

ATTESTATION PAPER.

No. 841204

Folio. 17

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Kenny
- 1a. What are your Christian names?..... James
- 1b. What is your present address?..... 82 de Villiers St., Cote St Paul, Montreal
- 2. In what Town, Township or Parish, and in what Country were you born?..... County Mayo, Ireland
- 3. What is the name of your next-of-kin?..... Mrs Maud Alice Kenny
- 4. What is the address of your next-of-kin?..... 228 Robart St., Cote St Paul
- 4a. What is the relationship of your next-of-kin?..... wife
- 5. What is the date of your birth?..... 15th Sept 1879
- 6. What is your Trade or Calling?..... Tanner
- 7. Are you married?..... yes, seven children, 3 boys, 4 girls
- 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 } yes
- CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Kenny, 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.

James Kenny (Signature of Recruit)

Date January 20th 191 6 *W. J. [Signature]* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Kenny, 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.

James Kenny (Signature of Recruit)

Date January 20th 191 6 *W. J. [Signature]* (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 Montreal this 20th day of January 191 6

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

44472
23/2/17
Dopke

2-MAR 1916

Description of James Kenny on Enlistment.

Apparent Age 36 years 4 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 8 3/4 ins.

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 3 1/2 ins.

Complexion ruddy
 Eyes blue
 Hair grey

*mole right groin
 mole right arm*

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date January 20th 1918

Place Montreal

E. J. Hurlbut
Capt. A. M. C.
 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.

James Kenny 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.

W. H. Magee Lt. (Signature of Officer)
 O. C., 148th "Overseas" Battn. C. E. F.

Date January 21st 1918

C.E.F. REGIMENTAL DOCUMENTS

VAR SERVICE RECORDS D.V.A.

KENNY JAMES

841204

148TH O.S. BN 05861

M.U.



PERSONNEL
RECORDS CENTRE
CENTRE des
DOCUMENTS du PERSONNEL

BOX
5099



841204

I.D. number
No. d'identification

KENNY

Surname
Nom de famille

JAMES

Given names
Prénoms

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

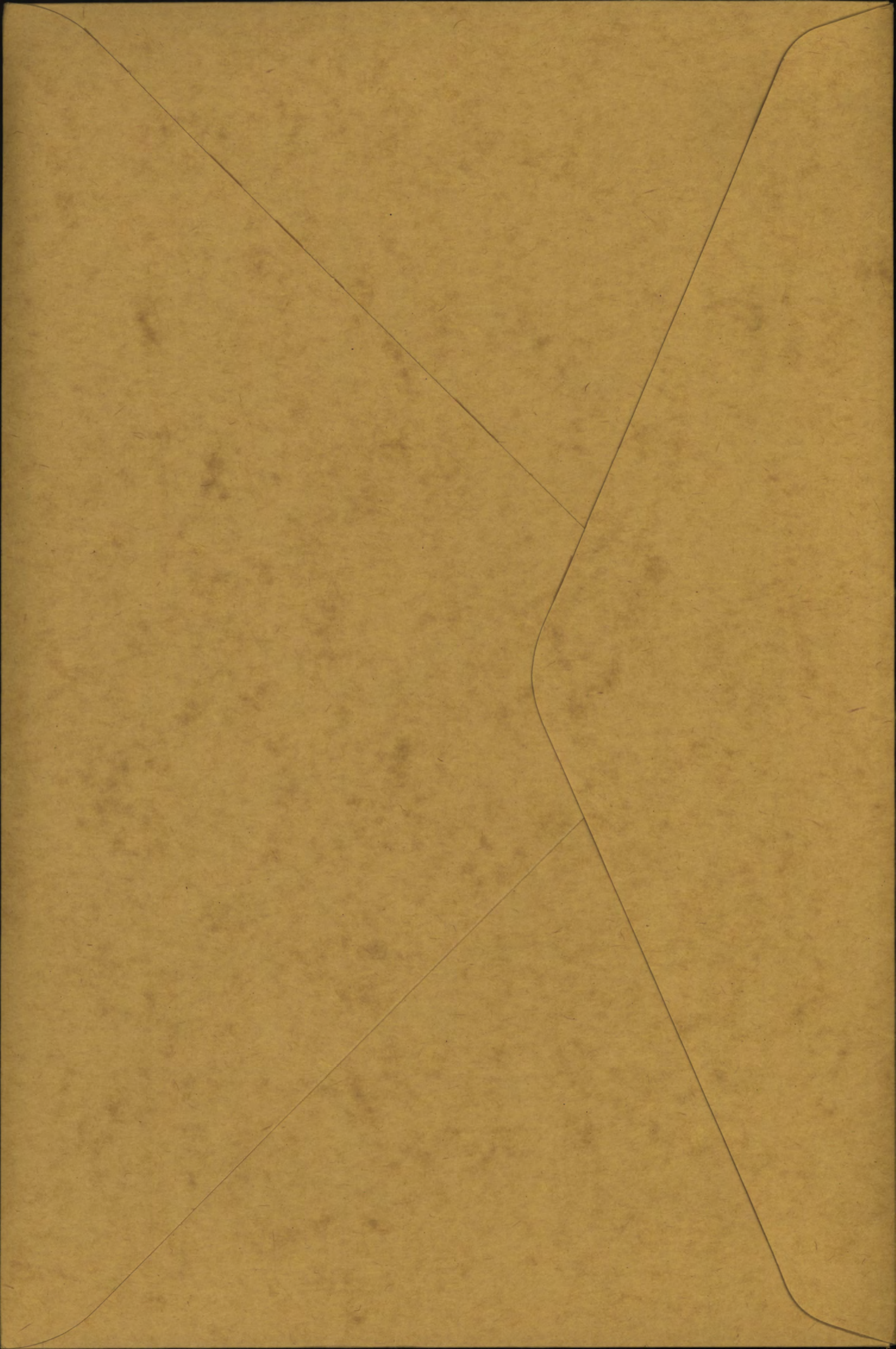
PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location

