

NAME **BAUGH, CHARLES W.**

C.E.F. REGIMENTAL DOCUMENTS

REGT. No.

C 41114

UNIT

1RES. BTY. **C.F.A.**

4846

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

CATEGORY

DISCHARGE

CATEGORY

MED. UNFIT

DESERTION

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DATE RECEIVED

TO WHOM FORWARDED

DATE
FORWARDED

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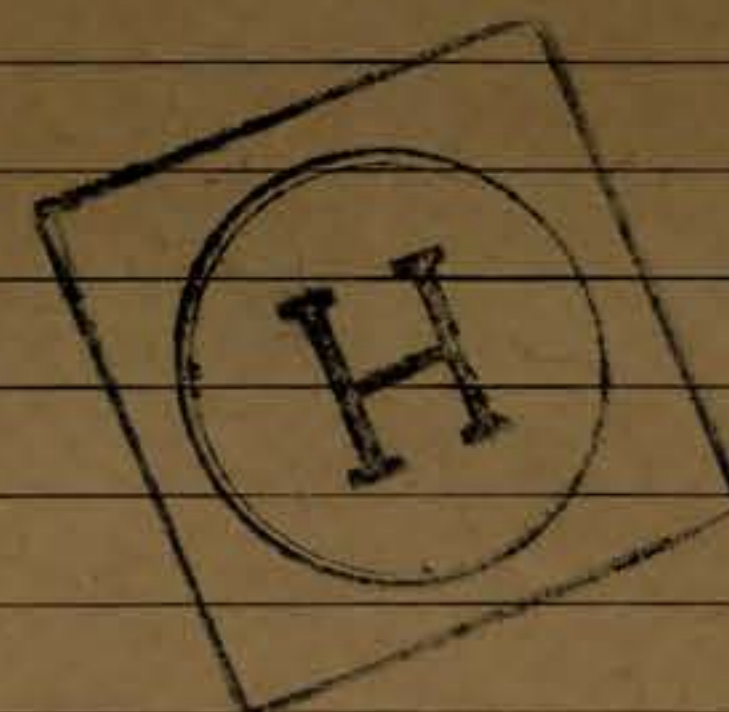
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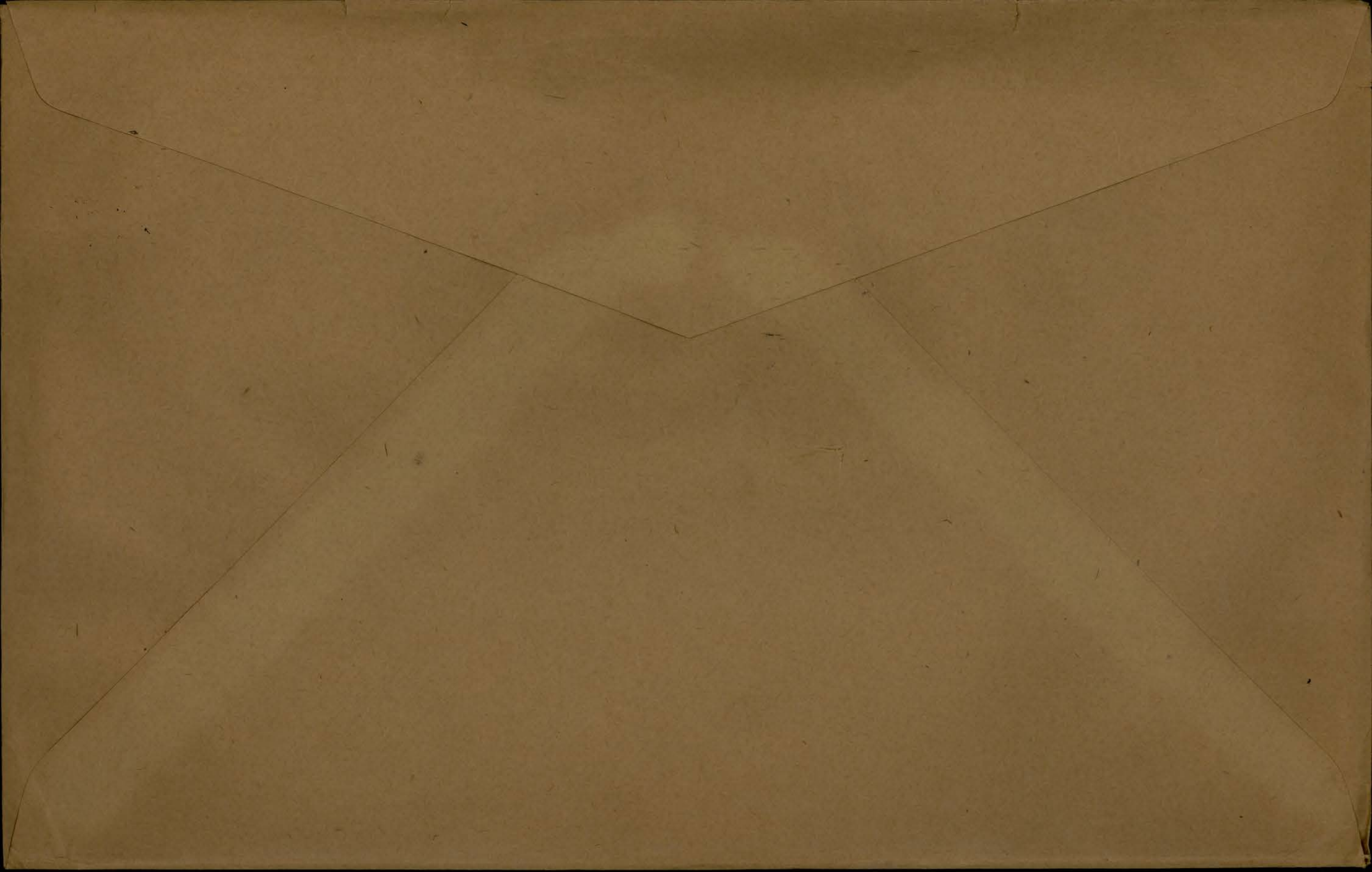
PARTICULARS OF CHARACTER (A.F.W. 3226)

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CARDS

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ATTESTATION PAPER.

No. ~~CH 1114~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

1. What is your name?.....
2. In what Town, Township or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?..
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the)
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}

(ANSWERS).

Charles Wallick Baugh
Quebec PQ
Elizabeth Baugh Mother
Fort Beaumont PQ
20th May 1891
Fireman
No
No
RCGA 3 yrs
3rd Batty CFA 3 yrs.
Yes
C. W. Baugh (Signature of Man).
J. H. M. Green (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Charles Wallick Baugh*, 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.

