# DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Coppin Harry

Regt. No. 11340 Rank L/Cpl.

Corps 12th Res. Batt.

Medically unfit

35680

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

Attestation Papers..... 1 4

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

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

Parchment Certificate..... 1

Medical Report for Invalids..... 3

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Deceased 9-3-55

AO-80 Box 1988

7 3
7 3
5- 3
1

M. F. W. 62.
25m.—11-15.
H. Q. 1772–39—935.

Copy

UNIT Camo T.S. Regimental No. 113406.

# ATTESTATION PAPER.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

| | (ANSWERS). |
|---|---|
| 1. What is your name? | Harry Coppin |
| 2. In what Town, Township or Parish, and in what Country were you born? | Woking Surrey Eng |
| 3. What is the name of your next-of-kin? | (Wife) Ann Coppin |
| 4. What is the address of your next-of-kin? | 27 McKenzie St Brantford Ont |
| 5. What is the date of your birth? | July 29th 1880. |
| 6. What is your Trade or Calling? | Painter |
| 7. Are you married? | yes |
| 8. Are you willing to be vaccinated or re-vaccinated? | yes |
| 9. Do you now belong to the Active Militia? | yes. |
| 10. Have you ever served in any Military Force? If so, state particulars of former Service. | yes. 1 yr 13 Lancers |
| 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 |

(Sd) Harry Coppin (Signature of Man).
(Sd) M.A. Colquhoun (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Harry Coppin, 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.

Sd { Harry Coppin (Signature of Recruit).
{ M.A. Colquhoun (Signature of Witness).

Date Sep 22 1915.

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Harry Coppin, 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.

So { Harry Coppin (Signature of Recruit).
{ M.A. Colquhoun (Signature of Witness).

Date Sep 22 1915.

### 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 Valcartier this 22 day of Sept. 1915.

(Sd) W E Bmell (Signature of Justice).

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

(Sd) R H Labatt (Approving Officer).

L9715 8-9-15 5,000. Per G.R. Tyler

Certified true copy.
for Officer i/c Records, C.E.F.

# Description of Coppin on Enlistment.

Apparent Age 34 years 2 months.
To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8½ ins.

Chest measurement. { Girth when fully expanded 36½ ins. / Range of expansion 3½ ins.

Complexion Light

Eyes Blue

Hair D. Brown.

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

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

Scar on L. Fore arm

## CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Sept 1 1915 (Sd) R. Maynard

Place

*Insert here "fit" or "unfit."

*Medical Officer.*

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:—

COPIED Archives COPIE

## CERTIFICATE OF OFFICER COMMANDING UNIT.

A Coppin 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.

(Sd) R. A. Labatt (Signature of Officer.)

Date Sept 22 1915

Certified true copy.

Captain,
for Officer i/c Records, C.E.F.

Army Form B. 2079.

**WARNING.**—*If you lose this Certificate a duplicate cannot be issued.*

*N.B.—Any person finding this Certificate is requested to forward it, in an unstamped envelope, to the Secretary, War Office, London, S.W.*

DEP'T. MILITIA & DEFENCE NOV 11 1915 CANADA

Certificate of discharge of No. 11340 (Rank) Pte.

(Name) Coppin. H.

(Regiment) 12th Reserve Battalion, C. T. R.Q.

who was enlisted at Valcartier.

on the 22nd September 1914.

He is discharged in consequence of Being Medically Unfit.

Auth. Para. 392 (XVI) K. R. & O.

after serving ____ years ____ days with the Colours, and ____ years ____ days in the Army Reserve.

(Place) Shorncliffe. Signature of Commanding Officer } Lt Col. O.C. 12th Res Bn.

(Date) October 1915.

*Description of the above-named man on ____ when he left the colours.

Age 35yrs 2 mths.

Height 5 ft 8½ ins.

Complexion Dark.

Eyes Grey

Hair Dark Brown.

Marks or Scars, whether on face or other parts of body.

3 Vaccn. Marks. L. Arm.

* *Should agree with the description on Character Certificate, Army Form B.* 2067.

(7 22 12) W 2766—1027 120,000 9/13 H W V Forms/B. 2079/20

# Recruiting Agents.

The following is an extract from the Recruiting Regulations, 1912:—

"Any man, whether Soldier or Civilian, who brings a Recruit to "a Recruiter, or to a Military Barrack, is a Recruiting Agent, "and it is not necessary that he should have been formally "appointed as such."

The effect of this Regulation is that anyone, whether ex-Soldier or Civilian, bringing a Recruit under the above Regulations is entitled to the reward if the Recruit is passed into the Service.

Recruiting Rewards will not be paid for—

(*a*) Boys under 17 years of age.

(*b*) Re-enlisted Pensioners.

(*c*) Recruits for the Armourer Section and the Machinery Artificer Section of the Army Ordnance Corps.

(*d*) Any Non-Commissioned Officer or Man of the Special Reserve who enlists into the Regular Army.

Recruiting Rewards will be paid to *Recruiting Agents* for each Recruit raised and finally approved for the Regular Army or the Special Reserve, at the following rates, viz. :—

**5s. to 2s. 6d. Regular Army.**

**1s. 6d. Special Reserve.**

Leaflets showing the conditions and advantages of the Army or Special Reserve are supplied gratis at every Post Office.

Men wishing to enlist should apply personally or by letter to the Officer Commanding the Regimental Depôt nearest to their homes, or to any Serjeant Instructor of the Territorial Force or other Recruiter.

Men who have served in the Regular Army for 3 years or more are eligible under certain conditions for enlistment into the Special Reserve up to the age of 38.

6 40427 C.

08223

Rank and Name COPPIN Harry

Regimental No. 11340

Unit 4th Battalion

Date of enlistment Sept.22,1914.

Place of birth England

Married (Yes or No) Yes

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Ann Coppin (wife)
27 Mohawk Street,
Brantford, Ont.

Date and place of discharge

Reason for discharge

Character on discharge

| 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 | | | | |
| 31.10.16 | O/C. A Th | S.O.S. ex aust to Hos Eng | in the field | 1-5-15. | Part II 59. (L/Cpl.) |
| 1-5-15 | 6-D-51 | Wounded | Base | | ON |
| 20.5.15 | " 6th. | Wounded. Slight | 3rd W.G. Hospl. Cardiff | 1.5.15 | O.N. |
| 24.6.15 | CD.91 4th Bn | -"- | -"- | 26-6-15 | Disch to sick furlough |
| 27.6.15 | 3rd W.G.H. Cardiff. RAMC | Furlough. 25 Hastings Ave | Margate, Kent | 26-6-15 / 3-7-15 | A.F.W. 3016 |
| 29.6.15 | O.C. 12th | On strength 12th | Shorncliffe | 1.5.15 | Pt II orders |
| 5-7-15 | O.C. 12th | Return to duty | Shorncliffe | 5/7/15 | Pt II orders 694 |
| | R.O. | Attchd to C.A.M.C. "On Command" | | 26-7-15 | R.O. 1603 (Pt II 89 12th Bn.) |
| 8.1.16 | 4th Batt | appointed Paid L/Corp | in the field | 19.3.15 | P.R. II No. 2. |
| 20.12.19 | 12th Res Bn | S.O.S to Canada | London Ont | 15-10-15 | A.O. 58 |

1ST CEN. ONT. REGT.

La Canada 15/10/15 S.S. Corsican.

92431.—W6190/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

**Army Form B. 103.**

# Casualty Form—Active Service.

Regiment or Corps 12th Res. Battalion.

