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

Attestation Papers..... 3A

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids..... 2

Medical History Sheet..... 1

Proceedings of ~~Regt. Court Martial~~ medical 2

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Army Form B. 1. / R 12

Misc. vouchers 4
A B 172 1
A F W. 3212 1
A F B. 181 2
A R 1234 K
1 Medal

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. C. No.....

H. Q. No.....

Name Clune, Thomas

Regt. No 847308 Rank Pte.

Corps 150th. Bn. C. E. F.

Deceased. Mar. 24-17.

25988

M

H

2-16
2-16
7 16
1

Appeal

MT 17-1-21 ac.

150th. BATTALION

150th Bn. Canadian Infantry

ATTESTATION PAPER.

No. 847304

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

TRIPLICATE

(ANSWERS.)

1. What is your surname?	Clune
1a. What are your Christian names?	Thomas
1b. What is your present address?	131 ~~Cathcart~~ Chatham ~~City~~ St. Montreal.
2. In what Town, Township or Parish, and in what Country were you born?	Montreal Que.
3. What is the name of your next-of kin?	Thomas Clune
4. What is the address of your next-of-kin?	131 Chatham City.
4a. What is the relationship of your next-of-kin?	father
5. What is the date of your birth?	March 10th. 1888
6. What is your Trade or Calling?	Carter
7. Are you married?	yes.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No.
11. Do you understand the nature and terms of your engagement?	Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Clune Thomas, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Thomas Clune (Signature of Recruit)

Date Feb. 2nd 1916. Albert Cadotte (Signature of Witness)
Recruit.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Clune Thomas, 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.

Thomas Clune (Signature of Recruit)

Date Feb. 2nd 1916. Albert Cadotte (Signature of Witness)
Recruit

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Montreal this 2nd day of February 1916.

J. B. Brossoit (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of Clune Thomas on Enlistment.

Apparent Age 28 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 2 1/4 ins.

Chest measurement.
- Girth when fully expanded 34 1/2 ins.
- Range of expansion 2 1/2 ins.

Complexion Fair

Eyes Brown

Hair Dark

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

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).

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 Feb. 2nd. 1916. J A Chabot Captain

Place Montreal

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.

Clune Thomas 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.

H Barnes (Signature of Officer)
Lieut. Col.
O.C. 150th Overseas Bn. C.E.F.

Date FEB 3 - 1916 191 .

Med Board held at
Hastings 3-1-17.
Particulars of Soldier, 21-2-17.
Sent T. C. R. 20-4-17

M K

I #847308 Pte Clune T certify on my honour that the within statements are correct and that I have not witheld any information.

Witness. [illegible] Signed. T. Clune

REG. NO. 847308 NAME (SURNAME FIRST) Blume T.

RANK Pte CORPS 150th Batty

AGE 29 SERVICE

NAME OF HOSPITAL General Hospital PLACE Montreal

DATE OF ADMISSION 10-3-17.

DISEASE Acute Nephritis

DISCHARGE

OPERATION

~~DISCHARGED TO DUTY~~ Died 24-3-17

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS

CARD NO. D

FOLL.

SURNAME. Leluyne,

CHRISTIAN NAMES Thomas

REGL. No. 847308 RANK Pte.

UNIT 150th Batt

FORMER CORPS Nil

NEXT OF KIN.

NAMES IN FULL Leluyne, Thomas

RELATIONSHIP TO SOLDIER father

ADDRESS 131 Lehatham St., Montreal, P.Q.

also notify Mde Maggie Cluyne, ~~100 Quesnel St. Montreal P.Q.~~ (auth S.A.A.P. 5/6/16)

CHANGE OF ADDRESS

1685 St James St., Jaurl McFee: Mar 27/17.

COUNTRY OF BIRTH Canada, Montreal, P.Q. DATE Mar. 10th 1888

PLACE OF ATTESTATION Montreal, P.Q. DATE Feb 2nd 1916

98 23-9-16 548/3

In event of casualty also notify: Mrs Thos. Cluyne, 100 Quesnel St. 3rd floor Montreal, Saskatchewan. 19/16)

From Halifax Per. S.S. Capland 23-9-16

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Carter RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 27 YEARS 11 MONTHS

HEIGHT 5 FEET 2 1/2 INCHES

CHEST MEASUREMENT 34 1/2 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Fair EYES Brown HAIR Dark

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Montreal, P.Q. DATE Feb 2nd 1916

Returned to Canada per S.S. Mississaki Feb 2/17 (Auth. T. 313)

HEB

Number 847308 Rank Pte

Surname CLUNE

Christian Name Thomas

Units 150th Battalion Theatre of War England

Date of Service 6-10-16. (In Canada) D

Remarks

Latest Address (Widow) Mrs Maggie Toohey 24 6/22
876 Craig St East, Montreal

Roll No. A Page 4998

200m.-6-21.M.

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

OSPITAL AS AN ADMISSION

WHERE FROM)

IIT IN CATEGORY

INVALID

WHERE TO)

ITIONS DIAGNOSED

ADDRESS

HOSPITAL STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

No. 847308 RANK Pte. NAME Clune Thos.

T. O. S. 2-2-16 UNIT 150th Battalion
D.O.48, 2-2-16.

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Oct. 2	1916 Oct. 29	✓		
	mar.	✓		
	apr.	✓		
	may.	✓		
	June	✓		
	July.	✓		
	Aug	✓		
	Sept.	✓	O/S paylist only.	

H.Q. 649-C-9231.

Clune, Pte. Thomas, #847308, C.C.A.C. (Form 150 to Bn)

M

M. & D. (Widow) (M) Mrs. M. ~~Clune~~, Toohey 24 6/22
~~1685 St. James St.~~, Montreal, P.Q.
876 Craig St. E

P. & S. " Ditto.

Ser # 806789
Mem. C. Ditto.