Lieu

5099

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »



OK.

Sm!

13

Number 841204

Rank Pte.

Surname KENN Y

Christian Name James

Units 24th Bn Gas Coy Theatre of War France

Date of Service 28-11-16

Remarks 395 Fullum St.

Latest Address ~~228 Poppart St.~~

Montreal

Roll No. B Page 16056 Inc.

200m. - 2-21. W.

Boy # 5099

Next of kin

Address on leave

Address on discharge

Transportation issued

Yes
No

Date

Character on
discharge

Previous occupation

Date and place of
enlistment

Diagnosis

Date of Medical
Boards

Date

Remarks

Date

DEPT. REGN. A. 263219
DEC 6 1929

*—Name will be given in full; surname first.

SOS. M. U. 30/9/17
M84

suppcard destroyed 17-2-21.

File #649-K-675

KENNY ✓ Pte. Jas. ✓ #841204 ✓

148th Bn. ^{form.} 24th Bn.

M & D
Ser. #
986240.

Widow

Mrs. James Kenny
395 Fullum St.
Montreal, Que.

P & S

"

"

Mem X

"

"

Canada

48855

Notelig forstar

m.f.

*U.M.
B.M. Desq. 2/2/21(w) e. 45584.*

B.

JUL 12 1923

Scroll Disp.

Reqn. No.

56605

Plaque Disp.

24-1-25

Reqn. No.

1466

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

NAME *Kenny J.*
RANK AND CORPS *Otc.*

REGT'L NO *841204*

H. Q. FILE NO. 649-

24th Bn.

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

T 337-18-6-17

*Sailed from Liverpool for Canada
per the Hosp ship "Araguay"
on June 11th. 1917. Debilitated*

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 445	14 Gen. Wimersey	6-2-17	pleurisy sev
B 295	Mil. Chatham	9-2-17	Pleurisy
B. 327	Can. Convt. Woodcote Hk	24-3-17	Pleurisy
B 392	Disch. Epson	12-6-17	Pleurisy
175.	M.H.C.C. Montreal	20-7-17	T.O.S. "A" unit. S.N.C. 7.
209	" " " " "	17-8-17	G. N. Lt. to C.I.M.S. Cl 2.
213 (2)	" " " " "	22-8-17	Trans. from L.V. M.S. to H.Q.
212	" " " " "	22-8-17	H.Q. "A" unit (in C.I.M.S. Cl 2-508)
240 (4)	" " " " "	30-9-17	Disch from H.M.S.
			H.Q. "A" Unit. Cl 3.
			very good.

SURNAME.

Kenny

(849-J-675)

CARD NO.

CHRISTIAN NAMES

James

REGL. No.

841204

RANK

Pte.

UNIT

148th

Batt.

FORMER CORPS

Inf.

FOLL. *108 Dis. 30/9/17. 4.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Kenny, Mrs, Maud, Alice

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

~~*82 de Villiers St. Cote St Paul*~~
+ Montreal, P.Q., Can

228 Poopart St. (H.Q. 54-21-38-1 May 3/16)

COUNTRY OF BIRTH

Ireland, Co Mayo

DATE

PLACE OF ATTESTATION

Montreal

DATE

20/1/16

*Sailed from Halifax on S.S. "Racina" 26-9-16
Emb. 11-6-17.*

*361
26*

Returned to Canada per S.S. Uruguay. June 11/17
add. 337

MARRIED *yes,*

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

No. 841204 RANK Pte.

NAME Kenney James.

T. O. S. 20-1-16

UNIT

14 8th. Battalion C. C. F.

