

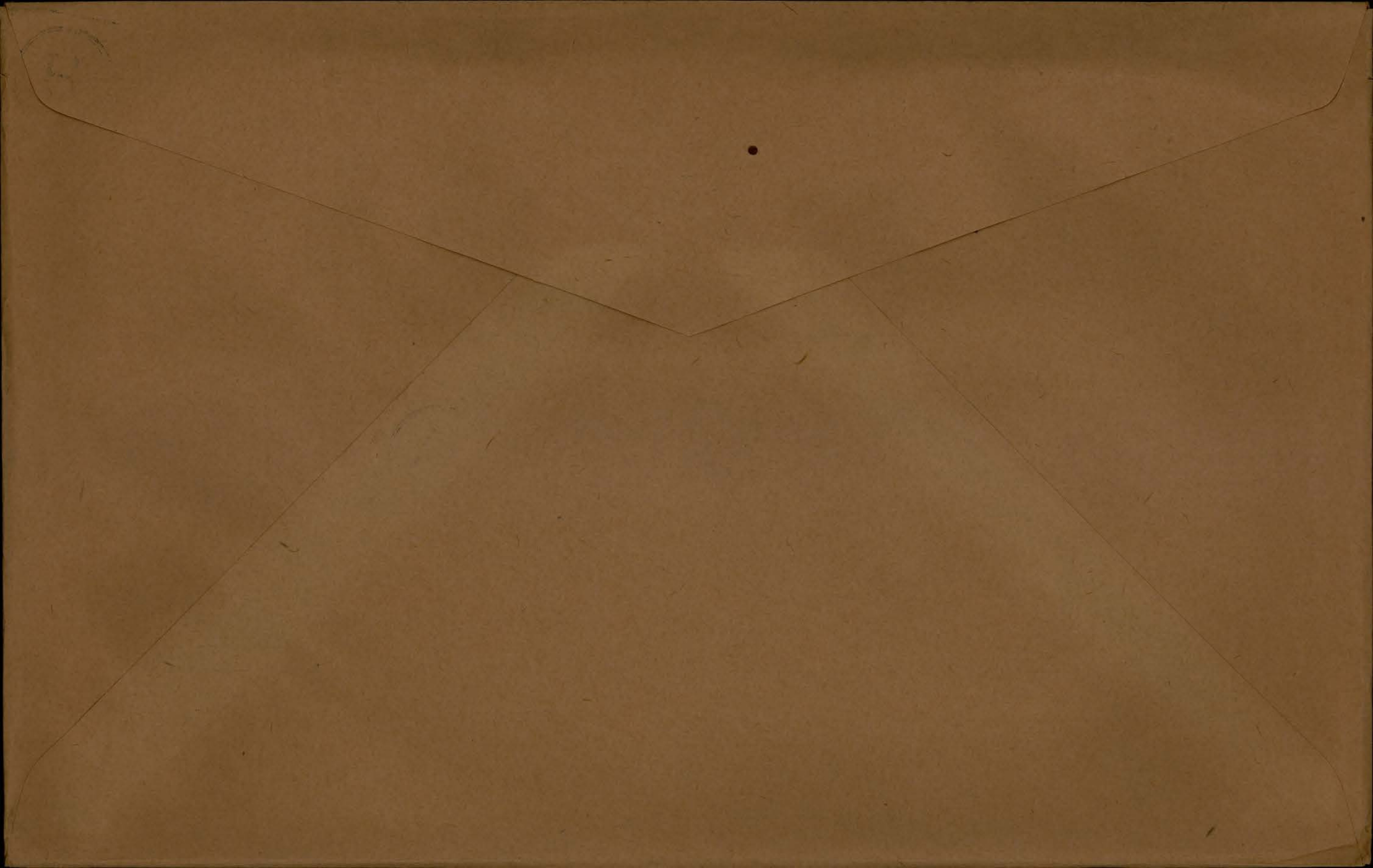
C.E.F. REGIMENTAL DOCUMENTS

NAME CLARK, GEO. A. REGT. No. 86900 UNIT 5 F.A. H. Q. FILE No. 21417

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
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					M.U.
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377



ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... **Clark, Geo. A.**
2. In what Town, Township or Parish, and in what Country were you born?..... **Aberdeen, Scotland.**
3. What is the name of your next-of-kin?..... **Tyaa, Mrs. (Sister)**
4. What is the address of your next-of-kin?..... **The Glen, Mexborough, Yorks, Eng.**
5. What is the date of your birth?..... **17th March, 1879.**
6. What is your Trade or Calling?..... **Laborer**
7. Are you married?..... **No**
8. Are you willing to be vaccinated or re-vaccinated?..... **Yes**
9. Do you now belong to the Active Militia?..... **No**
10. Have you ever served in any Military Force?.. **5 years 2nd Batt Gordon Highlanders**
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**

G. A. Clark (Signature of Man).
P. Weatherhead (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Geo. A. Clark**, 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 *Dec 4th* 1914. *G. A. Clark* (Signature of Recruit)
P. Weatherhead (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Geo. A. Clark**, 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 *Dec 4th* 1914. *G. A. Clark* (Signature of Recruit)
P. Weatherhead (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Winnipeg* this *29th* day of *Dec* 1914.