" " (Mother) Mrs. Catherine Clune,
131 Chatham St., Montreal, P.Q.

a

MAY 4 - 1921 R

Scroll Desp. _____ Reqn. No 241244

Elig. for Bw on Scroll

JAN 12 1923

Plague Desp. _____ Reqn. No P48446

a

702

WM

G 42327 JAN 22 1921

C. 42328 JAN 22 1921

Scroll redesp. 19 7/22 PB. 1715

Scroll rtd. 16-5-21

R. & O. 6034.

REGTL. NO.	RANK	NAME	COY.	FOLIO
849308	Pte.	Blume Jr	2	

TAKEN ON FROM	DATE	PARTICULARS
150th Bn C in Def.	2-2-16	

PROMOTIONS OR APPOINTMENTS	AUTHORITY	DATE	ON COMMAND

HOSPITAL	ADMITTED	BY ORDER	DISCHARGED	BY ORDER

EMPLOYED AS	INOCULATIONS
QUALIFICATIONS	VACCINATION
DRAFTED TO	REMARKS
STRUCK OFF	

LEAVE		NEXT OF KIN
FROM	TO	Mrs. M. Flume - (wife
		100. Duesnel St. Montréal. Can
		REMARKS

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Chune	T.	847308

Rank: Pte
Unit: 150th Bn.
Co.
Troop
Batty

Hospital: Bramshott Mil

Date of Admission: 8-12-16

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis N.S.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 15-12-16 IO

Date

REMARKS

EPITOME OF HOSPITAL TREATMENT.

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

Name CLUNE T. Rank Pte Regt. No 847308 Unit A

Battn. 150th Camp or O.S. O File M.H.C.C. H.Q. File

Pension awarded Date of first payment

Discharged to Class Conduct on discharge

Next of kin Wife, 1685 St. James St., Montreal.

Address on discharge

DATE	CLASS	REMARKS	PART 2 ORDER
3-3-17	2	L.I.M.S.	#64
11-3-17	2	Mtl. Gen. Hpl.	#72
24-3-17	2	"DIED" T.B.	#84

M.H.C. F. 29

DATE	CLASS	REMARKS	PART 2 ORDER

Register No. 10695

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 33897-1

Regt'l No. 847,308 Name Thomas (Christian Name) Clune (Surname)

Unit 150th Bn Rank Pte Date of enlistment

Date of casualty 24-3-17 B.P.C. File No. 881

Was service performed overseas ? yes

DEPENDENT

Name Maggie Toohey (nee Clune Relationship Widow

Address 876 Craig St E.
Montreal
P.Q.

Amount of Special Pension Bonus $ 80.00 Abstracted by A. M. Mather

Eligible for Gratuity $ 180.00

Less amount of Special Pension Bonus paid $ 80.00

Less Debit Balance of S. A. or A.P. $ ✓

Total deductions $ 80.00

Balance due $ 100.00

Cheque No. G.1892278 ✓ Date issued 19-7-20

Clerk W. Mitchell

REMARKS: Hold payment pending receipt of reply to letter re dep's latest address

Audited by Geo Howard

Date 9-7-20

M.F.W. 2652
25M—6-20.
H.Q. 1772—39-1473

DG 18

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments 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		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

E. Fm

3339-T-1

Name Clune, T.
Surname Christian Name

Regimental Number 847308 Rank Pte.

Address (in full) 1685 St. James St.
Montreal, P.Q.

Unit C.C.A.C.

Original Unit

District where paid Ottawa

Date of Discharge 24-3-17

P. D. P. Filing Number 15C20.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 20.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
160	10	11240	19/9/17	160	10											160	10

Remarks: Paid to O. I. C. Estates branch. Soldier deceased.

M. F. W. 127.
50M—6 17.
1772 39-1140.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Clerk .....

Dependent.....

Address.....

.....

.....

Pay Dependent $.....

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.....

Net.....

Dec'n No..... W.S.G. File No.....

Award ..... days at $ .... per day $

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

Less P. D. P. Credited $.....

$

Less further debit balance $.....

Net due paid as below

TO SOLDIER OR DEPENDENT

0	Ag. No	Ch. No	Date		Ch. No	Amount
1						
2						
3						
4						
5						
6						
	Total				Total	

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

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

Name Blume Pte Thomas

M. F. W. 41
1 0M—7-16
1772-39 889.

1049

Regimental No. 847308

Unit 150 Bn

Date of enlistment \

Place of " \

Married (yes or no) S A to 31/7

Amount of pay assigned monthly $ 15. Jan 1917

To whom payable Mrs Maggie Blume

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

1685. St James St
Montreal P.Q.

Date and place discharged

Reason for discharge

Character on discharge

Missanabie 11/7/17

No 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	17/7/17							1166						974		Boat
18/7/17	28/7/17	42	1	42	42	.10	4.20							40 —		Quebec
									5.88		Balber			814	5.88	To Mtl 1/7/17

POP
30/8/17

M. F. W. 41
1 0M—'-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

L. L. Job 4503.—M. & D. 6334.

wife.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
Sum.—6-16.
H. Q. 1772-39-319.

5 88

To Whom Maggie Clune

Address ~~100 Queen St~~
1685 St James St W. Montreal, Que
7/1/17 left

Rate 15.00

By Whom Assigned Clune Shoe

Regtl. No. 747308

Rank Private

Corps 150 Batt

OCT 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop payment 1/2/17
Sept.				Discharged to Canada
Oct.				3 M 17 January/17 J.N 6/3/17
Nov.				
Dec.				
Jan.	1915			Acct Closed
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

COPIED FOR 5 CASUALTIES.

Pensions Notified Date 6-8-17
~~Killed in Action~~
Died of Wounds } Date 24-3-17
~~Missing~~
C. L. 1/2/8/17 Clerk
1/2 8/16 6-8-
Late Noted 191 7

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

589

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Maggie Clune wife.
(Assignee)

Name of Soldier Clune Thos.
847308 - Pte. 150 Batt.