Regimental No. 11340. Rank L/Cpl. Name Coffin H.

Enlisted (a) 22/9/14 Terms of Service (a) Period of War. Service reckons from (a) 22/9/14.

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

Extended ____ Re-engaged ____ Qualification (b) ____

| Report | | 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 | | | | |
| 18.12.19 | 12 Res | S.S. Shafton for Canada | London | 5.10.15 | 170.18 |
| 26-1-16. | Discharge Depot- | S.S. Mel Kirkpt. | Quebec. | 26-1-16. | Jan Pay list. |

D. Guthrie Capt for OC

Discharged in Canada, being Medically unfit.

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

[P.T.O.

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

Lieut-Colonel,
Battalion, C.E.D.

O.C., 12th Reserve

(8915)—Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Dvf 9195

0823

Certified Correct
D.S.01/INF/4/11

Army Form B. 103.

# Casualty Form—Active Service.

Regiment or Corps 4th Batt. 1st Brigade C. E. F.

Regimental No. 11349 Rank L-Cpl Pte. Name Harry Coppin

Enlisted (a) 22.9.14 Terms of Service (a) Duration of War Service reckons from (a) 22 Sep 1914

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

Extended _____ Re-engaged _____ Qualification (b) _____

| Report | | 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 | | | | |
| | OC 4th Bn | Arrived in France | St Nazaire | 11-2-15 | YR |
| 25-4-15 | O.C. 4th H.F. | 1 S.L.C. P. Coml Rd. to H St. Hosp. | Field | 25/4/15 | W 130.34.K.19.4.14/4a |
| 25-4-15 | O.C. 4th Amb | wounded from 3. Canad. Station | Field | 23.4.15 | A 3.a |
| 29/4/15. | OC. Hosp Genl Hosp. | G. S. W. R Arm. | Hosp Genl | 29/4/15. | W3024-K 48/1. |
| 28/4/15 | #12 Genl | G.S.W. R. arm | #12 Genl | 27/4/15 | K 43/5 |
| 24/4/15 | 3 C. C St. | | Treated | 24/4/15 | Trans to Hosp A 36 |
| 8-1-16 | OC 4th Bn | Appointed Paid Lance Corporal | | 14-3-15 | Pt 2 Orders No 2 |
| 28-10-16 | 3rd Ech. | Struck off strength on admission to Hospital | England. | 1-5-15 | A.A.G. Can. Sec. 3rd Ech. G.H.Q. K.I. 101/283 & Part 2 Orders No. 59. d/- 31-10-16. |

22 NOV. REC'D

Chas. B. Maxwell
Lieut.
for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

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

P.T.O.

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

0823

Forms
I. 1237
10

169890

Army Form I. 1237.

# MEDICAL CASE SHEET.*

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| 3742 | 11340 | Sec Corpl. | Coppin | Harry |

| Year | Unit. | Age. | Service. |
|---|---|---|---|
| 1915 | 4th Canada | 34 | Quebec |

| Station and Date. | Disease |
|---|---|
| 23. 4. 15 | Rifle bullet wounds of right arm. (Forearm) |
| 21. 5. 15 | admitted to 3rd Western. Cardiff. Suffering from shell wounds of fore arm. Septic. |
| | Hot fomt: applied |
| 2. 5. 15 | X Rayed. Screened. No fracture found. |
| 3. 5. 15 | Heart examined by Col Lancashire. note on back |
| | of chart. |
| 6. 5. 15 | Belladonna plas: applied. |
| 12.5.15 | Movements L Elbow Joint |
| 23 5 15 | Carbolic Fomts. |

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

(Hse. No.) W 10373-1916. 800M (E) 1/15. Mc. & W.

P.T.O.

| Station and Date. | |
|---|---|
| | |
| | |

FILE No.
RECEIVED
JAN 25 1919
PAYMASTER
MILITARY DISTRICT No. 2

23377
466

# DEPARTMENT OF MILITIA AND DEFENCE.

# WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names ... Harry ... 2. Surname ... Coppin ...

3. Rank ~~L/Corp~~ Sgt ... 4. Original Unit ... 4th Batt ... 5. Reg. No. ... 11340 ...

6. Address, in full, to which future payments of gratuity are to be forwarded ...
... 27 Mohawk St ... Brantford Ont ...

7. Date of enlistment in the C.E.F. ... August 22nd 1914 ...

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ... Ann Coppin ...

9. Relationship of such dependent ... Wife ...

10. Address, in full, of such dependent ... 27 Mohawk St Brantford Ont ...

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ... No ...

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
... Yes ... 4th Batt in France Feb 8, 1915 until April 23, 1915 ...

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? ... No ...

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service ... No ...

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served ... 2 Years and 1 Month with 4th Batt in Canada, England & France ...

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department ... No ...

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ... No ...

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... No .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid .....
3 Months post discharge pay — $159.00
No 2 District Paymaster

20. Have you been issued with a War Service Badge? If so, what class ? ..... A & B .....

21. Have you, during the present war, served in the Imperial Forces ? ..... No .....

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled .....
I have not received any Not Applicable

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ..... No .....
(b) If so, was such reversion in consequence of misconduct or inefficiency? Not Applicable

24. Are you now serving in the C.E.F. ..... No ..... If not, give:—(a) Date of discharge Sept 11th 1916 ..... (b) Reason for discharge ..... wounded in action & found medically unfit for further Service .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit..... Yes with 4th Batt from Feb 8th to April 23 1915 .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No.
(b) If so, are you in receipt of full pay and allowances from that Department? ..... No .....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: Harry Coppin

Place of Residence: 27 Mohawk St Brantford Ont

Declared before me at: Brantford

This 18th day of January 19.19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. W J Muir A Notary Public.

**POST DISCHARGE PAY.**

| Date paid | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|---|---|---|---|---|
| Forward P.D.P. Court | | | | |
| | | | | |
| | | | | |

Certified Correct.

District Paymaster.

0823

# Opinion of the Medical Board.

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

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

(iii.) The rates of pension vary directly according to whether the disability is attributed to (*a*) active service, (*b*) climate, or (*c*) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165, Pay Warrant, 1913).

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (*a*) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service. (1) Yes (2) No (3) No

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it? G.S.W. and exposure

21. Has the disability been aggravated by

(*a*) Intemperance? No

(*b*) Misconduct? No

22. Is the disability permanent? Yes

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

*To be stated in months.*

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? 1/4

*In defining the extent of his inability to earn a livelihood, estimate it at* $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, *or total incapacity.*

24A. Is the man suffering from a disability which would *obviously*, as far as you can judge, cause him to be rejected by an Approved Society under the National Health Insurance Act? No

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

26. Do the Board recommend

(*a*) Discharge as permanently unfit, Yes

or

(*b*) Change to England? No

I concur, but recommend that this patient be invalided to Canada, with his discharge documents for subsequent disposal by the Militia Authorities.

C. Mallard
Captain, C.A.M.C.
for D.M.S.
Canadian Contingent.

25. 9. 15.

Signatures:— K. R. Duff, Lt.-Col. RAMC President.

Geo. A. Hugo. Major CAMC Members.

Station Shorncliffe.

Date 23. 9. 15.

---

**Approved.**

Station Shorncliffe. F. Kirkby Gen. Staff

Date 24. 9. 1915

Captain A/D.A.A.G.
for Brigadier-General,
Comdg. Can. Train. Div., Shorncliffe.

Administrative Medical Officer.
Canadian Training Division, Shorncliffe.

