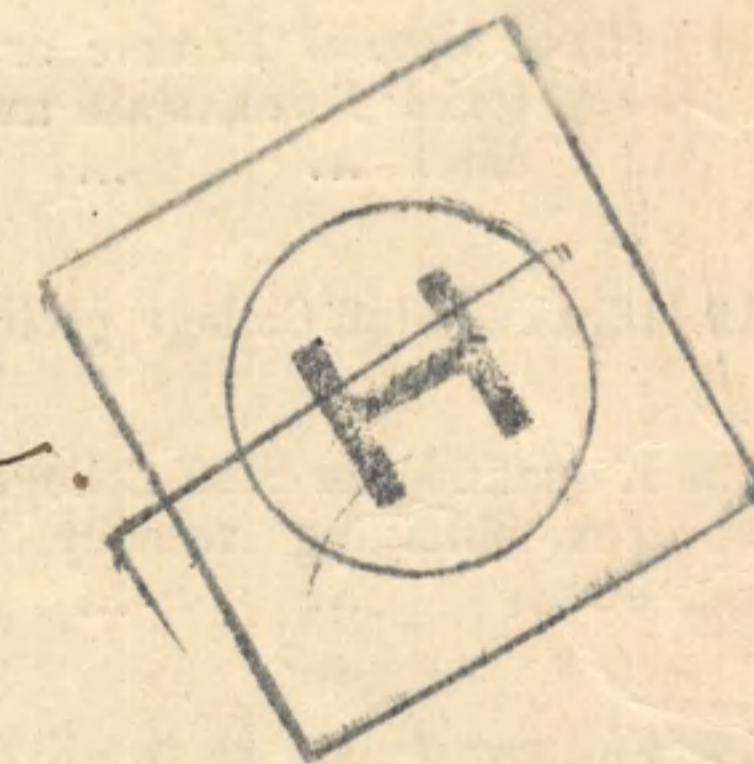
RECORD OF SERVICES

of *Lieut. Cyril Henry Barraud*
(Rank, Christian Names and Surname in full, printed.)

Regiment *79th Bt H of L.*

PERSONAL PARTICULARS.

- 1. Date and Place of Birth... *Barnes, London Eng. 9th July 1877.*
(If promoted from the ranks, age as given on attestation and date of attestation should be stated in lieu of date of birth.)
- 2. Religious persuasion ... *Roman Catholic*
- 3. Where educated, specifying Schools or University ...
- 4. Date of first Commission ...
- 5. Height ... *5ft. 8 inches.*
- 6. Married or Single ...
- 7. If married, date of marriage ...
- 8. Name and Address of next of kin (stating relationship), guardian or agent for reference in case of emergency ...



also

A second name (as an alternative)...

I do hereby certify that to the best of my knowledge and belief this statement of personal particulars is in all respects correct and true.

Signature of Officer.

Place

Rank.

Date

Regiment.

OPINION OF THE MEDICAL BOARD

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

Concur

19. Is the invalid fit for

- (a) General service, (b) Service abroad, not general service, (c) Home service (Canada only), (d) Temporarily unfit, (e) Unfit for service in Categories A, B and C

- (Category A) (Yes or No.) (Category B) (Yes or No.) (Category C) (Yes or No.) (Category D) (Yes or No.) (Category E) (Yes or No.)

20. It is certified that the invalid

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

- (b) Does not require treatment. (c) Should pass under his own control. (d) Should not pass under his own control.

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

C: - Boarded for discharge in this country (Eng) Oct - H.Q. C.P.O - 5222 of 25-1-19

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Aut. Cou. 2/8-8-88 of Aug 25-1919.

Handwritten signature of J.M. Macnamara, Major, Canada, President.

PLACE C.R.T. O.H.

DATE 25-8-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE

DATE

APPROVED BY

APPROVED BY

Assistant Director of Medical Services.

Director-General of Medical Services.

DATE

DATE

CERTIFIED TRUE COPY of the Board of Medical Officers here recorded in M.F.B. 227 for D.M.S. Canadian

THIS FORM WILL BE USED FOR ALL RANKS MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed. 2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. 3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. 4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered. 5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board. 6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board." 7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly. 8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Retired Hospital DATE 25.8.19

1. (a) Unit 43rd Bn. (b) Regimental No. (c) Rank Lt Col

(d) Surname BARRAUD (e) Christian name Cyril Henry

(f) Home address Warehouse Studio, Wokingham

(g) Next of Kin Gladys Barraud (h) Relationship wife

(i) Address of Next of Kin Warehouse Studio, Wokingham

2. Age last birthday 42 yrs Date of birth July 9th 1877

3. Enlistment, or Appointment (if an Officer) (a) Place WINNIPEG (b) Date May 15, 1915

4. Personal description: (a) Height 5' 8" (b) Weight 150 lb. (c) Complexion fair

(d) Colour of hair red (e) Colour of eyes blue (f) Identification marks, Scars, etc.