Date *Sept 26th* 1914. *C. W. Baugh* (Signature of Recruit)
J. H. M. Green (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Wallick Baugh*, 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.

Date *Sept 26th* 1914. *C. W. Baugh* (Signature of Recruit)
J. H. M. Green (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Quebec* this *26th* day of *September* 1914.

J. H. M. Green (Signature of Justice)

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

J. H. M. Green (Approving Officer)

3rd Brig 5th Bty
Description of C. Baugh on Enlistment.

Apparent Age 23 years.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 5 ins.

Vacc left arm

Chest measurement { Girth when fully expanded.....34 ins.
Range of expansion.....3 ins.

Blue scars right & left
in blocks

Complexion.....Fair

Eyes.....Blue

Hair.....Light Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....Sept 13.....1914.

Place.....Valcartier.....

R. G. Chown
Same

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.

Charles Wallick Baugh.....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.

R. G. Chown.....(Signature of Officer)

Date.....Sept 26th.....1914.

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

Certificate of discharge of No. C41114 (Rank) Sgt
(Name) Baugh b.
(Regiment) Can Field Arty
who was enlisted at Valcartier
on the 22nd Sept 1914.

He is discharged in consequence of Medical
unfitness

after serving 1 years 45 days with the Colours, and
✓ years ✓ days in the Army Reserve. aid. 1 year

(Place) Shorncliffe Signature of Capt. Adjutant,
Commanding Reserve Brigade, C.F.A.
(Date) Nov. 1915 Officer He

*Description of the above-named man on Nov 5 1915 when he
left the Colours.

Age 23 yrs 5 mths Marks or Scars, whether on face
Height 5ft 5ins or other parts of body.
Complexion Fair
Eyes Blue
Hair Fair

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

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

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 Depot 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 40.

Surname

Christian Name or Names

Reg. No.

Baugh

C W.

Rank

Unit

Co.

Troop

Batty.

Ipr

2nd Bde. (67d)

Hospital

#5 Gen Rouen

Date of Admission

3-5-15

Transferred

Yents. St. Martins Pln.

Hosp.

1-7-15

3rd North Gen.

Hosp.

13-5-15

Yent. St. Martins Pln.

Hosp.

5-7-15

Hosp.

Diagnosis

Gas poisoning

Sec. Syph.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

CL 17

Dis. to furlough
Discharged

21-6-15

Date

7-8-15

O.L. 17. 5.15 #53

REMARKS

WHR. 20-7-15

WR. 4-6-15

" 11-6-15

" 19-6-15

WHR. 25-6-15

C.L. 4-6-15

" 8-7-15 15

" 22-6-15 85

R.M.D. & DEPT.

Boh. of D.O.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 3502.	Regimental No. 41114	Rank. Trumpeter	Surname. Baugh	Christian Name. Charles
Year 1915	Unit. 5th. Btn. C.F.A.		Age. 24	Service. 9mts.
Station and Date. Sheffield	Disease <u>Gas Poisoning. (Conv)</u>			
13/5/15.	Suffered from Gas poisoning a fortnight ago and since then has had a cough and pain in chest. Pain over heart on exertion and bad taste in the mouth.			
	Chest clear, Heart normal. Tongue furred. Several very bad teeth.			
16/5/15.	Much better. <i>J. Clark</i> <i>Capt.</i>			
	Conv. Home			
June 21	Furlough.			

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

Station
and Date.

Rank and Name BAUGH, Charles Waldeck

Regimental No. 41114

Unit 2nd Brigade

Date of enlistment Sept 26th., 1914.

Place of birth Quebec

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Mrs Elizabeth Baugh (mother)

Fort Beaumont, P.Q.

Date and place of discharge

Reason for discharge

Character on discharge

Envelope #13910

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				
17-5-15	H.Q. Adm #5. Gen ^L Hops	Renew	3-5-15	C.S. #53. of N. Gas Poisoning	
22-5-15	H.Q. Adm #3. Northern Gen ^L Hops	Sheffield	13-5-15	C.S. #59.	
23-5-15	OC 2 nd Bde	Transferred to Enq.	France		Part II. O#13.
22-6-15	H.Q. Swtch ^d to Sick Furlough from Northern	Sheffield	21-6-15	Case S. 85.	
21-6-15	% 3 North Gen Hops	Granted Furlough. 21/6/15-28/6/15	"	21-6-15	address on leave, 52 Bannington Rd. Perisclon SW. Army Form W 3016,
1-7-15	OC R. Bde	Rep ^d for duty & p st 1 st Bly	Shorncliffe	30-6-15	Part I O #89
8-7-15	H.Q. Adm #5. Martin Plain			1-7-15	C.S. #15. See S. yph
6-11-15	OC HQ Can	Board recommends:— Transferred to Canada for three months with letter from			OC HQ Can. No H 22-B-248 Trans Div
7-1-16	OC R. Bde	Struck off Strength			
		Discharged to Canada M. Schiff	5-11-15	PA II O. 6.	

Casualty Form—Active Service.

Regiment or Corps 5th Battery, 2nd Artillery Brigade.Regimental No. C.41114 Rank 2nd Lt. Name Baugh, Charles WallaceEnlisted (a) 8 Aug. 14 Terms of Service (a) Duration of War Service reckons from (a) 8 Aug. 14Date of promotion to } ✓ Date of appointment } ✓ Numerical position on } 27
present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
5.5.15 12.5.15	H. G. 5 Gen H. A. G. H. 3. Herefordshire	<u>Embarked</u> admitted to H. 4 as poisoning trans. to England and struck off strength.	<u>Avonmouth</u> H. G. 5 Gen H. <u>Southampton</u>	<u>11.2.15</u> H. 5.15 12.5.15	<u>W3034, E41/2</u> <u>A 36</u> <u>McDermis</u> CAPT. OFFICER in RECORDS CANADIAN SECT.
1.7.15	H. Reston	Rep. for duty. Ret. to 15 th May	<u>5 Cliffe</u>	<u>30.6.15</u>	<u>Pr 0 89.</u>
7.1.16	"	<u>S.O.S. Discharged</u> <u>to Canada. (H. U)</u>	<u>100/2114</u>	<u>5.11.15</u>	<u>Pr 0.6.</u>
					<u>Spencer</u> Lieut. for Colonel i/c Records,

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

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

5th Bty 2nd Bn
Description of C. Baugh on Enlistment.

Apparent Age 28 years.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 5 ins.

Chest measurement { Girth when fully expanded.....34 ins.
Range of expansion.....1 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Brown

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

1 Vacc left arm
1 blue scar left Buttock
1 " " right

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.....3rd Sep......1914.

Place.....Valcartier.....

P. G. Chown
St Anne
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.

C. Baugh.....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.

E. Gerald Hansen.....(Signature of Officer)
mg

Date.....Sept 26th.....1914.

