

C.E.F. REGIMENTAL DOCUMENTS

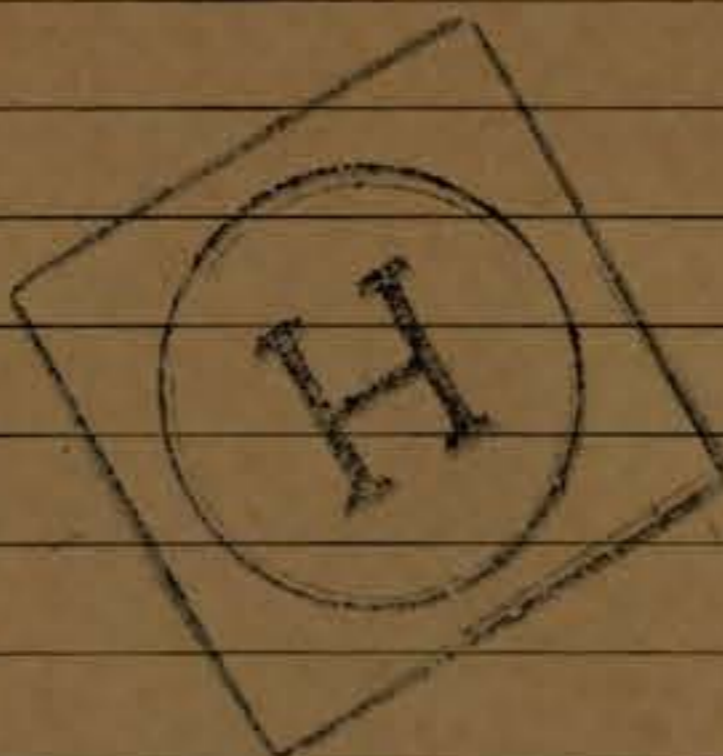
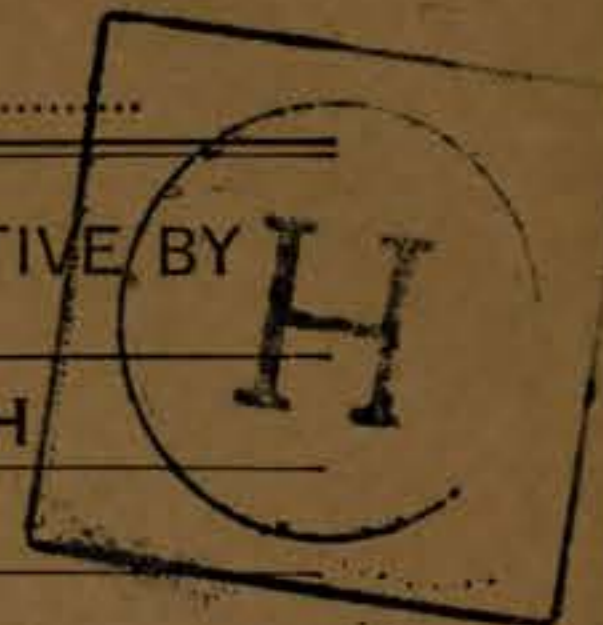
NAME **BATTRICK HERBERT**

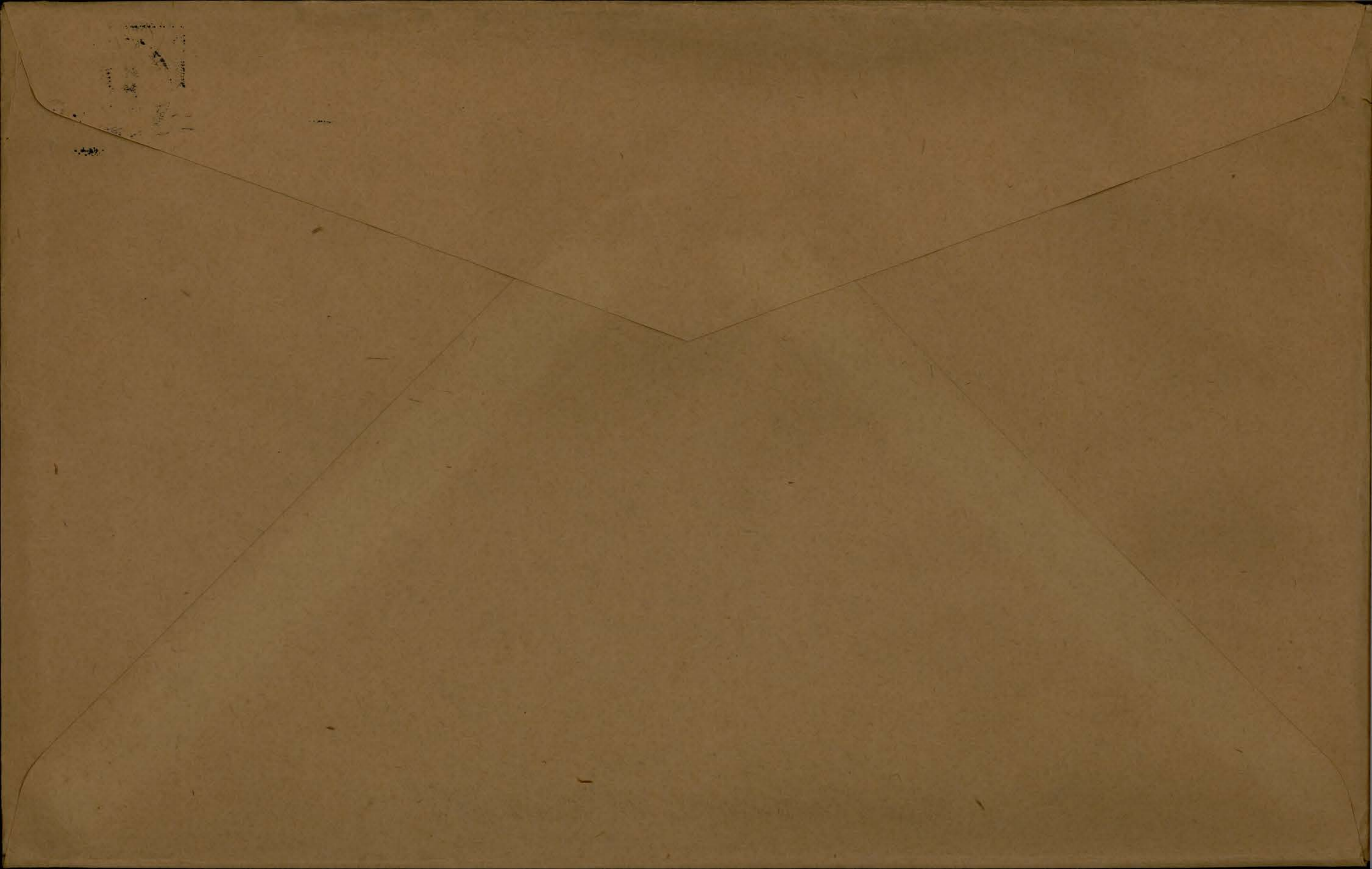
REGT. No. **841986**

UNIT **1 CORD**

H. Q. FILE No. **4723**

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH CATEGORY
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
TRAINING HISTORY SHEET (M.F.W. 113)					DISCHARGE CATEGORY
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					MED UNFIT
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DESERTION
DENTAL HISTORY SHEET (M.F.B. 465)					
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)					
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					





ATTESTATION PAPER.