(0017 of 21-1-16)

M. D. 4

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Jan. 20	1916. Jan. 31	✓		
Feb.		✓		
Mar.		✓		
Apr.		✓		
May		✓		
June		✓		
July		✓		
Aug.		✓		
Sept.		✓		

UNIT SAILED
SEP 26 1916



Name **KENNY. James.** Rank **Pte.**Reg. No. **841204.**Unit **24th. Battalion.**Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
6-2-17.	GH. Wimereux.	Pleurisy R Sev.	A445.			
9-2-17.	Mil. Hosp. Chatham.	"	B295.			
24-3-17.	Can CH. Epsom.	"	B327.			
19.5.17 12-6-17	<i>Still here</i> Discharged	do	B392			

Surname **Kenny** Christian Name or Names **J.** Reg. No. **841204**

Rank **Pte.** Unit **24th Bn.** Co. Troop Batty.

Hospital **14 General Wimereux** Date of Admission **6-2-17.**

Transferred *mil. Hosp. Chatham.* Hosp. **9-2-17**

Can Con Woodcote Park. Hosp. **24. 3. 17**

Hosp.

Hosp.

Diagnosis **Pleurisy.**

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Disc. 12-6-17 Date

C.L. 15-2-17 A445

" 17-2-17 B295

REMARKS

" 29. 3. 17 B327 To Canada per HS Araguaya
" 18-6-17 B392 from Liverpool. 11-6-17.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

66680

Perforated sheet for Will from Pay Book of Reg.

No. 841204

Name James Kenny

Unit A. Co 148th Battl. C.C. 1327

Military Will.

In the event of my death
I Bequeath to my wife
Maud Alice Bell Kenny
everything belonging
to me

Signature James Kenny

Rank and Regt. Pvt. 148th Battl.

Date November 25/1916

228 Parfait St.
Mont

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

44472
92 23/17
M. F. W. 54. (A. F. B. 103.)
250 M.—1-16.
H. Q. 2772-39-920.

Casualty Form—Active Service.

148TH "OVERSEAS" BATTALION, C.E.F.

Unit, Regiment or Corps

Regimental No. 841204 Rank Private Name Kenny, James.

C. E. F.

Enlisted (a) 20/1/16 Terms of Service (a) War & 6 mos. Service reckons from (a) 20/1/16

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

Extended _____ Re-engaged _____ Qualification (b) Tanner

NOTIFIED CORRECT.

NOV 25 1916

8 - MAX RECORD

6 DEC 1916
CAN. RECORDS, LONDON

1890 C.B.D.
1915 B.H.
1915-17 (Bols)

Report Date	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.
		Embarked Canada	Halifax	27-9-16	
		Disembarked England	Liverpool	6-10-16	
		Transferred to 24th Bn Proceeded overseas for service with 24 th Bn	WITLEY CAMP.	28/11/16	D. O. Pt. II No <u>251</u> <u>P. J. Ouse Capt.</u> ADJUTANT, 148TH BN. CANADIAN INFANTRY.
29.11.16.	C.B.D.	Recief - ex 148 th Bn	C. B. D.	29.11.16.	N.R. P.F. II. O. 85. 12 ¹² / ₁₆
14.12.16.	C.B.D.	Left to join 24 th Batt.	Field.	14.12.16.	
22-12-16	24 B Bn	Joined unit	"	17-12-16	B 213 - 268 266 ^d - 4/1/17
2-2-17	" "	Pleurisy	"	"	" 278 ^d - 13/2/17
8-2-17	14 Genl.	"	Not stated	30-1-17	B 213 " 278 ^d - 13/2/17
6-2-17	" "	" (Rt)	Jan Breydd.	8-2-17	W 3083 - 7355 - 920. 75 ^d - 20/2/17
			14 Genl	6-2-17	W 3034
			<u>J. Whogan</u>		Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

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

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
23.2.17	b.l.a.l.	T.O.S.	Hastings	9.2.17	P1 π 0 #92
11.3.17	D.S.	S.O.S. to 1st Q.R.D.	D.S.	10.3.17	#117
14.3.17	1st Q.R.D.	Jobs from b.l.a.l.	Shoreham	10.3.17	#6
					L. Curran Lieut. for Colonel i/c Records, C.O.M.F.

a *rs'*

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins 148TH "OVERSEAS" BATTALION, C.E.F.

(2) Regimental Number 841204

(3) Full Name of Soldier KENNY.. James

(4) Place of Birth County Mayo, Ireland.

(5) Are you married, or not? Yes

(6) If married, state,
(a) Full name of your wife Mrs. Maud Alice Kenny (Bell)

(b) Present Postal Address 82 Poupert St. Cote St. Paul Que.

(7) Are you a widower?

(8) Have you any children? Yes

If so, give number of boys and girls Three boys, Four girls

Also their names and ages.....