2nd BRIGADE

ATTESTATION PAPER. C-F-A

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. 4114

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Charles Wallick Baugh*
2. In what Town, Township or Parish, and in what Country were you born?..... *Quebec P.Q.*
3. What is the name of your next-of-kin?..... *Elizabeth Baugh Mother*
4. What is the address of your next-of-kin?..... *Fort Beaumont P.Q.*
5. What is the date of your birth?..... *20 May 1891*
6. What is your Trade or Calling?..... *Fulmar*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
9. Do you now belong to the Active Militia?..... *No*
10. Have you ever served in any Military Force?.. *R.C.G. 3 yrs*
If so, state particulars of former Service. *3rd Bn C.F.C. 3 yrs*
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*

C.W. Baugh (Signature of Man).

J.H.M. Green (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Charles Wallick Baugh*, 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.

Date *Sept 26th* 1914. *C.W. Baugh* (Signature of Recruit)
J.H.M. Green (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Wallick Baugh*, 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.

Date *Sept 26th* 1914. *C.W. Baugh* (Signature of Recruit)
J.H.M. Green (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Quebec* this *26th* day of *September* 1914.

E. Gerald Hanson (Signature of Justice)

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

..... (Approving Officer)

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				
Paymaster MD 4	Adm. Grey Muns Cous. Horne 4D.-22-B-106		Montreal	7/1/16	auth 649-B-389 7-45
"	Sos. Med. Unfit 4-D-22-B-106		"	29.1.16	45-649-B-389

[Signature]
for Duff R

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

30968/618

1052-C-9 92

Name **Baugh, Chas. W.**
Surname Christian Name

Regimental Number **4114** Rank **Tptr.**

Address (in full) **2113 St. Catharines St.**

Unit **1st Res. Bn. 114**

Montreal, P.Q.

Original Unit

District where paid **Ottawa**

Date of Discharge **29.2.16.**

P. D. P. Filing Number **16B9.**

Rates:—Regimental pay \$ 1.00 per diem: Field Allowance \$.19 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		
160 10	1441	25/7/17	53 00	1433	25/8/17	53 00	1289	24/9/17	54 10		160 10

Remarks:

M. F. W. 127.
60M-617.
1772 38-1140.

2113 St Catherine St East
Montreal

Dec'n No 30968/618 V.I. S. G. File No 1052-6-9

Award 122 days at \$ 70 per day \$ 280.00

S. A. 122 months at \$ per mo. \$

Less P. D. P. Credited \$ 160.10

Less further debit balance \$

Net due paid as below \$ 119.90

TO SOLDIER DEPENDENT

0	Ag. No	Ch No	Amt	0	Ag. No	Ch No	Amt
1				1			
2	2958	443012	119.90	2	31918	5282	120.00
3				3			
4				4			
5				5			
6				6			
Total			119.90	Total			

400 Dep. Mrs Baugh
Mother.
Same.

239.90

1.10.19.

RH

R W 109
11-12-19

Soldier died Oct /1918.
Hold all payments

29/7/19
GEN'L AUDITOR
Posting checked by
[Signature]
Date 20/1/19

Widow of Soldier.
Mrs Charlotte E. Baugh.
95 Lorfar St.
Pte St Charles

Name Baugh, Trpr. C. H.

M. F. W. 41.
10m.—11-15.
1772-39-889.

Regimental No. 41114.
Unit Ass. Bde. (2nd Bde.)
Date of enlistment
Place of " "
Married (yes or no) No.
Amount of pay assigned monthly \$ 7.00
To whom payable sup. all. mil
"Metagoria" 10/1/15

^{Home} Name and address of next-of-kin
2113 - St Catherine St. Montreal. Gen
Med Board Rec to 18/2/15
Adm Grey Muns Con. Home 3/1/16
Date and place discharged
Discharged 29/2/16.
Reason for discharge
Character on discharge
Class No. 2. H.Q. 649-B-389.

Date		PAY		Field Allowance			Other Credits	Total Credits	Chk. 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				
4/1/15	3/12/15	56	1.00	56.00	56	.10	5.60	44 472	31.50	137.57	1205 16/15	77 57	60.00	137.57	L.P. 6.608 ✓ 20 H.Q. 1st Gen. 2.D. T. to 4th Div from 1/1/16 Waiting to see if Gen 27/1/16 for date of Adm. to Home CAP mce

(261)

ESP nie

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

[illegible]

Ew
MILITIA AND DEFENCE

SEPARATION ALLOWANCE

529

Name *Baugh E. Mrs*Name of Soldier *Baugh Charles W.*Address ~~*Fort Beaumont.*~~Regtl. No. *41114.**2113 St Catherine St Eque
Montreal Que.*Rank *Private*Corps *5th Bty 2 Bde*

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

*Authority: apne 13th - Res. B. Y. O'Connell
Montreal.*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug. $\frac{1}{2}$	1914	<i>A 8472</i>	<i>170 00</i>	<i>S.A. + A.P. Form 1 rendered. 18-3-19 on file 1052-C-9 cur.</i>
Sept. ✓				
Oct. ✓				
Nov. ✓				
Dec. ✓				
Jan. ✓	1915			
Feb. ✓				
March ✓				
Apl. ✓				
May		<i>A 9798</i>	<i>20 00</i>	
June		<i>C 10752</i>	<i>20 -</i>	
July		<i>D 10384</i>	<i>20 -</i>	
Aug.		<i>A 11726</i>	<i>20 ✓</i>	
Sept.		<i>B 14183</i>	<i>20 -</i>	
Oct.		<i>E 14741</i>	<i>20 -</i>	
Nov.		<i>D 14281</i>	<i>20 - 20</i>	
Dec.		<i>A 15558</i>	<i>20 20</i>	
Jan.	1916	<i>B 18529</i>	<i>20 - 20</i>	<i>Closed Hq List 370 20 PDR 137-17</i>
Feb.		<i>C 18418</i>	<i>20 20</i>	
March			<i>370 20</i>	



NAME BAUGH Charles, Walbeck

Ym.

O

✓

Regimental No. ⁴¹ 114Unit ^{Res. Brig. B.T.A.} 2nd Brigade

Name and address of next-of-kin

MRS. Elizabeth Baugh (Mother)

Date of enlistment Sept. 26th, 1914

Fort Beaumont P.Q.