HEADQUARTERS
CANADIANS
D.A.A.G.
27 SEP. 1915
CANADIAN CONTINGENT

0823

*(On leaving Corps or Station where invalided.)*

Transfer { Date _____ / Station _____ } or Embarkation { Date _____ / Port _____ }

Name of { Conveyance _____ / Vessel _____ / Officer in medical charge } _____

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ / Hospital or Station _____ }

_____
Officer in medical charge.

*(At Station or Hospital where finally disposed of.)*

Station and Hospital _____

Arrived from _____ Date _____

| If admitted | If under treatment | | Disease | How finally disposed of | Date of Discharge, &c. |
|---|---|---|---|---|---|
| Date | From | To | | | |
| | | | | | |

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Oct 26/15.

The medical board having met and examined L/Corp. Harry Copper # 11340. does not concur with ans. to Q 22 ~~and 24~~. The answer to which should be "NO." The board considers 23 should read one month from this date. The board concurs in answer to Q 24. The board recommends that he be discharged from the service as medically unfit.

Riaviniers Major.
W. McCance Capt
P. M. Nevan Lt
Riaviniers Major

Date ~~of final Medical Board, or decision~~

Oct. 26/15

Administrative Medical Officer.

Army Form B. 179.

MEDICAL REPORT ON AN INVALID.

Station

Corps

Regimental No.

Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal

Date of final disposal

How finally disposed of

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

(s) (8534) Wt. 10047/1884 200,000 1-15 W B & L

Forms
B. 179
35.

H. 22-C-102

Army Form B. 179 0823

# Medical Report on an Invalid.

FIFTH DIVISIONAL AREA
17-C-53
DEC 1 1915
S.D.

Station Training School St. Martins Plain

Date Sept. 18th 1915.

1. Unit 12th Res. Batt.
2. Regimental No. 11340
3. Rank L'Corpl.
4. Name Coppin Harry
5. Age last birthday 38
6. Enlisted { on 22nd Aug. 1914 / at Brantford Ont.
7. Former Trade or Occupation { Painter & Paperer

LEFT MILITIA HEADQUARTERS DEC - 1 1915

8. **Disability.**

Chronic Arthritis and mutral stenosis. AMD Tricuspid

## Statement of Case.

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

9. Date of origin of disability. March - 1915: Onset indefinite.

10. Place of origin of disability. Salsbury Plains, England, later in France

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

Rheumatic pains all through the body since last March, but did not give up his duties until he was shot in the rt. arm at Ypres, France. During his stay in hospitals for his wound treatment he was constantly troubled with severe aching in joints and muscles which did not respond to treatment. At times the aching seems to be worse in the head. When his arm healed he was sent back to the 12th Res. Batt where he did light duty with difficulty. He has been able to do any marching or drilling since coming back.

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

(*b*) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (*See notes on page* 3).

Exposure in Camps & bad weather. Climatic. Nervousness due to strain of active service.

27, Mohawk St.
Brantford. Ont.

noted 12/11/15

0823

13. What is his present condition? Patient in average weight - Colour fair. Temperature normal Pulse 88 - is full and regular. Patient coughs - particularly in damp weather - knee joints painful on pressure & on standing Pains very severe in the back and across the chest at times. Joints not enlarged or swollen. Complains of shortness of breath and palpitation on exertion. Lungs normal - Heart - rhythm accelerated by drill exercise - Presystolic mitral murmur - compensation good.

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

14. If the disability is an injury, was it caused — no

(*a*) In action?

(*b*) On field service?

(*c*) On duty?

(*d*) Off duty?

15. Was a Court of Inquiry held on the injury? — no

If so—(*a*) When?

(*b*) Where?

(*c*) Opinion?

16. Was an operation performed? If so, what? — not applicable

17. If not, was an operation advised and declined? — no

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? — no -

19. Do you recommend

(*a*) Discharged as permanently unfit, — Yes

or

(*b*) Change to England?

Hugh MacKinnon Capt. C.A.M.C.

Officer in medical charge of case.

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

Station _____

Date _____

_____

Officer in charge of Hospital.

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

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

11340 0823

ORIGINAL.

# MEDICAL HISTORY SHEET.

*Surname* Corbin *Christian Name* Harry

**Examined** on 5 day of Sept 1914
at Valentia

**Birthplace** City or Town Woking
County Surrey.

Apparent age 34

Trade or occupation Painter

Height 5 Feet 8½ Inches.

Weight 150 Lbs.

Chest measurement Minimum 34 inches.
Maximum expansion 36½ inches.

Physical development Good

Small-Pox Marks —

Vaccination Marks Arm ~~Right.~~ Left.
Number 4

When Vaccinated last 1899

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

Scar on R & L. forearm

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

Approved by
L Haines
Rank Major M.O.

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

| Date | Result | Vaccinations. |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| Sept 5 | Good | RR M.O. |
| 15 | Good | RR M.O. |
| | | M.O. |

*Enlisted on* 22/9/14 *day of* 1914 *at* Valcartier

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | C/Coy 4 Batt | 11340 | Good | 5/10/14 |
| Transferred to.. ..... | 4th Batt: | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| | | | |

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

Entries in Red Ink made from Attestation Sheets.

JUN 3 1915

R. M. Shaw
for D. D. M. S.

M. F. B. 313.
50M—8-14.
H. Q. 1772—39—439.

0823

Surname..... Christian Name.....

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. Day | Month | Year | Dates of Discharge from Hospital. Day | Month | Year | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

M. F. W. 41.
10m.—4-16.
1772-39-889.

Name L/Cpl. Coppin, K.
27 Mohawk Ave,
Brantford, Ont.

1.

Regimental No. 11340

Unit 12th Bn.

Name and address of next-of-kin

Date of enlistment

Place of "

Married (yes or no) Yes.

Amount of pay assigned monthly $ 15.00

To whom payable Mrs.

Date and place discharged Sept 10

Reason for discharge A.S.M.S Aug 17

Character on discharge Class III

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

| Date | | PAY | | | Field Allowance | | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| From | To | No. of Days | Rate | Amount | No. of Days | Rate | Amount | | | No. | Date | | | | | |
| 1/8 | Sept 10 | 41 | 1 | 41 | 41 | 10 | 410 | 8 16 80<br>26 65 | 96 55 | 5137 | | 49 90 | 46 65 | | 96 55 | In 1-18 out 10-14 Sept 10<br>5138 3<br>Aug P.P. |

Name.....

1

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly $

Reason for discharge

To whom payable

Character on discharge

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

# POST DISCHARGE PAY OFFICE

23377-466

Three months pay and allowances after discharge.

3685-H-2

Name Coppin, Harry
Surname Christian Name

Regimental Number 11340 Rank L/Cpl.

Unit 12th Bn.

Original Unit 4th Bn. C.A.M.C.

District where paid M.D.1

Date of Discharge 10-9-16

P. D. P. Filing Number 20-8-1

Address (in full) 27 Mohawk St.
Brantford, Ont.

Rates:—Regimental pay $ 1.05 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 20.00 per month.

