ATTESTATION PAPER.

No. 501018.

Folio. Original

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? ... Jackson
1a. What are your Christian names? ... William
1b. What is your present address? ... Grand Lake Ontario
2. In what Town, Township or Parish, and in what Country were you born? ... Cumberland England
3. What is the name of your next-of-kin? ... Mrs. Hodgson Cumberland
4. What is the address of your next-of-kin? ... Mrs. Hodgson - Wallantine England (TALLANTINE (a. = th))
4a. What is the relationship of your next-of-kin? ... Mother
5. What is the date of your birth? ... 1879
6. What is your Trade or Calling? ... Miner
7. Are you married? ... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ... Yes
9. Do you now belong to the Active Militia? ... No
10. Have you ever served in any Military Force? ... No
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? ... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Jackson, 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.

W. Jackson (Signature of Recruit)

Date 1st November 1915 H. E. Blachwell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Jackson, 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.

W. Jackson (Signature of Recruit)

Date 1st November 1915 H. E. Blachwell (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Hamilton this 1st day of November 1915.

Jane A. Gibbons (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of William Jackson on Enlistment.

Apparent Age 36 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement: Girth when fully expanded 40 ins.
Range of expansion 4 ins.

Complexion Dark

Eyes Gray

Hair Dark Brown

Religious denominations:
- Church of England +
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic
- 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 declares that he is not subject to fits of any description.

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

Date 22nd October 1915 Gordon T. Jackson

Place Haileybury Ont. Lieut.
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.

William Jackson 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.

[signature] (Signature of Officer)

Date 9/11 1915

Major
O.C. #1 Tunnelling Coy. C.E.F.

C.E.F. REGIMENTAL DOCUMENTS

NAME JACKSON WILLIAM REGT. No. 501018 UNIT 1 T C H. Q. FILE No. 01344

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					DIED 21-5-19
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

H

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-89-1377

D.M.S. 1800.

Surname: Jackson
Christian Name or Names: W.
Reg. No. 9. 501018

Rank: Spr.
Unit: 1st. Tunn. Co.
Co.: Can. Eng.
Troop: (1 T.N.C.)
Batty.

Hospital
Date of Admission

Transferred 3 Can. Fld. Amb. Hosp. 17-3-16.
Nth. Mid. Div. Cas. Cl. Stn Hosp. 17-3-16
3 Can Gen. Boulogne Hosp. 10-4-16.
17 Div Rest Stat Hosp. 9.4.16
(over)

Diagnosis
(1) Dilitation of Myocardium
Later Diagnosis (if changed)
(2) D. A. H.
(3) Myalgia

Additional Diagnoses: If more than one state present
Bronchitis
Dental. B. P.
V. D. G. J. L
Shell Gas. Sev.

DISPOSITION
To Duty Rn. Date 25-3-16
Dis. to unit 7.5.16

A 32.
C.L. 15-4-16.
" 18.4.16. A.34.
C.L. 28.4.16 A 42
A 43.
C.L. 29-4-16.
" 15.5.16 A 53
A 69
C.L. 6-6-16
25.11.16 # a 191
28.11.16 a.192.
30.1.17 A 226.
a 252
16-3-17
C.L. 11-4-17 a 268
30-4-17 a 279

REMARKS
Dis. to Duty. 13.1.17
Disc. Rienf. Havre 1-4-17
R.F. Base Ref Unit
10-4-17
Disc:- 15-3-18

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

PTO

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	8 Cas. Cl. St.	9.4.16
2.	3 Can. Gen Boulogne to Marlboro Details	20-4-16
3.	N. M. D. Cl. Stn.	17-3-16
4.	13q Fld Amb	7.11.16
5.	H1 Div Rest Stn	7.11.16
	do. do. do. do.	11.1.17
6.	39 Gen Hosp	7-3-17
	No 24 G. H. Etaples.	1-11-17
7.	2nd W. G. H. Manchester	9.11.17
	Mil Conv Woodcote PR	14-2-18

C.L. 9-11-17 a 58(3)
15.11.17 B 63.
16.2.18 B141.
22-3-16 63/170-2.

R. 140.

Name Jackson, W. *Rank* Spr. *Reg. No.* 501018

Unit 1st. Tunnelling. Company.

Next of Kin Mrs. Hodgson, North, Lodge. Tallantine
Cumberland, Eng.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
			Dilatation of.			
17-3	No 3 Canadian Field Ambulance		Myocarditis	A.32.		
17-3.	North Mid Cas Clg Stat.		" "	A.32.		
9-4.	No 17. Divisional Rest Stat.		D. A. H.	A 42		
9-4.	No 8. Casualty Clearing Stat		" "	A.42.		
10-4.	No 3. Con Hosp.	Boulogne	" "	A 34.		
20-4.	Marlboro Det Camps	"	" "	A. 43.		
27-4	Cam Base Depot	Etaples	do	A. 53		
	Discharged to Unit		do	A. 53		
17 3	N. M. Cas Cl Stn		Bronchitis	A. 68		
28 3	Dis to duty		do	A. 68		
7 11	No 139 Fld Amb		Dental. B.P.	A 191		
7 11	No 41 Dis R Stab		Do	A 191		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
9 11	To Duty		Dental B.P	A192		
1917						
11 1	No 41 Dvl. R. Stat		Dental	A226		
13 1	Dis to Duty		Dental	A226		
7-3.	No. 39. Gen. Hosp. Havre.		NYD.	A252.		
1-4-	Discharged C. Camps. Havre.		V. D. G.	9.268		
10-4	Rej Unit		do.	A279		

No. 501018 RANK Spr. NAME Jackson W.

~~T. O. S.~~ UNIT No 1. Tunnelling Coy.
Transfd from 2nd Field Sps.
(D.O. no 1 of 2-11-15)

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 3	1915 Nov 30	✓		
Dec		✓		

H..Q. 649-J-10537.

1st Jun. Co.

JACKSON, Pte. William, #501018, C.E.F.

Med & D	(Widow)	Mrs. Mary Jackson, c/o Mr Innes ~~C/o Edwin Ross~~, 320-19th Ave W ~~26 Blantyne Street, Glasgow, Scotland.~~ Calgary Alta
P & S	(Widow)	Address as above. 30/9/24
See # 805834		
Mem Cross	(Widow)	Address as above. 48359
Mem Cross	(Mother)	Mrs. F. Hodgson, North Lodge, Tallantyre, Cockermouth, Cumberland, England.

Not Elig. for 14-15 Star

Scroll Desp. APR 30 1919 Reqn. No. 2-40542

E " " V M

E " " B W M

Plague Desp. JAN 17 1919 Reqn. No. PW 4199 ac

W 43-910

M 43-911

FEB 19 1921

FEB 19 1921

765

D 21-5-19

SURNAME. Jackson

CHRISTIAN NAMES William

REGL. No. 501018 RANK Pte.

UNIT #1 Tunnellie Coy

FORMER CORPS Nil.

29 CARD NO.

SOS Dis 21-5-19
Died FOLL. in Hospl.
auth DO 147 27-5-19
D O Clg Serv C.

NEXT OF KIN.

NAMES IN FULL Hodgson Mrs.

RELATIONSHIP TO SOLDIER Mother

ADDRESS

Cumberland
England.