Maud 16 yrs
John 15 "
Alice 12 "
Emily 11 "
Harry 8 "
Edith 5 1/2 "
Frank 3 "

(9) Is your Father alive? No

If so, state name and address _____

(10) Is your Mother alive? No

If so, state name and address _____

(11) If your Mother is a widow _____

Are you her sole support, or not? _____

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

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

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

(15) Are you insured? Yes

If so, in what Company? _____

Have you made arrangements for payment of your Insurance premium? _____

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

Date AUG 4 1916

[Signature]
O. G. [Signature] Commanding. Lt. Col. B. E. F.

Medical Examination upon leaving the Service

Of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Private Name James Surname Kenny

Unit or corps 24th. Battalion (If a soldier) Regtl. No. 641904

Born at Counnaught Ireland on, (date) September 15th, 1877

Signature (for identification) James Kenny

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 125

Colour of eyes

lbs.

Bleu

Height

Identification Marks

5 ft 9 in.

Linear scar left forearm

2. NUTRITION AND DIATHESIS?

Fair

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

Negative

No

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

Influenza in earlier life, Bilateral Pulmonary Tuberculosis

5. HEART? Negative

Abnormal Sounds? No

Abnormal Size? No

Pulse Rate?

Intermittence or Irregularity? No

78

Muscular Tone?

Good

6. ARTERIES.—(a) Any hardening or nodulation? None

(b) Blood Pressure. S. 120, D. 85, P.P. 35.

7. DIGESTIVE SYSTEM? Condition of teeth and tonsils to be included).

Negative

Good teeth. Tonsils negative.

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1015

Reaction? Alkaline

Albumen? 0

Sugar? 0

9. SKIN, MIDDLE EAR, EYE

or any other part?

Negative.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

11-8-18-8-17

11. Opinion as to the health and physical condition of the one examined?

Unfit for service

Examined at Sta. Acathe soldiers Signed

W. H. Keefe

M.O.

Date August 21st. 1917 Signed

Gas Tenny

M.O.

Signature note of soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

M.F.W. 129

7-17.

LTR

Rank _____ Name **KENNY, James** Reg'l No. **841204**
 Unit **148th, Bn.** If in perm. Corps, }
 What Unit? }

Married or Single **Married.**

Place and Date of Enlistment **Montreal, January, 20th, 1916.** Place of Birth **County Mayo, Ireland.**

Name and Address, Next-of-Kin **Mrs Maud Alice Kenny.-**
228 Roupart St, Cote, St Paul, Montreal,- Relationship **Wife.**

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

N/E. R.B. No. **4178**
 File R.L. _____
 Category **MUCAN**

Discharge, Date and Place _____ Reason **119** Character _____

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
	ARRIVED	IN ENGLAND	S LACONIA	6 10 16	D. B. M.
28. 11. 16	148th Bn.	<i>Trans. to 24th Bn. Overseas.</i>	<i>Widley</i>	<i>28. 11. 16</i>	<i>Part II, D.O. # 251</i>
12. 12. 16	<i>24th Bn.</i>	Taken on strength.	<i>Field</i>	<i>29. 11. 16</i>	<i>" " 85.</i>
15. 2. 17	<i>"</i>	<i>Adm in Genl. Hosp</i>	<i>Winneux</i>	<i>6. 2. 17</i>	<i>CL A445 Pleurisy R. Ser.</i>
20-2-17	<i>"</i>	<i>Trans to 66th Bn</i>	<i>Shoreham</i>	<i>8-2-17</i>	<i>Part II 015. S.</i>
17-2-17	<i>"</i>	<i>Adm. Military Hosp.</i>	<i>Chatham</i>	<i>9-2-17</i>	<i>CL #295. Pleurisy</i>
23. 2. 17	COAC	Taken on strength.	Hastings	9. 2. 17	PT 20 92
11-3. 17.	C.C.A.C.	<i>S. O. S. on transfer to</i>	<i>Hastings</i>	<i>10. 3. 17</i>	<i>Pt. II D. O. 117.</i>
		<i>1st Dubuque Regiment</i>			
14-3-17	Ist QueRD	T O S From CCAC	Shoreham	10-3-17	PT 2 0 NC6

A.F.B. 103
 4 DEC 1917

MAX
16/2/21/18

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
29-8-17	24 th M	Trans Can Com. Has Nicot RR, Epsom		24-8-17	Co. 13327. Pleurisy
18.6.17	"	Dis " " " " "	"	12.6.17	- 392 "
23.6.17	1 st QRD	POF on proceeding to Canada for discharge	Shoreham	20.6.17 11.6.17	80.96 Amended by Do 156 of 27/6/18.
	Dis Depot	To Convalescent Home	9 th D No 1 Montreal	23-6-17	NR 304.