J. J. [Signature] (Signature of Justice)

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

[Signature] (Approving Officer)

10 Lt Col Comdg 5 Brigade Artillery. C.E.F.

Description of Geo A Clark on Enlistment.

Apparent Age 35 years 9 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 6 ft. 0 ins.

Chest measurement { Girth when fully expanded 38½ ins.
 Range of expansion 2½ ins.

Complexion Fair

Eyes Brown

Hair Grey

None

Religious denominations. { Church of England
 Presbyterian Yes
 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 Dec 4th 1914.

Place Winnipeg

[Signature]
 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.

Geo A Clark 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.

Date Dec 4th 1914.

[Signature] (Signature of Officer)
 Lt Col. Comdg 5th Breg
 Artillery C.E.F.

548

ATTESTATION PAPER.

No.

Folio.

86900

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Clark, Geo A
2. In what Town, Township or Parish, and in what Country were you born?..... Aberdeen, Scotland
3. What is the name of your next-of-kin?..... Tyas, Mrs (Sister)
4. What is the address of your next-of-kin?..... The Glen, Mexborough, Yorks, Eng
5. What is the date of your birth?..... 17th March, 1879
6. What is your Trade or Calling?..... Laborer
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. 3 years 2nd Batt Gordon Highland
If so, state particulars of former Service. ers
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

G. A. Clark (Signature of Man).
R. B. Weatherhead (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Geo. A. Clark, 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 Dec 4th 1914. G. A. Clark (Signature of Recruit)
R. B. Weatherhead (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Geo. A. Clark, 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 Dec 4th 1914. G. A. Clark (Signature of Recruit)
R. B. Weatherhead (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
 The above questions were then read to the Recruit in my presence.
 I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Winnipeg this 29th day of Dec 1914.

Winnipeg (Signature of Justice)

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

W. D. W. W. W. (Approving Officer)

W. Col. Bondy 5th Brigade
Artillery - 6th Div

Description of Geo A Clark on Enlistment.

Apparent Age 35 years 9 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 6 ft. ins.

Chest measurement { Girth when fully expanded 58½ ins.
 Range of expansion 2½ ins.

Complexion Fair

Eyes Brown

None

Hair Grey

Religious denominations. { Church of England
 Presbyterian Yes
 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 Dec 4th 1914.

Place Winnipeg

H. J. Hedham
 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.

Geo A. Clark 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.

Date Dec 4th 1914.

H. J. Hedham (Signature of Officer)
 Lt Col. Comdg 5. Brigade
 Artillery. C. E. F.

certified a true copy of original

John F. Buckley

5th FIELD ARTILLERY BRIGADE C.E.F.

ATTESTATION PAPER

Field Artillery
No. 107 Brigade C.E.F.

1st Reinforcement
W.M.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Folio. *86900*

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS)

1. What is your name? *Clark Geo A*
2. In what Town, Township, or Parish, and in what Country were you born? *Aberdeen, Scotland*
3. What is the name of your next-of-kin? *Mrs. Mrs*
4. What is the address of your next-of-kin? *The Glen Macborough, Yorks Eng*
5. What is the date of your birth? *17th March 1879.*
6. What is your trade or calling? *laborer*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated? *yes*
9. Do you now belong to the Active Militia? *no*
10. Have you ever served in any Military Force?
If so, state particulars of former Service. *3 yrs 2nd Batt Gordon Highlanders*
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*

G.A. Clark (Signature of Man.)
R.B. Weatherhead (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Geo A Clark*, 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.

G.A. Clark (Signature of Recruit.)
Date *Dec 4th* 1914 *R.B. Weatherhead* (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Geo A Clark*, 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.

G.A. Clark (Signature of Recruit.)
Date *Dec 4th* 1914 *R.B. Weatherhead* (Signature of Witness.)

CERTIFICATE OF MAGISTRATE.

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Winnipeg* this *29th* day of *Dec* 1914
H. Murray JP (Signature of Justice.)

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

H.W. Ducharme (Approving Officer.)
Lieut Colonel
O.C. 5th Field Artillery Brigade C.E.F.

Winnipeg

DESCRIPTION OF Geo A Clark ON ENLISTMENT.

Apparent Age 35 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 6 ft. ins.

Chest measurement { Girth when fully expanded 38 1/2 ins.
 Range of expansion 2 1/2 ins.

Complexion Fair

Eyes Brown

Hair Grey

Religious Denominations { Church of England
 Presbyterian Yes
 Methodist
 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 Dec 4th 1914

Place Minneapolis

F. J. Cadham

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

Geo A Clark 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. O. Ducharme (Signature of Officer.)

Date Dec 4th 1914

Lieut Colonel
 O.C. 5th Field Artillery Brigade C, E.F.

LABORATORY.

Moore Barracks Hospital,
Shorncliffe.

Unit. *C. 4 A*
No. *86900*
Name. *Pte. Geo. Clark*

Date. *Sept 11-15* 1915
Ward. *16*
Med. Officer. *H. W. Gibson*

History of Case.....
Clinical Diagnosis..... *Influenza*
Particulars of information required.....