L. L. Job 5470—Req. 6888.

	Month.	Year.	Cheque No.	Amt.	Remarks. OCT 1 1916
					15.00.
	April	1916			
	May				
	June				
	July				
	Aug.				
	Sept.				
	Oct.				
JMR	Nov.		~~P 26422~~	~~30~~	P. 26422 Retd & cancelled 16/12/16 bl.
	Dec.		S 35206	15	Cancelled
adj Nov & Dec	Jan. 60	1917	V 37093	60	To adjust. 7/1/17 bl. Sp. Reg. 8-1-17 bl.
	Feb.		Cancelled 043443	15	✓ future. 60.00 stop 1/2/17
	March				
	April				
	May				Returning Insianabie 2/2/17 FK SHH 6/2/17
	June				
	July				$60 CFX. 31-1-17.
	Aug.				W/ Sayer 6-8-17
MAC	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1918			
	Feb.				
	March				
	April				
	May				
	June				
	July				

Pension Granted 1/7/17
B.P.C. to recover $ ✓
Clerk L.B. Date 11/6/17

P.D.P. 29/8/17 O.K.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

L. L. Job 887[illegible]—M. & D. 6195.

1—3—16

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

174

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Mrs Maggie Clunie

3rd flat.

Address ~~632 Aylmer~~

~~100 Queenel St~~ Montréal P.Q.

1685 St. James St West

Relation to Soldier wife, child or mother } wife

Name of Soldier Clunie, Thos.

Regtl. No. 847308

Rank Pte

Corps 150th Battn

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		N 28873	20—20	

COPIED FOR CASUALTIES.

ACCOUNT CLOSED

DATE..... PER W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2.

Mrs Maggie Clune wife

PAYMENTS.

Name of Soldier Clune, Thos

L. L. Job 89002.—Req. 6213.

847308

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	L 1034	20	20	
May		M 4627	20 —	20	
June		H L 9144	20	20	
July		C 5985	20	20	Reopen without loss of time. This man appears
Aug.		K 14[illegible]	20	20	nonRoll APB 150 Bn.
Sept.		Q 14778	20	20	JAK 28/11/16
Oct.		Z 18291	20	20	
Nov.	2	L 25130	20 —		mailed 28-11-16
Dec.		K 25711	20	20	
Jan.	1917	B 28945	20	20	
Feb.		~~B 31751~~	~~20~~	20	B 31751 Cancelled
March			220	20	Acct Closed
April					Returned Missing abs 2/12
May					
June					
July					
Aug.					M. G. H. 12/2/17
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

Pension Granted 1/7/17
B.P.C. to Recover $ nil
Clerk W. P. Date 11/6/17

Pensions Notified Date 4/8/17
Killed in Action
Died of Wounds } Date 29/3/17
Missing Returned
C. L. 1/4/17 Clerk J Bell
Date Noted 4/8/17

ACCOUNT CLOSED
DATE ..... PER W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

FORM OF WILL.

I, Thomas Clune. (Name in full)

Regimental Number 847308 serving in 150th Overseas Battalion C. E. F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

52783

I bequeath all my real estate unto

	Name & Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Marguerit Cutler Clune. # 1685 St James St. (wife) Montreal. P.Q.	Name & Address of person or persons to receive personal estate* *(see note).*

In Witness whereof I have hereunto set my hand this 23rd day of November. A.D. 1916.

Thomas Clune Signature.

* N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Name of Witness A. Hamilton Capt

Address of Witness Paymaster

Occupation of Witness 150th Overseas Bn. C.E.F.

Name of Witness Provost Lieut

Address of Witness

Occupation of Witness 150th Overseas Battalion C. E. F.

P. 85. 10,000. 23-9-16.

Read!

To be made out in duplicate. H.Q. 54-21-23-53

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 150th Overseas Bn. C.E.F.

(2) Regimental Number 847308

(3) Full Name of Soldier Thomas Clune

(4) Place of Birth Montreal Q

(5) Are you married, or not? Yes

(6) If married, state,
(a) Full name of your wife Maggie Cuttler Clune

(b) Present Postal Address 100 Inverness St Montreal Q

(7) Are you a widower? —

(8) Have you any children? Yes

If so, give number of boys and girls 1 Boy

Also their names and ages Thomas Clune 8 Years

M. F. W. 67
200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive? Thomas Clune

If so, state name and address 131 Rue Chatam Montreal Q

(10) Is your Mother alive? Catherine Hennessey Clune

If so, state name and address same address

(11) If your Mother is a widow —

Are you her sole support, or not? —

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

—

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

—

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

$15.00 per month

(15) Are you insured? no

If so, in what Company? no

Have you made arrangements for payment of your Insurance premium

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

H Barne Hood
Officer Commanding.

Date 28/8/16

Sunday March 4th, 1917.

CASE REPORT ON
#847308-Pte. Thos. Olune.
150th, Batt. C.E.F. Admitted 3/3/17.

COMPLAINTS:- Swelling of feet and ankles and legs ecxtending up to the knees. Puffiness of face. Weakness and lassitude. Anorexia, lost of weight, Night sweats, occasionall and not distressing cough with scanty sputum.AT NO TIME DID HE HAVE ANY HAEMOPTYSIS. Recent swelling and hoarseness in throat. PERSONAL HISTORY:- Born in Montreal 29 years ago. Occupation cab driver and expressman. PNEUMONIA WHEN SEVEN YEARS OLD, NO OTHER ILLNESSES, FAMILY HISTORY:- NO TUBERCULOSIS TRACEBLE.
HISTORY OF PRESENT ILLNESS:-

Perfectly well until November 1916. When the lost of appetite and constipation forced him to the field dispensary. About the first of December 1916 he was sent to no. 9 stationary hospital for bronchitis here he lost weight and had a few night sweats. HE RARELY COUGHED, NEVER HAD MUCH SPUTUM AND NEVER HAD HAEMOPTYSIS. A SPUTUM EXAMINATION MADE FOR HIM WAS PRONOUNCED POSITIVE,BUT HE STATES POSITIVELY THAT THE SPUTUM CUP GIVEN HIM ON THAT OCCASION BELONGED TO ANOTHER PATIENT AND HAD NOT BEEN CLEANED BEFORE HE GOT IT. On the 21st of December 1916 He was sent to Hastings where he remain till Feb 9th, 1917. He lost twenty-one pounds. The same symptoms continued has at Bramshott. HE LEFT HASTINGS ON A STRETCHER AND CAME TO CANADA VIA THE MISSINABIE. ON HIS SECOND DAY OUT TO SEA HE WAS SITTING UP AND WHEN THE BOAT LANDED AT QUEBEC HE WALKED ASHORE. HOARSENESS AND SWELLING OF THE THROAT DEVELLOPED ONLY AT QUEBEC. On march the 2sd, he was sent by Major Hall to the L.I.M.S. arriving on the same day. HE HAS HAD NO NIGHT SWEATS SINCE LEAVING ENGLAND. HIS FEET AND FACE BEGAN TO SWELL WITHIN TWO DAYS OF HIS ARRIVAL IN QUEBEC.