L. L. 22573—M. & D. 8009.

| Total Credits 91 days | FIRST PAYMENT | | | SECOND PAYMENT | | | FINAL PAYMENT | | | Balance Over-payments to be Recovered | Total Amount Paid |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Cheque No. A | Date | Amount 30 days | Cheque No. B | Date | Amount 30 days | Cheque No. C | Date | Amount 31 days | | |
| 164 65 | 151 | 25-8-17 | 54 50 | 150 | 25-9-17 | 54 50 | 152 | 25-10-17 | 55 65 | | 164 65 |

~~1226 67 246855 22 3/19 7000~~

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

27 Mohawk St
Brantford
Ont

Dep Min Ann Boppin
Name adds

2685428

Dec'n No 23377-466 W. S. G. File No .....

| | | |
|---|---|---|
| Award ..... days at $ 100 per day $ | | 500.00 |
| S. A. ..... months at $ ... per mo. $ | | $ 164.65 |
| Less P. D. P. Credited | | $ ..... |
| | | $ |
| Less further debit balance Not due paid as below | | $ 335.35 |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| ~~26/4/19~~ | ~~2~~ | ~~2574~~ | ~~44259~~ | ~~115 35~~ | ~~2922442408~~ | ~~30 00~~ | ~~26.4.19.~~ |
| 26/4/19 | 2 | 2574 | 44259 | 115 35 | 2922442408 | 30 00 | 26-4-19 |
| 22-2-19 | 1 | 2226 | 46885 | 70 00 | | 60 00 | X Note 26/4/19 |
| | | | | | 1961479900 | 20 00 | |
| | | | | | 1492536 | 20 00 | |

X Note - a.g. #2905 = Cek #474043 for 90.00 date 26/4/19

help - overpaid 30.00 refund Requested 29/5/19 Pds

Credit S. 5777. for $30.00. 15/9/19
19/9/19 40.116

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

29370 THE MORTIMER SYSTEMS
OTTAWA, CANADA

5785

# MILITIA AND DEFENCE
# ASSIGNED PAY
## OVERSEAS CONTINGENTS

(Wife)

To Whom Coppin Mrs N.
Address 27 Mohawk St.
Brantford
Ont.
Rate 25 = per month

By Whom Assigned Coppin Pte H.
Regtl. No. 11340.
Rank Dte
Corps "G" Coy 4th Pnsv.

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | B416 | 25 – | |
| Nov. | | C1992 | 25 – | |
| Dec. | | A3921 | 25 | |
| Jan. | 1915 | H4636 | 25 | |
| Feb. | | Illegible | 25 | |
| March | | G7077 | 25 | |
| Apl. | | F6384 | 25 | |
| May | | E7897 | 25 | |
| June | | D10346 | 25 | |
| July | | C10924 | 25 | |
| Aug. | | B12101 | 25 | |
| Sept. | | A13467 | 25 | |
| Oct. | | J8697 | 25 | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1916 | | | |
| Feb. | | | | |
| March | | | | |

COPIED FOR I CASUALTIES.

Acc Closed Pension Granted Sept 11/16
Flo2

Discharged to Canada.
Strength Nov. 4/15. 3rd Lofk 1st/15.

P.D.P. 7/6/17 O.K.

G. Couch.
D 1047-23
Cause. Dis.

M. F. W. 41.
5m.-6-15.
1772-39-889.

Name Coppin A/Cpl 86.

o/c O.K.

(151)

Regimental No. 11340

Unit 12th Battn.

Date of enlistment

Place of "

Married (yes or no) yes

Amount of pay assigned monthly $~~35~~.00 per mo (Oct 15)

~~To whom payable~~ Sep. All. 20.00 per mo. 15-8-14/31-10-15

Corsican 25-10-15

Name and address ~~of next-of-kin~~

27 Mohawk St.
Brantford, Ont.

Date and place discharged D. D. Quebec 26-1-16

Reason for discharge Med-unfit Temp 2 more Mths
29 3/16 M. Bd recmd 1 months disability

Character on discharge

649 6137

L. [illegible] 82314. M. & D. 5786-25-6-15-5000.

CHECK

| Date From | Date To | PAY No. of Days | PAY Rate | PAY Amount | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount | Other Credits | Total Credits | ~~Voucher~~ No. | ~~Voucher~~ Date | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | To 1st. Div. 27/1/16. |
| | 15-10-15 | | | | | | | | | | | | | ✓9 10 | | L. P. C England |
| | | | | | | | | | | | | | | | | x DD Quebec Paid |
| 16-10-15 | 26-1-16 | 103 | 1 05 | 10 8 15 | 103 | 10 | 10 30 | Subs 67 50 | 185 95 | 262 | 29/11/15 | 50 00 | ✓ | x 76 85 | 135 95 | H Q Paid |
| | | | | | | | | ~~50 00~~ | | | | | | | | ⊗ cl bal |
| | | | | | | | | | | 667 | 14/12/15 | 50 00 | ✓ | | 50 00 | H.Q Paid o/c O.K. |
| | | | | | | | | | 185 95 | | | | | | 185 95 | o/c O.K. E.S.W. |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

Name.....

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly $

Reason for discharge

To whom payable

Character on discharge

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

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

**NAME** COPPIN, Harry

**Regimental No.** 11340

**Unit** 12 4th Battalion

**Date of enlistment** Sept.22nd,1914.

**Place of** Birth England

**Married (yes or no)** Yes

**Amount of pay assigned monthly $** 25.00

**To whom payable**

**Name and address of next-of-kin**

Ann Coppin, (wife)
27, Mohawk Street,
Brantford, Ont.

**Date and place discharged** 15/10/15 Canada

**Reason for discharge** H.Q. P.M.S. letter 12/19 Oct 9/15

**Character on discharge**

DAY OFFICE, N. E. BRANCH
JAN 25 1916
CANADIAN OVERSEAS

| Date From | Date To | PAY No. of Days | PAY Rate | PAY Amount | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount | Other Credits | Total Credits | Voucher No. | Voucher Date | Cash Payments | Assigned pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 22.9 | 31-10 | 40 | 1. | 40 | 40 | 10 | 4 | | 44 | ✓ | | 19 | 25. | | 44 | ✓ |
| 1.11 | 30.11 | 30 | 1 | 30 | 30 | 10 | 3 | | 33. | ✓ | | 2 50 | 25 | | 27 50 | ✓ |
| 1.12 | 31-12 | 31 | 1 | 31 | 31 | 10 | 3 10 | 5 50 | 39 60 | ✓ | | 5 25 | 25 | | 30 25 | ✓ |
| 1-1 | 31-1 | 31 | 1 | 31 | 31 | 10 | 3 10 | 9 35 | 43 45 | ✓ | | 10 25 | 25 | | 35 25 | ✓ |
| 1.2 | 28.2 | 28 | 1 | 28 | 28 | 10 | 2 80 | 8 20 | 39 | ✓ | | | 25 | | 25 | ✓ |
| 1.3 | 31.3 | 31 | 1.05 | 32 65 | 31 | 10 | 3 10 | 14 | 49 75 | ✓ | | 9 | 25 | | 34 | ✓ |
| 1.4 | 30.4 | 30 | 1.05 | 31 50 | 30 | 10 | 3 . | 15 75 | 50 25 | ✓ | | 23 | 25 | | 48 | ✓ |
| 1.5 | 31.5 | 31 | 1.05 | 32 55 | 30 | 10 | 3 10 | 2 25 | 37 90 | ✓ | | | 25 | | 25 | ✓ |
| 1.6 | 30.6 | 30 | 1.05 | 31 50 | 30 | 10 | 3 . | 12 90 | 47 40 | ✓ | | | 25 | | 25 | ✓ Leave 6 12 days from 4th |
| 1/7 | 31/7 | 31 | | 32 55 | 31 | | 3 10 | 2 10 / 22 40 | 60 15 | 9 / 124 | | 15 | 25 | | 40 | ✓ 1st Hosp. 7 Days furlough |
| | | | | | | | | 20 15 | ✓ | | | 5 40 | | | | |
| Adjustment of Exchange 1 July 31st | | | | | | | | 2 24 | ✓ | | | | | | | |
| 1/8/15 | 31/8/15 | 31 | | 32 55 | 31 | | 3 10 | | 58 04 | 190 / 84 / 267 | | 17 03 | 25 | | 42 03 | ✓ |
| 1/9 | 30/9 | 30 | | 31 50 | 30 | | 3 | 16 01 | 50 51 | 292 / 331 | 1 paid | 17 03 | 25 | | 42 03 | ✓ 10¢ error Mar pay checks O.C. |
| 1/10/15 | 15/10/15 | 15 | 1.05 | 15 75 00 | 15 | 10 | 1 50 | 8 48 | 24 98 75 | | | 9 73 | 25 00 | 10 | 34 83 | Check to Canada 15/10/15 Auth 14.2.9 M.S. 12/19 Oct 9/15 Ch. of Arrangements 13/10/15 Left on Embarkation |
| | | | | | | | | 9 10 | 9 10 | | | | | Dr 9 10 | 9 10 | |
| | | | | | | | | Balance Nil | | | | | | | | Trans to Acct of P.M.G. Final Liability Cancelled |