Examination of Urine. (Routine will not include microscopical exam)

Colour. *Amber* Albumin. *absent* Odour.....
Sugar. *absent* Deposits..... Acetone.....
Re-Action. *acid* Sp:gravity. *1025*
Microscopic examination. Epitholium.....
Blood..... Pus..... Phosphates.....
Uric Acid..... Oxalates.....

Examined by *Fred Boyle*



[Faint, illegible handwriting throughout the page, likely bleed-through from the reverse side.]

Casualty Form—Active Service.

Regiment or Corps Reserve Brigade C.F.A.

Regimental No. 86900 Rank _____ Name Clark George A.

Enlisted (a) 4/12/14 Terms of Service (a) Duration Service reckons from (a) 4/12/14

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
					<i>Transferred to Bath Feb 1916</i>
					<i>R. G. Johnson Capt</i> 1ST RES. BATTY. C.F.A.

(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, Shoering 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 E. 213, Army Form A. 36, or other official documents.
Date	From whom received				

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	79799 86900.	Corpl. Gunner	Clark.	G. A.
		Unit.	Age.	Service.
Year 1915	17 th P.F.A.		36.	12 months
<i>The Grange Station and Date. Deal.</i>	Disease <u>Lumbago.</u>			
Oct. 11	Mustard Baths, Aspirin q. v. recti			
Nov. 5	massages			
Nov. 26	Discharged to Wokingham. Convalescent Home.			

W. Dew

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

H₂

re

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
445-4 Year	86900	Co.	Clarke	Geo. A.
		Unit.	Age.	Service.
		C. G. A.	36	10/12

Station and Date.

Disease

Innovative Base
Shoreline

Pain across back -

Lumbago

Pain in back 7 weeks - dull ache -
feels stiff - on movement, knife
like stabs -
Appetite good bowels regular -

Scarlet fever 9 years ago - no venereal
history - smokes tobacco - drinks
occasionally -

Exam - Heart negative
Chest - moist râles at rt base
Ald negative - 4 hyperaemic
spots -
no tenderness in muscles of back

W. W. Gibson
Capt. C. A. M. C.

P.T.O.

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

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

869009N.

Clark.

G.

Unit.

Age.

Service.

Year
1915

C.F.A.

37

12/12

Station and Date.

Disease

Lumbago.

26 NOV 1915

Since Sept 10 has been in hosp with pains in back.

Difficultly in bending

H. Rivers Capn

Can. Conval. Hospital, Bear Wood.

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

Station
and Date.

18501 4147
ORIGINAL.
MEDICAL HISTORY SHEET.

Surname Clark Christian Name Geo. A.

Examined { on 4th day of Dec 1914
 at Winnipeg, Man
 Birthplace { City or Town Aberdeen
 County " Shire Scot.

Approved by [Signature]
 Rank Capt M.O.

Apparent age 35-9
 Trade or occupation laborer
 Height 6 Feet 0 Inches.
 Weight _____ Lbs.
 Chest measurement { Minimum 36 inches
 Maximum expansion 2 1/2 inches
 Physical development Good
 Small-Pox Marks _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,

Vaccination Marks { Arm Right Left
 Number 3

Date	Result	VACCINATIONS.
<u>3/2/15</u>	<u> </u>	<u> </u>

When Vaccinated last 3/2/15
 (a) Marks indicating congenital peculiarities or previous disease crooked small finger on left hand.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.

(b) Slight defects but not sufficient to cause rejection

NOT TO BE SENT OUT

Enlisted on 4th day of December 1914 at Winnipeg Man.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>19th Battery</u>	<u>86900</u>		<u>4/12/14</u>
Transferred to..	<u>1st Reserve Battery C.F.A.</u>	<u>86900</u>	<u>Presb.</u>	<u>10/7/15</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

17

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	86900	Gunner.	Clark.	George. E. 29X
Year	Unit.	Age.	Service.	
1915.	C.F.A.	37	12/12.	
Station and Date.	Disease <u>LUMBAGO.</u> <i>Patt Dew - 2 + 7 J V</i>			
Ramsgate	Occupation.	Laborer.	Musician.	No.
Kent.	Arrived in England	July 10th	1915.	
12/10/15.	Reported Ill	Sept 10th	1915	
HOSPITALS.	Eng.	Moore Barracks Hosp.	4 days	
Nethercport Hospital	16 Days,	Winchester Hosp.	16 Days.	
Bearwood House Hosp.	10 Days.			
HISTORY.	Duration Four Months.	Present Condition	severe pains in Lumbar Muscles, very tender to pressure, feels better after a little walk. Muscles of abdomen very tender. Left arm twitches at times.	
TREATMENT	Steam Vapor bath every other day. Asperin & Doveri $\bar{a} \bar{a} \bar{g} \bar{r} \bar{v}$ every 4 hours.			
1-4-16.	Treatment discontinued. Rest in bed, has POTTS disease. Better when resting. TREATMENT. Rest and Emul Oil Morrh et Ext Malt			
9/3/16	<i>patient has high strung N. System. Lungs. Clear Heart but in rapid, lat dorsal muscles are slight rigid due to nervous condition can be overcome no pains in back or hands.</i>			
16/3/16	<i>Prostrator. Frame</i>			
6/4/16	<i>Prostrator under (C) capsule. Alcohol & Bracie full of d. C small but at Leshey under prostrator.</i>			

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

Station
and Date.