Next of Kin
CHANGE OF ADDRESS
Wife.
Mrs. M. McC Jackson
Can. B. of Comm.
Toronto, Ont.
auth R/C Sarp 10-9-19.

COUNTRY OF BIRTH England, Cumberland DATE 1879

PLACE OF ATTESTATION Haileybury Ont. DATE Nov. 10th 1915.

O/S 1-1-16 307/3.

R/C 19-5-19 325/9 Pte I. 2

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING RELIGION Church of England

DESCRIPTION.

APPARENT AGE 36. YEARS MONTHS

HEIGHT 5' FEET 7. INCHES

CHEST MEASUREMENT 40 INCHES EXPANSION 4 INCHES

COMPLEXION Dark EYES Gray HAIR Dark brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Haileybury Ont. DATE Oct. 22nd 1915.

Present Address:- Grout Lake Ontario.

Form R. 149.
7106—250m—7/2/17.

William

Name JACKSON. Rank Spr Reg. No. 501018

Unit 1st Can Tunn Coy

Next of Kin Mrs Hodgson North Lodge Tallantine Cumberland, England (Mother)

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917							
1	11	No 24 G. H. Etaples		Shell Gas Sev	A58	M6824	1583415
9	11	2nd West G. H. Manchester		do Slt	B63	8/11	5570
1918							
14	2	No. 6 G. H. Woodcote Pk Epsom		do do	B141		12552
15	3	Discharged		do do	B170		3842

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

LEDGER No. 433 1088 SERIAL No. 1118

REG. No. 5-01018 NAME Jackson W

RANK Pte CORPS C.A.C. AGE 40 SERVICE 36/12 OS

HOSPITALS DATE OF ADMISSION

1 Savard Park Quebec 18-5-19

2

3

DIAGNOSIS Appendicitis

TRANSFERRED TO

DISPOSITION Died at 10.05 Pm 21-5-19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

Q.M.B.

Number 5-01018 Rank Spr.

Surname JACKSON.

Christian Name William.

Units C.E. Theatre of War France.

Date of Service 16-2-16.

Remarks Mrs Mary Jackson c/o Mr Innes 320-19th ave W Calgary Alta APC

Latest Address ~~Cobalt. Ont.~~

123354

Roll No. B. Page 13975.

200m.-2-21.M.

DESP. NOV 14 1924
REGN. NO. 7473

M37
2792
IV
ORIGINAL
(16)

ORIGINAL.

MEDICAL HISTORY SHEET.

501018

Surname Jackson Christian Name William

Examined on 22nd day of October 1915 at Haileybury

Birthplace City or Town Cumberland County England

Apparent age 36 yrs

Trade or occupation Miner

Height 5 Feet 7 Inches.

Weight 140 Lbs.

Chest measurement Minimum 36 inches. Maximum expansion 4 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number — Two.

When Vaccinated last Infancy

(a) Marks indicating congenital peculiarities or previous disease Scald Scar on Left Leg.

(b) Slight defects but not sufficient to cause rejection

Approved by Gordon F. Jackson

Rank Lieut M.O.

Date	Fit or Unfit	Examined for Re-engagement,
11/3/18	201	JAC M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

14 NOV 1917

Date	Result	Vaccinations.
20/12/15		J Grinham M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
13/12/15		J Grinham M.O.
21/12/15		M.O.
29.3.18	T.A.B. 2	JBC M.O.

Enlisted on 1 day of November 1915 at Haileybury Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#1 Tunnelling C.C.E.F.	501018		1-11-15
Transferred to..				

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
3rd C.C.D. Seaford	31-5-18.	Shortness of Breath (Gassed)	B1. Wm. H. Taylor Capt. C.A.M.C.
Sunningdale	6.12.18	Debility	B2 Jt Cook Major Comm
do	25/3/19	do	B2 A H Newman Capt
Sunningdale	2		

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.
100M.—5-15.
H. Q. 1772-39-439

Surname Jackson Christian Name [illegible]

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	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.
Marlboro' Details											
Camp Boulogne		20	4	16				D. A. H.		To Can Base Depot.	A 43
Can Base Dep Havre					7	5	16	"	17	Dis to Unit	A 53.
41 Div. Rest Stat		7	11	16	9	11	16	Dental B.P.		To duty A191 A192	
No.41 Div.Rest Stat.		11	1	16	13	1	16	Dental		Discharged to duty Duplicate Medical History Sheet posted to here. [illegible]	A.226-A.226 DT.
		9.	11.	17	13.	2.	18.	Gassed.	97.	Onset 31. 10. 17. Gassed whilst wiring Conjunctivitis lt eye. Heart nil. 13. 2. 18. Fit for transfer	
MCH Epsom.		13	2	18	15 MAR 1918			Do. Shell	31	Condition much improved weakness still Rym Gymn. Since admitted Discharge to Command Depot Cat. Dr.	Calvert CAPT. R.A.M.O. (T.P.) FOR OFFICER COMMANDING, [illegible] GENERAL HOSPITAL [illegible] Capt Carpenter Capt Carpenter
Sovard Unit.	Hosp Dresher	19	5	19	21	5	19	Post operation appendicular adhesions & intestinal obstruction	3	died @ 10.35 a.m. [illegible]	

Western General Hospital, Manchester.

CASE HISTORY SHEET.

Seward Military Hospital. Station.

No. 601018 Rank Pte. Name Jackson W. Age 40

Unit C.S.C. Completed years of service Where and how long 36/12 - overseas -

Date of admission 18-6-19 Date of discharge 21/5/19 (dead)

Diagnosis Appendicitis Place of origin On board transport

CONDITION ON ADMISSION AND PROGRESS OF CASE Patient suffering from intestinal obstruction due to appendicular adhesions. Was operated on on Transport "Scandinavian" on May 14th for appendicitis. Appendix not removed. Drain put in.

On admission: bowels have not moved since 5 days, fecaloid vomiting pulse 104 Temp. 102 Resp. 22. Wound in side very ugly, c̄ very offensive odor. Wound reopened. Mass of adhesions around caecum c̄ large foul abscess behind caecum. Adhesions broken, part serous & muscular walls of caecum gangrened, the size of a quarter. Appendix felt in mass of adhesions;

Caecum brought to lips of operation incision, sutured & opened to give exit to faecal matter.

19/5/19 Patient passed a fair night. Feeling good, this am, too good in fact. Hiccoughs at times for periods of 5 minutes or more. Did not vomit since operation. S.S. Enema c̄ glycerine ℥ ij Bed. Russian oil ℥ iv Bed. Allowed iced milk.

20/5/19 Seems kind of better today. But still in very bad & critical condition. Allowed tea, coffee & cocoa. Same treatment. Artificial anus works satisfactorily.

21/5/19 Condition very poor, heart giving away. Artificial anus working very well.

Patient dies at 10.35 a.m.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

TREATMENT (Especially any specific or special form.)

CONDITION ON DISCHARGE, (and disposal made of case.)

Date 21/5/19

[signature]
Medical Officer i/c case.

M. F. B. 313a.
200M. 5-18.
1772-39-439.

1118

CLINICAL CHART.