Place of "birth" Quebec

Married (yes or no) No

Date and place discharged

7/15 Canada

Amount of pay assigned monthly \$ NIL

Reason for discharge

M. H.

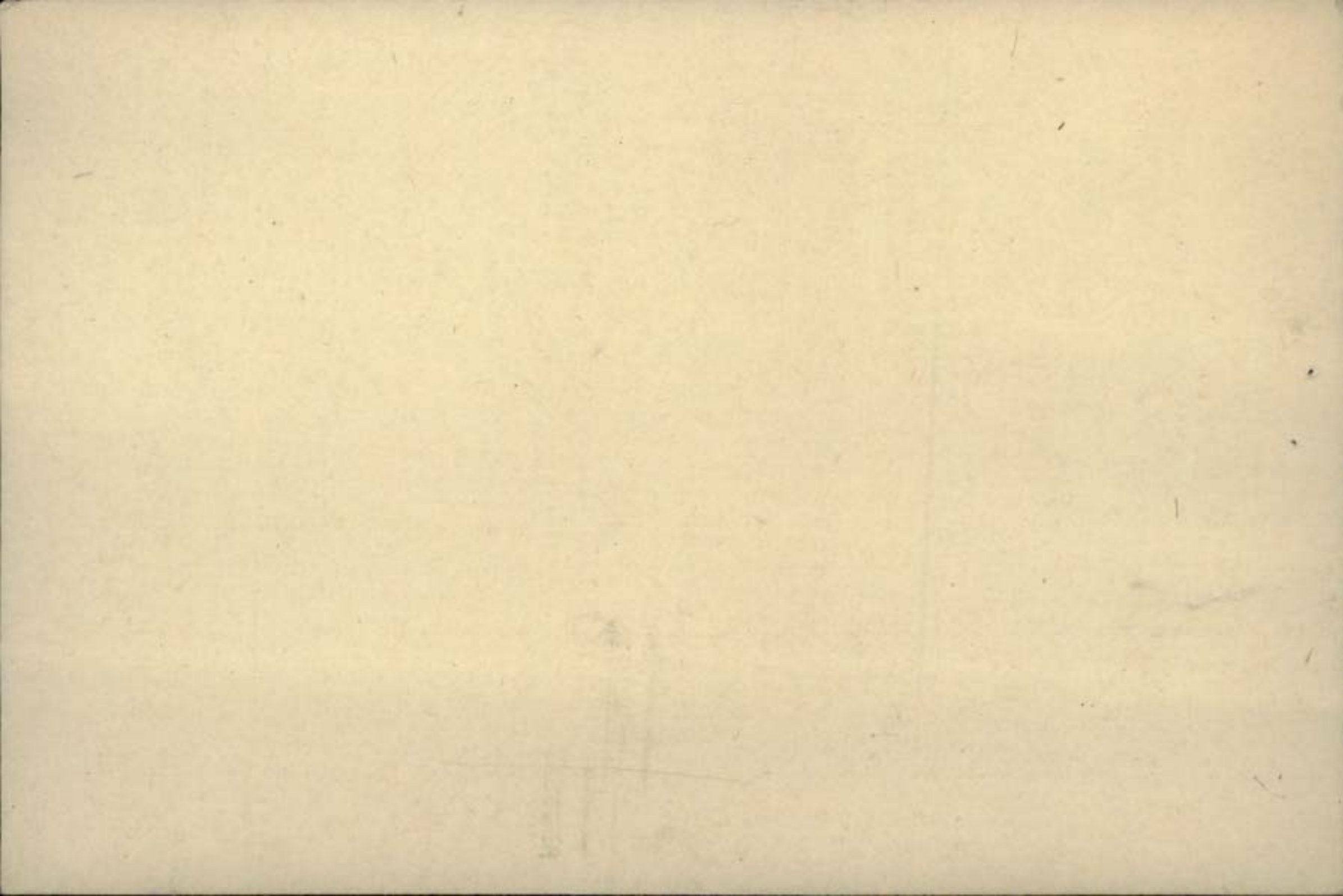
To whom payable

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
22.9.14	31.10.14	40	1.00	40 -	40	10	4 -		44 -			40 -		2 20	42 20	74/15 2 days pay	
1.11.14	30.11.14	30	"	30 -	30	"	3 -	1 80	31 80			30 -		4 40	34 40	" 4 "	
1.12.14	31.12.14	31	"	31 -	31	"	3 16	40	34 50			30 -			30 -		
1.1.15	31.1.15	"	"	31 -	"	"	3 10	4 50	38 60			30 -			36 -		
1.2.15	28.2.15	28	"	28 -	28	"	2 80	8 60	39 40							39.40	
1.3.15	31.3.15	31	"	31 -	31	"	3 10		34 10			6 -			6 -	67 50	
April		30	"	30 -	30	"	3 -		33 -			6 -			6 -	94 50	
May		31	"	31 -	31	"	3 10		34 10			5 -			8 -	120 60	Scutty Bea Pte. 25 ⁵ / ₁₅
June		30	"	30 -	30	"	3 -		33 -			3 -			80 -	13 60	+ P. 1/2 Bea Pte. June 10
To July 15		15	"	15 -	15	"	1 50		16 50			5 -			90 10	106 ¹ / ₂ Unk. Gen Hosp.	
16	31	16	"	16 -	16	"	1 60	4 -	17 60						111.70	To 6 ¹ / ₂ Byde.	
								6 13				230			117 83		
1 Aug. 31		31	1 -	31 -	31	10	3 10		34 10			48 66			48 66	103.27	
1 Sept. 30		30	"	30 -	30	"	3 -		33 -			38 94			38 94	97.33	
1 Oct 31		31	1	31 -	31	"	3 10		34 10			82 73			82 73	48 70	
1 Nov 5		5	1	5 -	5	"	50		5 50						54 20	54 20	Dis to Canada
NE Mch 16									54 20						54 20	54 20	7/15 L.P.C. Jan 10

Bal'd Transd to
"Can. Liability Disch'ge a/c"

[illegible]



No.

RANK

Gr.

NAME

Baugh C.

