

Original

17-H-498

11 M. D. 2nd. Depot Battalion B. C., Regiment

2nd DEPOT BATT. B.C. REGT Regtl. No. 2139243

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)



1. Surname..... HENDERSON,

2. Christian name..... Septimus

3. Present address..... Bowser, B. C., Canada.

4. Military Service Act letter and number..... 161876

5. Date of birth..... 13th, July, 1891

6. Place of birth..... Northumberland, England.
(town, township or county and country)

7. Married, widower or single..... Widower

8. Religion..... Methodist

9. Trade or calling..... Laborer

10. Name of next-of-kin..... Ralph Henderson

11. Relationship of next-of-kin..... Brother

12. Address of next-of-kin..... E. & N. Railway Co, Victoria, B.C. Canada.

13. Whether at present a member of the Active Militia..... No

14. Particulars of previous military or naval service, if any..... None

15. Medical Examination under Military Service Act:—
(a) Place..... Nanaimo, B. C., (b) Date..... 27th, Oct. 1917 (c) Category..... B-2

SUFFICIENT ADDRESS

S. Henderson

DECLARATION OF RECRUIT

I, Septimus Henderson,, do solemnly declare that the above particulars refer to me, and are true.

S. Henderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

| | | | | | |
|--|-------|-------------------------|----|-------|---|
| Apparent age..... | 28 | yrs..... | 3 | mths. | } Distinctive marks, and marks indicating congenital peculiarities or previous disease. Scar on point left thumb, scar on outside right knee, varicose veins at level of both knees. |
| Height..... | 5 | ft..... | 9½ | ins. | |
| Chest measurement } fully expanded..... | } | | 38 | ins. | |
| | | range of expansion..... | 3½ | ins. | |
| Complexion..... | Dark | | | | |
| Eyes..... | Blue | | | | |
| Hair..... | Brown | | | | |

M. C. McQueen Major
2nd. for O. C. absent on duty
Depot Btl.
B. C., Regt.

Place..... Victoria, B. C., Date..... 25th, April, 1918.

Regiment No. 1150000
Battalion
M. D. 1917

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname: HENDERSON

2. Christian name: Thomas

3. Present address: 10, ...

4. Military service No. (if any) and number: ...

5. Date of birth: 1911, ...

6. Place of birth: ...

7. Marital condition (if any): ...

8. Religion: ...

9. Trade or calling: ...

10. Name of next-of-kin: ...

11. Full description of next-of-kin: ...

12. Address of next-of-kin: ...

13. Whether or not a member of the Armed Forces: ...

14. Particulars of previous military or naval service, if any: ...

15. Medical Examination under Military Service Act: ...

16. Name of Recruiting Officer: ...

DECLARATION OF RECRUIT

I, the undersigned, do solemnly declare that the above particulars are true and correct.

DESCRIPTION ON CALLING UP

| | | | |
|------------|-----|------------|-----|
| Age | ... | Height | ... |
| Weight | ... | Complexion | ... |
| Build | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |
| Complexion | ... | Complexion | ... |

Signature of Recruit: ...
Signature of Recruiting Officer: ...
Date: ...

010 11-18

Deceased

DISCHARGE DOCUMENTS

R. O. No.
H. Q. No.



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *23*
- 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.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *2*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate..... *1*
- Inventory of Kit.....
- Last Pay Certificate..... *1*

Name *HENDERSON SEPTIMUS*

Regt. No. *2139243* Rank *Pte*

Corps *5th Bn. C. G. R.*

S.O.S. 30-11-18

"Deceased"