No. 10. 544986
Folio. 102. V

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... Battrick
- 1a. What are your Christian names?..... Herbert
- 1b. What is your present address? 520 St. Catherine Road, Outremont, Montreal, P.Q.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Bournemouth, England
- 3. What is the name of your next-of kin?..... Herbert Battrick
- 4. What is the address of your next-of-kin? 520 St. Catherine Road, Outremont, Montreal
- 4a. What is the relationship of your next-of-kin?..... Father P.Q.
- 5. What is the date of your birth?..... 18th. Sept. 1897
- 6. What is your Trade or Calling?..... Student
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... No
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Herbert Battrick, do solemnly declare that the above are answers made by me to the above questions and that they 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.

Herbert Battrick (Signature of Recruit)
John Fleming (Signature of Witness)

Date April 3rd. 191 6

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Herbert Battrick, 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.

Herbert Battrick (Signature of Recruit)
John Fleming (Signature of Witness)

Date April 3rd. 191 6

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 Montreal this 3 day of April 191 6

Albe (Signature of Justice)
Picem

Description of Herbert Watrick on Enlistment.

Apparent Age 18 years 6 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft 6 1/2 ins.

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 4 ins.

Complexion Medium

Eyes Blue

Hair Brown

Religious denominations { Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Roman Catholic XX
 Jewish
 Other denominations
 (Denomination to be stated.)

Ben upper lip

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 Apr 3 1916 *Attest*

Place Montreal *Stamp*
 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.

Herbert Watrick 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.

Attest
 (Signature of Officer)

Date APR 7 1916 1916

Major for Lt. Col.
 O. C., 148th "Overseas" Batta. C. E. F.
a.o.l.

PROCEEDINGS OF A MEDICAL BOARD.

REFERENCE
JAN - 2 1918
649-B-14987

Dated at 10 Aug 1916.

No. 64976 Rank PLC Name BARRICK - H.

Local Unit 130th Bn. Bull. Overseas Unit 14th Bn. Bull. Age 17

Examination held at Shoreham

DISABILITY.
Overseas—Local.
(scratch one out)

CHRONIC BRONCHITIS.

PRESENT CONDITION.

3 1/2 mos. in France - was returned to hos. ago
with Bronchitis and has not improved -
Complains of shortness of breath - pain in
upper chest. Exam shows definite findings
of chronic Bronchitis - Shows physical signs of
Croupy Cough. Cannot be raised to higher
category without to hos.

BOARD RECOMMENDS: C III.

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

Signatures:—

Members

Chas. Whiston Capt President.
W. J. Mackenzie Capt

14

APPROVED

SHOREHAM 1 AUG 1917

Dated at 1916.

W. J. Mackenzie
CAPT
For A.D.M.S.
D.A.D.M.S. CANADIANS
SHOREHAM-BY-SEA

PROCEEDINGS OF A MEDICAL BOARD



Dated at _____ 1916

No. _____ Name _____ Rank _____
Local Unit _____ Overseas Unit _____ Age _____

Examination held at _____

DISABILITY
Overseas (Local
(Post-Examination)

PRESENT CONDITION

BOARD RECOMMENDS

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

Signatures:

President

Members

APPROVED

Dated at _____ 1916

For A.D.M.S.

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

148TH "OVERSEAS" BATTALION, C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 841986.....

(3) Full Name of Soldier Herbert Bathrick.....

(4) Place of Birth Bornemouth England.....

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

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

(b) Present Postal Address 520 St Catherine Rd Outremont Montreal P.Q......

(7) Are you a widower?.....

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?

yes Herbert George Patrick

If so, state name and address

520 St Catherine Rd Montreal

(10) Is your Mother alive?

yes Rose Patrick

If so, state name and address

same address

(11) If your Mother is a widow

~~~~~

Are you her sole support, or not?

~~~~~

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

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

(15) Are you insured?

yes

If so, in what Company?

Ancient Order Foresters

Have you made arrangements for payment of your Insurance premium?

yes

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

Date AUG 4 1916

Almage Lt.-Col.
O. C. 148th Officers Commanding. F.

ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

- 7 FEB. 1917

Surname Battrick Christian Name Herbert

Examined { on 3 day of April 1916
at Montreal
Birthplace { City or Town Bournemouth
County Eng.

Approved by [Signature]
Rank [Signature] M.O.

Apparent age 18 yrs. 6 mos.
Trade or occupation Student
Height 5 Feet 6 1/2 Inches.
Weight 126 1/2 Lbs.
Chest measurement { Minimum 31 inches.
Maximum expansion 35 inches.
Physical development good
Small-Pox Marks none

Date.	Fit or Unft.	EXAMINED FOR RE-ENGAGEMENT.
		<u>8 FEB. 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
Number 1
When Vaccinated last child

Date.	Result.	VACCINATIONS.
<u>2/7/16</u>	<u>Good</u>	<u>Haig & Dims. Capt.</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection
Dental Corp
Pigeon Chest

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1916</u>	<u>500</u>	<u>million</u> M.O.
<u>JUN 16 1916</u>	<u>1000</u>	<u>"</u> M.O.
<u>JUN 23 1916</u>	<u>1000</u>	<u>"</u> M.O.

Enlisted on 3 day of April 1916 at Montreal - Rue

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to	<u>14th Bn</u> <u>23rd BATTALION G. E. F.</u>	<u>841 986</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Shornham</u>	<u>9-7-17.</u>	<u>Debility</u>	<u>B. II. G. Whistler. Capt. G. E. F.</u>
<u>Shornham</u>	<u>Aug, 10/17.</u>	<u>Chronic Pyelitis</u>	<u>C. III. G. Whistler. Capt.</u>

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.

CANADIAN

Herbert.

Christian Name

Batrlick

Surname

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
G. N. C. H.		22	4	16	25	5	16	Grippe		to unit Fit	<i>[Signature]</i> Capt. A.M.C., M.O. i/c Gray Nun Convalescent Home.
Montreal Que, G.N.C.H.	G.N.C.H.	15	10	17	3	12	17	Bronchial Asthma and effort syndrome	47	Discharged to O.C. "A" Unit through the Clearing Station for Sanatorium treatment.	<i>[Signature]</i>
Montreal Que, G.N.C.H.	G.N.C.H.	15	10	17	12	11	17	Bronchial asthma D.A.H.	58	Discharged to O.C. "A" Unit through the Clearing Station Class "E".	<i>[Signature]</i>

649-B-14987

FORM TO BE USED INSTEAD OF BLANK SPACE ON ARMY FORM 179

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

Number, Rank, Name, Name & Corps of disabled Soldier:-
841986 Pte Ballock Here 148th Batt
Previous civilian occupation:- Student

Is he able to resume previous civilian occupation:- no

Cause of disability:-

Chronic Bronchitis & D.A.H.

Condition, in detail, which prevents the Soldier from earning a full livelihood:-

This man shows an abnormal chest well pronounced on right side. Complaints of sharp pains at times on this side also of shortness of breath. Cough much expectorant on right side. There is also disorder action of the heart.

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions)

20%

Disability due to Service:-

100%

Probable duration of incapacity:-

2 months

Does it render him permanently unfit for Military Service:-

yes

Would operation, special treatment or the use of appliances etc., lessen incapacity:-

no

Recommendation of Medical Board:-

Convalescent Home

Station:- Halifax, N.S.