24/4/16

Slight tenderness over the 1st Scapulae. put leather
pad under. Massage feels good.

8/5/16

Skin in good condition in the points of pressure

26/5/16

Appetite good. Feeling fine

5:6:16

Appetite good. feeling fit

16:6:16

Improving daily. appetite good

14:7:16

Weight. Bed Patient

24:7:16

Weight. Bed Patient

4:8:16

Weight. Bed Patient

28/8/16

Doing nicely - gaining on weight
looking well. Quite comfortable - no pain

31/8/16

Urinalysis

Color Light amber

Reaction Acid

Spec. Grav. 1018

Albumen Nil

Sugar Nil

Remarks Phosphates

5/9/16

Less fixation of spine. Patient
doing well. Skin healthy

*Wanted to see
shoulder joint*

Rank C.C.A.C. Name CLARK Geo. A.
 Unit 1st Res. Bat. 5th Bde. If in perm. Corps, What Unit?
 Place and Date of Enlistment Winnipeg. 4th Dec. 1914
 Name and Address, Next-of-Kin Mrs. Tyas.

Reg'l No 86900

Married or Single Single

Place of Birth Aberdeen. Scot.

The Glen. Mexborough. W. Yorks. Eng

Relationship Sister.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Entered on N.E. Can. Payable to

Relationship

Discharge, Date and Place Checked by *Canada* Reason

Character



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						
1915																	
10 July	31 Aug.	53	1.	53.	53	10	5 30		58 30			✓ 43 50			43 50	14 50	
	1 Sept. 30	30	.	30.	30	.	3.		33.			✓ 14 60			14 60	32 90	
	1 Oct. 31	31	.	31	31	.	3 10		34 10							67.	
	1 Nov. 30	30	.	30.	30	.	3		33.						100.		
	1 Dec. 31	31	.	31.	31	.	3 10		34 10			17 03			17 03	117 07	
	1 Jan 31	31	"	31	31	"	3 10		34 10			129 20			29 20	121 97	
	1 FEB 14	14	"	14	14	"	1 40		15 40			197 33			97 33	40 04	Trans to 660, 6. Bath.
	14/2 31/3.	46	-	46	46	-	4 60		50 60			✓ 244			244	88 20	
Trans to New Ledger Sheet																	
		266		266	266		26 60		292 60			204 40			204 40		

Carried forward to Large Ledger sheet

Envelope # 25355

Rank _____ Name **CLARK Geo. A.** ✓ ✓ Reg'l No. **86900** R-122.

Unit **1st Res. Bat. 5th Bde** If in perm. Corps, }
 What Unit? } Married or Single **Single**

Place and Date of Enlistment **Winnipeg. 4th Dec. 1914** Place of Birth **Abardeen. Scot.**

Name and Address, Next-of-Kin, **Mrs. Tyas.**
The Glen. Mexborough. Yorks. Eng Relationship **Sister.**

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____

N/E. R.B. No. _____
 File R.L. _____
 Category **M.U. Can.** Payable to _____

N/E. R.B. No. **2449 2235**
 File R.L. _____
 Category **M.U. Can.** Relationship _____

Discharge, Date and Place Reason Character ✓

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				
12-7-15	OCR Bde	Taken on Str 1 st Bty & from 5 th Bde Shorncliffe		10-7-15	Part II C
21-9-15	W.O.	Admitted Kent 2 V.A.D Hosp.	Ramsgate	14-9-15	C.S. No. 29 Lumbago.
6-10-15	"	Discharged to Shorncliffe Mil Hosp. for duty.		1-10-15	C.S. 36. "
15-12-15	WO	Adm. Granville Can Special Hops	Ramsgate	9-12-15	SS # 61. "
18/2/16	OC Res Bde	Trans to CCAC.	S'chiffie	15/2/16	Part II O # 42.
16-2-16	1/2 C.C. Col	Taken on strength	Bath	15-2-16	Part II O # 5.
29-6-16	De Jo	Taken on strength CCAC	Stone	18/6/16	M. II. O. 245 Obs Re this.
18-11-16	Reg Bde 6-7th	Discharged Granville Can	Ramsgate	6-11-16	C.L.P. 310
23-11-16	CCAC	SOS Disch'd to Canada. (auth. 507(9) 5-10-3 7/4/16)	Shorncliffe	4-11-16	M. II. O. 517.

MAX
9/6/21 M.J.

CHECKED. 5th Dec. 1913.
(over)

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				
	Dis Depot	To Convalescent Home	MD No 10 Winnipeg	17-11-16	From Roll No 61

Surname

Clark,

Christian Name or Names

G. A.

Reg. No.

86900.

Rank

1st Lt.

Unit

Res Dep C.F.A.

Co.

Troop

Batty.

Hospital

Ramsgate V.A.D.

Date of Admission

14-9-15

Transferred

Granville Can Spc. Ramsgate

Hosp.

9.12.15

Hosp.

Hosp.

Hosp.