20020

*Doc. S. & 10-1
M & W 113 - 2
M & B 465 - 1*

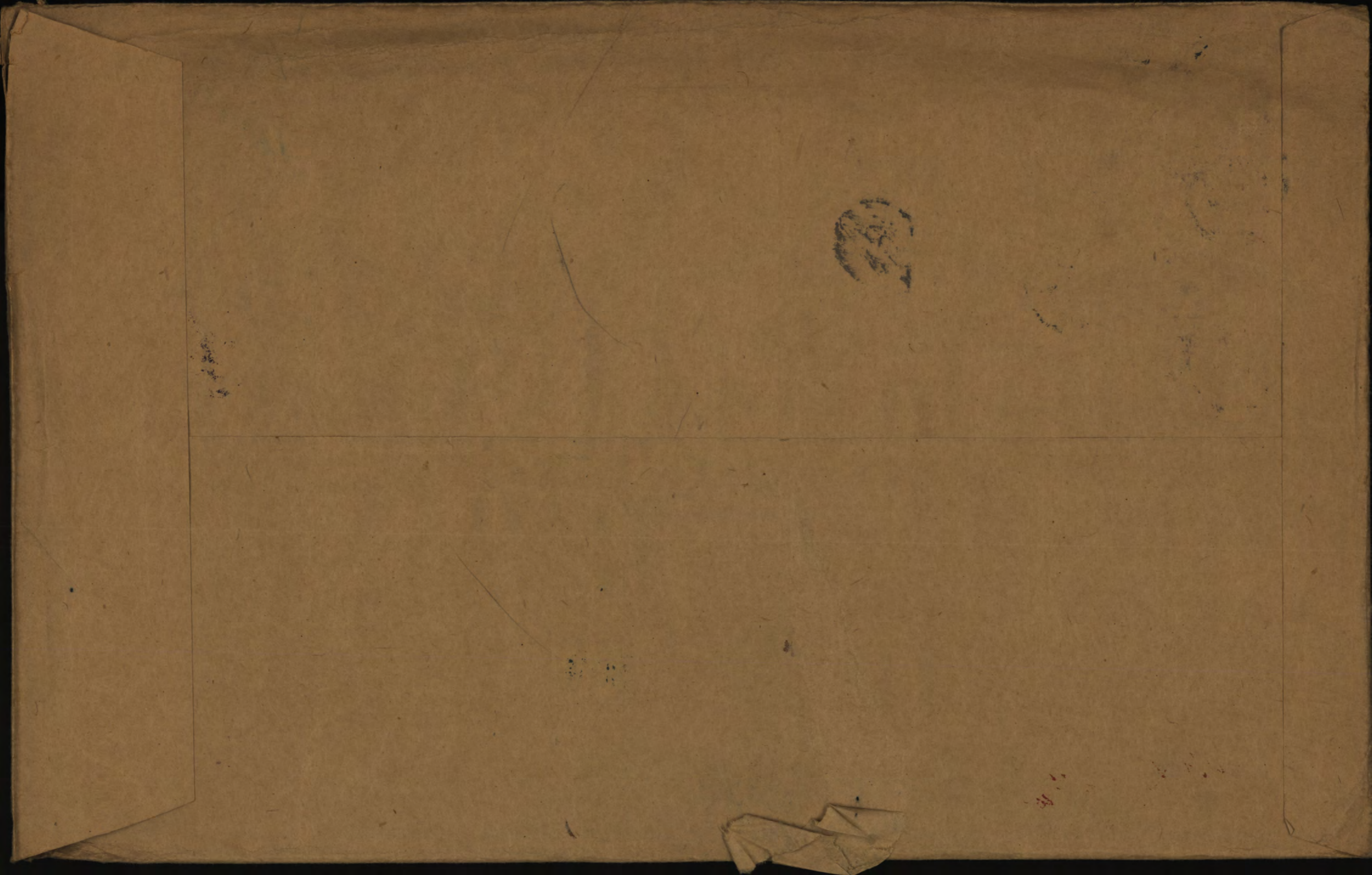
72422-1

M. F. W. 62.
100m.-6-17.
H. Q. 1772-39-635.

W. 20/20



*2
13-12
20-12
28-13
2*



"C" "C2"
NAME

Henderson Septimus

REGIMENTAL NO.

2139243

RANK

Private

ENLISTED AT

Victoria B.C.