S. Macdonald Major President

Class:- # D.T.II

Go wood Capt Member

Date 26-9-19

R. W. Kelly Member

APPROVED

Date 26-9-1919

Christie Major

for Asst. Director Medical Services.

Date

Director General Medical Services.

16

Dir Sect
1-2-18
Wes.

I 437
8-2-18

8-2-2
8-2-2
1918

REPORT OF THE BOARD

Name, Rank, Branch or Corps of Soldier:-

Private M. M. ...

Previous civilian occupation:-

Reason for disability:-

Condition, in detail, which prevents the Soldier from earning a full livelihood:-

The man above mentioned was injured while in the service of the United States Army at Camp ...

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions)

Disability due to service:-

Probable duration of incapacity:-

Is it recommended that the Soldier be discharged:-

With separation, special treatment or the use of appliances etc., (please specify):-

Recommendation of Medical Board:-

Signature of President

Signature of Member

Signature of Member

APPROVED

Signature of Agent, Director Medical Services

Signature of Director General Medical Services

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 841986 Rank Pvt Name Battick H.

Corps 23rd Bn who was* Discharged

On 15 Jan 1918, to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 12 Jan 1918, to 15 Jan 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month <u>Supp L.P.C.</u>	15	00	Bal. Cr. from prev. month		
Advances by Cheques } No.....			Regt'l Pay <u>15</u> days at \$ <u>1.00</u>	15	00
Assigned Pay <u>to 15 Dec</u> and <u>Sep'n Allee.</u> No. <u>14524</u>	7	50	Field Allow. <u>15</u> days at \$ <u>c/10</u>	1	50
Other charges <u>b.c. on Discharge Issued</u>	13	00	Separation Allowances* (Monthly)		
Payment on transfer or discharge No. <u>14522</u>	6	00	Other Allowances* <u>Subs 15 days @ 80</u>	12	00
Balance Cr. (to be paid by the new unit)			Other Credits* <u>b.c. on Discharge Issued</u>	13	00
			Bal. Dr. (to be deducted by new unit)		
Total	41	50	Total	41	50

*Give particulars.

A monthly stoppage of \$ 1.50 (†) has been (‡) been paid on account of Assigned Pay for the month of to 15 Dec 1917 (to) Assignee Mr R. Battick and Sep'n Allee. for month of 191 (Address) 520 St Catherine Rd
Outremont
P.Q.

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

On Transfer of an Officer

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

REMARKS:—

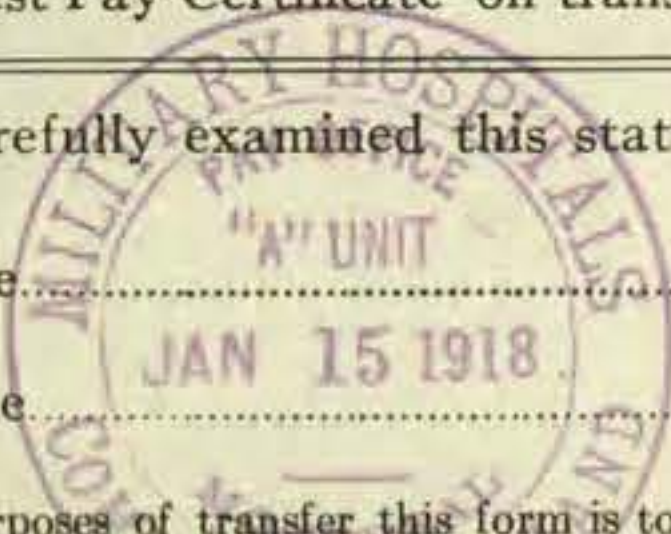
- State (1) date of enlistment April 1916
- (2) if married and if a Separation Allowance Card has been submitted Nil
- (3) cause of discharge..... authority MDH 22-B-1605
- (4) authority for transfer.....

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

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

Date.....

Place.....



[Signature]
CAPTAIN
PAYMASTER "A" UNIT
MILITARY HOSPITALS COMMISSION COMMAND

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record. For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record. If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

[The body of the document contains extremely faint, illegible text, likely bleed-through from the reverse side of the page. The text is too light to transcribe accurately.]

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2.

Mr. Row Battrick

Name of Soldier

Battrick Herbert
841986. Pte. N. Co. 1418th Bn

PAYMENTS.

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>L 24147</i>	<i>15⁰⁰</i>	
Nov.		<i>n 28122</i>	<i>N</i>	
Dec.		<i>E 35542</i>	<i>15</i>	
Jan.	1917	<i>Bh 1337027</i>	<i>15</i>	
Feb.		<i>B 42698</i>	<i>15</i>	<i>15 R</i>
March		<i>B 49635</i>	<i>15</i>	<i>15 L</i>
April		<i>e 626</i>	<i>15</i>	<i>15 Ch</i>
May		<i>B. 6324</i>	<i>15</i>	
June		<i>F 13293</i>	<i>15</i>	<i>15 R</i>
July	1918	<i>C 19709</i>	<i>15</i>	<i>15 L</i>
Aug.		<i>F 27216</i>	<i>15</i>	<i>15 L</i>
Sept.		<i>E 34004</i>	<i>15</i>	<i>15 L</i>
Oct.		<i>M 47641</i>	<i>15</i>	<i>15 L</i>
Nov.				<i>out 95</i>
Dec.				<i>45</i>
Jan.	1918			<i>Ret'd per</i>
Feb.				<i>Date</i>
March				<i>Clerk</i>
April				
May				
June				
July				

Original M.F.W. 187, showing A.P. paid from 1-10-16 to 31-10-17. Total 195⁰⁰ per file. 1045-H-2. 1240⁰⁰. shown below is in error. Saved 28-9-18.

Discharged 15-1-18 Weekly M.D.#4 23-2-18

Jan

obs

out 95
45
Ret'd per
Date 12-9-14 F. X 29-10-14.
Clerk

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____


PAYMENTS.