N.B. March 1916

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

29281 THE MORTIMER SYSTEMS
OTTAWA, CANADA

acct closed 1-11-15 [illegible]

126

MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

Name Copping Mrs H.

Address 17 Mohawk St
Brantford Ont.

Relation to Soldier wife, child or mother: Wife

Name of Soldier Copping H.

Regtl. No. 11340

Rank

Corps H Pnr. G Coy

To what Corps belonging when called out: 38 DR

## PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|---|---|---|---|---|
| Aug. | 1914 | | | |
| Sept. | | C1080 | 20 .. | 2 cheques for Sept. |
| Oct. | | C1-97 | 20 — | |
| Nov. | | B7237 | 20 — | |
| Dec. 1/2 any | | B4096 | 30 | |
| Jan. | 1915 | A4502 | 20 — | |
| Feb. | | A-5674 | 20 — | |
| March | | A 6922 | 20 — | |
| Apl. | | A-8109 | 20 — | |
| May | | B.10395 | 20 | |
| June | | C 11349 | 20 — | |
| July | | D.10949 | 20 ✓ | |
| Aug. | | A12295. | 20 ✓ | |
| Sept. | | B14736 | 20 — | |
| Oct. | | C15284 | 20 — | Discharged to Canada Oct 15/15 |
| Nov. | | | 290 | 20 3 Mo |
| Dec. | | | | |
| Jan. | 1916 | | | acct. closed. Pension granted. 11/2/16 W.T. |
| Feb. | | | | |
| March | | | | |

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

MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Mrs. H. Coppin Wife

Name of Soldier Coppin R.

11348 4 Prov.

L. L. Job 310.—Req. 6574.

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|---|---|---|---|---|
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1917 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | A 7850 | 80 | 50 R Mailed 8/17 Casualty Adjustment |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

ACCOUNT CLOSED

DATE..... PER.....

MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

## PAYMENTS.

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

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
| --- | --- | --- | --- |
| 5-1 | Reported from Base | | Wounded |
| 64 | No 3 Western Gen Cardiff | 1-5-15 | Wounded slightly |
| V 91 6/ | 3rd West. Gen. Cardiff, Dis. sick Furlo. | 26/6/15. | Wounded |

H. Q. FILE No. 649-

NAME Coppin, H.

REGT'L. No. 11340. C

RANK AND CORPS Lance corporal. 4th Battalion

0823

| CABLE NO. | CABLE DATE | NATURE OF CASUALTY |
|---|---|---|
| C. 569. | May 1, 115 | Reported Wounded. |

NO. 2048

X FOLL.

L. L. Job 83225 —M. & D. 5812.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

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

X *Name* Coppin, H. *Rank* L/C *Reg. No.* 11340

*Unit* 4th Batt

0823

*Next of Kin* Canada

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 26-6-15 | 3rd West. G.H.Cardiff - Disc. to Sick Furl. | | 67. 646(a) Wounded | 91-3 | | |

Ltr. 6852. Disp
Sec. 22646 Def

MAR 21 1921

JUL 15 1921

DESP. MAY 13 39
REGN. NO. 383

BOT replaced on Enquiries

Deceased 9 Mar 55

Number 11340 Rank L/Cpl

Surname COPPIN

Christian Names Harry

Unit 48th Bn. Can Inf. Theatre of War France

Dates of Service

Remarks 1386 Burrard Lb Vancouver BC

Latest Address 27 Mohawk St 12/5/39

Brantford Ont

Roll No. Gager058

No. 11340 RANK Pte NAME Coppin Henry

0823

T. O. S. UNIT 38th Regt Dufferin Rifles of Can. Overseas Service

M. D. 2

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1914 | 1914 | | | |
| Aug. 20 | Aug. 23 | O.S | | |
| " 28 | " 30 | V | | |
| Aug 31 | Sept 21 | V | On 4th Bn. pay list | |
| Sept. 22 | Oct. 31 | V | | |

COPIED Archives Copy

UNIT SAILED OCT 3 1914

Con. Home in 2nd Division.

---

H. Q. 649 - C - 134

No. 11340. Rank L/Corpl. (12 Bn.) Name Colpoys H.

T. O. S. Unit Discharge Depot (Quebec.)

M. D. 5.

| Paid From | Paid To | Sig. or Rec't | Promotions, Transfers, Discharges, etc. | |
|---|---|---|---|---|
| | | | Particulars | Authority |
| 1915. Oct. 16. | 1916. Jan. 26. | ✓ | | |

No. 11340. Rank L/Cpl. Name Coppin. H.

T. O. S. Unit Casualties.

M. D. H. Q.

| Paid From | Paid To | Sig. or Rec't | Promotions, Transfers, Discharges, etc. | |
|---|---|---|---|---|
| | | | Particulars | Authority |
| 1915. Oct. 16. | 1916. Jan. 26. | R. | From 12th. Bn. | |

No. 11340 RANK L/Cpl/Corpl. NAME Coppin H.

T. O. S. UNIT Casualties C.E.F.

M. D. /

| PAID FROM | PAID TO | SIC OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 | 1916 | | | |
| Jan 27 | Jan 31 | N | 12th Bn. | Jan. Baylish. |
| Mar 1st 20 | a/c | N | Transf. to 2nd Dis 29/2/16 | Mar. — — — |

C.E.F. 11340

COPPIN, Harry

Medals prev desp:

Cross to widow: Deceased

Cross to mother: Deceased

| Surname | Christian Name | Reg. No. |
|---|---|---|
| Copin. | H. | II340. 0827 |

| Rank | Unit | Co. | Troop | Batty. |
|---|---|---|---|---|
| Pte. | I2th.Battalion. | | | |

| MEDICAL BOARD held at | Date | Serial No. |
|---|---|---|
| (1) Shorncliffe. | 8.7.I5. | |

| Other Medical Boards at | Date | Serial No. |
|---|---|---|
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |

Condition found by Board Inability R.arm.

Disposition Recommended

(1) Light duty.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at
~~CASUALTY BOARD held at~~ Date.....

Disposition

A.M.D. 2 DEPT.