Diagnosis

(Lumbago.) myalgia

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

Phonoclippe mil. for duty 1.10.15

Date

Ch. 21-9-15 #29

REMARKS

Q.L. 6.10.15

36.

Dis. 6.11.16.

Ch. 15.12.15 #61

18.11.16 No. 310

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Name *Clark Pte Geo & A*

Regimental No. *86900*
Unit *1st Res Bn, 65 Bu*
Date of enlistment *—*
Place of " *—*
Married (yes or no) *No*
Amount of pay assigned monthly \$ *Kil*
To whom payable *—*

Name and address of next of kin
*Winnipeg
Man*
Date and place discharged
Reason for discharge *Classed*
Character on discharge *649. b. 19501.
Mauretania 17/16*

776

24 BMM

Ob 2376 M. & D. 6892

Date		No. of Days	PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To		Rate	Amount	Rate	Amount			No.	Date					
<i>28²⁰/₁₆</i>	<i>27¹⁰/₁₆</i>	<i>34</i>	<i>100.34</i>	<i>—</i>	<i>34</i>	<i>.10</i>	<i>3.40</i>								<i>Boat</i>
							<i>276.38</i>								<i>Bal br 978</i>
								<u><i>3,278</i></u>			<i>30305</i>		<u><i>31278</i></u>		<i>10/1/10 - 17/16</i>
											<u><i>743</i></u>				<i>Sup R. P.D. 3 9/16</i>
															<i>17/17 L. P. b. P. ch. "G" Unit</i>
								<u><i>43615</i></u>					<u><i>43615</i></u>		<i>17/9/17</i>
															<i>Sept. 2nd 3 sub on duty pay 2.81</i>
								<u><i>2.81</i></u>							<i>D^r Bal. brot down 2.43</i>
															<i>Bal br 38 2.81</i>
															<i>10/1/18 Recovered by P. M. M.D. 41</i>
								<u><i>38</i></u>							Pensioned. <i>1/1/17 600⁰⁰ pa.</i>

M.P. 4/12/17

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

26386/526
mcb
3244-9-7

Name Clark, George A.
Surname Christian Name

Regimental Number 86900

Rank Gnr.

Address (in full)

41 Metcalf St.,

Unit 21st Bty. C. F. A.

Montreal, Que.

Original Unit

District where paid M.D.4.

Date of Discharge 30-11-17.

P. D. P. Filing Number 10-68-4,

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

L. L. 22573—M. & D. SCOP.

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	1351	4-1-18	33 00	1334	21-2-18	33 00	1331	21-3-18	31 67	2 43	97 67

Remarks: H.Q.54-21-23-25. dated 20-19-17. Dr. \$2.43 Casualty Paymaster.

M. F. W. 127.
50M-617.
1772 39-1140.

SURNAME.

Clark

649-6-7105

CARD NO.

CHRISTIAN NAMES

George A.

S.O.S. Div. 30-11-17 4
M.U. FOLL

REGL. NO.

86900

RANK

Gt.

UNIT

~~5th Bde (1st N.D.)~~

Reserve Brigade C.F.A.

FORMER CORPS

Imp Forces (3 yrs)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jyas Mrs.

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

The Glen, Mexborough, Yorks., Eng.

COUNTRY OF BIRTH

Scotland Aberdeen

DATE

Mar. 17th 1879.

PLACE OF ATTESTATION

Winnipeg, Man.

DATE

Dec. 29th 1914.

O/S 29-6-15 145
Bailed for Canada n.m.s. Recvt 5-11-16.
L. L. 10437. M. & D. 7253.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

labourer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

35

YEARS

9

MONTHS

HEIGHT

6

FEET

INCHES

CHEST MEASUREMENT

38 1/2

INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

Fair

EYES

Brown

HAIR

Grey

DISTINGUISHING MARKS

Not stated

MEDICAL EXAMINATION.

PLACE

Winnipeg Man.

DATE

Dec 4th, 1914.

Present Address - Not stated

115

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. 86900 A. & D. No. 4457
Rank *Gr.*
Name *Clarke Geo. A.*
Corps *C. Fa 1 Res Bty* *10/12*
Religion *Pres* Age *36*
M. H. Rec'd *10-9-15* M. H. Requested M. H. Ret'd
Disease *Lumbago*
Admitted *10-9-15*
Discharged
Place in Hospital *16*
Transferred *Central hospital 14-9-15*
Results

REMARKS:

CANADIAN CONVALESCENT HOSPITAL,
AT
CANADIAN CONVALESCENT HOSPITAL,
Bear Wood, Wokingham, Berks.

A. & D.
CARD.

Regt. No. 86900. A. & D. No. 4 Bty Res 134
Rank Gy Corps 4 Bty Res
Name Clark, G. A Age 37 Religion Presb.
Service at Home 14/12
" " Front
Diagnosis "Lumbago."
Admitted 26 NOV 1915
Discharged 9 DEC 1915
Place in Hospital W 224
M. H. ~~Rec'd~~ made out & sent with him (See Document card)
Transferred To Ramsgate
Results

REMARKS: Since Sept 10. has been in Hosp with
pains in back. Has not been to Front. In B'ks
at Shorncliffe. Has difficulty in bending.