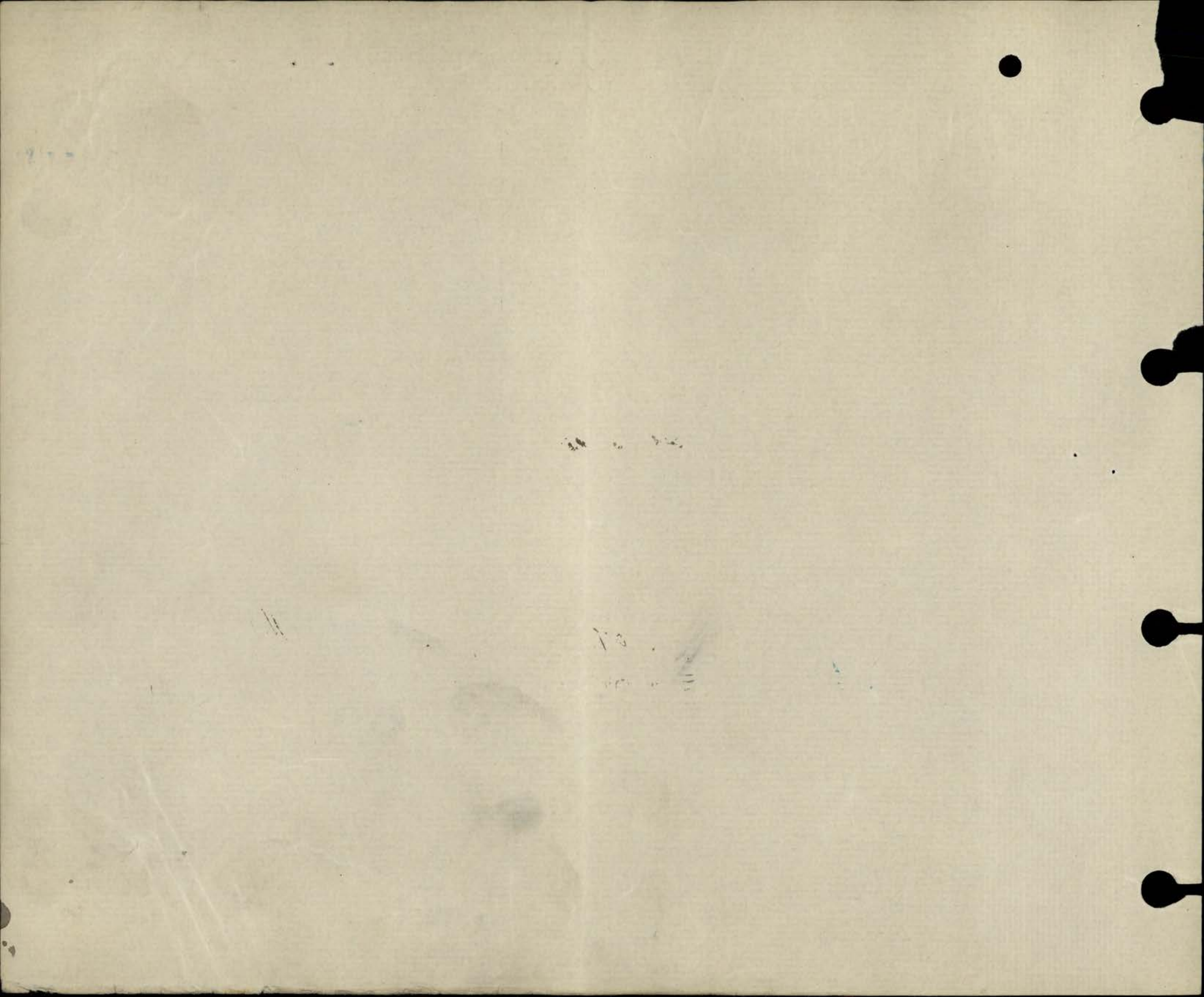
Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mr. Rose Battrick* By Whom Assigned *Battrick Herbert*
 Address *520 St. Catherine Rd.* Regtl. No. *841986*
Outremont Rank. *Pte.*
Montreal Corps *A. Coy 148th Bn*
 Rate *15⁰⁰* OCT 1 - 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				 \$30 P.A.P. Overpaid for the month of September and October, 1917 mounted by G.P. on file - 1045 - H-2 - R. Lashance 9-1-18
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Pte Name *Battiest St.*

Regimental No. *841986*

Home. Name and address of next of kin *520 St. Catherine Place*

Unit *148.*

(Outremont) Montreal

Date of enlistment *June 1916*

MB 26/9/17 Cavo Home

Place of " *Montreal*

Married (yes or no) *No*

Date and place discharged

Amount of pay assigned monthly *\$15 = 1/10/16 to 31/10/17 \$195 =*

Reason for discharge

To whom payable *Mrs R Battiest
 520 St. Catherine R
 Justitia 25/9/17 Outremont Montreal pg*

Character on discharge *Cate D. 3 Hg.*

649-13-17984

Job 5351-M. & D. t880.

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					
<i>25/8/17</i>	<i>31/10/17</i>	<i>67</i>	<i>1.00</i>	<i>67</i>	<i>67</i>	<i>1.00</i>	<i>67</i>							<i>Eng R.P.G. 600 Relief AR 8689 " 10076 " 2 Boat AP Sept Oct 17</i>
							<i>1888</i>					<i>40-</i>		<i>L.P.G. Reason</i>
							<i>9258</i>					<i>487</i>		<i>Showing of Aug to 31 17</i>
							<i>Dr Bal.</i>					<i>973</i>		<i>Aug 1916 to A Unit</i>
							<i>175</i>			<i>30-</i>		<i>973</i>		<i>A.P. Nov. 1917</i>
							<i>9433</i>					<i>9433</i>		<i>Letter to Dept of A.P. Sept Oct 15 17</i>
							<i>Dr. Bal.</i>					<i>175</i>		
							<i>S.L.P.G. forid to "A" Unit 20 17/16 75 1675</i>					<i>15 00</i>		
							<i>Rec'd in Jan 1918 Pay list A unit.</i>					<i>1675</i>		

25/9/17

Eng a P.G. for 1/10/16 to 31/8/17 - \$165 =

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

10724/213.

E. Under H.

Name **Battrick, H. M.**
Surname Christian Name

1045-H-1

Regimental Number **841986** Rank **Pte.**

Address (in full) **520 St. Catherine Rd.,**

Unit **23rd Bn.**

Outremont, P.Q.

Original Unit

District where paid **M.D. 4.**

Date of Discharge **15-1-18.**

P. D. P. Filing Number **10-83-4.**

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	1652	30-1-18	33 00	1627	21-2-18	33 00	1615	21-3-18	34 10		100 10
	<i>8413</i>	<i>26-2-19</i>	<i>70 00</i>								
	<i>27579</i>	<i>5/3/19</i>	<i>70 00</i>								

Remarks:

M. F. W. 127.
50M-6 17.
1772-89-1140.

Amn

Dec'n No. 10724/213 S. C. File No. 1045-H-2

Award 4 days at \$ 70.00 per day \$ 280.00

S. A. months at \$ per mo. \$ \$ 100.10

Less P. D. P. Credited \$ 100.10

\$ 179.90

Less further debit balance \$

Net due paid as below \$ 179.90

TO SOLDIER		TO DEPENDENT		Amount	
O	Ag. No	Ch No	Pay	Ch No	Amount
1	711	8413	70		
2	702 a	27579	70		
3	764 B	419/25	3990		
4					
5					
6					
Total				Total	

2562 - b. Waverly St
 Montreal
 Que.

26/2/19
 5/3/19
 9-4-19

GEN'L AUDITOR
 Posting checked by
W. Black
 Date 14/3/19

W. Black

Casualty Form—Active Service.

Regimental Number 841986

Regiment or Corps 23rd RESERVE BATTAL

Rank Pte Surname Patrick Christian Name Herbert

Religion _____ Age on Enlistment _____ years _____ months.