T. O. S.

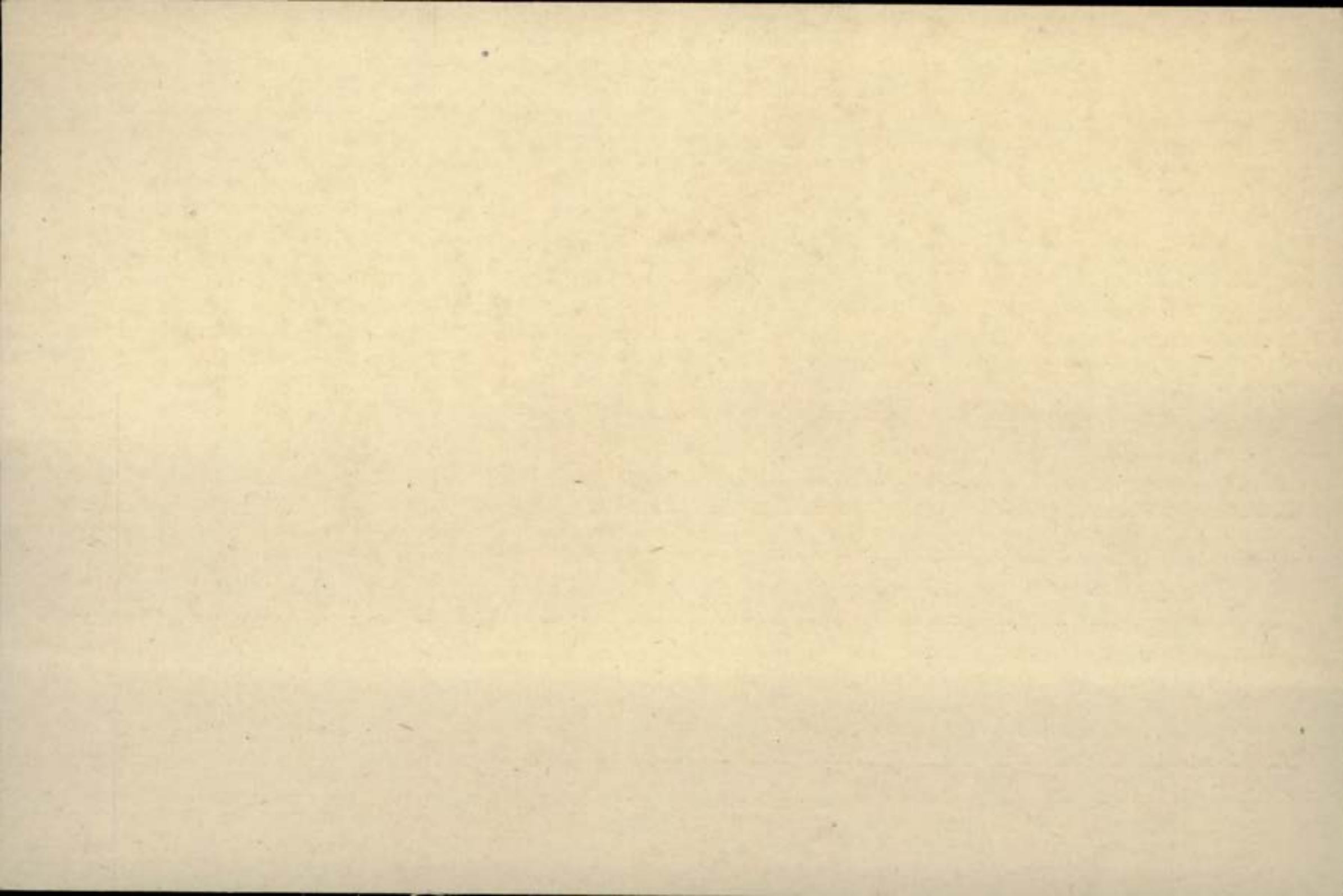
UNIT

21st Battery, 6th Brigade C. 7. A.
(mobilization)

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'D	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Aug. 15	1914 Aug. 28	✓		

UNIT SAILED
FEB 23 1915



No 41114 RANK *spv.*

NAME

Baugh, C. W.

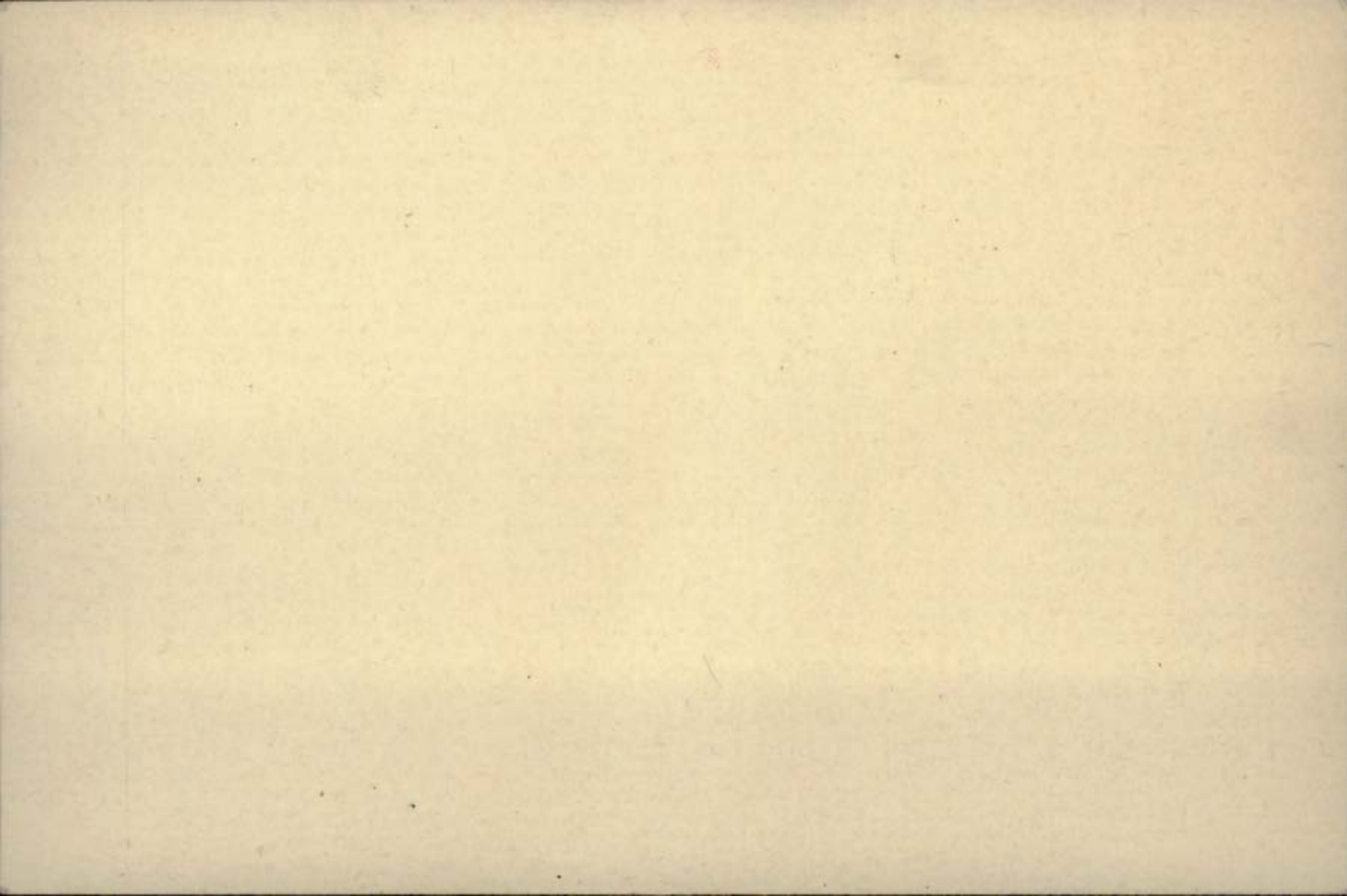
T. O. S.