PHYSICAL EXAMINATION:- 1. Heart shows weakness of the aortic sounds softness of the apical sounds and marked accentuation of the pulmonic second sound. There are no murmurs.

2. Lungs:- There is slight lagging of the apical portion of the right thorax with slight diminution of normal percussion note and a friction rub heard only occasionally on deep inspiration. Expiration is prolonged and slightly wheezy has far as the third rib. Beyond this there are no evidences of pathological conditions present in the chest.

5. The Skin of the lower extremities pits deeply on pressure as high as the tuberosity of the tibia .

3. Abdomen shows no trace of movable dullness neither liver nor the spleen are palpable.

4. Kidneys are not palpable and no pain nor tenderness in the back is complain of.

6. There is marked puffiness of the eyelids and face generally.

7. Anaemia is marked both in the skin and the mucous membranes. 8. Larynx shows marked infection with hypertropyh of the inter-arytenoid mucosa and arytenoid mounds with infiltration of the vocal cords 9. An enormous hydrocoele.

LABORATORY EXAMINATION Urine.Albumen ///; 80Grammes to the liter.,
2. Bloodcells;-(a) Reds///.(3) Whites//.
3. Casts;- granular (a) coarse/ (b) fine//.
4. Amorphous phophates ///.
5. Crystalline triple phophates ///.
6. Urochromogen test is positive.

Sputum:-

Shows absence of tubercle bacilli.

Treatment:- 1. The patient is to be kept in bed till all trace of oedema as dissapeared. 2; Milk diet with occasional light greuls and water. 3; Force fluids including imperial drink lemonade and such like. 4; Packs etc. t.i.d. followed by Strychnine grs.1/40 5; Magnesium sulphate concentrated solution A.M. 2 ounces. 6; Ammonium chloride expectorant t.id. p.r.n. 7; Fluid intake to be measured. 8; Urine out-put to be measured.

10

[illegible] Capt. M.C.

294-16-3-17

21 L 16/3/17.

Medical Case Sheet.

847308 Pte Clune T. 150th Can Age 29, Service 9/12

Disease Pulmonary Phthysis etc.
Enlisted Sept 2/16 at Montreal
Arrived in England Oct. 6/16

Complains of pain in chest, cough, etc.

Family History:- Married, age 29, one child-boy. Parents alive and well. Always enjoyed good health till he came here. Been losing flesh about 20 pounds since arriving in England. Has had pneumonia and pleurisy when quite young. No history of T.B.

Present Condition:- about two weeks ago took sick with chill, cold feeling etc, had cough. Got wet and felt worse. Sweats at night. Has never had any haemoptysis. Very anaemic. Bowels regular, appetite fair.

Physical Exam:- Left apex somewhat dull on percussion. Diminution of breath sound. No rales. Heart is negative. Fairly well nourished, quite hoarse. Bases dull and general general condition poor. Very anaemic. No appetite Suspect T.B.

Sgd T.A. Lebbetter, Capt.

Dec. 20th Dullness increased. Vocal fremitus and rales at left apex. Sputum positive to T.B.

Sgd A.H. MacKinnon.

Dec 23 Transfer to Hastings.

6

CLINICAL CHART.

(*To be attached to Case Sheet*).

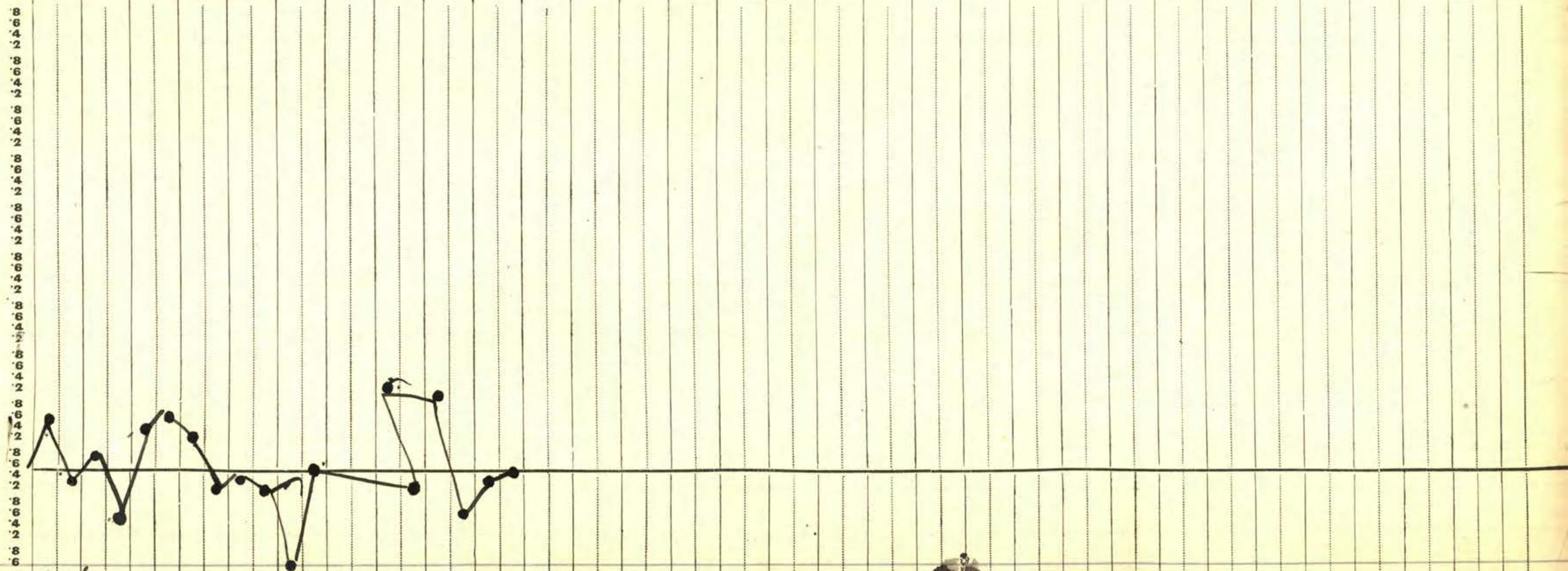
Army Form B 181.