Emitted

Register No. *Of 422*

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *9946-f-2*

Regt'l No. *841204* Name *James Kenney*
(Christian Name) (Surname)
Unit *24 Battr* Rank *Pte* Date of enlistment *20-1-16*
Date of casualty *27-4-19* B.P.C. File No. *15054*
Was service performed overseas? *Yes*

DEPENDENT

Name *Mrs Maud A B Kenney* Relationship *Widow*
Address *395 Fullum St*
Montreal
Que

Amount of Special Pension Bonus \$ *80* Abstracted by *D. Parlow*

Eligible for Gratuity *Not Eligible* \$ *c*

Less amount of Special Pension Bonus paid \$

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

Total deductions \$ *c*

Balance due \$ *c* *net*

Cheque No. Date issued

REMARKS *w.s.g. paid*

Clerk *ATMial*

Audited by
Date

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

SEPARATION ALLOWANCE

Name *Maud A. Kenny,*Name of Soldier *Kenny, James*Address ~~82 de Villiers St.~~Regtl. No. *841204*~~82 de Villiers St.~~ *Cote St Paul.*Rank *Pte*~~Poupart St.~~ *Montreal. Que*Corps *149th Batt.* *A Unit M.A.C.B.* *17* *Serial file 9946-7-2*Relation to Soldier *228* *Poupart St.*

To what Corps belonging

wife, child or mother

Wife

when called out

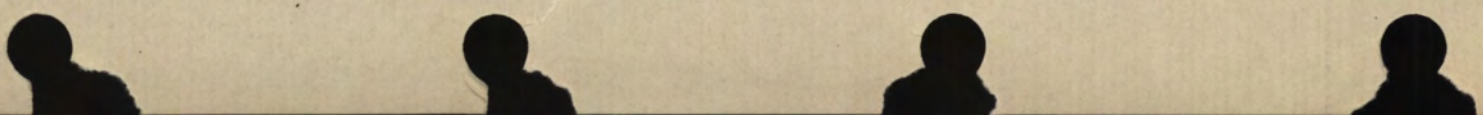
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<i>078169</i>	<i>20 - 20</i>	

COPIES
FOR
3
CASUALTIES.

ACCOUNT CLOSED
DATE..... PER... *W*

Handwritten text, possibly a signature or date, including the word "Received" and the date "1870".



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

Maud A. Kenny ^{Wife}
Wife
PAYMENTS.

Name of Soldier Kenny, James
641204 *Rte*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	02015	20 -	20
May		L-6629	20	20
June		<i>28</i> 57981	20	20
July		E 8449	20	20
Aug.		B12368	20	<i>28</i> Remailed 7-9-16 & 26.9.16
Sept.		T16774	20	20
Oct.		E 19342	20	20
Nov.		Q 21544	20	20
Dec.		K25497	20	20
Jan.	1917	<i>17975</i>	20	20
Feb.		P 32533	20	20
March		Q 38458	20	20
April		Q 1626	20	20
May		P 4901	20	20
June		R 48614	20	20
July		P 11774	20	20
Aug.			20	20
Sept.			20	20
Oct.			20	20
Nov.			20	20
Dec.			20	20
Jan.	1918		20	20
Feb.			20	20
March			20	20
April			20	20
May			20	20
June			20	20
July			20	20

↑ 320

340

Dis. 30/9/17 (M.U.) # 487mk
19/9/17 1/10/17

Ret'd per Ar. Agony
Date 11/6/17 F. X. 23/8/17
Clerk E. E.

ACCOUNT CLOSED
DATE PER W

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

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

*Pte John Kenny
 47689
 56 Bn
 wife Mrs Jean Kenny
 Downington Mill
 Patne Dist.*

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

E

To Whom *Mrs Maud Alice ^KTenny ^{Wife}* By Whom Assigned *^KTenny James*
 Address *228 Bonaparte St* Regtl. No. *PH1204*
Cote St Paul Rank *Pte*
Montreal Que. Corps *148 O.S. Batt. "A"*
 Rate *8.25⁰⁰* *OCT 1 - 1916*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

COPIED FOR 2 CASUALTIES.

Ac closed.

20

10

10

10

10

10

10

10

10

10

10



ASSIGNED PAY

Sheet No. 2.

Mrs Maud Alice Henry

OVERSEAS CONTINGENTS

Name of Soldier

Henry James

PAYMENTS.

7841204 Plt 148 C.I. Batt "A"

L. L. Job 4503. - Req. 6332.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>820⁰⁰</i>	<i>OCT 1 - 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>W 25905</i>	<i>20</i>	
Nov.		<i>N 28900</i>	<i>20</i>	
Dec.		<i>134517</i>	<i>20</i>	
Jan.	1917	<i>138996</i>	<i>20</i>	<i>Overpayment of 40⁰⁰ for June & July recovered by C. P. S.M.C 11-8-17</i>
Feb.		<i>J 45334</i>	<i>20</i>	
March		<i>C 51442</i>	<i>20</i>	<i>20 P</i>
April		<i>Z 2072</i>	<i>20</i>	<i>20.8</i>
May		<i>Z 9327</i>	<i>20</i>	
June		<i>Z 17493</i>	<i>20</i>	<i>Mc</i>
July		<i>Z 25130</i>	<i>20</i>	<i>c</i>
Aug.				
Sept.			<i>200⁰⁰</i>	<i>A/c Closed 31-7-17.</i>
Oct.				<i>Ret'd per Praguay.</i>
Nov.				<i>Date 11.6.17 F. X 20.7.17.</i>
Dec.				<i>S.M.C.</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

XP

1/1

M.C.