Remarks

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

Boarded re casualty duty

| Surname | Christian Name | Reg. No. |
|---|---|---|
| Coppin. | H. | II340. |

| Rank | Unit | Co. | Troop | Batty. |
|---|---|---|---|---|
| Lcpl. | 4th.Battalion. | | | |

0823

**MEDICAL BOARD** held at — Date — Serial No.

(1) Shorncliffe. I.9.I5.

Other Medical Boards at — Date — Serial No.

(2) Shorncliffe. 23.9.I5.

(3)

(4)

(5)

**Condition found by Board**

Bullet wound of right elbow.
Rheumatism.
(2) Chronic Arthritis & mitral stenosis.

**Disposition Recommended**

(1) Fit for light duty.

D.M.S. I concur in the findings of the Board of
(2) Medical Officers here recorded.

(2) Discharge as permanently unfit.

D.M.S. Return to Canada, disposal to be consider
(4) ed by Military Authorities there.

(5)

**CASUALTY BOARD** held at — Date.....

**Disposition**

**Remarks**

A.M.D. 2 DEPT.
Boh. of D.G.M.S. O.M.F.C. London

Indicate by a P.T.O. if continued on other side.

# EPITOME OF HOSPITAL TREATMENT.

| | Hospital | Adm. |
|---|---|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |

Surname: Coppin. H.

Christian Name or Names

Reg. No. 0823 / 11340.

Rank: L. Cpl.

Unit: 4 Btn.

Co.

Troop

Batty.

Hospital

Date of Admission

Transferred 3rd Welsh Gen Cardiff Hosp. 1.5.15

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Wd.

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

Date

Dis to duty fwds 26.6.15.

REMARKS

G.L. -1.4.15 5

Cl. 24.6.15. # 913

Cl. 20.8.15 # 6412

51.

Rep. from base wd. by telegram.

A.M.D. 2 DEPT.

A.M.D.

Bch

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

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge (Army Form B. 268)
2. Proceedings on transfer to reserve (if any) (Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name (if any)
6. Re-engagement paper (if any) (Army Form B. 136)
7. Authority for continuance, or extension, of service (if any) (Army Form B. 221)
8. Court of Inquiry on an injury (if any) (Army Form A. 2)
9. Regimental conduct sheet (Army Form B. 120)
10. Company conduct sheet (Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet (Army Form B. 178)
13. Medical report on invalid (if any) (Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge)
18. Descriptive return (Army Form D. 400), where required
    See section 11 on second page
19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

D-C-5

MILITIA & DEFENCE

0823

space to be left blank the Chelsea Number.

NOV 11 1915 Army Form B. 268.

H.Q. CANADA.

# Proceedings on Discharge.

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

MILITARY DISTRICT MAY 14 1916

MILITIA & DEFENCE AUG 20 1916 CANADA

No. 11340 Army Rank L/Cpl.

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

Corps 12th Reserve Battalion. C. T. D.

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

DISCHARGE DEPOT QUEBEC OCT 20 1915

Date of discharge October 1915. 10/9/16

Place of discharge CANADA. Toronto

1. *Description at the time of discharge.*

Age 35 years 2 months
Height 5 feet 8½ inches
Chest measurement { girth when fully expanded 35 ins. / range of expansion 2 ins.
Complexion Dark
Eyes Grey.
Hair Dark Brown.
Trade General House Dec.
Intended place of residence (To be given as fully as practicable) 27 Mohawk St, Brantford Ont.

Descriptive marks.
3. Vacc marks. L. Arm.

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

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

Auth. Para. 392 (XVI) K. R. & O.

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

To be filled in on the soldier quitting the Colours.

3. Military character:— GOOD.

4. Character awarded in accordance with King's Regulations:— V. Good. E R 1

GOOD.

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

1145 Wt. W. 6538/936 125,000 10/14 D. D. & L. Sch. 11* Forms B. 268 39

* Strike out if not applicable.

W. S. G. Comp'n 3-1920

2092 K.C. Comp. 29-9-19 a m.

OVER.

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

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

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

6. Campaigns, Medals and Decorations

Certificate of education .....

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

(Place) Shorncliffe. Kent. C W Macleod Lieut Col.

(Date) October 1915. *Commanding* 12th Res *Battn.* C. T. D. *Regiment.*

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

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

DISCHARGE DEPOT OCT 29 1915 QUEBEC

(*Place*) _____ 2/Corp. H. Coffin (*Signature of Soldier.*)

(*Date*) _____ A Bean (*Signature of Witness.*)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

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

Total ... _____ „

11. *Confirmation of discharge.*

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

DISCHARGE DEPOT OCT 29 1915 QUEBEC

(*Place*) Toronto.

(*Date*) Oct 28th 1915

*Signature* J. J. Murphy

Major R. C. A.

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

A. J. Crowther Lieut.
for A.A.G. M.D.2.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

No

2/Corp. H. Coffin

**Table III.**—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances, Particulars of Dental Treatment, &c.

| Date | Brief details, and signature |
|---|---|
| Sept 5/14 | Inoculation (Typhoid) R.R. |
| " 15/14 | " " " |

**Table IV.**—SERVICE TABLE.

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

DUPLICATE.

11340
Army Form B. 178.

**To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.**

## MEDICAL HISTORY of

*Surname* COPPIN, *Christian Name* Harry.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Woking, County Surrey.

Examined ... ... ... on 5th day of Sept. 1914. at Valcartier.

Declared Age ... ... 34 years days.

Trade or Occupation ... Painter.

Height ... ... ... 5 feet, 8½ inches.

Weight ... ... ... 150 lbs.

Chest Measurement — Girth when fully Expanded. 36½ inches.

Chest Measurement — Range of Expansion 2½ inches.

Physical Development ... Good.

Vaccination Marks — Arm .. Right Left

Vaccination Marks — Number 4

When Vaccinated ... ... 1899

Vision ... ... ... R.E.—V=

L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) Scar on right and left forearm

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of the C.A.M.C. for the Officer in Charge of Records Canadian Contingents.

Approved by (*Signature*) R. Raikes,

(*Rank*) Major.

*Medical Officer.*

Enlisted ... ... ... at Valcartier, on 22nd day of Sept. 191 4.

| Corps | Regtl. No. |
|---|---|
| G.Coy. 4 Batt. | 11340 |
| 4th Batt. | |

Joined on Enlistment ...

Transferred to ... ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

W.R.WARD,
Colonel in Charge of Records,
Canadian Contingents.

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

(8 82 62) W 2069—1662 20,000 5/15 H W V(R) Forms/B. 178

[P.T.O.

**Table II.**—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | |

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*(On leaving Corps or Station when invalided.)*

Transfer { Date _____ / Station _____ }
or
Embarkation { Date _____ / Port _____ }

Name of { Conveyance _____ / Vessel _____ / Officer in medical charge _____ }

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ / Hospital or Station _____ } Officer in medical charge.

*(At Station or Hospital where finally disposed of.)*

Station and Hospital _____

Arrived from _____ Date _____

| If admitted | If under treatment | | Disease | How finally disposed of | Date of Discharge, &c. |
|---|---|---|---|---|---|
| Date | From | To | | | |
| | | | | | |

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Oct. 26th/1915

The Medical Board having met and examined L/Corp. Harry Coppin #113340 — does not concur with the answers to Ques. 22. 23 and 24. The Board considers these should read as follows.