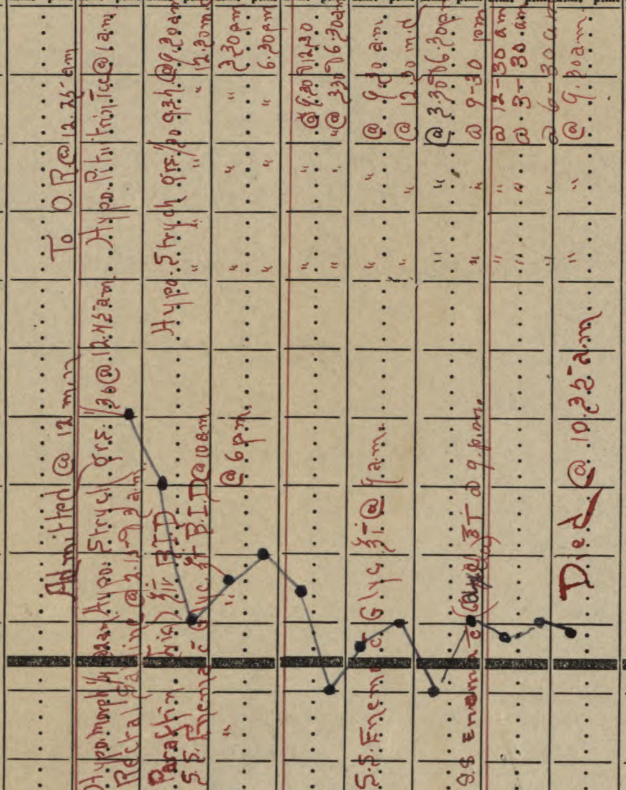
Corps: C. L. C. — Hospital Station: Inlue

No.: 5-01018 — Rank and Name: Pte. Jackson W. — Age: 40 — Service: 36/12

Disease: Appendicitis — Date of Admission: 18-5-19 — Date of Discharge: 21/5/19 — Result: Dead — Serial No. A. & D. Book: 261 A

Dates of Observation	18	19	20	21	22	23	24	25	26	27	28
Days of Disease		1	2	3	4	5	6	7	8	9	10

Temperature Fahrenheit (TIME a.m. p.m.): 107°, 106°, 105°, 104°, 103°, 102°, 101°, 100°, 99°, 98°, 97°



Pulse per Minute: 104, 108, 108, 108, 112, 104, 100, 108, 116, 124, 124, 136, 140, 140

Respirations per Minute: 22, 24, 26, 24, 22, 22, 20, 20, 24, 24, 22, 24, 26, 36

Motions:

M. F. B. 288.
50M.—10-18.
H. Q. 1772-39-513.

Signature: Geo. Clemmons Capt. In charge of case.

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class "A" No. .....

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 501018 (Rank) Pte

Name (in full) William JACKSON. enlisted in

the 1st Tunnelling Coy

CANADIAN EXPEDITIONARY FORCE at Haileybury on the 1st

day of November 19 18

HE served in France with 1st Tunnelling Coy

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age	39	Marks or Scars	
Height	5'. 7"		burn on left leg
Complexion	Dark		
Eyes	Grey		
Hair	Dark Brown		

Signature of Soldier

Issuing Officer

Date of Discharge

Rank

Date ..... 19 .....

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class "A" No. .....

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 501018 (Rank) Pte.

Name (in full) William Jackson enlisted in the 1st Tunnelling Company

CANADIAN EXPEDITIONARY FORCE at Shorncliffe on the 1st.

day of November 1915.

HE served in France with 1st Tun. Coy.

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age	39.	Marks or Scars	Burn on Left Leg
Height	5'. 7"		
Complexion	Dark.		
Eyes	Grey		
Hair	DK Brown.		

Signature of Soldier

Date of Discharge

Issuing Officer

Rank

Date ..... 19 .....

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

I

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

8192

War Service Badge
Class "A" No. ——

CERTIFIED TO BE A TRUE COPY
Canadian Record Office
Westminster House
7, Millbank

M. F. W. 54.
15M. 10-15.
H.Q. 1172-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps No. 1 Tunnelling Co., C. E. F.

Regimental No. 501018 Rank Sapper Name Jackson William C.E.F.

Enlisted (a) 1/11/15 Terms of Service (a) Ho Gw Service reckons from (a) 1/11/15

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) Tunnel

Report Date	Report From whom received	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.
		ARRIVED IN FRANCE	HAVRE 16.2.16		LNDG.RTNS.4366&37
16/3/16	36 Fld	Dilatation of myocardium	Tofs Mtr de Cats	17/3/16	a36 DCS 23. 11/4/16
10/4/16	3 Can Gen	D.A. sct.	3 Can Gen	10/4/16	W 3034
15/4/16	17 DRS	do	17 DRS	9/4/16	a36 DCS 35. 23/4/16
do	do	do	Tofs	9/4/16	
13/4/16	SCCS	do	SCCS	9/4/16	a36 DCS 37. 26/4/16
do	do	do	Tofs	10/4/16	
20/4/16	3 Can Gen	mydgia	Tofs Manlborg Dillard Camp	20/4/16	W3034
14/4/16	O C Unit	Sentenced to 10 days F.P. No 1 for Drunk when warned for duty in trenches 2 marched to Can M.C.O. on 6/4/16	Tofs	14/4/16	By roley P.T. Orders 10-7/5/16

(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 Date	Report From whom received	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.
9/5/16	CBD	Left for Mint in	Field	7/5/16	Nan Roll CBD. DCS 49
27/4/16	do	Taken on Strength	CBD	27/4/16	101/BD 15/5/16 3/298 DCS. 57 - 19/6/16
12/5/16	do	Regd Mint from	Hosp Field	7/5/16	B213 DCS. 65 - 27-5-16
18/3/16	Of Mid CCS	Bronchitis Adm	Of Mid CCS	17/3/16	A36 DCS 40 - 1/6/16
do	do	do Discgd	To Duty	25/3/16	
1/6/16	O C Mint	Sentenced to 5 days F Pho 1 for While on active Service, Drunk	Field	31/5/16	B2069 Pt-2 Orders 16 21-6-16
11/11/16	139 FA	Dental B.P. adm	139 FA	7/11/16	E1525 A36 DCS. 176 - 21/11/16
do	do	do Hosp	41 DRS		
11/11/16	41 DRS	do adm	41 DRS	do	E1527 A36 DCS 177 24/11/16
do	do	do Disch to Duty		9/11/16	
13/1/17	do	Dental adm	41 DRS	11/1/17	A36 Error DCS 192 25/1/17
do	do	do Disch to Duty		13/1/17	
20/1/17	O C Mint	Regd from Hosp.	Field	13/1/17	B213 DCS. 193 - 29/1/17
24/1/17	do	do	do	9/11/16	115/1274 do
10/2/17	do	Leave from 5-2-17 to 15-2-17.			B213 Pt 2 O. 12 - 20/2/17
3/3/17	do	Regd from Leave	Field	25/2/17	B213. DCS. 204 - 12/3/17
do	do	To Hosp	Not Stated	1/3/17	B213
4/3/17	7 Car Depot	V.D.G. adm	7 Car Depot	4/3/17	W3034

Army Form B. 103. Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps Sect II

Rank..... Surname..... Christian Name.....

Religion..... Age on Enlistment.....years.....months.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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

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

or Corps Trade and Rate.....