[Handwritten signature]

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

POST DISCHARGE PAY OFFICE

27728-553

Three months pay and allowances after discharge.

9946-J-8.

Name **Kenny, James**
Surname

Christian Name

Regimental Number **841204**

Rank **Pte.**

Address (in full) **228 Poupart St.,**

Unit **24th Bn.**

Montreal, Que.

Original Unit

District where paid **M.D.4.**

Date of Discharge **30-9-17.**

P. D. P. Filing Number **3-39-4.**

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

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
160 10	765	8-11-17	53 00	755	13-12-17	53 00	769	21-1-18	54 10		160 10
	<i>2579.151-94173-23</i>	<i>31.3.19</i>	<i>70 00</i>								
	<i>u u 9.417524</i>	<i>31.3.19</i>	<i>30 00</i>								

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

Remarks:

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. OF DAYS	RATE	AMOUNT	No. OF DAYS	RATE	AMOUNT				No. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	REP. ALLG. ENG.
-------	-------------	-------	-------	-------------	-------	-------	-------	-------	---------	--------------	-----------------

OCT 1917	Balance FORWARD								6739		
"	DR. 21R. 418 20/4/17 LCH Spad				9 73						
"	" 796 9/10/17				48 67				899		
					58 40						
	Balance transferred to N. E. Branch.								NIL		

This space to be for numbers

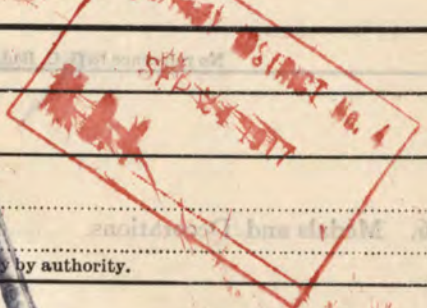
Class 3093



Proceedings on Discharge.

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

No.	841204
Rank	Private
Surname	Kenny
Christian Name	James
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	148th Bn.
Date of Discharge	30/9/17.
Place of Discharge	Montreal.



1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....	years.....	months.....	Descriptive Marks
38			
Height.....	5	feet.....	
		8 ³	
		inches.....	Mole right groin
Complexion	Ruddy		Mole right arm.
Eyes	Blue		Linear scar left forearm.
Hair	Grey		
Trade	Tannery Supt.		
Intended place of residence	228, Poupard Street, Montreal.		
(To be given as fully as practicable.)			

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

due to **Pulmonary Tuberculosis.**

Authority H.Q. 4D. 22-K-50 Dated Sept. 5th/1917.

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

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

Very Good

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

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

By M. A. B.

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

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

*W. A. S. Camp
18-3-19*

*Disc. 2.10.17
3-10-17*

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Montreal..... (Signature of Soldier.)

(Date) 30/9/17..... (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

Total 1 years 250 days.

11. Confirmation of Discharge.

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

(Place) Montreal.....

(Date) SEP 19 1917.....

(Signature) G. E. Hall MAJOR



O. C. "A" Unit Military Hospitals Commissions Comm.

Reservations referred to at Para. 8.

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

List of Discharge Documents.

None.

James Henry

Reg. Conduct Sheet	Militia Form B. 263	Attestation Paper	Militia Form B. 255
Squadron Battery Company	Conduct Sheet	Proceedings on Discharge	B. 218
Copies of Convictions by C. P.	in MS		
Med. Hist. Sheet	Militia Form B. 313		
Medical Report for Invalidity	B. 227	(a) Proceedings on Discharge	
Statement of Man's Account on Transfer and Last Pay Cer- tificate	D. 877	(b) Attestation	
*Only if discharged "Medically unfit"		(c) Medical History Sheet (in the event of such having been prepared)	

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

James Henry

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

List of Discharge Documents.

None.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	
*Only if discharged "Medically unfit."	

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

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

11
10
64926-675
JUL 14 1917
CANADA

Number Rank Name and Corps of disabled soldier:-
891 207. Pte, Kenny James, 178th Bn. / 27th Bn.
Previous civilian occupation:- Farmer.

Cause of disability:- Pleurisy Rt Chest. (Suspect T.B.)

Condition, in detail, which prevents the soldier earning a full livelihood?-

General weakness, shortness of breath - slight cough in the morning & expectoration. Sputum analyses neg. for T.B. Complains of pain on breathing base, right chest.

On exam. - there is slight relative dullness both apices & fine crepitant rales both bases anteriorly. No other apparent disability.