Ques. 22 — "Yes"
" 23 — Not applicable
" 24 — 1/4

the Service as Medically unfit

and recommends his discharge from

H. Winters Major A.M.C.
W. M. Carrick Capt A.M.C.
H. M. Ferrison Lt. A.M.C.

Date of final Medical Board, or decision
Sackville
27—10—15

W. H. Delamere Lieut-Col.
Administrative Medical Officer.

APPROVED
JAN 20 1915
for D.G.M.S.

Station
Corps
Regimental No.
Rank
Name
Disability
Date

Hospital or Station transferred to for final disposal
Date of final disposal
How finally disposed of

Army Form B. 179.

MEDICAL REPORT ON AN INVALID.

Forms/B. 179./34

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

(xx) (88579) wt. 1896 475M 5.15 W B & L

H22-C-10

0823

Army Form B. 179.

# Medical Report on an Invalid.

Station Shorncliffe England

Date August 23rd 1915.

1. Unit 1st Can. C. Depot. from 4th Battalion
2. Regimental No. 113340
3. Rank
4. Name Lance Corporal Coppin. H.
5. Age last birthday 35.
6. Enlisted { on Aug. 22nd 1914. / at Brantford Ontario.
7. Former Trade or Occupation { painter & Paper hanger.

8. **Disability.**

Bullet wound of right elbow.
Rheumatism

## Statement of Case.

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

9. Date of origin of disability. April 23rd 1915.

10. Place of origin of disability. Ypres

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

While making the charge at 5. a.m. received wound on right arm. and was treated at Lglstr Rd. Cardiff South Wales. Since that time has been in convalescent homes. and the last six weeks has been doing light duty at St. Martins plains. Shorncliffe with the 12th Reserve Battalion A contracted scar remains that apparently has some nerve involvements.

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

(*b*) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (*See notes on page 3*).

Bullet wound with contraction of scar + involvements of cutaneous nerves.

Caused in active service + climatic conditions.

barded. 21/12/16. No Inc.

0823

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H22-C-102

13. What is his present condition?

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

In a very nervous condition.
Rheumatism in knees + shoulders.
Rear is contracted, inability to straighten arm + continuous burning of extensor surface
complains of palpitation of heart on least exertion. The disability in the arm is now only slight

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

(a) In action? yes.
(b) On field service? yes.
(c) On duty? yes.
(d) Off duty? no.

15. Was a Court of Inquiry held on the injury? yes.

If so—(a) When? July 8th 1915.
(b) Where? Moore Barracks
(c) Opinion? Two months light duty in England.

16. Was an operation performed? If so, what? not applicable

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

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? not applicable

19. Do you recommend

(a) Discharge as permanently unfit, or
(b) Change to England? (a) yes.

C. E. McGhee Capt C.A.M.C.

Officer in medical charge of case.

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

Station _____

Date _____

_____
Officer in charge of Hospital.

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

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

## Opinion of the Medical Board.

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

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

(iii.) The rates of pension vary directly according to whether the disability is attributed to (*a*) active service, (*b*) climate, or (*c*) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 1162 and 1165, Pay Warrant, 1913).

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

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (*a*) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii) ordinary military service. 1 Yes 2 No 3. No

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

21. Has the disability been aggravated by

(*a*) Intemperance? No
(*b*) Misconduct? No.

22. Is the disability permanent? No

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

*To be stated in months.*

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? None.

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

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

26. Do the Board recommend

(*a*) Discharge as permanently unfit, or
(*b*) Change to England? No —

Signatures:— A. Monroe Lt. Col. Comd. President.
R. J. Blanchard Lt. Col.
H. W. Wookey Capt. C.A.M.C. Members.

Station Shorncliffe

Date ~~August~~ Sept. 1st 1915

I concur in the findings of the Board of Medical Officers here recorded.
C. Maillard.
Captain, C.A.M.C.
For D.M.S.
Canadian Contingents.
4.9.15.

Approved.
Station Shorncliffe
Date Sept 2 1915

G. S. Dudley Capt. A/D.A.D.M.S.
Canadian Training Division, Shorncliffe.
Administrative Medical Officer.

(a(a). Fit for home service..... No

(b). Fit for light duty..... Yes.

(c). Temporarily unfit for home service or light duty

(stating probable period)..... Not applicable

0823

(At Station or Hospital where finally disposed of.)

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

Date .....

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

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

Date of final Medical Board or decision. }

Administrative Medical Officer.

**DETAILED MEDICAL HISTORY OF INVALID.**

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

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

Militia Form B. 227.
150 m—5-16.
H. Q. 1772—39—117.

Address:- 27 Mohawk st. Brantford

0823

# MEDICAL HISTORY OF AN INVALID.

Next of Kin:- Wife ..

1. Station. Toronto
2. Regiment or Corps. 4th Bn.
3. Regimental No. and Rank. 11340 Lt Cpl.
4. Name. Coffin, Harry
5. Age last Birthday. 38
6. Enlisted on Aug. 22/1914 at Brantford
7. Former Trade or Occupation. Decorator Date. Aug. 4th 1916.
8. General remarks on his :—
   (a) Conduct. Good
   (b) Habits. Good
   (c) Temperance. Good

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

LEFT MILITIA & DEFENCE AUG 20 1916 641-G-137 CANADA

9. Service.

| | Years. | Days. | PERIODS. From. | To. |
|---|---|---|---|---|
| 12th Lancers - Eng. | | | Jan. 1899 | Jan. 1901 |
| 4th Bn. Canada | | | Aug 1914 | Oct. 1914 |
| England | | | Oct. 1914 | Feb. 1915 |
| France | | | Feb. 1915 | May 1915 |

10. (a) Disease or disability. Chronic Rheumatism - Bronchitis - Wounds
    (b) Date of origin. Feb 1915 at Salisbury Plains in Oct. 1914 at St Julien Apr 23/15
    (c) Place of origin. In the Trenches
    (d) Cause. Exposure to wet in Trenches and at Salisbury Plains. Exposure to ~~wet~~ Bullet. dampness.

11. Present Condition. (Most Important) (To include full description of present disabling condition or conditions.) Pains in joints of arms and legs and muscles. Rt. Knee was swollen Aug. for 3 or 4 days. Is short of breath on exertion Heart not enlarged First sound of poor quality and reduplicated. Mitral systolic murmur heard at times. Brachial arteries are thickened. Tires easily. Has had dry cough most of time since Oct. 1914 on Salisbury plains. Slight expectoration at times. Moist rales have been heard over both apices. None present today. A dry rale is heard to-day on coughing in all parts of both lungs. Xray of chest shows some diffuse shadows and retraction of rt apex and emphysema of left lung.

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

Scar at rt. elbow.

Cannot quite straighten the rt. elbow.

M. F. B. 227.
150 M—5-16.
1772-39-117.

31

Invalided 23-8-16 G. C.

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

scar 2½" long above rt. elbow & bullet wound & entry on rt. forearm. Can straighten rt. arm to about 150°

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

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. No special exposure except dampness of Salisbury Plains and Trenches.

14. Treatment In two temporary hospitals in France (St. Omer and Boulogne & Rouen.) dressing of elbow. Red Cross Hospital at Cardiff Wales - Medical Rheum. and dressings. Convalescent Home Llandovery - Carm. S. Wales. Shorncliffe camps 4 mos.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? Result of service.

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

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. Rheumatism and Heart weakness 4/10 disability
Lung Condition 3/10 disability
Rt Elbow - 1/10 disability

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

John Mackie Capt
Medical Officer by whom the case is brought forward.