Small T & T. wds. upper 1/3 left thigh.

5. Former trade or occupation Artist

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

Table with columns: PERIODS, From, To. Rows: Canada (May 1915 - Sept 1915), England (Sept 1915 to Feb 1916; Oct 10, '16 to Dec 16, '16; May '17 to -), France or other theatres of War (Feb 1916 to Oct 10, '16; Dec 16 to May '17)

7. Original disease, or injury DEBILITY, ANAEMIA

(a) Date of origin May 1917 (b) Place of origin France

(c) Cause P.U.O in France

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

DEBILITY resulting in moderate weakness.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Fairly well nourished, slightly pale. All systems negative.

Subjective. Complains of weakness and lack of spirit. Usually of an athletic habit. Now he easily tires after exercise, eats and sleeps well.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System... NO Cardio-Vascular System... NO Genito-Urinary System... NO (If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.) Special Senses... NO Respiratory System... NO Integumentary System... NO Disturbances of Mentality... NO Digestive System... NO Muscular System... NO Osseous and Joint Systems... NO Any other general condition... NO

10. (a) History (of the condition referred to in Section 9 (a).)

Statement May 47 sent on 1.7 the line with Gen. W.H.B. Shaw to 7 St. Hosp. B'logne 13.5.17 to 22.5.17 U.S.D. Mullbank Hosp 31.5.17 to 6.6.17 Quanaia.

10. (b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Wounded. 5.10.16. G.I.W. left thigh. No disability. W.H.B. Shaw. 101. London Gen. 11.10.16. to 23.10.16.

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

Small T & T. scars upper left thigh

11.—(a) Did the disabling condition have its origin before enlistment? NO.

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

NO

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? 91- NO

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months.

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

None in hospital

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? NO (If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? YES (If not, briefly state why)

17. Recommendations

W.H.B. Shaw Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned C.H. Berrand, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

9117

C.H. Berrand Rank. Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Concur

19. Is the invalid fit for

- (a) General service, (b) Service abroad, not general service, (c) Home service (Canada only), (d) Temporarily unfit, (e) Unfit for service in Categories A, B and C

20. It is certified that the invalid

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

- (b) Does not require treatment, (c) Should pass under his own control, (d) Should not pass under his own control, (e) Strike out condition not applicable.

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

C.1 Boarded for discharge in this country Auth H.C. CRO 5222 of 25-1-19

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement.

Auth:- Com. 2/8-B-88 of Aug. 25/1919

Frederic A. St. John, Major President

PLACE G.R.C. O. Hospital DATE 25-8-19 Jno. Mcoun, Major Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

CERTIFIED TRUE COPY I concur in the opinion of the Board of Medical Officers here recorded. Captain, D.A.D.M. for D.M.B. Canadians

PLACE DATE APPROVED BY APPROVED BY Assistant Director of Medical Services. Director-General of Medical Services.

DATE DATE

THIS FORM WILL BE USED FOR ALL RANKS MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed. 2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board." 4. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. 5. Special care is required in answering question 9. Read the questions carefully. All questions must be answered. 6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board." 7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly. 8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Petrograd Hospital DATE 25-8-19

1. 1 (a) Unit 43rd Bn (b) Regimental No. (c) Rank Lieut

(d) Surname BARRAUD (e) Christian name CYRIL HENRY

(f) Home address Warehouse Studio Wokingham

(g) Next of Kin Gladys Barraud (h) Relationship Wife

(i) Address of Next of Kin Warehouse Studio Wokingham

2. Age last birthday 42 Date of birth July 9/1877

3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg (b) Date 15-5-15

4. Personal description: (a) Height 5-8 (b) Weight 150 (c) Complexion Fair

(d) Colour of hair Red (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

Small T. & T. wds. upper 1/5 left thigh

5. Former trade or occupation Artist

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

Table with columns: Statement, From, To, Years, Days. Rows: Canada (May 1915 to Sept. 1915), England (Sept. 1915 to Feb. 1916), France or other theatres of War (Feb. 1916 to Oct. 10, 16 Dec. 16)

7. Original disease, or injury ANAEMIA

(a) Date of origin May 1917 (b) Place of origin France

(c) Cause P.U.O. France

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

Debility resulting in moderate weakness

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Fairly well nourished Slightly pale All systems negative

Subjective:- Complains of weakness and lack of spirit Usually of an atheletic habits Now he easily tires after exercise Lets and sleeps well

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No Cardio-Vascular System No Genito-Urinary System No
Special Senses No Respiratory System No Integumentary System No
Disturbances of Mentality No Digestive System No Muscular System No
Osseous and Joint Systems No Any other general condition No

10. (a) History (of the condition referred to in Section 9 (a).)