Enlisted (a) 3/4/16 Terms of Service (a) of War Service reckons from (a) 3/4/16

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

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
or Corps Trade and Rate _____

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<u>15-8-17</u>	<u>23rd CAN. RES BN.</u>	<u>POSTED TO 1st. QUE. REG. DEPOT,</u>	<u>SHOREHAM</u>	<u>15.8.17</u>	<u>Pt. II. D.O. No. 224</u>
<u>9.4.17</u>		<u>TAKEN ON STRENGTH 1st. Quebec Regt'l, Depot, SHOREHAM. Pt. II. D.O.</u>		<u>30. 7.4.17</u>	<u>for O.C. 23rd. Can. Res. Bn.</u>
<u>20.8.17</u>		<u>1st. Que. Regt'l. Depot. ON COMMAND TO <u>C.D.D. Buxton.</u></u>		<u>Pt. II. D.O. 145. 20.8.17.</u>	<u>ADJUTANT, 1ST. QUEBEC REGT'L DEPOT.</u>
<u>21 AUG 1917</u>		<u>TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 194</u>	<u>Commanding</u>		<u>Canadian Discharge</u>
<u>13 SEP 1917</u>		<u>EMBARKED FOR CANADA FROM LIVERPOOL</u>	<u>Commanding</u>		<u>Canadian Discharge</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoing Smith, &c.

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 148TH "OVERSEAS" BATTALION, C.E.F.

Regimental No. 841986 Rank Private Name Battrick, Herbert
C. E. F.

Enlisted (a) 3/4/16 Terms of Service (a) WAR & OVERSEAS WAR Service reckons from (a) 3/4/16

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

Extended _____ Re-engaged _____ Qualification (b) Student

CERTIFIED CORRECT
 6 DEC. 1916
 28
 NOV 25 1916
 GAMES RECORDS 10

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 Canada Halifax	27-9-16	
		Disembarked England Liverpool	6-10-16	
	Transferred to 14th Bn. Dibley Proceeded Overseas for Service with 14th Bn.		28/11/16	D. O. PT. II No. <u>251</u> <u>P. H. Rice</u> Capt. ADJUTANT, 148TH BN CANADIAN INFANTRY.
4.17.	23rd Res. Bn. Posted to 1st. 2.R.D. and att. to 23rd. Res. Bn. for duty.	Shoreham	7.4.17.	D.P. II No. 94. <u>A. H. Humphrey</u> Lt. Asst. ADJ. 23rd. Res. Bn.

(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				
	G. B. D.	ARRIVED G. B. D.	FRANCE	29 th 11/16	N. R. D. 29. 11. 16 PART II ORDERS No 81 D 8. 12. 16.
	G. B. D.	LEFT G. B. D. FOR 14th	14th	14. 12. 16	N. R. D. 14. 12. 16
	G. B. BN	ARRIVED 14th BN	FIELD	16. 12. 16	B. 212 D. 22. 12. 16 386.
24. 12. 16.	G. B. D.	Joined from 14th BN. T.B.	led D.	24. 12. 16	nd. 53-3.
29. 12. 16	Unit	To hospital	Field	18. 12. 16	513. 389.
7. 1. 17	ban corps.	Classified P.B. + attached ban corps bomb boy.	Field	5. 1. 17	513. Part II O# 3. 1917
24. 12. 16	+ 67A	D. N. A. To duty P.B.	led D.	29. 12. 16	at 68. 388.
2. 1. 17	led D.	P.B. for ban corps			File 184/107.
19. 1. 17	Apply ban sectn.	To report to Lt. Keintm. he have for transfer to G. T. D. Thornecliffe (if willing).			
		MINOR	do		
23. 1. 17.	oc. bomb boy	Being despatched to base,	led D.	23. 1. 17.	K.E. 184/107/Y. 48234-28. 1. 17.
27. 1. 17	led D.	Joined from "Unit"	led D.	27. 1. 17.	513.
28. 1. 17.	ban corps.	cesses to be attached. To base	Immature	23. 1. 17.	513. Pt 2 no 9. 1917.
30. 1. 17	led D.	Transferred to Thornecliffe "A"	Thornecliffe	30. 1. 17	21. D. 2. 21 Pt 2 no 15 dt. 10/17.
					Lieut. for Lt Col. and ban section
2. 2. 17.	oc. 23. R. B.	Taken on strength.	Shoreham	31-1-17	Port 0 30

Lieut
for Special i/c Records, C.E.F.

A.G.R. Rank Name **BATTRICK, Herbert** Reg'l No. **841986**
 Unit **148th Bn.** If in perm. Corps, } Married or Single **Single.**
 What Unit? }
 Place and Date of Enlistment **Montreal, 3rd April, 1916.** Place of Birth **Bournemouth, England.**
 Name and Address, Next-of-Kin **Herbert Battrick,**
520 St. Catherine Rd., Outremont, Montreal, P.Q. Relationship **Father.**
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. **9123**
 File R.L.
 Category **ORCA 12**

MEDICALLY UNFIT CANADIAN

Discharge, Date and Place Reason Character

H. W. & V., Ltd. - 7165-16.

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.			
				ARRIVED ENGLAND 3 S LACONIA 6 10 16
28. 11. 16	148th Bn.	Witley	28. 11. 16	Part II, A.O. # 251
8. 12. 16	14th. Bn.	Field.	29. 11. 16	Pt, 2, O-81
24-1-17	" "	"	19-12-16	C.L.H. 569 O.H.H.
19-1-17	"	"	5-1-17	Pr 1103
22-1-17	C.A.C.H. Co	"	"	- 9.
5-2-17	14th Bn	"	23-1-17	- 9.
5-2-17	C.A.C.H. Co	"	"	- 15.
10-2-17	14th Bn	"	30-1-17	- 12.
2. 2. 17	O/c 23rd Res T.O.S.	Shoreham	31. 1. 17	- 30

A.F.B. 103 CHECKED
 5 DEC 1916

ASB

Battrick Herbert

841986

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.				
7.4.17	23 rd Res.	S.O.S. to 1 st Q.R.D. & att. from 1 st Q.R.D.		7.4.17	Pt II DO 94. ^{1st Q.R.D.} Pt II DO 30 1/94.17.
15.8.17	--	ceases to be att on Ret to 1 st Que	Shoreham	15.8.17	Pt II DO 224. ^{1st Que} 1/15 742 dis. 8.17
21.8.17	1 st Que.	On board to b.O.D. Boston for Disch	--	20.8.17	Pt II DO 146.
18.9.17	1 st Q.R.D.	ceases to be on Com to b.O.D. } & S.O.S. on Disch to Canada	--	15.9.17	Pt II DO 170.
	Dis. Depot	To leave Home	Montreal	25.9.17	NR 352.
		MINOR BORN		Sep-18 th	1899