.....Signature of Officer.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked ...			
		Disembarked...			
7/3/17	39 Genl	[illegible] adm	39 Genl	7/3/17	W3034
8/3/17	7 Con Depot	VDG & PS. Tpn	do	6/3/17	W3034
10/3/17	139 Fa	Gonnehem adm	139 Fa	1/3/17	} a 36 DCS 204
do	do	do Tpn	17 Cl	2/3/17	21/3/17
2/4/17	CBD	[illegible]	CBD	2/4/17	NR
1/4/17	39 Genl	Forfeit F.A. & is placed under suppgs of pay at rate of 50¢ per any from 7/3/17 to 1/4/17	39 Genl	1/4/17	01643 (3271) C1-20. 26. 10/4/17
9/4/17	CBD	Supt for Unit	Field	9/4/17	NR
1/4/17	39 Genl	VDG Tpn	Reinforcement	1/4/17	W3034.
14/4/17	OC Unit	Reqd from Stores	Field	10/4/17	B213 DCS 214. 24-4-17

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

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
3/11/17	O.C.	W dead (Gas)	Not Stated	31/10/17	B213
1/11/17	1 ACCB	Gas Shell	Adm 1 ACCB Tran CCS	31/10/17	960
1/11/17	24 Genl	do	Adm 24 Genl	1/11/17	745
8/11/17	A.T. Pieter de Cannick	do (W.) Posted to C.E.R.D. Seaford	Adm A.T. Pieter de Cannick	8/11/17	W3083. (4277) P/-81. 14/11/17
17-11-17	C.E.R.D.	T.O.S. from 1st Tan Co	Seaford	8.11.17	Pt II O 252

C.B. Johnston
Lieut. for Lt.-Col., A.A.G.
Canadian Section, G.H.Q. 3rd Echelon, B.E.F.

A.P. Charles LIEUT.
FOR LT. COL. I/C RECORDS, C.C.M.F.

7/4/18 DISCHARGED FROM 3RD C.C.D. Seaford TO C.E.R.D. BN. PART II D.O. NO. 13 3 7 6 8

T.D.M. Hammond Capt
For C.C.
3rd Canadian Command Depot

R—122.

Rank Pte. Name JACKSON William Reg'l No. 501018

Unit No.1.Tunnelling Coy: If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Haileybury.1st Nov.1915 Place of Birth Cumberland.England.

Reg. Voter - Penrith & Cockermouth, Cumbld. Poll. Dist Letter - M - 1024. Real. Address - North Lodge Tallentine.

Name and Address, Next-of-Kin Mrs Mary McClennon Jackson ~~Mrs Hodgson~~, "North Lodge", ~~Tallantine, Cumberland, England.~~ Relationship ~~Mother~~ Wife

26 Blantyre Street, Glasgow. W. Auth:- 29-T 4/10.4.19

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E R.B No 15616
File R.L
Category O1 Gan

Discharge, Date and Place Reason Character

M X 12-2-21 ac.

For

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
C		Arrived in England		10 JAN 1916	Per S.S. Metagama. a F.B. 103. checked 3/3/16
12.1.16.	O/C. Tun. Coy.	Drunk in Barracks. 2 days C.B.	Denham Camp.	12.1.16.	Pt. II - 12.
15.5.16.	D.A.G	Arrived in	France	16.2.16.	Nor Roll
15.4.16	1 Tun. Co.	Dilation of Myocardium. #3 Can. Fld Amb.	France	17.3.16.	CL. a 32.
15.4.16	—"—	—"— To Nt Mid. Cas. Clear. Sta.	—"—	17.3.16.	CL. a 32.
28.4.16	—"—	D.A.H. #17 Div. Rest. Sta.	—"—	9.4.16	CL a 42. #8 Cas. Cle. Sta. 9.4.16. CL a 42.
18.4.16	—"—	D.A.H. Stt. To #3 Can. Gen. Hosp.	Boulogne.	10.4.16	CL. a 34.
29.4.16	—"—	Myalgia Stt. To Marlboro Det. Camp.	—"—	20.4.16	CL a 43
7-5-16	—"—	10 days F.P. #1 for "Found Drunk when warned for trenches + Insolence to a NCO"	In the Field	14-4-16	Pt II O # 10
15.5.16.	—"—	Discharged to Unit.	—"—	7.5.16.	CL a 53.
6.6.16.	—"—	Bronchitis. Nt Mid. Cas. Cle. Sta.	—"—	17.3.16	Disch to Duty. 25.3.16. CL a 69.
21.6.16	—"—	5 days F.P. No 1 for "Drunk"	—"—	31.5.16	P. II O. 16

Eng

501018 Jackson W.

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
C					
25.11.16	1 Tun Co.	Adm: #41 Div. Rest Sta	Field	7.11.16	Ch. A 191. Dental B B
28.11.16	-"-	Ex. 139. Fam Discharg. to duty	-"-	9.11.16	-"- 192 -"-
30.1.17.	-"-	Dental #41 Divisional Rest station.	-"-	11.1.17.	-"- 226.
-"-	-"-	-"- Discharged to duty	-"-	13.1.17.	-"- 226.
16.3.17	"	Admd No 39 Genl Hospital	Havre	7.3.17	CLA 253 NYD S
11.4.17	Ch 1st Tunn Co	Dis to Reift	Havre	1.4.17	Ch. A 268 VDG.
30.4.17	-"-	Reported from Base Rejoined Unit	Field Spr	10.4.17	-"- A 279 -"-
8.11.17	C.E.	Adm 24 Genl Hosp	Staples	1.11.17	CLA 58 PUO Severe
14.11.17	"	" 2nd West Gen Hosp	Manchester	9.11.17	CLB 63 Shell Gas Slt
14.11.17	1st C.T. Co	Invd Wounded & Posted to CERD	Field	8.11.17	CERD. T.O.S Pt II O 81 Pt II O 252 d/17.11.17
19.3.18	C.E.R.D	O/C to 3rd C.C.D.	Seaford "	15.3.18	" 78 & C.E.D # 69 d 22 3/18
16.5.18	3rd C.E.D.	Granted. Perm to Marry	-"- "	16.5.18	Pt II O. 114
7.6.18	C.E.R.D	Ceases O/C to 3rd C.C.D and S.O.S to C.F.C	-"- "	7.6.18	9 3 CCD 132 D 7 6/18 Pt II D.O. 156 T.O.S. BDC&C Pt II. O 138 D/10 6/18
11.6.18	BDC&C	On Comm to 140 Coy 53 Dist	S'dale Pte	10.6.18	" 139 attch @ 140 Coy. 53 Dist C&C. Pt II. O 258/14 6/18 Pte
6.12.18	"	Ceases on Com to 53 Dist	" "	5.12.18	" 291 Pt II O 52 d/13-12-18 53 Dist C&C
9-4-19	" "	On Comd to C.D.D. Buxton P.T.C	" "	9-4-19	-99
22-5-19	CDD Buxton	S O S to Canada	Buxton "	D13-I	10-5-19 — DO 119 10-5-19

Rank Pte. Name JACKSON William Reg'l No. 501018

Unit No.1.Tunnelling Coy: If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Haileybury.18th Nov.1915 Place of Birth Cumberland.England.