PROMOTIONS, &c.
AND DATE

DATE

April 25th 1918

IF SERVED PREVIOUSLY. STATE UNIT, &c.

none

MARRIED, WIDOWER, OR SINGLE

Widower

NEXT OF KIN

W. Raeph Henderson

RELATIONSHIP

Brother

ADDRESS OF

C. & N. Railway Co., Victoria B.C.

ASSIGNMENT OF PAY \$

C.

TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE

E.G. ABSENCE, PROMOTION, &c.

PART II. D. O.

No.

DATE

REMARKS

IF IN HOSPITAL, NOTE NAME, &c.

*I. O. S.**39**1. 6. 18*

649-423075: 0'12 11

131
11
13

CARD NO. 45

SURNAME. *Henderson*

S.O.S. file 23-11-183
Dec D.O. FOLL. 229 of 13-12-18
5 an C.G.R.

CHRISTIAN NAMES *Septimus.*

REGL. NO. *2139243* RANK *Pte.*

UNIT *B.C. Regt. 2nd Dps. Bn.*

T.O.S. *April 15 1918*

FORMER CORPS *Nil.*

D.O. Part II No *114*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Henderson, Ralph.*

RELATIONSHIP TO SOLDIER *Brother.*

ADDRESS *E & N. Railway Co. Victoria*
B.C.

COUNTRY OF BIRTH *England* Northumberland DATE *July 13th 1891*

PLACE OF ATTESTATION *Victoria, B.C.* DATE *Apr. 25th 1918.*



R/C 19-4-19 305/78 0'12 Pte.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

not eligible for 4/15-5th Br. C.G.R. Star.
Henderson, Pte S. 23078

* 2139243

Name & Address of Legatee

(Adm²) Ralph Henderson (Walter)
Combs.
Vanover Id² BC.

M.D.S.
Medals
&
Decorations

Name & Address of Next of Kin

Brother: Mr. John Henderson
Heppele Northumberland
England

P. & S.
Sheet I

See also Ser # 807446
(Ser. # 807446)

Serial Desp. MA 1 - 1921 Reqn. No. 2 41640

Name & Address of Female Next of Kin

Widow & mother predeceased.
Plague Desp. Reqn. No.

Cops.

NAME

REG. NO.

FILE NO.

DATE IN

DATE OUT

P.A. OR B.F.

DATE
REQUIRED

REMARKS

AUG 18 1924

Scroll Desp.

Reqn. No.

674

AUG 18 1924

Plaque Desp.

Reqn. No.

699

M.D. 5

CANADIAN CONTINGENT EXPEDITIONARY FORCE

35

LAST PAY CERTIFICATE

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

Regimental No. 817243 Rank Pvt. Name Donaldson, S.

Cor. 5th BN. C. G. R. who was* Deceased

On NOV 30 1918 191... to

*Insert "discharged" or "transferred."

NOV 1 1918

The following is a statement of the account of the above named from 191... to NOV 30 1918 191..., the inclusive date of transfer or discharge.

| Dr. | \$ | c. | Cr. | \$ | c. |
|--|----|----|---|----|----|
| Bal. Dr. from prev. month | | | Balance Cr. from prev. month | 15 | 00 |
| Advances by } No. <u>Cash</u> <u>18</u> | 00 | | Reg'tl. Pay days at \$..... c. <u>30</u> | 30 | 00 |
| Cheques } No. | | | Field Allow. <u>30</u> days at \$..... c. <u>1 30</u> | 30 | 00 |
| Assigned Pay and Sep'n Allee. No. | | | Separation Allowances* (Monthly) <u>18</u> | 8 | 00 |
| Other charges <u>Laundry</u> <u>50</u> | | | Other Allowances* | | |
| Payment on transfer or discharge No. | | | Other Credits* | | |
| Balance Cr. (to be paid by the new unit) ... <u>27</u> | 50 | | Bal. Dr. (to be deducted by new unit) | | |
| Total | | | Total | 43 | 00 |

*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned Pay for the month of Nov 191... and Sep'n Allee. for month of 191... (to) Assignee

(Address)

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

On Transfer of an Officer.