UNIT

Casualties.

M. D. H. Q.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915. Nov. 6.</i>	<i>1915. Dec. 31.</i>	<i>A.</i>	<i>from 2nd. Bn.</i>	



No. *C 41114* RANK *1st. (Res. Bdg. C.F.A.)* NAME *Baugh C.*

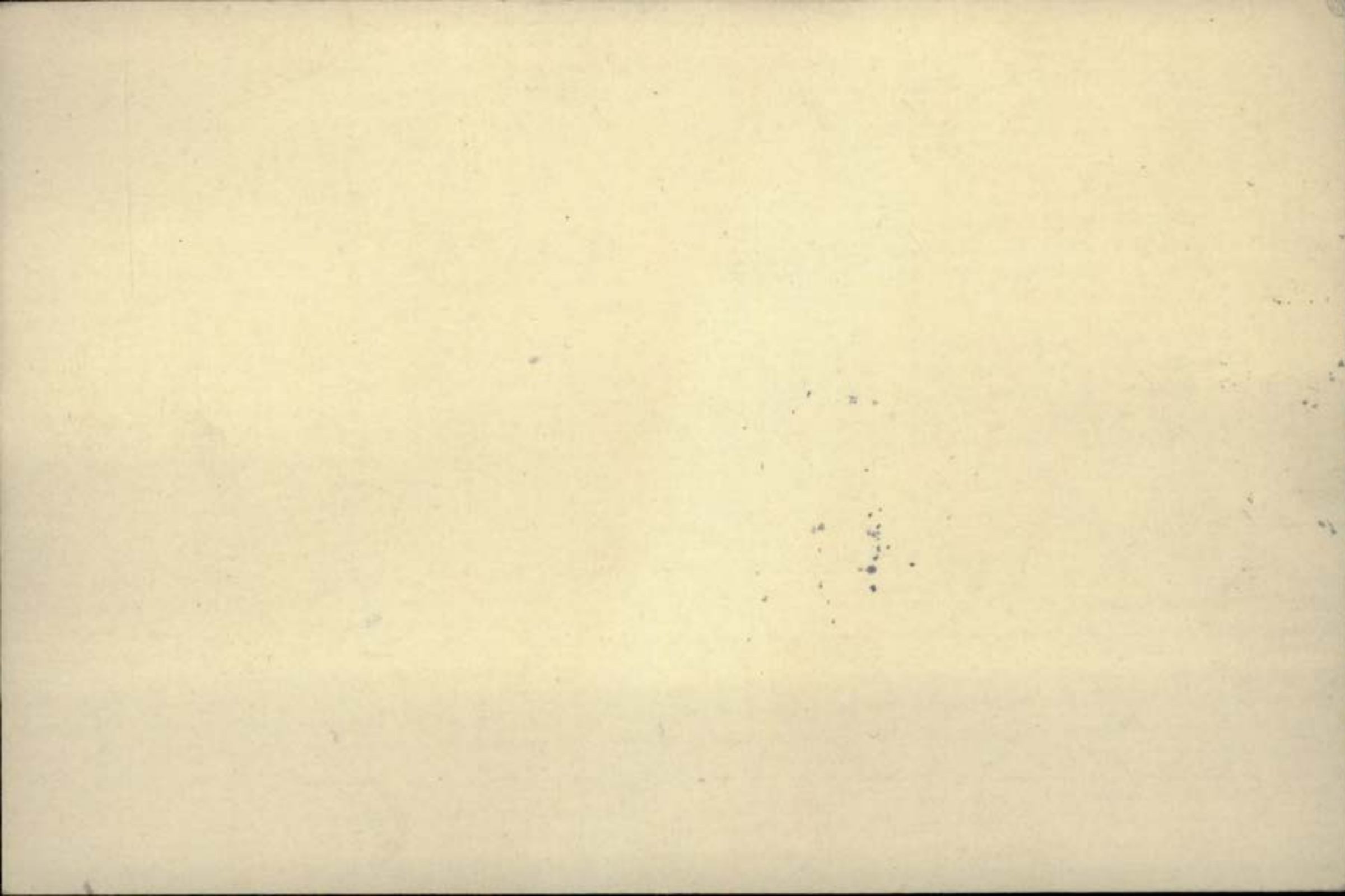
T. O. S.

UNIT

Discharge Depot (Quebec.)

M. D. *5.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915. Nov.</i>	<i>1915. Nov.</i>	<i>✓</i>	<i>Dates not stated.</i>	



No. 47114 RANK *Plt*NAME *Baugh. L. W.*T. O. S. 1-2-16
*Feb payroll.*UNIT *casualties. Co. 7.*M. D. *4*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Feb 1.</i> <i>mar.</i>	<i>1916</i> <i>Feb 29</i> <i>no/c</i>	<i>n</i> <i>n</i>	<i>2nd Bde.</i>	

L. Q. 3513 Recy

APR 2 1921

JUL 29 1921

9 19652 Recy

114 21
Number. 41114..... Rank. *Gnr*

Surname. *BAUGH*.....

Christian Names. *Charles Wallick*.....

Unit. *C.F. 9*..... Theatre of War. *France*

Dates of Service. *11/2/15*.....

Remarks. *2047 - St CATHERINE E*

Latest Address. *2113 St Catherine St E*
Montreal

Roll No. *P.Q.*

Page 1525

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

Name Baugh, C.W. Rank Private Reg. No. 41114.

Unit 1st. Reserve Brigade, Canadian Field Artillery.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1-7-16.	St Martin's Plain.		Sec. Syph.	15.		
(See also 2 nd C.F.A.)						
in 2nd Bde C.F.A. Sheet 15/16 May 15.						

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
✓ 53	No 5 General Hosp., Rouen	3-5-15	Gas poisoning
✓ 59	No 3 North Gen. Hosp., Sheffield	13-5-15	Sick
✓ 85	3 rd North Gen. Hosp. Sheffield	21-6-15	Dis: to sick furlough "Sick"
15.	St. Martins Plain	1-7-15	sec. syph.

NAME *Baugh. Charles. Wallich*

H. Q. FILE No. 649-

REGT'L. No. *4 1114*

RANK AND CORPS
CABLE

Gunner.

2nd Field Artillery Brigade

NO.

DATE

NATURE OF CASUALTY

NO.

766.

FOLL.