Corps _____ Military Hospital _____

No. _____ Rank and Name Pte Clune H. Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

Dates of Observation	Jan 23	24	25	26	27	28	29	30	31	Feb 1	2	3	4
Days of Disease													
Temperature Fahrenheit (Time A.M.P.M.)													
Pulse per Minute	94	92	98	92	98	94	88	104	98	94	88	88	94	92	94	88	96	88



4

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number 847308 Rank Pte Name and Corps of disabled soldier. Clune, Thomas 150 Batt

Previous Civilian Occupation. Carter

Cause of disability - Pulmonary Tuberculosis Eng. C.9231

Condition in detail which prevent the soldier earning a Full livelihood:-

Complains of cough & expectoration. Weakness & dyspnoea. He has dulness at both bases & diminished vesicular breathing. Some rales at left apex behind. Man is hoarse, very anaemic and has albuminuria - TB positive.

Opinion of the Board.

Degree of incapacity (Please state in fractions.) Total

Probable duration of incapacity:- 6 months at least

Does it render him permanently unfit for Military Service? Yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity? Sanatorium

Signature. E A Roberton Capt President.
M A Coglon Capt Members.
J W Walker Capt

Station. Quebec

Date Feb 21. 1917

Approved.

Date Feb 21/17 W. W. Carnell Major
Assistant Director Medical Service.

Date 3/1/17 Geo A Cameron Col
Director General Medical Service.

5m-11-16.(M)

R125

Form 4. To be used instead of blank space in Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number. Rank Name and Corps of disabled soldier.

Previous Civilian Occupation.

Cause of disability.-

Condition in detail which prevents his a later earning a full livelihood:-

Opinion of the Board.

Degree of incapacity (Please state in fractions.)

Probable duration of incapacity:-

Does it render him permanently unfit for Military Service?

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

Signature. _____ President.

_____ Member.

Station. _____

Date

Approved.

D. G. _____

Assistant Director Medical Service.

Date _____

Director General Medical Service.

Sm-11-10.(M)

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847308

MEDICAL HISTORY SHEET.

Surname Clune *Christian Name* Thomas

Examined { on 2nd. day of Feb. 1916 / at Montreal

Birthplace { City or Town Montreal / County Que.

Apparent age 29

Trade or occupation Carter

Height 5 Feet 2 1/2 Inches.

Weight 125 Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 34 1/2 inches.

Physical development good

Small-Pox Marks Nil

Vaccination Marks { Arm Right. Left. / Number 4

When Vaccinated last Childhood

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

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

refer Dental Corps

Approved by Jachabo Captain

Rank M.O.

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

Date.	Result.	Vaccinations.
21/8/16		E Cooke Capt. M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
19/3/16	good	F Boudreau M.O.
17/4/16	good	F Boudreau M.O.
12/2/16	Good	G E Boudreau M.O.

Enlisted on 2nd *day of* February 1916 *at* Montreal P.Q.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to	150th			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
3rd Hospital Hastings	3/1/17	Tuberculosis of lungs	Invalided to Canada for Canadian Regt
APPROVED Thos Monson CAPT. C.A.M.C. for G.O.C. CANADIANS.	4 JAN 1917	Approved W Carnold. CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE.	PRESIDENT, STANDING MEDICAL BOARD.

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.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname G. Shaw Christian Name H. Maria

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Brandreth		7	12	16	23	12	16	Phthisis	17	Patient admitted with bronchitis. Tubercular area found at the left apex. Sputum positive to T bacilli. Cough not improving much.	Chas Mackenzie Capt
L.D.M.S. Schegach		2	2	17	11	3	17	Latent T.B.? Nephritis	9	No improvement transferred to Montreal Hospital.	A Myers Capt
Montreal	M.G.H.	10	3	17	24	3	17	Nephritis The Pulm Latent	14	Died March 24 at 11.45 pm autopsy:	B.R. Bourne Capt.

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

M. F. W. 54. (A.F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 150th Overseas Bn. C.E.F.

Regimental No. 847308 Rank Pte Name Cline, Thomas

Enlisted (a) 2-2-16 Terms of Service (a) 20 of W. C. E. F. Service reckons from (a) 2-2-16

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

Extended ..... Re-engaged ..... Qualification (b) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	23-9-16	
		Disembarked England	Liverpool	6-10-16	

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

[P.T.O.

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

Army Form W. 3212. (In books of 100.)

Regtl. No., Rank and Name Pte Cline. Corps

Disease Tuberculosis. Hospital Canadian Convalescent Hospital, Sanitorium Section, Hastings.

To Officer i/c Laboratory. Ore. Ward

Please carry out an examination of the accompanying specimen of Urine.

with special regard to

Date 22 JAN 1917

R. Young
O. i/c Ward.

LABORATORY REPORT.

Colour muddy amber
Reaction acid faintly
Sugar negative
Albumen faint trace
Microscopic ~~sputum deposit~~
large cells in masses singly and by
globular and a few from cocci
Gram stained smears show for gram positive
bacilli resembling

Date of Examination

Thos R. Little Capt
O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

Army Form W. 3212. (In books of 100.)

Regd. No. Rank and Name _____ Corps _____

In _____ Hospital _____

To Officer i/c Laboratory _____ Ward _____ Station _____

Please carry out an examination of the accompanying specimen of _____

with special regard to _____

Date _____

LABORATORY REPORT.

Date of Examination _____

O. i/c Laboratory.

REPORT OF CLINICAL PATHOLOGISTS EXAMINATION..

Dec 16 1916

Specimen Sputum

Result T.B.Positive +++

Name Pte Clune 847308

Corps 150 Can

Capt Lebbetter

O i.c. Ward

A.R.Campbell

O i/c Laboratory.

URINE SPECIMEN

Ward. 13

Date. 7-12-1916

Unit. 15 C. Canada Reg. No. 841348 Name & Rank. Pte. Clune

Disease.