Statement May '17 Sent out of the line with fever MHS shows No.7 Stat. Hosp. BBlagne 13-5-17 to 22-5-17 NYD Millbank Hospital 31-5-17 to 6-6-17 Anaemia

10—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either to or since enlistment, and not included in Section 10 (a).)

Wounded 8-10-16 GSW left thigh No disability MHS shows
101 London Gen. 11-10-16 to 23-10-16

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

Small T. & T. scar upper left thigh

11.—(a) Did the disabling condition have its origin before enlistment? No

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

N. A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

Routine Hospital

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? Yes (If not, briefly state why)

17. Recommendations

A.C.C. Johnstone, Major CAMC

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out.)

I, the undersigned C.H. Barraud have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Handwritten initials

C.H. Barraud

Rank. Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

CONCUR

19. Is the invalid fit for

- (a) General service, (b) Service abroad, not general service, (c) Home service (Canada only), (d) Temporarily unfit, (e) Unfit for service in Categories A, B and C

- (Category A) (Yes or No.) six months, (Category B) (Yes or No.) Cl., (Category C) (Yes or No.) N.A., (Category D) (Yes or No.), (Category E) (Yes or No.)

20. It is certified that the invalid

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

- (b) Does not require treatment. (c) Should pass under his own control. (d) Should not pass under his own control. (Strike out condition not applicable.)

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

C.I. Boarded for discharge in this country Auth. H.Q. CRO. 5222 of 25-1-19

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Auth :- Com. 2/8-B-88 of Aug. 25/1919

Frederick A. St. John Major President.

PLACE C.R.C.O. Hospital

DATE 25 -8-1919

Jno. Macoun. Major.

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

President.

PLACE

DATE APPROVED BY

APPROVED BY

Members

Assistant Director of Medical Services.

Director-General of Medical Services.

DATE

DATE

THIS FORM WILL BE USED FOR ALL RANKS MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed. 2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board." 4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered. 5. If space provided under any section is insufficient add another sheet. Such sheets must be initialed by the Medical Board. 6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board." 7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly. 8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Petrograd Hospital DATE 25-8-1919

- 1. 1 (a) Unit 43rd Bn. (b) Regimental No. (c) Rank Lieut (d) Surname Barraud (e) Christian name Cyril Henry (f) Home address Warehouse Studio, Wokingham. (g) Next of Kin Gladys Barraud (h) Relationship Wife (i) Address of Next of Kin Warehouse Studio, Wokingham. 2. Age last birthday 42 Date of birth July 9/1877 3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg (b) Date 15-5-15 4. Personal description: (a) Height 5-8 (b) Weight 150 (stripped) (c) Complexion Fair (d) Colour of hair Red (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Small T.&T. wds. upper 1/3 left thigh 5. Former trade or occupation Artist

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

Table with columns: Statement, From, To, Years, Days. Rows: Canada (May 1915 to Sept 1915), England (Sept. 1915 to Feb. 1916), France or other theatres of War (Feb. 1916 to Oct. 10, 16 Dec 16, May '17).

- 7. Original disease, or injury Anaemia (a) Date of origin May 1917 (b) Place of origin France (c) Cause P.U.O. France.

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

Debility resulting in moderate weakness.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Fairly well nourished Slightly pale. All systems negative.

Subjective :- Complains of weakness and lack of spirit. Usually of an athletic habits. Now he easily tires after exercise. Eats and sleeps well.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No Cardio-Vascular System No Genito-Urinary System No
Special Senses No Respiratory System No Integumentary System No
Disturbances of Mentality No Digestive System No Muscular System No
Osseous and Joint Systems No Any other general condition No

10. (a) History (of the condition referred to in Section 9 (a).)

Statement May 31-17 Sent out of the line with fever. MHS shows No. 7.