Ramsgate.

NAME

Clark, G. A.

H. Q. FILE No. 649-

REGT'L. No.

86900

RANK AND CORPS

Gnr. 1st Reserve B. Co. C. F. A.

CABLE

No.

DATE

NATURE OF CASUALTY

NO. 1145

XX FOLLX

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
29.	Kent 2. V.A.D. Ramsgate	14-9-15	Lumbago.
✓ 36	Kent 2 V.A.D., Ramsgate	1-10-15	Lumbago.
61	Disch. to Shorne. Mil., for Duty	9-12-15	" " "
310.	Man. Can. Special Ramsgate Trans. Can. Spec. Ramsgate. Dise	6-11-16	"
39	M.H.C.C., Montreal	8-2-17	Lumbago, bl "2"
296	MHCC Montreal	30-11-17	Disch M.M.S., HQ "A" Unit

REG. NO. 86900..... NAME *Clarke G.A.*
(SURNAME FIRST)

RANK *Gnr*..... CORPS *5th Brig*

AGE *37*..... SERVICE

NAME OF HOSPITAL *General Hospital* PLACE *Montreal*

DATE OF ADMISSION *8-2-17*

DISEASE *Removal of Plaster*

DISCHARGE *14-2-17*

OPERATION

DISCHARGED TO DUTY *Yes*

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

Name Clark, G.A. Rank Gnr. Reg. No. 86900.

Unit 1st. Reserve Brigade, Canadian Field Artillery.

Next of Kin Mrs. Tyas, The Glen, Mexborough, Yorks.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915						
14.9.	Kent 2 V.A.D. Hosp.	Ramsgate.	Lumbago.	29.		
1. 10.	Dis. to Shorncliffe Mil Hosp: (Ex above)		do.	36.		
9. 12.	Granville Can. Spl Hosp.	Ramsgate.	dg.	61.		
	Transf to C.C.A.		vide Record			
6-11	Discharged.		Lumbago.	310		

SOS. m. u. 30/11/77 m D4.

649-C-7105

86900 ✓

Gnr. ✓

CLARK, George A. ✓

Res. Bde. C. F. A. ✓

Medals & Dec. (Sister)

Mrs. Tyas,
The Glen, Mexboro,
Yorkshire, England.

Ser. #

986052

P. & S. m

(Sister)

As above.

Memorial Cross-----NIL .

54492

Canada

2.

England only.
Eligible for B.W.M.
m.f.

56510

JUL 9
Scroll Disp. 1923 Reqn. No.

NOV 10 1923 Reqn. No. 49713
Plaque Disp.

WCB
Lom

Number 86900 Rank

Im

Surname CLARK

Christian Name George A.

Units C. F. A. Theatre of War England

Date of Service 10-7-15.

Remarks

Latest Address 41 Metcal St.
Montreal P.Q.

Roll No. A Page 4825

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

No. ~~548~~
86900

RANK *Gnr*

NAME *Clark. G. A.*

T. O. S.

UNIT *19th Bty C. F. A. 5th Art. Bgde C. C. F.*

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i>	<i>1914</i>			
<i>Dec 4</i>	<i>Dec 31</i>	<i>✓</i>		
<i>Jan 1st</i>	<i>Jan 31</i>	<i>✓</i>		
<i>Feb 1st</i>	<i>Feb 28</i>	<i>✓</i>		
<i>Mar 1st</i>	<i>Mar 31</i>	<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		

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. <u>86900</u>		Army Rank <u>Gunner</u>
Name <u>Clark George A.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps <u>Canadian Field Artillery.</u>		
Battalion, Battery, Company, Depot, &c. <u>C.C.A.C.</u> <small>(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.)</small>		
Date of discharge _____		
Place of discharge XXXXX <u>Invalided to Canada.</u>		
1. Description at the time of discharge.		
Age <u>37</u> years <u>8</u> months	Descriptive marks.	
Height <u>6</u> feet _____ inches		
Chest measurement { girth when fully expanded <u>38½</u> ins. range of expansion <u>2½</u> ins.		
Complexion <u>Fair</u>		
Eyes <u>Brown</u>		
Hair <u>Grey</u>		
Trade <u>Labourer</u>		
Intended place of residence <u>Winnipeg, Man.</u>	10	
<small>(To be given as fully as practicable)</small>		
<small>(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.)</small>		
2. The above-named man is discharged in consequence of _____ <u>Invalided to Canada by authority of Medical Board.</u>		
<small>(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.)</small>		
3. Military character:—		
4. Character awarded in accordance with King's Regulations:—		
To be filled in on the soldier quitting the Colours.		
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.		
		<u>Lt.</u> Lieut. for Initials of Commanding Officer.
Army Form B. 2088 has been issued to*		<u>C.C.A.C.</u>

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

No service in France - Auth. Can records cable C906 of 9.5.19.

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)

(Date) Commanding Batin. Regiment.

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

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

(Place) (Signature of Soldier.)

(Date) (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. *Statement of service.*

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

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

Total " .. "

11. *Confirmation of discharge.*

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

(Place) Signature

(Date)

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

R.C.