C. 1255

19/5/15

Suffering from gas fumes.

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

Name *Baugh L.* Rank *Sgt.* Reg. No. *41114*
 Unit *2nd Bde C. I. A.*
 Next of Kin *Canada.*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1915.</i>						
<i>3. 5.</i>	<i>Nº 5. Gen: Hosp.</i>	<i>Rouen</i>	<i>Gas Poisoning</i>	<i>53</i>		
<i>13. 5.</i>	<i>" 3. A. Gen: Hosp</i>	<i>Sheffield</i>	<i>Sick.</i>	<i>59</i>		
<i>21. 6</i>	<i>Dis: to Sick Fur, & 3 N. G. H.</i>	<i>Sheffield</i>	<i>Sick</i>	<i>85.</i>		

(See also 1st Reserve Bde)
" " 3rd Bde Cfa

From Quebec, Per. ed. "Ivernia" 3-10-14

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Fireman

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

23

YEARS

—

MONTHS

HEIGHT

5

FEET

5

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

1 Vacc. left arm. 1 blue scar
left buttock. 1 Blue scar right Buttock.

MEDICAL EXAMINATION.

PLACE

Valcartier, P.Q.

DATE

Sept. 3rd, 1914

Present Address: Not stated.

SURNAME.

Baugh

649-15-389

S.O.S. Dis. M. U.

CHRISTIAN NAMES

Charles Wallick

29-2-16. 4

REGL. NO.

41114

RANK

Trump.

UNIT 2nd. C.F.A. Bde.

FORMER CORPS

R. C. G. A. 3 yrs.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Baugh, Mrs. Elizabeth

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

2112 St. Catharine St. E.
Montreal P. Q.

2.1 k. card. 28-12-17.

COUNTRY OF BIRTH

Canada Quebec, P. Q.

DATE

May 20th 1891

PLACE OF ATTESTATION

Valcartier, P. Q.

DATE

Sept. 26th 1914

R/b. 8-11-15

LIST OF DISCHARGE DOCUMENTS.

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

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

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

Instructions as to the preparation, 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.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. <i>CH 1114</i>	Army Rank <i>Trumpeter</i>																
Name <i>Baugh G.</i> (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)																	
Corps <i>Canadian Field Arty</i>																	
Battalion, Battery, Company, Depot, &c. <i>1st Res. Bty.</i> (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)																	
Date of discharge <i>Nov. 1915</i> <i>Feb 29. 1916</i>																	
Place of discharge <i>Canada Montreal</i>																	
<p>1. Description at the time of discharge.</p> <table border="1"> <tr> <td>Age <i>23</i> years <i>5</i> months</td> <td rowspan="5">Descriptive marks.</td> </tr> <tr> <td>Height <i>5</i> feet <i>5</i> inches</td> </tr> <tr> <td>Chest measurement (girth when fully expanded <i>38</i> ins. range of expansion <i>2</i> ins.)</td> </tr> <tr> <td>Complexion <i>Fair</i></td> </tr> <tr> <td>Eyes <i>Blue</i></td> </tr> <tr> <td>Hair <i>Fair</i></td> <td></td> </tr> <tr> <td>Trade <i>Fireman</i></td> <td></td> </tr> <tr> <td>Intended place of residence <i>Montreal</i></td> <td></td> </tr> <tr> <td colspan="2">(To be given as fully as practicable)</td> </tr> <tr> <td colspan="2">(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.)</td> </tr> </table>		Age <i>23</i> years <i>5</i> months	Descriptive marks.	Height <i>5</i> feet <i>5</i> inches	Chest measurement (girth when fully expanded <i>38</i> ins. range of expansion <i>2</i> ins.)	Complexion <i>Fair</i>	Eyes <i>Blue</i>	Hair <i>Fair</i>		Trade <i>Fireman</i>		Intended place of residence <i>Montreal</i>		(To be given as fully as practicable)		(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.)	
Age <i>23</i> years <i>5</i> months	Descriptive marks.																
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Trade <i>Fireman</i>																	
Intended place of residence <i>Montreal</i>																	
(To be given as fully as practicable)																	
(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.)																	
<p>2. The above-named man is discharged in consequence of <i>Medical unfitness.</i></p> <p>(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.)</p>																	
<p>3. Military character:—</p>																	
<p>4. Character awarded in accordance with King's Regulations:—</p> <p><i>Good.</i></p>																	
<p>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.</p> <p><i>E.W.R. M. 2011 Capt.</i> Initials of Commanding Officer. <i>for Res. Bty. C.F.M.</i></p>																	
<p>Army Form B. 2088 has been issued to*</p>																	

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

(Date) Nov. 1915

Commanding

Col. J. Roberts
1st Bn. King's L. Rif.

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

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

(Place) Shorncliffe

(Date) Nov 1 1915

C. Baugh (Signature of Soldier.)

H. E. Beeching (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 Nov 5/15 (the date to which the record of service is completed) ... years ... days.

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

Total ... " ... "

11. *Confirmation of discharge.*

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

(Place) Shorncliffe

(Date) 8 NOV 1915

Signature

Col. Inman
Capt. Adjutant
Reserve Brigade, C.F.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.

RESERVATIONS REFERRED TO AT PARA. 8.

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

None

C. Baugh

MEDICAL HISTORY OF AN INVALID.

DEPT 50
MILITARY OFFENCE
DEC 19 1915
648.13-389
CANADA

47

- 1.—Station. *Quebec P.Q.*
- 2.—Regiment of Corps. *5th Batty C.F.A.*
- 3.—Regimental No. and Rank. *41114 Drummer.*
- 4.—Name. *Chas Baugh.*
- 5.—Age last Birthday. *23.*
- 6.—Enlisted { on *Sept 25 /14*
at *Valcartier P.Q.*
- 7.—Former Trade or Occupation. *Locomotive Fireman.* Date *Nov 19/15*

- 8.—General remarks on his :—
(a) Conduct. *2 days detention 5 days C.B.*
(b) Habits. *for obscene language*
Good
(c) Temperance. *Abstainer*

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

9.—Service.	Years.	Days.
	PERIODS.	
	From	To
<i>5th Batty - C.F.A.</i>	<i>Sept 25/14</i>	<i>Present.</i>

- 10.—Disease or Disability. *Shortness of Breath & pain in Chest on exertion from Gas poisoning. Chronic Widespread h. ear.*
- 11.—Date of origin, cause, present condition and whether the same is the result of service or climate.
 1. *May 3rd 15 Gases.*
 2. *Inhalation Gas.*
 3. *Complains of shortness of breath on exertion or running up stairs, no pain in chest now. Says chest condition is improving.*
 4. *Result of Service*

Has it been aggravated by intemperance, vice or misconduct?
No.