Name and Address, Next-of-Kin Mrs Hodgson, "North Lodge",

Tallantine,Cumberland,England. Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Reason Character

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	Balance	Remarks, Casualties, etc.
1.1.16	31.1.16	31	1.00	31 -	31	.10	3 10	10 -	~~44~~ 31 90			14 60			14 60	29 50	
1.2.16	29.2.16	29	1.00	29 -	29	.10	2 90	~~29 50~~	~~61 40~~			6 79			6 79	54 61	
Mar.1	31	31	1.00	31 -	31	.10	3 10		34 10						-	88 71	
				91 -			9 10	10 -	110 10			21 39			21 39	88 71	

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

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ENGLAND OR ~~CANADA.~~	SEPARATION ALLOWANCE.	* ENGLAND OR ~~CANADA.~~
EFFECTIVE DATE:-	1/6/18	EFFECTIVE DATE:-	May 16th 1918 1/9/18
AMOUNT:-	~~15~~ 00	AMOUNT:-	~~25~~ 30 cts

NAME:- JACKSON. W. E

NUMBER:- 501018.

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
MRS MARY McLENIVAN JACKSON (Wife)	
~~NURSES HOME~~ 26 Blantyre St. (1/19) ~~Royal INFIRMARY~~ Glasgow, Scotland ~~MANCHESTER~~	Same
Stopped Eff. 1-5-1919	
Can Add. Bank of Commerce Toronto.	
Sailed to Canada S.L. 13.	

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Spr.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 1st T. Co

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
253. 17 11-17	1-1-18		C & R D
138 Y. C. 18	1-7-18	23.7.18	Base Depot C.F.C. Eng

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS — UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~24/9~~ 3/19	1059	~~23d. £3-0-0~~	14 60				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis: to Canada 31 3/19 Auth: N.B. 5299 24 3/19 Sailed 2nd Base details Vol 2

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	B/F								516 48	~~4 30~~	
Apl 1/30	P.P.	33 —		A/R 179 12/4 3rd C&D	9 73					~~1 35~~	
				A/R 728. 29/4	4 84				534 88		
May	P.P.	33 34 10		A/R 985 15/5 ✓	14 60 / 9 73						
	~~S.C. from~~			✓ 1598 29/6 ✓	4 84						
				✓ 1262 21/8/18 ✓	94 33						
				a/9864 S.C. from May 16th to 31/5/18 £2-6-5					457 05	~~4 50~~	11 30
June	✓	34 10 / 33 —		B 45334	111 93		15				11 30
				Part I, 123 28.5.18 3rd C.C.D. Awd. F.P. No 2 from 14/5/18 to 25.5. :- AWARD 1 days F.P. No 2. FOR 1 days Pay R.N. 27.6.18		2 20				
				A/N B1221 13/6 C.E.	9 73				463 12		
		33 —			9 73	2 20	15 —				
July	"	34 10		D.92409 £3-1-8			15				
				A.M. B1622 10/9/18. RB.	19 47				462 75		
		34 10			19 47		15				
Aug.	"	34 10		C.7609 £3-1-8			15				
				C.707 £10-8-3							75
				A.M. 1584 12/8/18. 13-8-18.	14 60				467 25	~~4 50~~	
		34 10			14 60		15				
Sept	"	33		69615 £8-4-5			15				25
				A.R. E1955 140 boy 12-9-18	17 03				468 00		
		33 —			17 03		15				75 —
Oct	"	34 10		D69830 £8-4-5			15				25
				A.M. D2319. 1/10/18 140 boy	17 03				470 29		
		34 10			17 03		15				25
Nov	"	33		E 28230 £11-6-0			15				40
				A.M. E2754. 16/11.	17 03						
Dec	"	34 10		E8026 £9-4-11			15		P.T.O.		30
				A.M. B.5051. 13/12 R.D.	14 60						
		6/7 67 10			31 63		30				70

GRANTED PERMISSION TO MARRY - Effect 16/5/18 (Auth: O.C. 3rd C.C.D.)

12 L 114 16/5/18 CERO

NUMBER 501018 RANK Spr NAME JACKSON, W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	B/f	67 10			31 63		30		470 29		70
Jan	P P	34 10		F 34530 £9-4-11			15		494 86		30
		101 20			31 63		45				
Feb	P.P.	30 80		F.83629 £9-4-11			15				30
Mar	-	34 10		G.24423 £9-4-11			15				30 =
	Int: on Def. Pay.	43 59		G. 39017 £9. 4. 11			15		55835		30 =
				aR B. 10590 24/3/19 Bd	14 60		15		54375		90
		108 49			14 60		45 -				90 -
				endorsed on L.P.C. A.R. 1357 11/4/19 Buxton	9 85						
				endorsed on L.P.C. A.R. 2745 17/4/19 ✓	9 73						
				endorsed on L.P.C. A.R. 5133 6/5/19 ✓	9 73				514 44		
					29 31						
June				A 47720. Mary. Buxton 9. 4. 11			15		499 44		30
		- -			- -		15				30

Ending Apl-13 $08. 14/5/19

O/f. 1 5/19
Canada 31 3/19
26 3/19
6: 5437 5 26 3/19
N R 52992 4/19. Sdale MD2

Buxton Lond 15-00
LDCCr 5287

COMPILED BY
CHECKED BY

MARRIED OR SINGLE S.

PLACE OF BIRTH Cumberland. England.

NAME AND ADDRESS OF NEXT OF KIN Mrs. Hodgson
North Lodge. Tallantine. Cumberland England

RELATIONSHIP OF NEXT OF KIN Mother.

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. 501018. RANK Tun^r NAME Jackson. William.

IF IN PERMT. CORPS | WHAT UNIT | No 1 UNIT Tunnelling Co TRANSFERRED TO C.E.R.D. DATE 1.1.18 AUTHORITY M0263 17/11/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Haileybury. Ont. Can. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 1/11/15. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	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
Mar. 31	Forward from old Ledger.														110 10															21 39 88 71				
April.																																			
1-30	30	1^00	30	-	30	.10	3	-							33 -	7/4	3/4/16.							5 23						5 23 116 48				
May.																																			
1-31	31	1^00	31	-	31	.10	3	10							34 10			284	24/5/16.	CED 1859 24/4/16					5 11	4 36			11 -	20 47 130 11				Sent to 10 Days F.P.^n 1. P.II O.^n 10. 7/6/16.
June																																			
1-30	30	..	30	-	30	..	3	-							33 -			303	15/6/16						2 56				5 50	8 06 155 05				5 Days FP N° 1 P II O N° 16 21/6/16
JULY																																			
1-31	31	.	31	-	31	.	3	10							34 10	331	30/6/16	386	15/7/16					2 56	2 62				5 18 183 97				
AUG																																			
1-31	31	-	31	-	31	-	3	10							34 10	436	30/7	485	15/8					2 61	2 62				5 23 212 84				
SEPT																																			
1-30	30		30		30		3	-							33 -	592	31/8/16	584	11/9					2 62	2 61				5 23 240 61				
OCT																																			
1-31	31		31	-	31		3	10							34 10	639	23/9	686	17/10					2 62	2 62				5 24 269 47				
NOV																																			
1-30	30		30		30		3	-							33 -	741	29/10	827	12/11					2 62	2 62				5 24 297 23				
DEC																																			
1-31	31		31		31		3	10							34 10	901	26/11	973	6/12					2 61	11 33				13 94 317 39		180 00		
JAN																																			
1917 1-31	31		34	10											34 10	1044	27/12	1225	11/1					2 62	2 61				5 23 346 26		195 -		
FEB																1425	4/2							8 72											
1-28	28		30	80											30 80	1308	2/1					Bfm 23/1/17		2 62			14 60		25 94 351 12		210		
Mch																				ICK						73 00									
1-31	31		34	10											34 10					P270	4/2					24 33			97 33 287 89		225		