Sp. Gr. 1023

Reac. acid

Albumen. Pos (+++)

Sugar. Neg

a few granular casts

4

Capt. Lebutter
M.O. i/c Ward.

A R Campbell
Capt. C.A.M.C.
Officer i/c Laboratory.

MEDICAL CERTIFICATE BOOK.

London: Printed for H.M. Stationery Office by John Rissen, Ltd.—82.

MEDICAL TRANSFER CERTIFICATE.

Army Book 172.

(To accompany a Man Transferred from one Hospital to another.)

Extract from Admission and Discharge Book of _____ **Hospital at** _____ **Date** _____

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of: Age last birthday.	Completed Years of: Service.	Completed Years of: Service in the command.	DATES. Admitted into Hospital.	DATES. Transferred.	Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations,	Destination on Transfer, and to what Hospital or Ship Transferred.
2625	150 Coods	B	847 308	Pte Blane	19	9/12		1/12/7	1/12/23	R.C.	Tuberculosis of Lung.	Hastings

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

H G Kendall Major

Medical Officer in Charge.

847308

CHANGE OF ADDRESS of next of kin

No. Rank Surname Blure Christian Names Thomas

Address Mrs. M. Dooley (widow)
876 Craig St E.,
Montreal, P.Q.

649-B-9281
21-5-21 21

Section

D-19
LHP.

R—122

TLH. Rank Name CLUNE, Thomas, - Reg'l No. 847308. -

Unit 150th.Bn. If in perm. Corps, What Unit? Married or Single Married -

Place and Date of Enlistment Montreal, Feb. 2nd. 1916. - Place of Birth Montreal, Que. -

Name and Address, Next-of-Kin Thomas Clune, -

131, Chatham St., Montreal, P.Q. - Relationship Father. -

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

CCAC N/E. R.B. No. 2329 File R.L. 137 Category M.B. Ca

SMX 17-1-21 ar

	Report. Date.	Report. From whom received	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.
			Arrived in England per S.S. Lapland 6-10-18.			
	6.12.16	150th Bn.	Adm. to Bramshill Hosp.	Bramshott.	6.12.16	Pr. H.O. 239. C.L. 10 Influenza
	22.1.17	"	TOS & Rejtd	Hastings	9.1.17	— 36
	9.2.17	"	Pnr. to Canada for Dis is 303	"	2.2.17	— 68
		Dis bn.	To Can Home.	MD 4 Montreal	11-2-17	NR196

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.					

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 407	Regimental No. 847308	Rank. Pte	Surname. Clune	Christian Name. T
Year 1916	Unit. 150th Batt		Age. 29	Service. 11/12

Station and Date.	Disease
Enlisted in	150th Batt
Date	2/2/16
Place	Montreal
Transferred	
Arrived In England from Canada	6/10/16
In France from England	
In England from France	
Hospital Transfers	Bramshot 7/12/16 Hastings 23/12/16
Remarks & M.O. Report.	

12

Capt. C.A.M.C.
M.O.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

St Agathe
Vocational Counsellor

Report No. 1887 | Class II | No. of M. H. C. File | No. of Local File | No. of H. Q. File

A

Clune, Thomas.
1685 St James St
Montreal

No. 847308 Rank Private Original Unit 150th Present Unit CCAC
Age 29 Height 5 ft. 2½ ins. Complexion Fair Eyes Brown Hair Dark Character NR.
Date of enlistment 2/2/16 Where enlisted Montreal Where seen service England
Ship returned by Missanabie Date of arrival 11/2/17 Port of arrival St. John
Birthplace Canada Religion R.C.
Name and address next of kin Wife Mrs M. Clune same address.
Cause of disability Pulmonary Tuberculosis

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Eng. Board Total 6 mos. Canadian Board Total.
Probable duration of incapacity 6 months at least.
Is final disability likely to prevent return to previous occupation?
Recommendation of Canadian Board Sanatorium
Destination to which transportation issued Montreal (St Agathe)
Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	wife	26			Good
Children 1					
2	1	9			
3					
4					
5					

Occupation prior to enlistment Carter
Regular trade or profession
Average earnings previous to enlistment $12.00 week. Any other income
Name and address of last employer J. Richard 262 St Martin St Montreal
Rent per month $12.00 If purchasing property amount due and annual payment, $ — $—
Taxes — If Homestead, when is patent due? —
If carrying life or accident insurance, annual premium —
If in receipt of sick benefits or other insurance—name of society — Amt. per mo. $
If unable to follow previous occupation, ~~name preference~~ after recovery
At what age soldier left school? 15 What grade, standard, &c., was he in? 3rd Class Montreal
Has he taken any Technical or Continuation classes, if so what? —
Whether given Vocational Training while in Hospital in England. If so, what subjects? —
References Last employer
Witness J. McDonell
Date 21-2-17

I declare that the above statement is correct.
Signature T. Clune

Recommendation by Interviewer as to classes likely to be of use, and general remarks:
Is desirous of improving his education
Vocational Counsellor

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $
Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....
First payment date.....

Form No. 5c.

CLASS 1.—Men for immediate discharge without a pension
(a) Unfit for overseas service but capable to take up their previous civilian occupation
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

CLASS 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 3.—Men having a permanent disability which would not be benefitted by further medical treatment (such disability due to or aggravated by service) and who in some cases will immediately be considered by the Pensions Board with a view to pension.

Report No. Class A

Regimental Number

No. Rank

Age. Height ft. in. Complexion Eyes Hair Chest

Date enlistment Where enlisted Original Unit Present Unit

Strength attached by Date of arrival Where acting service Character

Birthplace Port of arrival

Name and address next of kin Religion

Cause of disability

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Fire Board Canadian Board

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment Any other income

Name and address of last employer

$ per month If purchasing property amount due and annual payment, $ $

Tax If Homestead, when is payment due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Ans. per mo. $

Desirable to follow previous occupation, particulars

At what age soldier left school? What grade, secondary, etc., was he in?

Has he taken any Technical or Continuation classes, if so what?

Was he given Vocational Training while in Hospital in England. If so, what subjects?

Preference

Wishes

I declare that the above statement is correct.