NOV 1 1917

329
1/11/17

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

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

Summary of Causes of invaliding, or remarks as to remand to Regiment, Stat on or Depot.

Date of final Medical Board or decision.

Administrative Medical Officer.

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

Date
 Disability
 Name
 Regimental No.
 Corps
 Station
 Rank

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.

300M. 8.16. 1772-39-117.

4 D 22 - C - 396

MEDICAL HISTORY OF AN INVALID.

B.P.C.

DEPT MILITIA & DEFENCE
NOV - 1 1917
H. 649-C-7105
CANADA

- 1. Station. Montreal
- 2. Regiment or Corps. 64th Battalion
- 3. Regimental No. and Rank. #86900 Gunner
- 4. Name. G. A. Clark
- 5. Age last Birthday. 39
- 6. Enlisted on December 4, 1914. at Winnipeg, Man.
- 7. Former trade or occupation. Labourer. Date. October 10th, 1917.

- 8. General remarks on his:—
 - (a) Conduct.
 - (b) Habits.
 - (c) Temperance.
 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

9. Service. Years. 2 Days. 310

PERIODS

FROM	TO
Dec. 4, 1914.	Oct. 10, 1917.

Permanent address:

41 Metcalfe St., Montreal.

- 10. (a) Disease or disability. Pott's Disease second and third lumbar vertebrae.
- (b) Date of origin. September, 1915.
- (c) Place of origin. Shorncliffe.
- (d) Cause. Unknown. History of fall from wagon.

11. Present condition. (Most Important.) General condition fair. Heart normal.
 (To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.) Lungs normal. There is complaint of

pain in the back on exertion. There is rigidity and limitation of movements. Pott's Disease was confirmed by the X-Ray examination in England on September 5th. He is at present wearing a Taylor's brace. The disease is arrested, but the man will not be able to perform any manual labour. Other than above general condition fair.

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

M. F. B. 227.

300M. 8.16. 1772-39-117.

OPINION OF THE MEDICAL BOARD.

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

None present.

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

CONCUR.

10.

11.

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

Impossible to state.

12.

15.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Ordinary exposure.

16.

17.

14. Treatment.

Has had rest and a Taylor's brace to support the spine. None further advised.

18. Is he unfit for Military Service.

Unfit for service.

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

Not applicable.

Recommendations: That he be discharged Class "E" and that he receive vocational training. To be re-examined for re-adjustment at the end of six months. Further and additional treatment not required.

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

Permanent for one year. To return then for readjustment.

Signatures:—

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

100% for six months, then to return for readjustment.

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

Unfit for Service - Class "E".

Wm. M. ...
President.

Lt. Col.

H. Aubrey ...

Members.

Station. Montreal, Que.

Date. Oct. 17th, 1917.

Albert Perrot

Date.

Approved.

Date.



Assoc. Director of Medical Services.

Director-General of Medical Services.

Alfred ...
Medical Officer by whom the case is brought forward.

Members of Board.

Medical Report on an Invalid.

Station Granville Canadian Special Hospital.
Ramsgate.

Date Sept. 7th 1916.

1. Unit C.F.A.
2. Regimental No. 86900
3. Rank Gunner.
4. Name Clark Geo.
5. Age last birthday 37.
6. Enlisted on Dec. 4th 1914.
 at Winnipeg.
7. Former Trade or Occupation Laborer.

8. Disability.

POTT'S DISEASE of 1st & 2nd LUMBAR VERTEBRA.

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. Sept. 1915.

10. Place of origin of disability. Shorncliffe Camp.

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

No previous history of sickness. No T.B. history in family. Patient wrenched back handling a big gun in Aug. 1915. Suffered with back after this and reported sick and sent to hospital, Sept. 10th 1915. Was treated for Lumbago for 4 months.

10.12.15. Admitted to G.C.S.H. Severe pains in lumbar muscles, very tender to pressure over lumbar vert. Pain radiates to muscles of abdomen, which are tender to pressure. Patient very nervous. XRAY showed disease of 1st & 2nd lumbar vertebra.

4.1.16. Patient put to bed and fed up. Diagnosis "Pott's Disease."

16.3.16. Patient put up in frame. Back much better. No pain in handling patient complained of.

1.9.16. Has been on back in frame since 16.3.16, and is much improved in every way. Complains of no pain or tenderness. Movements of lumbar vert. more free - very little rigidity.

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

Strain of military life and T.B. infection.

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

**1. No.
2. Yes. While doing duty at Shorncliffe Camp.**

Proceedings.

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

Signed at Prior Park, Bath, this _____ day

of _____, 191_____

President.

2

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.

Patient is well developed, muscular robust and looks quite healthy. Heart and Lungs normal. At present no active condition present. Very little rigidity in muscles of lumbar region. No tenderness except on deep pressure over site of diseased spine - 1st & 2nd lumbar vertebra. XRAY shows some irregularity of 1st & 2nd lumbar vertebra.

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

Not applicable.

- (a) In the presence of the enemy?
- (b) On active service?
- (c) On duty?
- (d) Off duty?

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

No.

- If so—
- (a) When?
 - (b) Where?
 - (c) Opinion?

16. Was an operation performed? If so, what?

No.