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

REMARKS:—

- State (1) date of enlistment 18-1-18
- (2) if married and if a Separation Allowance Card has been submitted No
- (3) cause of discharge Deceased authority
- (4) authority for transfer

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

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

Date NOV 30 1918

Place Wichita, K. C.

[Signature]
 PAYMASTER
 5th BN. CANADIAN GARRISON REGT.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

*copy passed to Estates
21-12-18.*

MEDICAL HISTORY SHEET. Copy

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname Anderson Christian name Septimus
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 161876
3. Consecutive number on schedule of men reporting for service (if he appears on it) 24
4. Address (including street and number, if any) Doucer P. O. B. C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 27th day of October 1917, by the undersigned medical board sitting at Nanaimo B.C.

5. Age as stated 28 Years 3 Months. 6. Apparent age 28 Years _____ Months
7. Height 5 Feet 9 1/2 Inches. 8. Weight 151 Pounds.

9. Chest measurement { Minimum 34 1/2 Ins. 10. Complexion Dark { Eyes Blue
Maximum 38 Ins. { Hair Brown

11. Physical development. { Good Fair Poor 12. Smallpox marks None

13. Number of vaccination marks { Right arm _____ Left arm _____ 14. When vaccinated last 1913

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar on point of left thumb. Scar on out side of Rt. Knee

16. Slight defects but not sufficient to cause rejection 21 defective teeth (bad roots mostly)
The man denies having had { Rheumatism Varicella Venereal disease Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis of both knees

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category B2

W. H. Drysdale Member. O. S. Ingham Member. W. H. Frost Capt President.

| Date | Result | VACCINATIONS | Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|--------|------------------------|----------------|----------|---------------------------------|
| <u>27/5-18</u> | | <u>JWH Hunter</u> M.O. | <u>27/5-18</u> | <u>G</u> | <u>JWH Hunter</u> M.O. |
| | | M.O. | <u>4/5-18</u> | <u>G</u> | <u>JWH Hunter</u> M.O. |
| | | M.O. | <u>9/5-18</u> | <u>G</u> | <u>JWH Hunter</u> M.O. |

Joined 25th day of April 1918 at Victoria B.C.

| CORPS | REG'TL NUMBER | HABITS | DATE |
|----------------------------------|----------------|--------|----------------|
| <u>2nd Depot Batt. B.C. Regt</u> | <u>2139243</u> | | <u>25/4/18</u> |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION | DATE | DISEASE | RESULT |
|---------------|----------------|-----------------------------------|----------------------------------|
| <u>Quebec</u> | <u>22-8-18</u> | <u>Neurose ven. Syphilis C II</u> | <u>Warrant Capt. W. H. Frost</u> |

N. B.—This sheet is 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.

Signature of Man Septimus Anderson

86-1198

Surname *Anderesson* Christian Name *Septimus*

| STATION No. 5 Date of Arrival at the Station. | DATES OF | | | | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|--|-------------------------|-----------|-----------|--------------------------|-----------|-----------|------------------|-----------------------------|--|-------------------------------|
| | Admission into Hospital | | | Discharge from Hospital. | | | | | | |
| | Day | Month | Year | Day | Month | Year | | | | |
| <i>Belvidere Camp</i> | <i>11</i> | <i>6</i> | <i>18</i> | <i>20</i> | <i>6</i> | <i>18</i> | <i>Plumery</i> | <i>9</i> | <i>Slight attack Fit for B2</i> | <i>W.P. Lee</i> |
| <i>Quincy M. H.</i> | <i>21</i> | <i>11</i> | <i>18</i> | <i>28</i> | <i>11</i> | <i>18</i> | <i>Pneumonia</i> | <i>7</i> | <i>Wid - 29/11/18 -</i> | <i>St. Andrew's</i> |



Original not available

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

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. *2nd Inf Bn B.C. Regt.*

Regimental No. *2139243* Rank. *Pte* Name. *Henderson, Septimus*
C. E. F.