Has history of Pleurisy in Montreal. General Hospital in May 1916. Paracentesis, rt. chest & 1500 c.c. fluid withdrawn.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) $\frac{3}{5}$.

Probable duration of incapacity:- 3 mos then impossible to say.

Does it render him permanently unfit for Military Service? yes

Would operation, Special treatment, or the use of appliances, etc. lessen incapacity? Convalescent Home

Signature:-

E. A. Robertson Capt

President.

Station:- Que.

M. J. Rogbon Capt
Rhodes ass't Capt

Members

Date:-

July 7/17

APPROVED.

Date

July 7/17

W. H. Carruth Major
Asst. Director Medical Services.

Date

Director General Medical Services. 10

RECEIVED
JUL 22 1871

Tanner

General...
 that...
 description of...
 On... there is...
 list of...
 The...
 list of...
 1300...
 1871...

3/10

[Faint, mostly illegible handwriting and bleed-through from the reverse side of the page.]

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

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

PROCEEDINGS of a * Standing Medical Board

assembled at Montreal General Hospital

on the 6th May 1916.

by order of O. C. 4th Division.

for the purpose of examining #841204 Pte. James Kenny

148th Battalion C.E.F. according to #617 P. & A.

Rgl. 1014.

DEPT
MILITIA & DEFENCE
MAY 13 1916
H.Q.
CANADA

PRESIDENT.

Lieut.-Col. A.M. Forbes, A.M.C.

MEMBERS.

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

Lieut. C.R. Bourne, A.M.C.

The Board having assembled pursuant to order, proceed to

examine Pte. Kenny and find that:—

1. He was admitted to the Montreal General Hospital on this date with Pleurisy Right.
2. His temperature is 103°
3. Hospital Treatment is advisable until the patient is afebrile.
4. Then, Sanitarium treatment is recommended.
5. There is a reasonable probability that he may ultimately be "Fit".

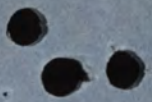
Dated at Montreal P.Q.
May 6th 1916.

A.M. Forbes Lieut.-Col Pres.

R.E. Powell Capt.

Members.

C.R. Bourne Lieut.



55

A

1111

A.A.G.

M.D. No. 4.

I CONCUR

[Signature]
Lt-Col.

A/A.D.M.S. M.D. No. 4

Secretary, Militia Council,
Ottawa, Ontario.

FORWARDED

[Signature]
Brig-General.

O.C. M.D. No. 4.

Montreal, P.Q.

May 11th, 1916.



MEDICAL HISTORY OF AN INVALID.

B.P.C. 4D.22-K-50

1. Station. **Laurentide Inn Military Sanatorium Ste. Agathe** 8. General remarks on his: **Good**

2. Regiment or Corps. **24th. Battalion** (a) Conduct. **Good**

3. Regimental No. and Rank. **841204 Pte.** (b) Habits. **Good**

Premanent Address **228 Poupart St. Montreal.,**

4. Name. **James Kenny** (c) Temperance. **Yes.**

5. Age last Birthday. **39** (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

6. Enlisted on **January 20th. 1916** at **Montreal**

7. Former Trade or Occupation. **Tannery Superintendent** Date. **August 21st. 1917**

DEPT MILITIA & DEFENCE
AUG 24 1917
H.Q. CANADA

649 JK-675'

9. Service. Years. Days.

	PERIODS.	
	FROM.	To.
Canada 148th. Battalion	January 20. 1916	September 25/16
England " "	October 3rd/16	November 25/ 16
France 24th. Battalion	November 6/16	February 8/17
Canada invalided	Feb. 9th. /16	August 21st/17

10. (a) Disease or disability. **Pulmonary Tuberculosis**

(b) Date of origin. **Not known**

(c) Place of origin. **Not Known**

(d) Cause. **infection Tbc.**

11. Present Condition. (Most Important).
(To include full description of present disabling condition or conditions.)
Thorax long and narrow with poor apical expansion. Right lung shows an impaired note from the 3rd. to 5d.s.. over which B.S.#1V.F. #1 V.R.#2 and W.P.#1 all slight more intense at apex. On coughing subcrepitatant rales od small caliber. Right base shows an am adhsion of the pleura with sclerosis. Left lung show apical fibrosis of-the-apex evidence of adhesion at the base.

12. (a) Is the disability the result of service or climate? **Aggravated by climate**

(b) Has it been aggravated by intemperance, vice or misconduct? **No.**

MEDICAL HISTORY OF AN INVALID

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

Linear scar left forearm

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

Not applicable

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

Exposure

14. Treatment

England Tunbridge Wells seven weeks Chatham one week
Epsom twelve weeks.

Canada Grey Nuns Convalescent Home three weeks

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

Yes 100%

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

Minimum one year

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions.

100%

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

Yes.