501018 Spr Jackson W

Date 1917	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.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
																																	225 00		
Apr 1-30	30	1 00/10	33	-											33	-														15 60	15 60	305 29		240 00		Hosp (V) 7/3/17 - 1/4/17 25 days pt II 26 14/4/17
May 1-31	31		34	10											34	10	100 140	13/4 19/4	244	7/5	681	25/4		262 261	267	698				1488	324 51		255 00		
June 1-30	30		33	-											33	-			310	5/6					268					268	357 83		270 00		
July 1-31	31		34	10											34	10																388 93		285 00		
Aug. 1-31	31		34	10											34	10	378	20/6			283	18/5		267		267				534	417 69		300 00		
Sept 1-30	30		33	00											33	00	618 561 487	27/7 17/7 10/7	708 775	10/8 22/8				267 625 357	268 267					1784	432 85		315 00		

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
	Bal F.	~~432 85~~							432 85	315	
Oct.				A.R. 889. 10/9/17. 1st T. Co.	2 68						
	Sap Pays.	34 10							466 95		
				A.R. 932. 22/9/17. 1st T. Co.	2 68				461 59		
		34 10			5 36				~~461 59~~		
Nov.				AR. 971 4/15/17 1 T Co.	3 07						
	Sap. pay	33 -		AR. 1008. 20/10/17. 1. T. Coy	4 46				520 66		
Dec.	Sap. pay	34 10									
		67 10			8 03						
Jan 18		34 10							554 76	375	
		34 10									
Feb		30 80							585 56	390	
		30 80									
				8318. 14 2/18 Epson	9 73						
	Pt. 11 Eq. 22 3/18 S. Furlough 15 3/18 27. 3-18. 12 days. 73.			CP. 5 3/18.	48 67						
		8 76		16423. 14 3/18 "	4 87						
				16550. 15 3/18.	48 67						
Mch.	RP	34 10			111 94						
		42 86			111 94				516 48	405 ~~420~~	

War Service Badge
Class "A" No. 32 Scandinavia 19-59
Hospital

No. of Dependents 1

CANADIAN DISCHARGE DEPOT, C.E.F.
BUXTON, DERBYSHIRE
APR 10 1919
FILE

M

DISPERSAL AREA J 2

RELIGION C of E

NEXT OF KIN Wife

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No.	501018.
2. Rank.	R10.
3. Name.	JACKSON. William
4. Unit.	C F C 1st Fun Com.
5 Date of Discharge	Place

War Service Badge
Class "A" No.

6 Reason for Discharge

TRADE Miner. OCCUPATIONAL GROUPS 18

SERVICE IN FRANCE 21 months CATEGORY B II

7. Authority.

8. Proposed Residence after Discharge

Cobalt.
~~Toronto~~ Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23). or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... 6

Checked by I.O..... 4

..... O.K.

Date..... 9.5.19.

B1

PART I. A.F.B. 179 Canada (Revised 1918). 100m. 16/11/18 D.493

Reserved for M.H.C.

Regt. No. 501018 Rank Pte. Surname Jackson Christian Name William

Unit or Corps—(a) Overseas from United Kingdom 1st Tunnelling Co C.E. (b) in United Kingdom 6.76.

Born at—Town Cockermouth County or Province Cumberland Country England

Date of Birth—Day 28 Month July Year 1879 Age 39 yrs. 5 months.

Joined at Haileybury Ont Date Oct 22nd 1915

Former trade or occupation Miner

Permanent Marks or any peculiarity that will serve for future identification :—

Scald on outside left leg

Height—feet 5 inches 8 Colour of eyes Grey

Signature of Soldier (*for identification purposes*) Pte W Jackson

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) Debility.

Disabilities Group (*b*)

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Following Gas - Shell.	France	Oct 1917
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(*i.*) As to Group (*a*) above ? no If yes, has Active Service aggravated it ?

(*ii.*) As to Group (*b*) above ? If yes, has Active Service aggravated it ?

(*iii.*) As to Group (*c*) above ? If yes, has Active Service aggravated it ?

4. Is the disability due to disease contracted or injuries received while on Active Service ?

(*i.*) As to Group (*a*) above ? Yes

(*ii.*) As to Group (*b*) above ?

(*iii.*) As to Group (*c*) above ?

PART I. (continued).

5. MEDICAL HISTORY. He states he was never ill Occupation - miner - Joined 1/11/15. Arrived England Jan 1916 - Went to France Feb 1916 Tunnelling Co. In hospital for sickness at Armentieres - went to hospital Returned to Unit and was gassed Oct 1917. was working on ground that had been gas shelled and when being evacuated was again gassed - Says he had no shortness of breath prior to Enlistment.
Documents MHS 24/4/16 to 7/5/16 DAH. 7/11/16 to 9/11/16 Dental 11/1/16 to 13/1/16 Dental. 9/11/17 to 15/3/16 Gassed - Conjunct. Lt Eye Medical Board 31/5/18 Cat B1

6. PRESENT CONDITION. Pain over praecordium - Pains in back shortness of breath - Pains in head - Cough every morning with expectoration - Feels better if he can expectorate freely - Feels weak and sweats.
Objective Skin fair Nourishment fair - Development fair - General condition somewhat debilitated. Chest negative - Expansion limited - Heart apex well within nipple line. Pulse regular - 74. after Exercise 106 after 1 min - 74
The symptoms are chiefly subjective. Occupation may have something to do with the symptoms -
Other systems negative.
His dental treatment was due to broken plates

7. OPERATION. (i.) Was one performed? No (ii.) If so, state what.

(iii.) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No.

(ii.) If so, describe.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) B11

(b) Invalid to Canada?

(c) Discharge from the Service as permanently unfit?

Date of Report 6/12/18 191...

Signed Geo. F. Seaborne Capt
Officer in medical charge of case.

Station Sunningdale

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

Not in hospital

{Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

Yes

11. Is the cause of the disability fully described in Part I. (2)? Yes
If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? / Aggravated? } No

(b) Misconduct of the Soldier { Caused? / Aggravated? } No

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none, 5%, 10%, 15%, 20%, etc.*) Fifteen Percent

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) all

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent? No
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? Six months

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applicable

17. Can the former trade or occupation be resumed? No

18. REMARKS:—

Authority for board a.g. telegram
9083 11. 11. 18

19. RECOMMENDATION:—

(a) Fit for duty? (*state category*) B II

(b) Invalid to Canada? —

(c) Discharge from Service as permanently unfit? —

Date of Board 6. 12. 18

Signatures of the Board: J. L. Cook Major Cave President.

Station Sunnyside

Approved Frederick H. John Cuff, A.D.M.S.
Major, C.A.M.C.