Enlisted (a) *25-4-18* Terms of Service (a) *M.S.A.* Service reckons from (a) *25-4-18*

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

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

| 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>27-4-18</i> | <i>2nd B.C.R.</i> | <i>S.O.S. (Draftee under M.S.A.)</i> | <i>Victoria B.C.</i> | <i>25-4-18</i> | <i>D.O. 117.</i> |
| <i>29-5-18</i> | <i>2nd B.C.R.</i> | <i>Trans to B.C. Spec Ser Co (Quebec) from 2nd B.C.R.</i> | <i>Victoria B.C.</i> | <i>28-5-18</i> | <i>D.O. 149.</i> |
| <i>8-6-18</i> | <i>5th C.G.R.</i> | <i>S.O.S. of 5th Bn C.G.R. on trans from B.C. Spec Ser Coy (Quebec)</i> | <i>Quebec P.Q.</i> | <i>6-6-18</i> | <i>D.O. 43.</i> |
| <i>12-12-18.</i> | <i>5th C.G.R.</i> | <i>S.O.S. (Deceased)</i> | <i>Quebec P.Q.</i> | <i>23-11-18.</i> | <i>D.O. 229. Duntie - Capt for D of R</i> |



(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, Shoening Smith, etc., etc., also special qualifications in technical Corps duties.

CASE HISTORY SHEET.

No. 2139243 Rank Private Name Henderson, A Age 28
Unit Co. G, 8888 Completed years of service 5 weeks Where and how long
Date of admission June 11, 1918 Date of discharge June 26, 1918
Diagnosis Pneumonia Place of origin England

CONDITION ON ADMISSION AND PROGRESS OF CASE

Pain in region of trapezius
with cough with heavy cold - Temp 103. Pulse 104
Resp 22. Sputum considerable
June 12-18 - Temp 100. Condition improved
15/6/18 Temp Normal Cough with yellow
sputum.
17/6/18 Convalescing - Temp - Normal
20/6/18 Convalescent & Temp Normal

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

None

TREATMENT

(Especially any specific or special form)

Quinine gr. x. Absolute Pain Adhesion Strapping
Doses Pulg 200 Special Diet
June 17. Much improved no. 9.

CONDITION ON DISCHARGE

(and disposal made of case.)

Cat B II

Date June 26, 1918

W. R. Keant Capt
Medical Officer i/c case.

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's case.)

Corps 6-4-OR

Hospital Station Belvidere Camp

No. 2139243 Rank and Name Henderson J Age 28 Service 5 weeks

Disease Pleurisy Date of Admission 12/6/18 Date of Discharge 20/6/18 Result 4 311 Case Book Folio