No. 941986 RANK

Pt

NAME

Batrick Herb

T. O. S. 3-4-16

UNIT

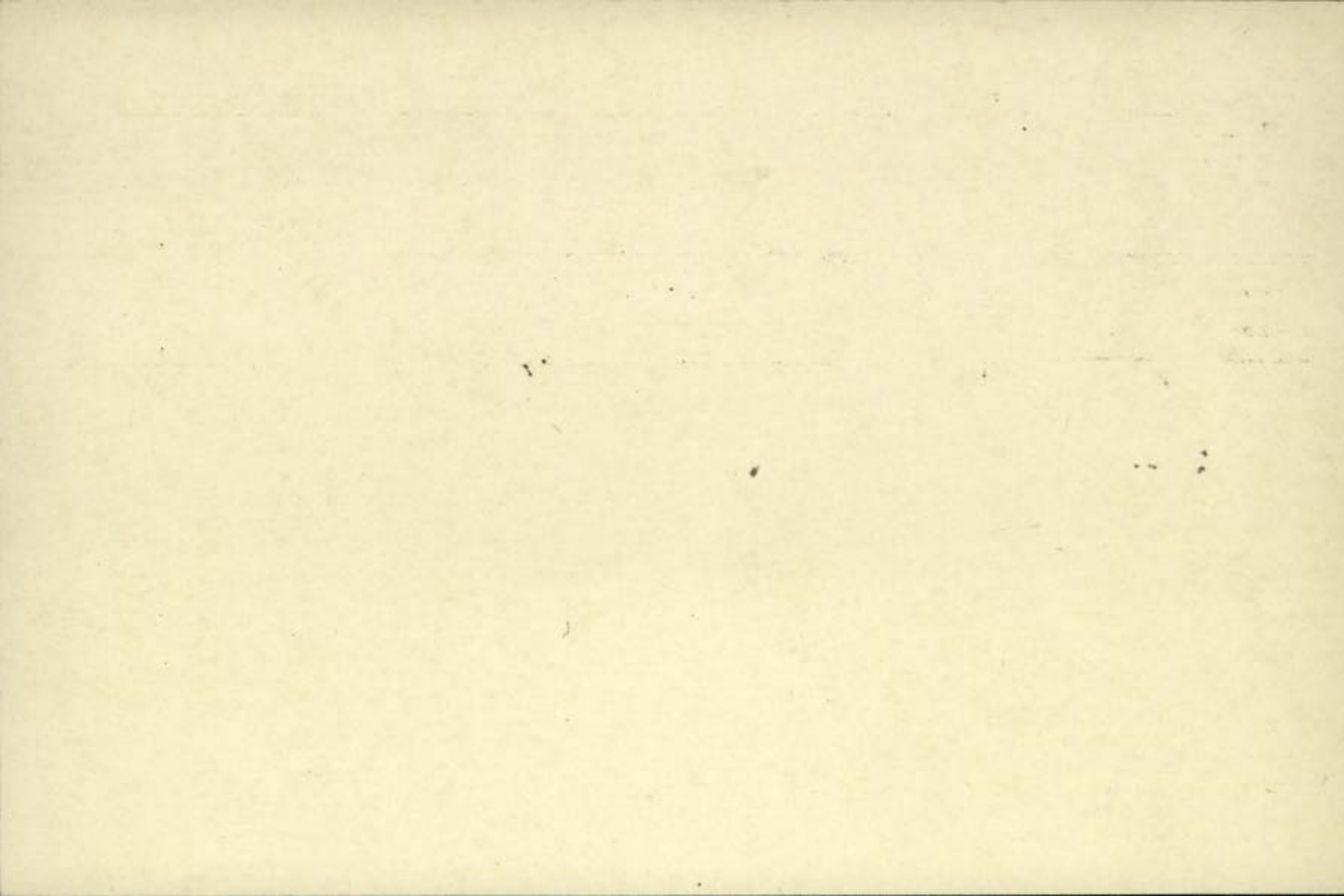
148th O'Leary Battalion

5079 of 4-4-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Apr 3	1916 Apr 30	L ✓ ✓ ✓ ✓		
	May June July Aug Sept			

UNIT SAILED
SEP 26 1916



Reg. No. 841986 Name Battrick H.
Rank Plt Corps 148 Bn Age _____ Service _____
Ledger No. _____ Serial No. _____

HOSPITALS

DATE

DIAGNOSIS

C

G. N. C. H. Montreal

22.4.16

Grippe

26.5.16

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Name *Babrick* Rank *Plt*
 Unit *14th Am.* *Herbert.*
 Next of Kin *Canada*

Reg. No. *841986*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916</i>	<i>Emb. C.F.A.</i>		<i>D.A.S.</i>	<i>1</i>		
<i>"</i>	<i>To P. Base.</i>		<i>"</i>	<i>569</i>		

Number

841986

Rank

ptl.

Surname

BATTREICK.

BV

Christian Name

Herbert.

Units

14th Bu Con

Theatre of War

France

Date of Service

29-11-16.

Remarks

49 GIROUARD AVE.

Latest Address

~~520 St Catherine Rd.~~
Outremont. P.Q.

Roll No.

B

200m.-6-21.

Page 18981

DEPT. NOV 17 1922
REGN. NO. 1075

NAME

Barrick D. B.

REGT'L NO

841986

RANK AND CORPS

Pte. 14th Bn

H. Q. FILE NO. 649-

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A. 569	2nd Canada Lmb adm + disch to Permanent Base	19-12-16	D.A.S.
249.	M.H.C. Toronto	4-10-17.	Adm. C.N.C.H.
264	" " " " "	23-10-17	Trans. to d. C.H.
308	" " " " "	12-12-17	Trans. A. unit,
308	" " " " "	12-12-17	Trans. U.P. Penders
258	" " " " "	15-10-17	Out P.S. of G.M.C.H.
24	" " " " "	15-1-18	Dis from H.M.S. 3.

not eligible for Robert '14/15' Star.

BATTRICK, Pte. H., No. 841986, 148th Bn. 649 B 38954

MEDALS & DECORATIONS, Mother, Mrs. Rose Battrick,
2562c Waverley St.,
Montreal, P.Q.

PLAQUE & SCROLL, Father, H. Battrick Esq.,
2562c Waverley St.,
Montreal, P.Q.

(Ser. # 985038.)

MEMORIAL CROSS, Mother, as above.

Desp JUN 12 1920 611460

Not a list. Died after discharge



Scroll Desp. 22 $\frac{5}{3}$ Reqn. No. 55-950

Plaque Desp. _____ Reqn. No. _____

AUG 13 1924
Plaque Desp. _____ Reqn. No. 643

L

186

111

116
99 ✓
SURNAME. *Battrick.*

S.O.S. No. *11.5*
15-1-18. 4

CHRISTIAN NAMES *Herbert.*

REGL. NO. *841986.* RANK *plc.*

UNIT *148th*

Batt

FORMER CORPS *nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Battrick, Herbert.*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *520 St Catherine Rd. Old Montreal
Montreal. P.Q.*

COUNTRY OF BIRTH *England. Bournemouth*

DATE *Sept 18th 1897.*

PLACE OF ATTESTATION *Montreal. P.Q.*

DATE *April 3rd 1916.*

Sailed from Halifax Nev.

S.S. "Laconia" 26/9/16 561/4

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Student

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

18 YEARS

6 MONTHS

HEIGHT

5 FEET

6 1/2 INCHES

CHEST MEASUREMENT

35 INCHES

EXPANSION

4 INCHES

COMPLEXION

Medium

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Blue upper lip.

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

April 3rd 1916.

Present Address, 520 St. Catherine Road.

Outremont, Montreal, P. Q.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Oct-1-16

OVERSEAS CONTINGENTS

Euro

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *841986*
 Rank *Plt* Promoted Reverted Discharge
 Soldier's Name *Herbert Battick*
 Battalion *148 Bn. D. Coy.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Rose Battick*
 Address *5-20 St. Catharine Rd. Outremont*
 Change of Address *Montreal*
 1
 2
 3
 4.