Dated at for A.D.M.S., Canadians, London Area Station

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA.
DEC 9 1918
13, BERNERS ST. LONDON, W.1

191

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his ~~Discharge in England.~~)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned William Jackson 501018 .....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

William Jackson
.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

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

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

Form R & O 6045
1238-130M-29/11.15.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at SEAFORD MAY 30 1918.

No. 501018 Rank BPR Name JACKSON W

Local Unit CE Overseas Unit CE Age 38

Examination held at 2nd CCD Seaford Sussex

DISABILITY
Overseas—Local.
(scratch one out)

SHORTNESS OF BREATH
(GASSED)

PRESENT CONDITION.

2/12 in France Invalided Nov 1918 Gassed
2 mos in 2nd CCD 7 wks at R.G. - No improv
Complains of pressing sens^n in Lo chest
2 Shortness of breath
3 General weakness
Exam P.R. regular & slow
Breath sounds clear
General condition poor

BOARD RECOMMENDS:—

1. Fit for Duty B1 not likely to be raised
2. Fit for duty after in category in 6 wks weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

MEDICAL DEPARTMENT.
3rd Canadian Command Depot.
1 JUN 1918
SEAFORD CAMP.
SUSSEX.

Signatures:— [signature] President.

Members [signature]

APPROVED

Dated at Seaford 31-5-18 1916. G Mojilvie Dowsley Maj. CAMC

Further remedial treatment not Recommended.

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

17-3-16
25-3-16 D.A.H
9
10-4-16
7-5-16

7-11-16 dentia
13-1-17

7-11-17 Shell gas
15-3-18

10-5-19 Acute
21-5-19 appendix
open

1-3-17 V.D.S.
1-4-17 + V.L.

Forms
I. 1237
12

Army Form I. 1237. 11

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	501018	Spr.	Jackson	W.
Year	Unit.		Age.	Service.
	C. E.		39	2 3/12

Station and Date. Disease Gas Poisoning Shell.

14-2-18 Dyspnoea on exertion & worse in damp weather. Cough - dry. following shell gas. General weakness - appetite good. R.Y. & F.X.
T.A. Carpenter Capt

Convalescent Hospital, Woodcote Park, Epsom.

20/2/18 C.O.

25.2.18 - Pain over abdomen - Rt side - urea Rept. ND.
T.A.C.

27.2.18 C.O.

28.2.18 Urine neg. Complains of pain in knees - some thickening about jt. but no grating, etc. CO

6.3.18 R.Y. ✱

11.3.18 D.I. T.A.C.

Glasgow

26. Blantyre St.
Sandyford.
Glasgow West.

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

(44502) Wt. W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	

MEDICAL CERTIFICATE BOOK.

Southall: Printed for H.M. Stationery Office by John Line & Sons, Ltd.

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

Army Book 172.

Extract from Admission and Discharge Book of Scandinavian *Hospital at* ..... *Date* 10-5-19

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.
1			501 118	Jackson W M.	40	3 6/12		11-5-19			Appendicial abscess.	Military Hosp Quebec

State whether the Patient

(a) Was transferred from an Expeditionary Force .....

(b) Has already been granted 10 days' furlough .....

(c) Was admitted whilst on short leave from Overseas .....

(d) Was admitted from a Home Service Unit .....

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

Disembarkation

SS. SCANDINAVIAN SAILING D.13

Embarked LIVERPOOL 10 5.1919

W J Grant Capt

Medical Officer in Charge.

Books 172 15

Forms I. 1237 12

Medical Officer:

Whether U.K. or Expeditionary Force: (If latter, state which).

Army Form I. 1237.

MEDICAL CASE SHEET.*

Ward:

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
F.C. 2265	501018	Spr	Jackson.	William

Year	Unit.	Age.	Service.
1917.	1st Canadian Tunnelling Co.	39	2 year. 7 8/12

Station and Date.

ROYAL INFIRMARY, MANCHESTER.

-9 NOV 1917

Transfer Class. Discharge

Disease

Date of Onset 31. x. 17. Gassed whilst mining in bottom

Had doses at Messines also about July: only a few days off work.

On the 31st. vomited & eyes affected

11/xi/17. Conjunctivitis & eye. Lit Heart: no adventitious sounds in lump.

25. cough tight.

2/xii better. 16/xii better

23/xii/ Fit for Red Cross

9-1-18 Transfd to Fairhope, Pendleton.

31.1.18

Feb 7 Fit for Discharge to Canadian Depot

Hurd Cpl

13.2.18. Transferred to Woodcote Park. Epsom

Next of kin: Mother Mrs Hodgson North Lodge, Tallantire, Cockermouth Cumberland.

Antitetanus Inocn.	
Units.	Date.

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

Wt. W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	

NOMINAL ROLL OF OTHER RANKS ADMITTED TO HOSPITAL FROM

S.S.SCANDINAVIAN

501018 Pte Jackson, William

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION SMITHS LAWN DATE 28/3/19

1. 1 (a) Unit C.F.C. (b) Regimental No. 50 1018 (c) Rank PTE

(d) Surname JACKSON (e) Christian name WILLIAM.

(f) Home address TORONTO. 2

(g) Next of Kin MARY JACKSON (h) Relationship WIFE

(i) Address of Next of Kin 26 BLANTYRE ST. GLASGOW. SCOT

2. Age last birthday 39 Date of birth JULY 28 1880

3. Enlistment, or Appointment (if an Officer) (a) Place COBALT ONT. (b) Date NOV 1. 1915

4. Personal description:

(a) Height 5' 7 (b) Weight 170 (stripped) (c) Complexion DARK

(d) Colour of hair DARK (e) Colour of eyes GREY (f) Identification marks, Scars, etc. SCALD ON LEFT LEG

5. Former trade or occupation MINER

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	144

	Periods	
	From	To
Canada	1-11-15	1-1-16
England	1-1-16	16-2-16
France or other theatres of War	16-2-16 / 22-10-17	22-10-17

7. Original disease, or injury GAS: (SHELL)

(a) Date of origin O.C.T. 1917 (b) Place of origin YPRES FRANCE

(c) Cause CONDITIONS OF SERVICE

M. F. B. 227.

400M.—11-18.
1778-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

GENERAL DEBILITY: general weakness
Easily tired out & short of breath: unable
to stand heavy work

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

OBJECTIVE:
Man of 39 years of age development fair
poorly nourished. General condition somewhat
debilitated. Loss of muscular power.
Expansion of chest somewhat limited examination
negative.
Heart rate: standing 84. After slight exercise 120
Recovers in 2½ minutes. 1st sound of fair muscular
quality.
SUBJECTIVE:
weakness: shortness of breath
Man states walking 3 miles: makes him very tired

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

10. (a) History (of the condition referred to in Section 9 (a).)