21138th Calvernia St. E. Montreal

M. F. B. 227.
20m.—5-15.
H. Q. 1772-39-117.

FAIR PLAY
E. F. C. P. L. L. O.
429

[OVER]

(At Station or Hospital where finally disposed of.)

Station and Hospital	Arrived from
Date	

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

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.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
20m.—5-15.
H. Q. 1772-39-117.

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

13.—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.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

16.—Full particulars of medical treatment of case up to date of invaliding.

To Dressing Station &
then to Base in Rouen 1 week.
To Sheffield Hosp. Yorkshire 1 week
To Convalescent Home Doncaster
Yorkshire - 6 or 7 weeks.
To Depot.

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

Shorncliffe Nov 1915.
on Gen. disability.

18.—State if for discharge on account of unfitness for service.

Yes - at end of 3 months.

Conrad Gheggie
Capt R.M.S.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

The Medical Board having met & examined
Pte Ches Daugh # 41114 concerns in the
above report, and recommends that he
receive treatment of ear condition by Specialist.

No - as to Chest. Indefinite as to ear condition
3 months
1/4

Signatures:—

W. H. Curran Capt R.M.S. President.

Station

Quebec P.Q. Conrad Gheggie Capt R.M.S.
R.M. Rivers an St Anne Members.

Date

Nov 19/15

Date

Nov. 20/15.

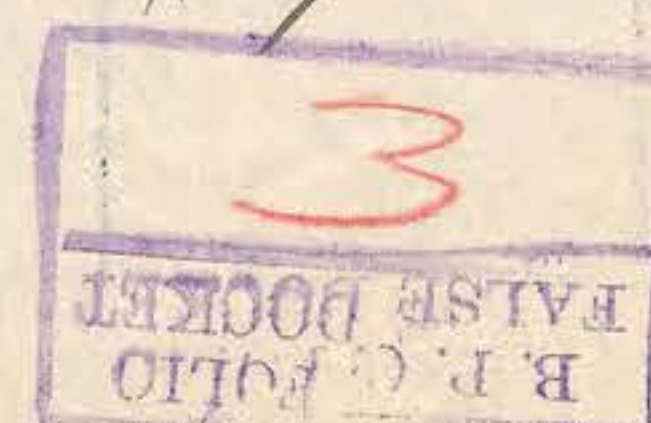
Approved.

Date

20/15

Gairwinter Major
Assistant Director of Medical Services.

for Director of Medical Services.
[OVER]



DEPT
MILITIA & DEFENCE
JAN 25 1963
649 B-389
CANADA

[illegible]

Date of final Medical Board or decision.	
--	--

<u>Militia Form B. 227.</u>	
20m.—10-15.	
H. Q. 1172-89-117.	

DETAILED MEDICAL HISTORY OF INVALID

Station	Corps	Regimental No.	Rank	Name	Disability	Date
<div style="float: right; width: 20%;">Hospital or Station transferred to for final disposal.</div> <div style="float: right; width: 20%;">Date of final disposal</div> <div style="float: right; width: 20%;">How finally disposed of</div> <div style="clear: both;"></div>						

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

B. P. C. FOLIO
FALSE DOCKET

[OVER]

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

Not previously proposed.

18—State if for discharge on account of unfitness for service.

Yes.

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

Not applicable.

13.—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.

Not applicable.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

Not aggravated.

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

Ear Yes. Syphilis 2 years
None.

16.—Full particulars of medical treatment of case up to date of invaliding.

Admitted to M.G.H. 15th. Jan. 1916.
Inunctions of mercury & routine Hospital treatment. Ear syringed.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

The Board having examined #41114, Pte. Chas. Baugh, 5th. Batt. Concurs in the diagnosis of Syphilis, & Chr. Otitis Media left. and in the above report.

The Board recommends his discharge as medically unfit.

Signatures :—

B. P. C. Folio Capt. President.

Station Montreal P. Q.

B. P. C. Folio Lieut. Members.

Date Jany. 19/16.

A. T. B. B. B. Lieut. Members.

Date 21/16

Approved.

Date Feb. 1. 16

B. P. C. Folio Assistant Director of Medical Services.

B. P. C. Folio Director of Medical Services.

[OVER]

B. P. C. FOLIO
FALSE DOCKET
J-

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

Members of Board.

LIEUT. COL. SIR. H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TODD, C.A.M.C.
LIEUT. COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER,
Legal Adviser.

Proceedings.

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

BEWLEY, FOLKESTONE.
10,000-1/10/15-3512.

REPT
MILITIA & DEFENCE

649-13-389

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station

Shorncliffe

Date

Oct 21/15

1. Unit

Rus Bgd C.F.A.

5. Age last birthday

24

2. Regimental No.

41114

6. Enlisted

on Aug 22/14
at Montreal

3. Rank

Trumpeter

7. Former Trade

Locomotive Fireman

4. Name

Baugh, Chas

or Occupation

8. Disability.

Gas poisoning

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.

Apr 22/15 - slightly
May 3/15 - badly.

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.

(1) Rouen. Host not known
(2) Sheffield

(3) Newcastle Convalescent. Dates not known.

(4) Returned to Rus Bgd C.F.A. in July

(5) Since July this man has been frequently on sick report complaining of his bronchitis and inability to blow the trumpet. I have never found anything very marked in chest.

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

gas poisoning

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

Active Service



Corded
1-12-15
H

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.

- (1) General appearance fair.
(2) Complaints of Pains in chest. Cough at night, Shortness of breath on exertion. Inability to use trumpet without distress.
(3) Exam of chest.
(1) Heart normal
(2) Lung: Suspicion Normal
(3) Palp. & percussion
(4) Auscult. Normal except for slight harshness of breath sounds.

14. If the disability is an injury, was caused

- (a) In action?
(b) On field service?
(c) On duty?
(d) Off duty?

in action

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

If so—(a) When?

(b) Where?

(c) Opinion?

not applicable

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) Fit for duty?
(b) Fit for light duty?
(c) Invalided to Canada?
(d) Discharge as permanently unfit?

Home Service

J. J. Sonnewan.
Officer in medical charge of case.

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

Station

Officer in charge of Hospital.

Date

* 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 it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

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

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

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

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

Yes
Yes

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

Yes.

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?

3 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?

Total

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.

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

Not all healed. Approved.

26. Do the Board recommend

(a) Fit for duty?

No

(b) Fit for light duty?

No

(c) Invalided to Canada?

Yes

(d) Discharge as permanently unfit?

No

Signatures:—

J. J. Sonnewan.
President.

Station

Date

Approved.

Station

Date

Administrative Medical Officer.

Capt. A/D.A.D.M.S.
Canadian Training Division, Shorncliffe.