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Sept. 30/1917</i>			<i>180</i>	<i>180</i>	<i>✓</i>
<i>Oct</i>	<i>M 47641</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Nov.</i>	<i>B 54555</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec</i>	<i>xxx</i>		<i>75</i>	<i>75</i>	<i>m</i>
			<i>xx</i>	<i>xx</i>	

\$30.00 O'payment for Sept & Oct 1917 recovered by C.P. on file 1045-H-2 N.A.G. 13-1-18. Ret'd Ins. 8261 - Date 12/9/17 FX 29/10/17 Ev. Hudson B. 54555 return asked for from P.O. SHS

\$15 O'payment for Nov-1917 recovered by C.P. on file 1045-H-2 N.A.G. 13-1-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
400M-6-17-1772-89-1141
L. L. 22220-M. & D. 7333.

IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—

- (a) See that all entries are properly and fully made, and signed.
- (b) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

2. Action by Officer Commanding Unit—

- (a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.
- (b) On transfer to another Unit—to Officer Commanding such Unit.
- (c) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

W. H. WOODRUFF

REPORT OF ORIGINAL MEDICAL

HISTORY, PHYSICAL

Presented to the

Medical Staff of the
Hospital and University and
signed

on the 1st day of August, 1914, at
the Hospital, which
man is listed as
No. 12345, in the
to Unit - the
the Unit

Medical Officer

On admission to the
Hospital, the patient
was found to be

in good health and
the physical
examination
revealed
no abnormal
findings

65822

20

Perforated sheet for Will from Pay Book of Reg.

No. 841986

Name Herbert Battwick

Unit 1484 Batt. C.E.F.

Military Will

In the event of my death I give the whole of my property + effects to my mother,

Mrs R. Battwick
520 St-Bath: Rd
Outremont

Signature H. Battwick ^{P-2.} *circled*

Rank and Regt. Pte # 841986

Date Nov. 24th 1916

List of Discharge Documents.

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

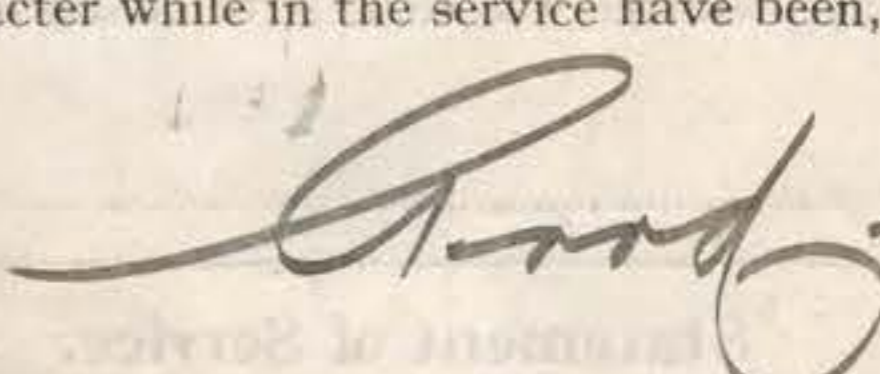
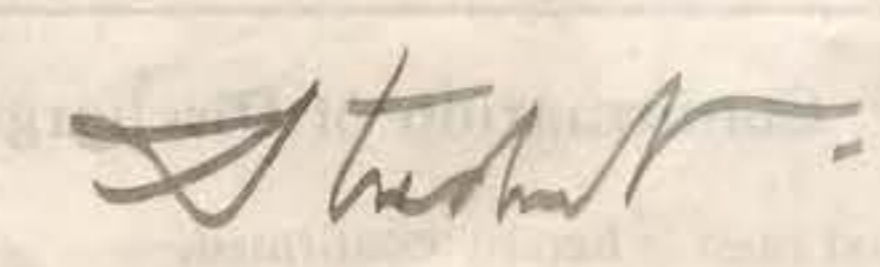
*Only if discharged "Medically unfit."

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

This space to be for numbers

Proceedings on Discharge.

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

No.	841986
Rank	Private
Surname	Batrick
Christian Name	Herbert
<small>Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	148th Battalion
Date of Discharge	15/1/18.
Place of Discharge	Montreal.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 20 years..... 4 months.	Descriptive Marks
Height..... 5 feet..... 6 1/2 inches.	
Complexion Fair	Birth mark on left upper lip.
Eyes Grey Blue	
Hair Brown	
Trade Student.	
Intended place of residence	520 St. Catherine Road, Outremont, P.Q.
<small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of Medical Unfitness due to Bronchial Asthma. D.A.H. Authority H.Q.4D.22-B-1605 Dated December 18th 1917. and in accordance with instructions in Circular Letter No.285 HQ 16-1-25 December 14/1917.	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
3. Conduct and character while in the service have been, according to the records, etc.	
	
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	
	

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

W. S. G. Comp. 6/2/19

(OVER)

*Div Seat
1-2-18
MB*

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Montreal. J. M. Battwick (Signature of Soldier.)

(Date) 15/1/18. E. Wieding (Signature of Witness.)

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

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

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

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....1 years 282 days.

11. Confirmation of Discharge.

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

(Place) Montreal

(Signature) G. C. Hall

(Date) JAN 18 1918



Military Hospitals Commission Command

Reservations referred to at Para. 8.

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

List of Discharge Documents
None.

J. M. Battwick

9226
23/1/18
A162 23/18

421/23/1/18

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

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

MEDICAL HISTORY OF AN INVALID

B.P.C.

649.1317987

STATION Montreal, Que. DATE 5th Dec./17.
 1. (a) Unit 148th Battalion, C.E.R. (b) Regimental No. 841986 (c) Rank Private
 (d) Surname BATTRICK (e) Christian name Herbert
 2. Age last birthday 18 Date of birth 18 Sept. 1899
 3. Enlisted at Montreal, on 3 April 1916
 4. Personal description :-
 (a) Height 5 ft 6-1/2 ins. (b) Weight 127 lbs (c) Complexion fair
 (d) Colour of hair brown, (e) Colour of eyes grey blue (f) Identification marks
 Birth mark on left upper lip.
 5. Address after discharge (for the use of the Board of Pension Commissioners.)
 520 Ste. Catherine Road, Outremont, Montreal.
 6. Former trade or occupation Student.
 7. (a) Service 1 Years 246 Days

	PERIODS	
	From	To
Transferred to 14th Battalion,	3 April 1916	Nov. 1916
" " 23rd Battalion,	Nov. 1916	Feb. 1917
	Feb. 1916	5th Dec. 1917

(b) Has he been Overseas? Yes, in France,
 8. Present disease or disability (use authorized nomenclature if possible). 1. Bronchial Asthma. 2. D.A.H.
 (a) Date of origin 1. Jan /17. 2. Jan./17. (b) Place of origin 1 & 2 In France.
 (c) Cause* Service and climate.
*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).
 General condition fairly good. Complains of cough, pains in chest, perspiration, morning sputum, general weakness, and shortness of breath even at rest. Examination :- characteristic deformity of rt. side of chest, which is quite prominent. Both apices slightly retracted. Lungs :- blowing emphysematous breathing, but no adventitious sounds heard. Apex of heart in 5th interspace near nipple line, no enlargement, no murmur. Pulse 80, regular, but after a quick walk of about 50 ft. it gives some extra systoles and irregularity. Sputum analysis is negative for T.B.C. "X-Ray of chest shows increased mottling right upper lobe of doubtful pathological significance." Other systems normal.