Man states: he was quite well & strong
till: October 1917 when he was shell gassed
at Ypres following which he was short of
breath; weak & felt generally collapsed
He was in Hospital 6 months following
Documentary: Casualty form: 3.11.17: gas shell
M.H.S. Manchester 9.11.17 = 13.2.18 gassed Heart mil
MCH - Epsom: 13.2.18 = 15/3/18 do
3rd CCP Seaford 31-3-18 B1 shortness of breath gassed
Man states condition due to Service

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

NHS
Camp Boulogne: 20-4-16: D O H
Can Base Depot: 7-6-16: do

(*c*) (Here give a description of wounds, scars and deformities.

vaccination scar left arm

11.—(*a*) Did the disabling condition have its origin before enlistment? no

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

n a

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? no

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 12 months

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

Hospital England & France 6 months

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

no

16. Can the former trade or occupation be resumed? Not immediately because of general weakness was a miner
(If not, briefly state why)

17. Recommendations

n a

D J Paulson Pte France
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned William Jackman have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of N A

W J Jackson Rank. Pte
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged.~~ (When not for discharge add special recommendation.)

Boarded for return to Canada Auth A.G. Tel 9083 11/11/18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

A. H. Newman Capt *President.*

PLACE Sunningdale — Eloy Capt CAMC } Members

DATE 25/3/19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....*President*

PLACE..... } Members

DATE.....

APPROVED BY B. C. Hardman Capt CAMC
Assistant Director of Medical Services.
DATE 25-3-19
Captain, C.A.M.C.
for A.D.M.S., Canadians, London Area.

APPROVED BY
Director-General of Medical Services.
DATE

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA
APR 28 1919
13. BERNERS ST. LONDON, W.1

DISTRICT LABORATORY, M.D. No. 5.

DIVISIONAL LABORATORY

URINE REPORT

Rank Pte Name Jackson No. 501018 Corps Tunnel Cy

Ward 2 4716 Date MAY 19 1919

Received from Routine Test.

~~Volume~~ "Clear" "Dk Amber"

Sp. Gr. 1025

Reaction Acid

Albumin Slight-trace

Blood

Glucose Nil

Bile —

× Deposit Few Hyaline Casts

Examined by Harry Moore [signature]

O ½ LABORATORY

M. F. W. 2537.

20m.—1-19.

1772-39-1314.

Army Form B. 103. III Regimental Number 501018

Casualty Form—Active Service.

Regiment or Corps

Rank Spr Surname Jackson Christian Name W

Religion Age on Enlistment years months.

Enlisted (a) Terms of Service (a) Service reckons from (a)

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

Extended { } Re-engaged { } Qualification (b)

or Corps Trade and Rate

Signature of Officer.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked			
		Disembarked			
19.3-18	C.E.R.D.	Disch. from C.C.H Epsom			
		On cmd to 3rd CCD	Seaford	15-3-18	Pt II DO #78
7-6-18	C.E.R.D	Ceases 3rd CCD. S.O.S			
		on transfer to Can	Seaford	7-6-18	Pt II DO #156
		Forestry Corps Sunningdale			
		[signature]			
					Lieut C.E. for O.C. CERD
10.6.18		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale		7.6.18	Pt. 11. D.O. 138
		on transfer from CERD.			
11.6.18	O.C. C.L.C	On Command to Co 140	Do	10.6.18	D.O. 139
		Dist 53.	Inwack		Maj for O.C. C.L.C

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

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B 103/4. E./354.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
14.6.18	D.H.53.	Attached at Coy 140	Egham	10 6 18	Pt 2 D.O. 25
13-12-18	"	Ceases to be attached @ 140 Co on return to BD	"	7-12-18	Pt II D.O. 52
					Capt for Adj. Dist 53. C.F.C.
6.12.18	O.C. C.F.C.	Returned from Command to 140 Co Dist 53.	S'dale	5.12.18	Pt II D.O. 291

[signature] Lt. & A/Adjt.
For O.C. Base Depot, Canadian Forestry Corps.

B.D.C.F.C. S.O.S. BASE DEPOT C.F.C. SUNNINGDALE Pt. II D.O.
on posting to
Lt. for O.C. B.D.C.F.C.

10/4/19 Attached C.D.D. Buxton for return to Canada Part II Order No. 85
10 MAY 1919 Ceases to be attached C.D.D. Buxton on embarkation for Canada.

[signature] Lt. for Lt. Col.
Commanding Canadian Discharge Depot.

DISEMBARKED S.S. SCANDINAVIAN
MAY, 20, 1919

R. L. Shortell Lt & Adj
D5 - T.A.B.S.

Forms I. 1237 / 14

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	501 018	Pte	Jackson	W

Year.	Unit.	Age.	Service.
1919			

Station and Date.
SS. Scandinavian

Disease Appendicitis with pus.
Gives a history* of having had several attacks,
First seen by S.M.O. Saturday night
May 10th 10 P.M. also by Capt Smith.
Patient was admitted to hospital.
temp. 102. pulse 110. Patient was kept
quiet. enema given, with fairly
good results. On palpation mass,
felt in Rt Iliac fossa, quite tender
to the touch. May 11th temp 103.5 pulse
115. Patient suffering a good deal.
May 12. Patient somewhat improved,
temp. 101. pulse 110. Resting somewhat
better. Still suffering a good deal.
May 13. temp. 100. Pulse 108. Still
suffering a good deal.
May 14. temp. 102.4 pulse 118. quite
restless. Suffering a good deal pain
May 14. 5 P.M. operated on, and
appendicial abscess drained. bowel
very much congested. and ~~being~~ bound
~~as~~ down by adhesions. Some adhesions
brokened down ~~but~~ bowel being very
easily torn, ~~but to~~ Closed wound with
drainage.* Pte kept in Fowler's position May 15. Pte feeling much
better temp. 100. pulse 110, Suffering
very little, May 16th temp. 96.4 pulse
118. and somewhat thereby. External heat
applied, Stry. 1/30 q.q.h. Saline by bowel

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

(A 1014) W3081/P/1296 3,450m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420)

[P.T.O.

Station and Date.	
	May. 16. 9. PM. Pte condition much the same.
	May. 17. temp. 99.4 pulse 98. Pte feeling fairly well. Had good night to rest.
	May. 17. temp 100. pulse 98. troubled a good deal with hiccough. Evening given some flatus passed. No faeces. Vomiting.
Calomel 2 grs. & May Eng. given	May 18. temp. 99.4 Pulse 100. Still Vomiting at times. Had a bad night. No passage by bowel.
	M W Smith Capt MO
Quebec Military Hospital 19/5/19	Operated on on admission. A abscess Mrs. Brown, retro-caecal abscess drained, artificial anus performed.
20/5/19	Same condition.
21/5/19	Died at 10.35 a.m. [illegible] Capt

SS. SCANDINAVIAN SAILING D. 1919
Embarked LIVERPOOL 10.5.1919

Forwarded by me this 2nd day of December, 1918, to.
Officer i/c Estates Branch, London.

A W Foddy
Capt. & Paymaster.
No. 53, District, Canadian Forestry Corps.
M.

20

Perforated sheet for Will from Pay Book of Reg.

No. 501018

Name Spr. Jackson William

Unit Othadain Engineers

Military Will

In the event of my death I give the whole of my property & effects to my wife Mrs Mary Mc Lennan Jackson Nurses Home. Royal Infirmary Manchester. England

Signature Spr. Jackson William 501018

Rank and Regt. Sapper. Canadian Engineers

Date June 5th 1918

REGISTERED.
WILLS SECTION
4 DEC 1918
ESTATES.

ESTATES REGISTRY
MAILING
DEPARTMENT
— IN —
DEC 4 1918
OXFORD ST.
LONDON, W. 1
CANADA.