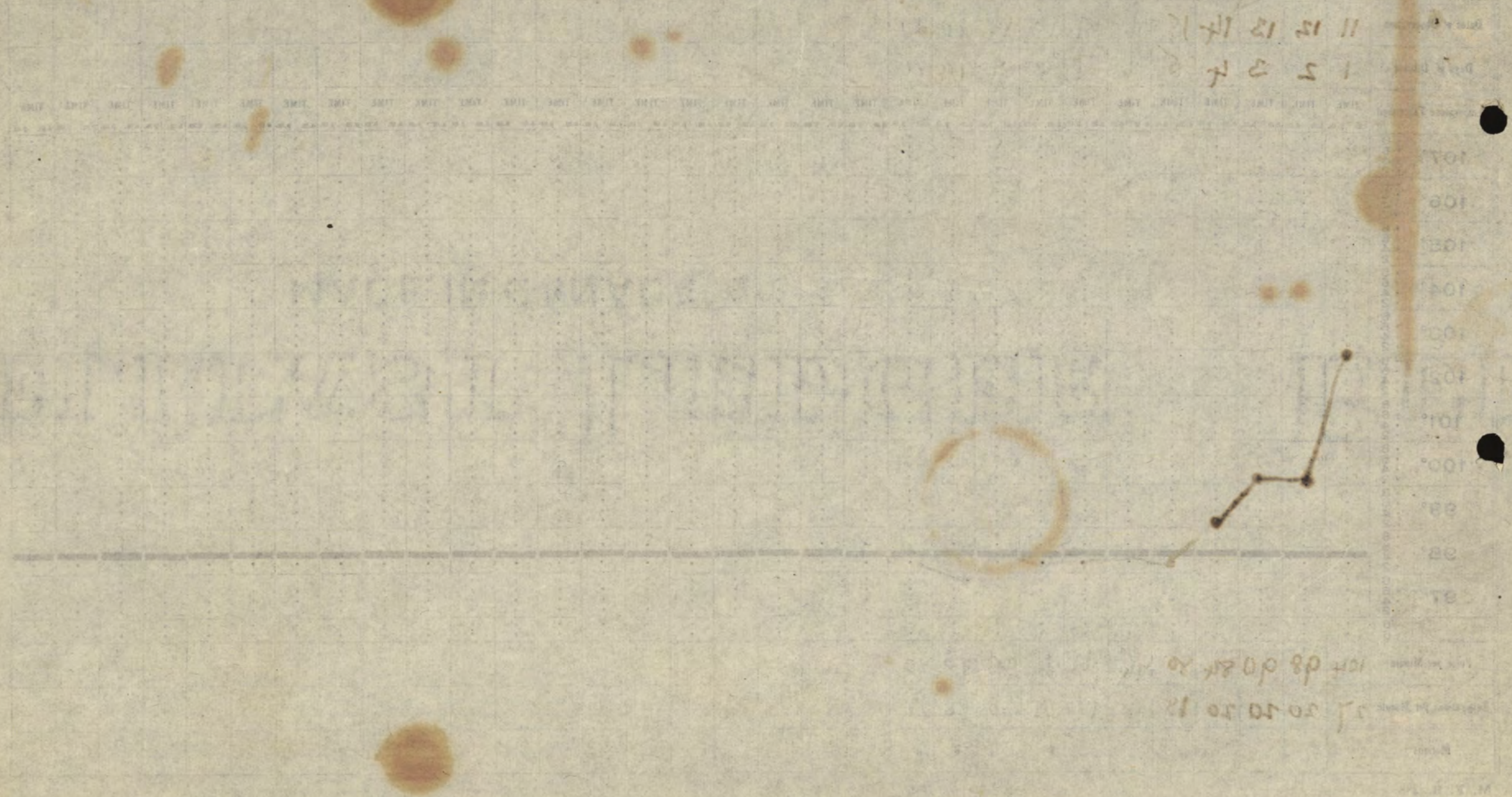
| Dates of Observation | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Days of Disease | TIME | | TIME | | TIME | | TIME | | TIME | | TIME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Temperature Fahrenheit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | a.m. | p.m. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 107° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 106° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 105° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 101° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 100° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 99° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 98° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 97° | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pulse per Minute | 104 | 98 | 90 | 84 | 80 | 74 | 76 | 86 | 88 | 70 | 72 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Respirations per Minute | 27 | 20 | 20 | 20 | 18 | 18 | 18 | 18 | 20 | 20 | 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Motions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Signature W R Grant Capt In charge of case.

CLINICAL CHART

(To be posted into Case Book opposite Patient's Name)

No. *11214* Rank and Name *Private*
 Date of Admission *10/11* Date of Discharge *11/12*
 Result *Discharged*
 Case Book *1234* Folio *5*
 Hospital Station *General*



101 08 00 20 12
 101 08 00 20 12

CASE HISTORY SHEET.

Military Hospital. Quebec Station.
No. 2139243 Rank PTE Name Henderson S Age 29
Unit 5th PGP Completed years of service 6 months Where and how long Canada
Date of admission 21-11-18 Date of discharge
Diagnosis Influenza Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE. Admitted PM. 21/11/18

9.102 & 1.112. High temperature of chest & headache of feverish
character, anorexia - has only had solid a day
P. 8. - Chest ~~was~~ on exam shows - change in
vocal resonance. B. Brads somewhat harsh, fine rales
heard over both lungs, + at Rt Base is small area in
which percussion note is dull.
23/11/18 - Rt side ~~at~~ pneumonia. Percussion hard & dull.
B. S changed. Vocal resonance & fremitus increased, some
hyperinflation & pleural friction - typical of lower pneumonia
Rt side 25/11/18 since yesterday has been giving worse
than morning respiration ~~at~~ shallow, rapid, whole expanded
part fast ~~and~~ compressible -

FAMILY HISTORY P.H. - my uncle for Pharynx last June
(Tuberculosis, mental or nervous diseases.)
Died 28/11/18 - 2.40 PM

TREATMENT
(Especially any specific or special form.)