Stat. Hosp. B'longe 13-5-17 to 22-5-17 MYD Mill Bank Hospital 31-5-17

to 6-6-17 Anaemia.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Wounded 5-10-16 G.S.W. Left thigh No disability MHS shows
101 London Gen. 11-10-16 to 23-10-16.

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

Small T. & T. scar upper left thigh.

11.—(a) Did the disabling condition have its origin before enlistment? No

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

N.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

Routine Hospital.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? Yes (If not, briefly state why)

17. Recommendations

A.C.C. Johnstone. Major. CANC.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, C.H. Barraud, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

C.H. Barraud,

Rank. Signature of invalid examined.

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

Pay

F.A.

Messing

Name

Initials

Bank

Returns in Ex. Sales. 31/8/19. a.g. 28/8/19

*Barrand
C.H.
of Mont.*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1919								
Aug 1	a.o.a. 17/9		100	100				
		Bank						
17	Ex. Sales 1-31/19 Pay R.	5635	124	124				
		Bank						
17	Ex. Sales 1-31/19	6413						
		Bank						

£12.14.9 62⁰⁰

*Pa to cease eff 19/19
H to W.C. Ledger.
£12.14.9 62⁰⁰
Add for 6-12
12/19 No 14044.*

W.S.G. clearance certificate issued 4/19.

ASSIGNED PAY.

UNIT.

Rates
DATE

AUTHORITY

RANK.

DATE

AUTHORITY

NAME.

✓ 14

Beneficiary
Address

43 Bn. Pay. \$ 2⁰⁰ P.D.
man. R. D. L.A. \$ 0⁶⁰
mess \$ 1⁰⁰

Lieut.

Name *Barrand.*
Initials *C. A.*
Bank *of montreal.*

Amount. \$

Separation Allowance issued. Yes or No.....
England.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
apl 3	<u>Balance Forward</u>					Nil - ✓		
9 5	Can. Viet War Loan Pay to C.P.M. Bank	267		20				
11	Pay R.		108					
23	Bank	1094		88				
24	Sub 1-31 ³ /18	988					9-11-1 46 ⁵⁰	
may 6	Pay R.		111 60					
6 6	Can Viet War Loan Pay to C.P.M. Bank	1663		20				
23	Bank	2551		91 60				
15	Sub 1-30 ⁴ /18	2035					9-4-11-45 ⁰⁰	
June	Pay R.		108					
15	Sub 1-31 ⁵ /18	3397					9-11-1 46 ⁵⁰	
22	Bank	4126		108				
July	Pay R.		111 60					
22	Sub 1-30 ⁶ /18	4895					9-4-11-45 ⁰⁰	
25	Bank	5607		111 60				
Aug	Pay R.		111 60					
24	Bank	7161		111 60				
Sep 13	Sub 1-31 ⁷ /18	7096					9-11-1 46 ⁵⁰	
25	Pay R.		108					
Oct 12	Do. R. (Shirt, Tie) 4 ¹⁰ /18 Leg. Oct. O.C.S. No 1813	Bank 9127		108				
15	Sub 1-31 ⁸ /18	8410		3 77			9-11-1 46 ⁵⁰	
-	1-30 ⁹ /18	8410					9-4-11 45 ⁰⁰	
22	Pay R.		111 60					
	Bank	10363		104 83				
	Yount - Pugs.							

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

40.

addⁿ outfit all $1\frac{8}{18}$, \$ 100.

Lieut

Name

Initials

Bank of Montreal

Barrand
C. H.
Bank of Montreal

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Oct 31	add. Outfit all $1\frac{8}{18}$	Bank 10854	100	100				
Nov 22	Pay R & A.F.A. $12\frac{9}{18}$	Bank 12542	140	140				
22	Sub: 1-31 $1\frac{10}{18}$	9700					9-11-1 46 ⁵⁰	
Dec 11	Pay R.	Bank 13730	124	124				
1919	Jan 2	Bank 15504	124	124				
22	Subs 1-31 $12\frac{12}{18}$	11714					9-11-1-46 ⁵⁰	
Feb 14	Pay R.	Bank 17062	112	112				
March	Subs 1-28 $1\frac{9}{19}$	13733					11-10-7 56 ⁰⁰	
14	Sub 1-31 $1\frac{1}{19}$	13853					12-14-9	
April 4	Pay (R)	Bank 18653	120	120				
May	Pay (R)	Bank 1101	120	120				
June	Pay R.	Bank	124	124				
July 14	Subs 1-30 $6\frac{6}{19}$	4623					12-6-7 60 ⁰⁰	
29	Subs 1 ⁴ / ₁₉ - 31 ⁵ / ₁₉	5116	124	124			12-5-1-4 122 ⁰⁰	