## OPINION OF THE MEDICAL BOARD.

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

10. Yes
11. "
12. "
15. "
16. "
17. "

18. Is he unfit for Military Service. Yes

Recommendations: That he be discharged with suitable recompence for disability due to Service

Signatures:—

Chas B Shuttleworth Lt Colonel President.
E. G. Jay Capt RAMC
R Wrmann Lt Colonel Members.

Station. Toronto
Date. Aug 10/16

Date. 16/8/16
F. J. Mann, Maj.
Asst. Director of Medical Services. (2)

Approved.
Date. 7.9.16
Oscar A Carmichael
Director-General of Medical Services.

**Table III.**—Boards; Courts of Inquiry, Vaccination, Inoculations, &c.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances, Particulars of Dental Treatment, &c.

| Date | Brief details, and signature |
|---|---|
| 8/7/15 | Injury to Forearm at Elbow. Lighted ship in England. Has been induced to work the arm. Dental treatment. [illegible] Lt |
| 23-9-15 | Chronic Arthritis of Wrist & Incipient Stenosis. Recommended discharge as permanently unfit. [illegible] Lt. Col. Canada Resident |
| | PRESIDENT, STANDING MEDICAL BOARD. |
| | Proceedings of Medical Board approved this date 24/9/15. |
| | [illegible] Capt. A/D.A.D.M.S. Canadian Training Division, Shorncliffe. |

**Table IV.**—SERVICE TABLE.

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

22-C-1076.124



Army Form B. 178.

**To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178a to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.**

## MEDICAL HISTORY of

*Surname* Coppin *Christian Name* Harry

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Woking County Surry, England

Examined ... ... ... on ____ day of ____ 191 .
at ____

Declared Age ... ... 35 years — days.

Trade or Occupation ... ____

Height ... ... ... ____ feet, ____ inches.

Weight ... ... ... ____ lbs.

Chest Measurement — Girth when fully Expanded. ____ inches.
Range of Expansion ____ inches.

Physical Development ... ____

Vaccination Marks — Arm .. Right ____ Left ____
Number ____

When Vaccinated ... ... ____

Vision ... ... ... R.E.—V= ____
L.E.—V= ____

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) ____

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

Approved by (*Signature*) ____

(*Rank*) ____ *Medical Officer.*

Enlisted ... ... ... at Brantford Ont.
on 22nd day of August 1914.

| Joined on Enlistment ... | Corps | Regtl. No. |
|---|---|---|
| Transferred to ... ... | 12th Battalion | 11340 |

Became non-effective by ____

on ____ day of ____ 191 .

(*Signature*) H F Macleod

(*Rank*) Lieut. Col. O.C. 12th Res. Battalion.

(8 82 62) W 2369—1662 200,000 5/15 H W V(R) Forms/B. 178 [P.T.O.

0823

**Table II.**—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | | |
| | | | | | | | | | | |

0823

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Central Military Convalescent Hospital Toronto.

on the March 29/1916

by order of A. D. M. S. 2nd Division

DEPT MILITIA & DEFENCE APR 17 1916 H.Q. 646-C-134 CANADA

for the purpose of examining and reporting on

L Corp H Coppin
#11340

PRESIDENT.

A G Ley. Capt A.M.C

MEMBERS.

J. A Dille Lt A.M.C

B. O'Reilly Lt A.M.C

The Medical Board having assembled pursuant to order, proceed to

examine # and report that

1 Present condition:

Is suffering from dyspnoea and
precordial pain on exertion.
Has cramps, pains and numbness in legs.
Urine ~~1012~~ 1012 Sp. Gr., 1500 c.c. per day, No albumin
Few red & white blood cells and granular casts
Arteries are thickened.
Has slight mitral stenosis.
Would recommend pay and allowances
be continued
Has had teeth attended to for pyorrhoea

24

boarded 21/12/16. 70 Yr

M. F. B. 303.
75 m.—9-15.
H. Q. 1772—39—132.

14

2 Extent to which his capacity is lessened for earning a full livelihood in the general labour market at present:

Total

3 Probable minimum duration of the disability:

One month

4 Whether treatment in a Convalescent Home would materially assist in his recovery:

yes.

John McCrae Lt. Col.

A. E. Ley
Capt. A.M.C.
Supervising staff.

Approved
Thomson
Lieut
Arms
Apr 1. '16

APPROVED for Medical purposes
APR 18 1916
Edgar Canon, Capt
for a/D.G.M.S.

0823

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Brantford

on the 16th Day of December 1915

by order of A.D.M.S. 2nd Division

for the purpose of Examining #11340

Lce Corl. A Coppin. late 4th.

Overseas. Battalion C.E.F.

Second Divisional Area
DEC 18 1915
2.D34-G-118

DEPT. MILITIA & DEFENCE
DEC 22 1915
H.Q. CANADA

PRESIDENT.

C D Chapin Capt

MEMBERS.

A J McGaunty Capt.

A M Hanna Capt.

The Medical Board having assembled pursuant to order, proceed to

Examine. Lce Corp. A Coppin.

Present Condition.

Chronic Arthritis still present, especially in Knees. Complains of general weakness of the Nervous system Easily excited. Under excitement complains of palpitation of heart and head swims. Reflexes exaggerated. Sleeps fairly well but in morning complains of general lassitude.

Appears well nourished. Eats well. Weight above what was normal before service.

Heart sounds normal.

Condition of pyorrhoea present.

Earning Capacity

Lessened by one quarter.

Minimum Duration of Disability Probably three months.

12

barded 21/12/16 R. Inc

(over)

M. F. B. 303.
50 m.—6-15.
H. Q. 1772—39—133.

0823

The Board are of the opinion that Convalescent Home Treatment could not materially assist in her recovery Except that treatment of the pyorrhoea might improve the arthritic condition.

20/2/15

Approved,
E. Warren Major
pr D.G.M.S.

E. W. Chapin Capt.
Wm Hanna Capt
D. J. McCarty Capt

APPROVED
JAN 20 1915
D.G.M.S.

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Central Military Convalescent Hospital, Toronto.

on the 6th day of June 1916

by order of A.D.M.S., M.D. #2

for the purpose of examining and reporting on

# 11340 L/Cpl H. Coppin

4th Bn.

PRESIDENT.

MEMBERS. J. McDonald Capt. A.M.C.

H. A. Dickson Capt A.M.C.

L. B. Ley Capt A.M.C.

The Medical Board having assembled pursuant to order, proceed to examine # 11340 L/Cpl H. Coppin and report that:-

1. Present condition:

Pains present in both arms and both legs present all the time but worse in damp weather. Has to get up three times at night to pass water. Wt. 152½ lbs. (same as usual) Superficial temporal arteries tortuous and thickened. Radial arteries also markedly thickened but straight. Heart normal size. Tricuspid (rough) + slight blowing systolic murmur present at M. area. Has tried stacking but finds that he cannot stand it and has aching of arms + legs after working.

M F. B. 303.
100m.—4-16.
H. Q. 1772—39—133.

(over)

carded

2. Extent to which his capacity is lessened for earning a full livelihood in the General Labour market at present:

½ at present due to aching in arms and legs

3. Probable minimum duration of the disability:

two months

4. Whether treatment in a Convalescent Hospital would materially assist in his recovery:

Would recommend that patient receive treatment as an outpatient in the 6th Gen. reporting once a month for Observation.

J. S. McDonald.
Capt. A.M.C.

H. A. Dixon
Captain.

L. S. Lee
Capt. A.M.C.

Approved
9/6/16
Thomas Edwards
Colonel