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

M. F. B. 227.
 1514-6-17.
 1772-39-117.

B. P. C. FOLIO
 FALSE DOCKET
 2

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: *John A. Scapam* Signed: *Herbert Battrick*
Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

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

10. History;

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

History of some bronchial troubles prior to enlistment, but nothing like he has now. Was very well when he enlisted.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

1/2

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

13. Was a Court of Inquiry held? Not applicable.

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

Yes..... No..... No. (If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? Refused Sanatorium treatment.

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

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

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

Hospital treatment and convalescent Home for three months altogether.

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

Sanitarium treatment for respiratory diseases indicated.

19. Can the former trade or occupation be resumed? Hardly, not before three months.

20. Recommendations Sanitarium for non-tubercular patients indicated, but this is refused. Would discharge Class E. (Waiver page 4, signed)

Signature of Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned, Herbert Battrick, have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Signature of soldier examined.

MG.

OPINION OF THE MEDICAL BOARD

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

No. 8. (1) YES. (2) No evidence found.

No. 9. YES.

No. 11. 1/4 for six months.

No. 12. Probably originated before enlistment.

No. 14. Perhaps aggravated by service by 50%.

Nos. 17 & 18. Discharge best treatment.

No. 20. Discharge. Class E.

22. Is the soldier fit for

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

UNFIT.

23. It is certified that the soldier

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

(Strike out condition not applicable).

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

It is recommended that he be discharged. Class E.

It is recommended that he receive 25% compensation for six months.

It is recommended that he return at the end of that time for re-adjustment.

Signature of President.

Signature of Lt. Col. Members.

STATION Montreal.

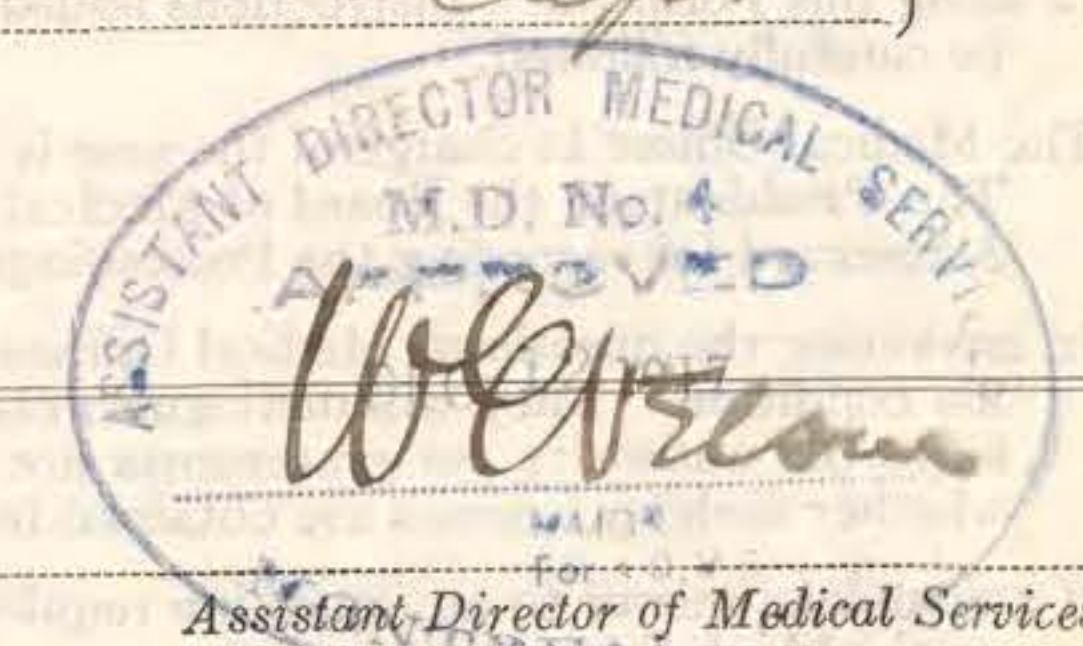
DATE December 8/1917.

APPROVED BY

DATE

APPROVED BY

DATE



Assistant Director of Medical Services.



Director-General of Medical Services.

P. 559 MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c

PARTICULARS

EFFECTIVE DATE

AUTHORITY

ADMISSIONS TO HOSPITAL, &c

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

REG'L No.

RANK

NAME

IF IN PERM. CORPS
WHAT UNIT

UNIT

TRANSFERRED TO

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

October 1 1916

PAYABLE TO

RELATIONSHIP

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

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

Stopped Effective 1/9/17

REASON

Disch. to Canada

DISCHARGE DATE AND PLACE

25/9/17 Canada

REASON AND AUTHORITY

AG 1129-19/6/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT							
Oct-31	31	1.	31		31	.10	3.10								18	18	34 10										15		27 17	24 93				Bal from Canada	
Nov-30	30	1	30		30	10	3									33	34 19/10	81	3/11	167	24/11	133	15/11				15		36 89	21 04	15 50	5 54			
Dec-31	31		31		31	3	10									34 10											15		15	40 04					
Jan-31	31	1	31		31	9	20									34 10											15	05	19 41	54 53				Do by note	
Feb-28	28		28		28											16 50											15	15	56 33				of a c.c.c.c. 11.2.17		
Mar-31	31		31		31	20										16 50											15		113 41	70 63				9	
Apr-30	30		30		30											34 10											15	48	75	55 98					
May-31	31		31		31											33											15	60	39	28 59					
June-30	30		30		30											34 10											15	15	47 69						
July-10	10		10		10											33											15	22	30	58 39				Trans 23 Res Bn 1/7/17	
"-31	10		10		10											33											15	15	54 39				Auth & Note		
			23	10												23 10											15	27	49 1	77 49					
			33	40												334 40											150	05	274 91						
															18	352 40												24	33	993	9080				

Sailing list 45 1917 1/7/17 to Bal 4²⁸

841986 Pte Barrick H

Assigned Pay \$15

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1 2 3 4				1 2 3 4				CREDIT	DEBIT										
			\$	c.						\$	c.	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE						NO.	DATE					
food			334	40				18	352 40									24 33	9 73	90	80	150	05	274 91	77 49				<p>Lo pay 24th 29th 29th 1917</p> <p>direct to Can</p> <p>Inv Rpt. # 39-19/17</p> <p>33M. FORM RENO Stopped 1/9/17</p> <p>DISCHARGED TO Can. DATE 25/8/17</p> <p>PAYBOOK VERIFIED 25/8/17</p> <p>for BAL 18.88 I.P.C. RENO 25/8/17</p> <p>OUT 4. H.S. 1.29. 19/17</p> <p>For Disposal</p> <p>Checked [Signature]</p>		
Aug 23	1 ¹⁰		25	30					25 30																						
24-25	2		2	20					377 90																						
26									2 20																						
									907. 21/8 (extra Run)																	4 87	84 57				
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLOE ENG.																				
Oct	Bal food								84 57																						
	AR 10076			8/9/17	Buxton	9 74																									
	Anal 138			23/10/17	do	9 73																									
	298			30/5/17	do	7 30																									
	528			29/6/17	do	9 73																									
	AR 639			7/7/17	V	14 60			33 47																						
	do 625			23/9/17	do	9 73																									
	786			14/8/17		9 74																									
	433			15/6/17		9 74			4 26																						
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Transf. to Canadian Liability ac.																															
Balance transferred to N. E. Branch																															

Balance transferred to N. E. Branch

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