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary
Address

NAME OF DATE AUTHORITY

DATE AUTHORITY

43 Pn.

Pay 2⁰⁰ P.K.
A.O. 60
Messg. P.D.
Lieut

Name *Barrand*
Initials *C. H.*
Bank of Montreal

Amount. \$

Separation Allowance issued. Yes or No *30 ENGLAND*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
		1917-18						
						0		
Apr 22	Apr Pay (R)		108					
	Bank	3017		108				
May 22	May Pay R.		111 60					
	Bank	6029		111 60				
June 9	Pay R.		108					
	Bank	7999		108				
July 10	Pay R.		111 60					
	Bank	13082		111 60				
Aug 9	Pay R.		111 60					
	Bank	14394		111 60				
Sept 15	Pay R.		108					
	Bank	21863		108				
Oct 11	Pay (R)		111 60					
17	billeting 29-31/17.	7007					18/6	4 ⁵⁰ ✓
"	" 1-24 9/17.	7018					7-7-11	36 ✓
19		Bank 26190		111 60				
26	Rations 1-28 ⁸ /17 (less 4dps)	6418					£1 12. 0	
Nov 14	Pay (R)		108					
	Bank	30662		108				
Dec 8	Chief P.M. 1 st Inst Can Vic War Loan Cash	32738		10				
10	Pay (R)		111 60					
13		Bank 35096		101 60				
19	Subs 3. 30 ¹¹ /17	10632					£8. 12. 7	\$42 ⁰⁰ ✓
Jan 3	Chief P.M. 2 nd Inst Can Vic War Loan Bank	35246		10				
10	Pay (R)		111 60					
	by barrand Twd							

ASSIGNED PAY.	UNIT.	RANK.	NAME.
Beneficiary	43 Bn	Lieut	Name <i>Barrand</i>
Address			Initials <i>B. H.</i>
Amount. \$			Bank <i>of Montreal.</i>
Separation Allowance issued. Yes or No <i>30 ENCLAN 1</i>			

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Jan 10	<i>br Brought Forward.</i>					101 60		
" 12	<i>Subs 1-31¹² 17</i>	<i>12037</i>					<i>9-11-1 \$46⁵⁰</i>	
21	<i>Bank</i>	<i>39336</i>		101 60				
Feb 8	<i>Pay (R)</i>							
" 13	<i>3rd Inst to Vic. War Loan Chief P.M.</i>	<i>40380</i>	<i>100 80</i>					
" 18	<i>Sub 1-31¹⁸</i>	<i>14716</i>		20 -			<i>9-11-1 \$46⁵⁰</i>	
" 19	<i>Bank</i>	<i>40953</i>		80 80				
Mar 8	<i>Pay (R)</i>							
" 8	<i>4th Inst C.V. War Loan Chief P.M.</i>	<i>41627</i>	<i>111 60</i>					
" 20	<i>Subs 1-28¹⁸</i>	<i>16353</i>		20 -			<i>8-12-7</i>	
" 21	<i>Bank</i>	<i>42552</i>		91 60				

ASSIGNED PAY.

UNIT.

RANK.

NAME.

C

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

43rd Bn.

Lieut.

Name *Barrasid*

Initials *C H.*

Bank

Bank of Montreal

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case	INITIALS
1916								
April 24	Pay April (R)		108			108		
.. 26	Bank			108		0		
May 22	Pay May (R)		111 60					
.. 26	Bank			111 60		0		
June 20	Pay June (R)		108					
.. 27	Bank			108		0		
July 20	Pay July (R)		111 60					
.. 25	Bank	5565		111 60		0		
Aug 19	Pay Aug (R)		111 60					
.. 25	Bank	7408		111 60		0		
Sept 15	Pay Sept R		108					
.. 20	Bank			108		0		
Oct 21	Pay Oct R		111 60					
.. 26	Bank			111 60		0		
Nov 24	Pay Nov R		108					
.. 27	Bank			108		0		
Dec 14	Pay Dec		111 60					
.. 14	Bank			111 60		0		
1917								
Jan 20	P & A Jan.		111 60					
.. 23	Bank	19288		111 60		0		
Feb 14	P & A Feb.		100 80					
.. 20	Bank	21931		100 80		0		
Mar 22	P & A Mar		111 60					
.. 23	Bank	24836		111 60		0		

1916-17

(See Cards)