CONDITION ON DISCHARGE
(and disposal made of case.)

Date 29/11/18 Medical Officer i/c case. W. R. W. Hair Capt

M. J. [unclear]
1/15/1910
1/15/1910
1/15/1910

100
100
100

100

100
100

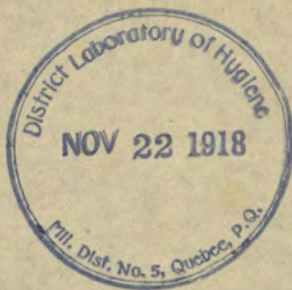
100 100 100

100 100

100 100 100

100 100 100

100 100



No. 4363

M.D.No. LABORATORY. QUEBEC. P.Q.

URINE REPORT.

No. 2139243
RANK Private
NAME C. Benderson
CORES 5 Cyl
WARD 10

CHEMICAL ANALYSIS.

AMOUNT IN 24 HRS BILE
APPEARANCE Turbid ACETONE
COLOR S. Amber DIACETIC ACID
REACTION Alkaline DIAZO
SPECIFIC GRAVITY 1.025 UREA
ALBUMEN One
GLUCOSE One

MICROSCOPICAL EXAMINATION.

[Dotted lines for microscopic examination]

REMARKS.

[Dotted lines for remarks]

W. J. Miner Capt. A.M.C.
Officer i/c Laboratory. Que.

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CLINICAL REPORT.

(To be pasted into Case Book opposite Patient's Case.)

Corps 5th C G 10

Hospital Station Jessie

No. 2139243 Rank and Name St. Henderson S

Age 29 Service 6/12

Disease Influenza Date of Admission 21/11/19 Date of Discharge

Result

Case Book 861 (Folio

| Dates of Observation | Days of Disease | | Temperature Fahrenheit | | Pulse per Minute | Respirations per Minute | Motions |
|----------------------|-----------------|------|------------------------|------|------------------|-------------------------|---------|
| | TIME | TIME | TIME | TIME | | | |
| 21 | 9 | 10 | 9 | 10 | 104 | 22 | T |
| 22 | 9 | 10 | 9 | 10 | 100 | 24 | T |
| 23 | 9 | 10 | 9 | 10 | 108 | 40 | T |
| 24 | 9 | 10 | 9 | 10 | 108 | 40 | T |
| 25 | 9 | 10 | 9 | 10 | 108 | 36 | T |
| 26 | 9 | 10 | 9 | 10 | 108 | 32 | T |
| 27 | 9 | 10 | 9 | 10 | 108 | AS veg. | T |
| 28 | 9 | 10 | 9 | 10 | 108 | 24 | T |
| 29 | 9 | 10 | 9 | 10 | 108 | 28 | T |
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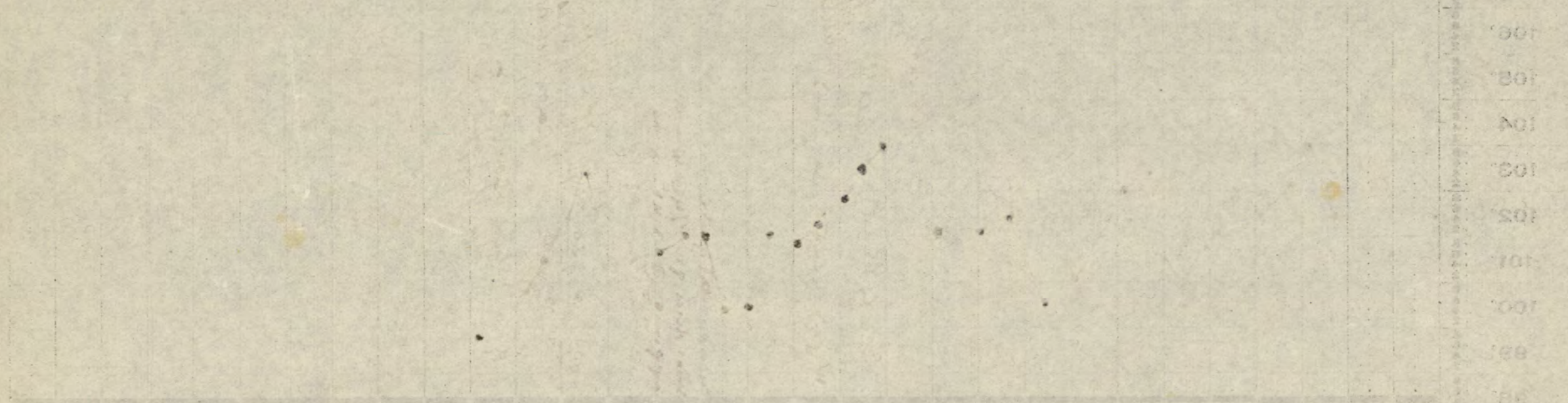
Dr. J. H. ...