Signature

Recommendation by Interviewer as to class suitable to be at least with general character

Last Pay Qtr. Ch. $ Dep. $ Amount paid at Depot R. O. $ L. F. C. leaving Depot $

Amount remitted to R. O. Unit, $ Credit Clothing allowance $

Transfer'd to Date—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class Amount per year, $ Period granted for Ending Date

Next pay on date

REPORT OF CLINICAL PATHOLOGIST'S EXAMINATION

12. 12. 1916.

Specimen Sputum

Result No T.B. found

Name Pte Blum

Corps 150 Can # 847308

Disease

Capt Lebbette R.A.M.C.

O.i.c., Ward 13

A R Campbell R.A.M.C.

O.i.c., Laboratory.

8

8

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2625	847308	Pte	Clune	L.
Year	Unit.		Age.	Service.
6-12-16	100th Cands.		29	9/12

Station and Date.	Disease
Bramshott	Pulmonary Phthisis, Etc. Enlisted Sep. 27/16 at Montreal. Arrived in England Oct 6/16

Complaints — Pain in chest, cough, Etc.

Family history. Married, age 29. (Parents alive & well) one child living. Always enjoyed good health till he came here. Been losing flesh about 20 lbs since arriving in England. Was last examined & passed when quite young. No history P.B.

Pre. Const. About two weeks ago, took sick with chill, cold feeling & had cough. Got worse & felt worse. Sweats at night. No new hæmoptysis. Very anæmic. Bowels regular. Appetite fair.

Phys. Exam. Left apex somewhat dull on percussion, diminution of breath sound. No râles. Heart negative. Fairly well nourished, quite hoarse. Been — dull & gen. condition poor. Very anæmic. No appetite

Suspected P.B.

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

(J 3521.) Wt. W 5606—2621. 2,000,600. 7/15. D & S.

J. A. Lebbetts Capt.

Station and Date.	
Dec 20th	Dullness marked vocal fremitus and rales at left apex. Sputum positive to T.B. [illegible]
Dec	23d Improved & Discharged.

Army Form B 181.

CLINICAL CHART.

(To be attached to Case Sheet).

Canadian Convalescent Hospital, [illegible] Hastings.

Corps 150th Batt

No. 847308

Rank and Name Pte Clune H.

Age 19

Military Hospital

Service 9/12

Disease Tubercle of lung

Date of admission 23/12/16

Date of discharge

Result

Pulse per Minute: 88, 84, 120, 88, 104, 104, 90, 92, 108, 110, 100, 100, 80, 88, 90, 112, 84, 108, 88, 98, 102, 84, 68, 84, 88, 78, 92, 76, 84, 88, 76, 96, 72, 76, 92, 80, 84, 72, 92, 88, 88, 80, 90, 100, 92, 100, 100, 84, 84, 100, 98, 80, 98, 98, 104, 106, 84, 120, 100, 130

Wt. W. 7106-623. 350,000m. 11/14. J. J. K. & Co., Ltd., Forms B 181/3.

Signature ____________ In Charge of Case,

REPORT OF CLINICAL PATHOLOGIST'S EXAMINATION

Specimen Sputum. Dec 7 1916.

Result No T. b. found

Name Pte C Shine

Corps 150 Can. # 847308

Disease

Capt Lebuller R.A.M.C.

O.i.c., Ward. 13.

A R Campbell R.A.M.C.,

O.i.c., Laboratory.

9

P 3

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

22-6-548

This space to be for numbers.

Proceedings on Discharge.

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

No. 847308

Rank Private

Name Clune, Thomas
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 150th Battalion, C.E.F.

Date of Discharge March 24th/1917

Place of Discharge Montreal, P.Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 29 years — months.
Height 5 feet 2½ inches.
Complexion Fair
Eyes Brown
Hair Dark
Trade Carter
Intended place of residence (To be given as fully as practicable.) Deceased

Descriptive Marks

2. The above-named man is discharged in consequence of Deceased March 24th/17

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Amanda

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

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

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place) Montreal, P.Q. ..... (*Signature of Soldier.*)

(Date) March 24/17 ..... (*Signature of Witness.*)

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

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

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

..... (*Signature of Soldier.*)

10. **Statement of Service.**

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

Total...1 years 68 days.

11. **Confirmation of Discharge.**

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

(Place) Montreal, P.Q. .....

(Date) 1 April 17. ..... (*Signature*) R. C. Hall

MAJOR,

O. C. [illegible] Unit

Military Hospitals Commissions Command.

Reservations referred to at Para. 8.

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

NO RESERVATIONS

(OVER)

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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. 847308 Army Rank Private

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

Corps 150th. Battalion, C.E.F.

Battalion, Battery, Company, Depôt, &c. C.C.A.C.
(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

Place of discharge Invalided to Canada by authority of Medical Board.

1. *Description at the time of discharge.*

Age years months
Height feet inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade
Intended place of residence (To be given as fully as practicable)

Descriptive marks.

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

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

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

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

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

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

Wt. W. 13141/283 430,000 3/15 M.&C. Ld.

Forms B. 268 39

*Strike out if not applicable.

[OVER.

P. 559.
MARRIED OR SINGLE: Married

PLACE OF BIRTH: Montreal, P.Q. Canada.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Maggie Cline. 100 Quesnel St. Montreal.

RELATIONSHIP OF NEXT OF KIN: Wife

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $: EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 847308 RANK: Private NAME: Cline Thomas.

IF IN PERMT. CORPS / WHAT UNIT: 150th OVERSEAS BATTALION C.E.F.

TRANSFERED TO: Non Effective Discharge DATE: 17-1-17 AUTHORITY: GO/P.6148

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION: Montreal.

DATE OF ATTESTATION: 2-2-16

TRANSFERED TO / DATE / AUTHORITY

TRANSFERED TO / DATE / AUTHORITY

TRANSFERED TO / DATE / AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1-10-16

PAYABLE TO: Mrs. Maggie Cline, 100 Quesnel St. Montreal. RELATIONSHIP: Wife.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 17-1-17 EFFECTIVE Feby 1st 1917 REASON: Discharged Med. Unfit.