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

No.

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

Not applicable.

19. Do you recommend

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

Yes, as stretcher case.

W. Clark Cap. C.M.C.
Officer in medical charge of case.

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

except

Station

S. Sell

Major, C.A.M.C.

For Officer in charge of Hospital.
Special Hospital, Ramsgate.

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 Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

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

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

a1 *no* a2 *yes*

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

Strain on active service

21. Has the disability been caused or aggravated by

- (a) Intemperance?
- (b) Misconduct?

no
no
yes

22. Is the disability permanent?

not applicable

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

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?

Totally.

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.

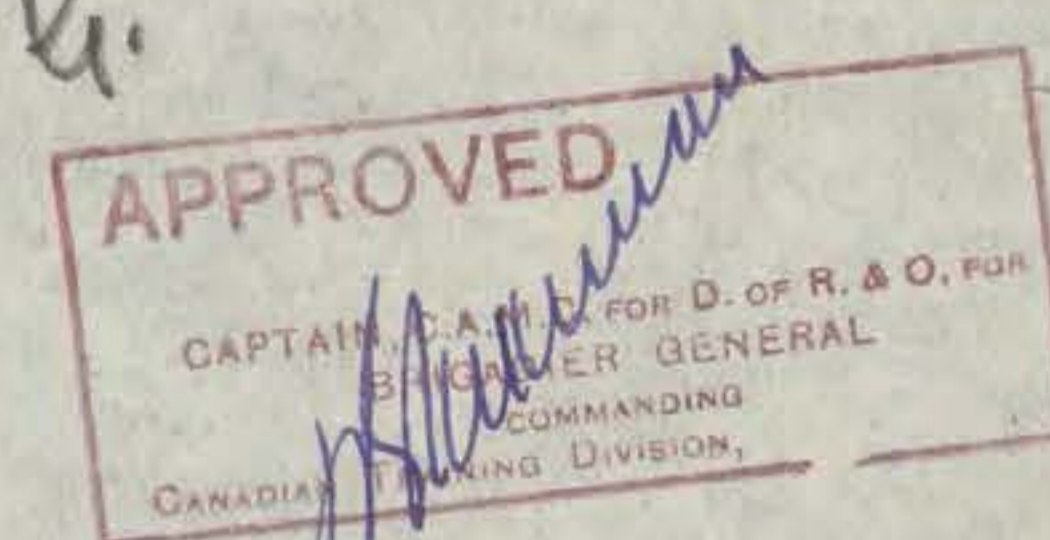
not applicable

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

26. Do the Board recommend

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

no
no
yes
no



27. Remarks.

Signatures:—

S. Campbell Major President.

Station

Date

Ramsgate
Sept. 25th 1916 Members.

Approved.

Station

Date

Shorncliffe
27 OCT 1916 Administrative Medical Officer.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

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

Date	Brief details, and signature	
3.2.15	Vaccination - positive.	A.N.Taylor, Capt.
<i>Ramsden 24-9-16</i>	<i>Pitt, Messrs 182 lumber. Invalid to Canada. Sample Major</i>	
17 OCT 1916	<i>Approved</i>	
	<p style="text-align: center;">PRESIDENT, STANDING MEDICAL BOARD.</p> <p style="text-align: center;"><i>D.F.M. Gutteridge</i> CAPT. FOR A.S.M.S. CANADIANS, SHORNCLIFFE.</p>	



Table IV.—Service Table.

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

Original not attached
ORIGINAL.

Army Form B. 178.

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

CLARK MEDICAL HISTORY of

Surname ~~Wade~~ *Clarke* Christian Name *G.A.*

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Aberdeen County Aberdeenshire, Scotland.

Examined ... { on 4th day of December 1914.
at Winnipeg, Man.

Declared Age ... 35 years 9 months days.

Trade or Occupation ... Labourer

Height ... 6 feet, 0 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. 38½ inches.
Range of Expansion 2½ inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number 3

When Vaccinated ...

Vision ... { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... { (a) Crooked small finger on left hand

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

Approved by (Signature) F. Hadham
(Rank) Capt.
Medical Officer.

Enlisted ... { at Winnipeg Man.
on 4th day of December 1914.

Joined on Enlistment ...	Corps. <u>Reserve Brigade</u>	Regtl. No. <u>86900</u>
Transferred to ...	<u>1st Batty</u>	

Became non-effective by
on day of 191

(Signature)
(Rank)

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

Ramsden

Lieut.-Col.
In Charge of Records,
Canadian Contingent.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
WBA	10	9	15	14	9	15	Lumbago	5	To convalescent Home	R. H. C. [Signature]
Ramsgate VAD	14	9	15	1	10	15	do	18	Steam vapour bath every other day.	Chas. H. [Signature] ^{MAJ. CAT}

#86900 Mr. Clark G. A.

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.																

March
Aug 1917
Sept 1917

2 81 2 81

off Raneyale
987 1/16 1917

2 43

2 43

2 43

38 Transf to "Canada Disc'ge a/c"

- 38 - 38 Nil

ajr.p.c. 1917
628 1/2 Dept Pay, List 3
Ex: 38 = R.D. 16-10-17

R. 682 - 62