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EXPERIMENT I



23/10

...

...



N. of 27-11-18-

T.P.A. 102⁴-120-48 @ 9. 101⁴-138-49 @ 1. 100⁸-140-50 @ 5-

7³⁰ voided.

8³⁰ Hypo Strych. gr/60

8³⁰ Milk 3^{iv}

Spec. P4 @ 9 - 11-1-3-5-

10. Milk 3^{iv}

10³⁰ Hypo Camphor Oil

10³⁰ voided.

11¹⁵ Milk 3^{iv}

12³⁰ Hypo Strych gr/60

1 - Lemon albumen 3^{iv}

2³⁰ Hypo Camphor Oil

2³⁰ Milk 3^{iv}

3³⁰ voided 3ⁱⁱⁱ

3⁴⁵ Milk 3^{iv}

4³⁰ Hypo Strych gr/60

5¹⁵ Lemon albumen 3^{iv}

6³⁰ Hypo Camphor Oil

7. Milk 3^{iv}

Sips of water (3^{viii})

Had restless night. Moaned almost all night.

Dozed a little early a.m.

P. rapid, breathing labored.

Pt. a little brighter this a.m. - Irrational @ times.

Expectorated fairly well @ times, sputum brownish tinge. Mouth wash several times.

Colouring poor. Hands cyanosed.

28th Hypo Strych 8³⁰ - Beef tea 3^v

" Camph oil 10³⁰ Milk 3^{iv}

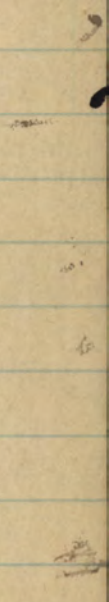
Cloture oil qtt i in olive oil 10³⁰

12³⁰ Strych 1-60 - Breathing shallow milk 3^{vii}



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FORM OF WILL

I, Septimue Henderson. (Name in full)

Regimental Number 2139243 serving in 2nd Depot Battn. B.C. Regt.

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

bequeath

I ~~devise~~ all my real estate unto

.....
.....
.....

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

absolutely, and my personal estate I bequeath to

(Brother) Ralph Henderson.
E. and N. Railway.
Victoria, B.C.

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT NOTE

this 26th day of April A.D. 191 8

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

Septimus Henderson. Signature of Soldier.

*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.

Signature of First Witness L. Barker.

Address of Witness Willows Camp, Victoria, B.C.

THE TWO
WITNESSES

Occupation of Witness Soldier.

MUST
SIGN HERE

Signature of Second Witness R.S. Boyd.

Address of Witness Willows Camp, Victoria, B.C.

Occupation of Witness Soldier.

I hereby certify that this document is a true copy of an original document now in possession of this office.

L.B. Husband. Capt.
Director Military Estates.

MAR 4 - 1919