DISCHARGE DATE AND PLACE: Canada REASON AND AUTHORITY: Medically Unfit GO/P.6148

Entered on N.E. Card Index

ACCOUNT TRANSFERED TO NON-EFFECTIVE BRANCH (DATE) 17-1-17

Checked by H. Gillolan

ACCOUNT TRANSFERED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1916 Sept 30															10 18																10 18					Balance from Canada
Oct 31	31	1.00	31	00	31	10	3	10							~~44 28~~ 34 10	12	14	30	26					9 73	4 87			15 00		29 60	14 68		14 68		
Nov 30	30	1.00	30	00	30	10	3	00							33 00	92	16/11/16	116	30/11/16					4 87	9 73			15		29 60	18 08		15	3 08	
Dec 31	31	1.00	31	00	31	10	3	10							34 10													15		15 00	37 18		15 50	21 68	
1917 Jan 17	17	1.00	17	00	17	10	1	70							18 70 / 130 08											3 44 / 2 43 / 24 53	15		15 20	11 68				Discharged 17-1-17 Med. Unfit Authy GO/P.6148
N.E. Monthly																															11 68				
																													11 68	11 68		Nil			

Balance transferred to N. E. Branch.

by Bal 11.68
Transd to "Canada Disc'ge a/c"

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.

Poorly developed man Looks as if he has lost much weight.
Chest. Both apecies dull on percussion Front of chest almost hyperesonant on percussion below clavicular. Vocal ~~xxxxxxxx~~ fremitus increas d in front of chest. On auscultation Breath sound somewhat diminished at apecies but have amphoric tone. Fine moist rales scattered occasionally heard at apecies and almost over whole front of chest Vocal resonance very marked Whispered pectoriliquy at both apecies. Has lost about 25 lbs since beginning of fall.

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

(*a*) In the presence of the enemy? Not applicable.

(*b*) On active service?

(*c*) On duty?

(*d*) Off duty?

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

If so—(*a*) When? Not applicable.

(*b*) Where?

(*c*) Opinion?

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? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada?

(*d*) Discharge as permanently unfit?

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* 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 conditi ns 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 for aggravation.

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it? Active service conditions aggravating an old condition.

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No.

(*b*) Misconduct? No.

22. Is the disability permanent? Yes

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

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? Total for six months.

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

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

26. Do the Board recommend

(*a*) Fit for duty? No.

(*b*) Fit for base duty? No.

(*c*) Invalided to Canada? Yes. F.

(*d*) Discharge as permanently unfit? No.

APPROVED
The Monson
CAPT. C.A.M.C.
for G.O.C. CANADIANS.

27. Remarks.

This man admits having been subject to colds and sweats for two years previous to enlistment.

Signatures:—

President.

Members.

Station Hastings.

Date Jan. 3rd, 1917.

Approved.

Station SHORNCLIFFE (19, Westbourne Gardens, Folkestone.)

Date 4 JAN 1917

W C Arnold CAPT.
Administrative Medical Officer. CANADIANS SHORNCLIFFE.

NOT CHARGED 219 MAR - 2 1917

PENSIONS AND CLAIMS BOARD. Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the day of 191

MAR 2 - 1917

Members of Board.

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.

St. C.P., Kingsway, W.C.
30,000—17/4/16—10533.

Army Form B. 179.
Canada.

N.E.

Medical Report on an Invalid.

Station Canadian Convales ent Hospital, Sanitorium Section, Hast ngs

Date 1st Jan 1917

1. Unit 150th Batt
2. Regimental No. 847308
3. Rank Pte
4. Name CLUNE Thomas
5. Age last birthday 29
6. Enlisted {on 2/2/16 / at Montreal}
7. Former Trade or Occupation} Carter

DEPT MILITIA & DEFENCE FEB 26 1917 H.Q. 9 C. 92 31 CANADA

8. Disability.

Pulmonary Tuberculosis

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. Probably preexisting to enlistment

10. Place of origin of disability. Montreal

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

Says he was perfectly well when leaving Canada Had hardly ever been ill. Pneumonia and pleurisy at the age of 7. However he was subject to colds and cough in Canada during winter time Did not take treatment. Just before reaching England his appetite began to fail and he began to cough considerably with some expectoration which has increased. Four after reaching Camp he took a chill and became hoarse and was admitted to Hospital Has been in hospital since. Cough somewhat improved but expectorates a good deal Has had many and severe night sweats Voice is still hoarse Has lost considerablr weight.

12. (*a*) Give your opinion as to the causation of the disability. T.B.C. 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) No.

5

L-10

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

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

PROCEEDINGS of a * Standing Medical Board

assembled at The Montreal General Hospital

on the 25th March 1917

by order of The O. C. M. D. #4

for the purpose of examining #847308 Pte. Thomas Clune, 150th Battalion, C.E.F.

PRESIDENT.

Major W.H.P. Hill, A.M.C.

MEMBERS.

Capt. R.E. Powell, A.M.C.

Capt. C.R. Bourne, A.M.C.

The Board having assembled pursuant to order, proceed to

examine #847308 Pte. Thomas Clune,

150th Battalion, C.E.F.

and find that he had:-

1. Nephritis acute.
   Tuberculosis Pulmonary Latent.

   He was enlisted on February 23rd 1916 over the signature of Capt. Chabot, A.M.C.

   There is no evidence before this board that the disease could have been detected at the enlistment date.

   Death occurred on March 24th 1917 at 11.45 P.M. as a result of the former condition.

2. Post mortem findings showed Pulmonary Tuberculosis, early Tuberculosis of the Intestine and acute chronic Nephritis.

Dated at Montreal, P.Q.
March 27th 1917.

W. H. P. Hill — Major, Pres.
R. E. Powell — Capt.
C. R. Bourne — Capt.
Members.

M F. B. 303.
10m.—4-16.
H. Q 1772—39—188.

Secretary, Militia Council,

Ottawa, Ont.

APPROVED AND FORWARDED

R. Meeten

Lieut-Colonel, A.D.M.S., M.D.#4.
for Major-General, G.O.C., M.D.#4.

Montreal, Que.
3/4/17

APPROVED
MAY 2 1917
A.D.G.M.S.

A. Carr of Cammercoff

APPROVED
MAY 2 1917
$1450/-