T. A. Welf Lt. Col. A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

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

10. **Yes**

11. **Yes**

12. **Yes**

15. **Yes**

16. **Yes**

17. **Yes**

19. Is he unfit for Military Service. **Yes**

20. Recommendations : That #841204. Pte. James Kenny has active pulmonary tuberculosis and does not desire sanatorium treatment that forced treatment will in no way benefit him, and that therefore he be allowed to pass under his own control with a disability of 100% for six months.

Signatures :—

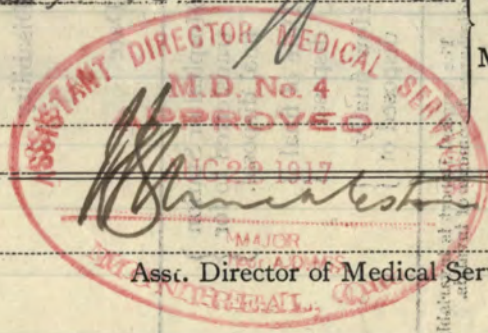
[Handwritten Signature]
President.

Laurentide Inn Military Sanatorium

Station. Ste. Agathe des monts

Date. August 21st 1917

[Handwritten Signature] A.M.C.
Members.



Date.

Approved.

Date.

Director-General of Medical Services.

OPINION OF THE MEDICAL BOARD.

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

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

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

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

.....

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.....

Date of final Medical Board or decision. } Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
100 m-2-16.
H. G. 1772-89-117.

Station	Corps	Regimental No.	Rank	Name	Disability	Date	Hospital or Station transferred to for final disposal.	Date of final disposal	How finally disposed of

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

Reserved for M.H.C.

161668

Regt. No. 841204 Rank Pte. Surname Kenny Christian Name James

Unit or Corps—(a) Overseas from United Kingdom 24th Battn. (b) In United Kingdom 23rd Regt.

Born at—Town County or Province Mago Country Ireland.

Date of Birth—Day 15th Month September Year 1877 Age 39 yrs. 9 months.

Joined at Montreal Date 20th January 1916.

Former Trade or Occupation Tanner.

Permanent marks or peculiarities that will serve for future identification:—

Height—feet 5 inches 8 3-4 Colour of eyes Blue.

Signature of Soldier (for identification purposes) James Kenny

Medical Report.

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. DISABILITY (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted). (Follow the official nomenclature as far as possible.)

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

Disabilities Group (a). Weakness. Pain in right chest. Cough: expectoration. Shortness of breath.

Disabilities Group (b).

Disabilities Group (c).

2. CAUSE OF DISABILITY. (Follow the official nomenclature in stating the disease or injury.)

Table with 3 columns: (i) As to Group (a) above, (ii) As to Group (b) above, (iii) As to Group (c) above. Rows contain 'DISABILITY', 'CANADA', and '1 year ago'.

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

3. Is the disability due to disease contracted or injuries received prior to Active Service No.

(i) As to Group (a) above? 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?

5. If a cause of disability was an injury received on Active Service, was it received— **NOT APPLICABLE.**

(i) While on duty?

(ii) While off duty?

(iii) Was a Court of Inquiry held?

(iv) Where?

(v) When?

(vi) Opinion of the Court?

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.)

Had always been healthy. Five months after enlistment while still in Canada developed Pleurisy. At the Montreal General Hospital 1500 cc fluid withdrawn. Recommended for Sanatorium treatment at St Agathe according to M.H.S., but was discharged "Fit" and came to England. Three months later, and immediately to France, where he was on full duty for 2 and 1-2 months. Returned to England with Pleurisy two and a half months ago. To Tunbridge Wells, then to Epsom.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

He is weak, has pains in right side, cough, expectoration. Has sweat at night. Weight on enlistment 122lbs: now-----
Diminished expansion axilla. Percussion note in right lower lobe impaired. Diminished breath sounds, low part right chest anterior right axilla and right side posterior. There are adhesions at base of right lungs—and rales rales may be heard over the right lung, but are not constant. Few rhonchi left lung, sputum exam negative. Heart normal.

8. 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.

9. (i) Is there loss or decay of teeth attributable to Active Service?

NOT APPLICABLE.

(ii) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty?

(b) Fit for base duty?

(c) Invalid to Canada?

(d) Discharge from the Service as permanently unfit? **Yes.**

Date of Report **21st April 1917.** 191

Signed **D.A. Morrison. Capt.**

Officer in medical charge of case.

Station **Military Convalescent Hospital, Epsom.**

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

sgd. **S.O. ROGERS** CAPT. C.A.M.C. (Officer i/c Hospital) Strike out one of these.
~~for S.M.O. Brigade~~

Dated at **Military Convalescent Hospital EPSOM** Station, on **April 28th, 1917.** 191

* Delete if inapplicable.

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

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I (1)?

If not, indicate it.

YES

12. Is the cause of the disability fully indicated in Part I (2)?

If not, indicate it.

NO

PLEURISY

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier {
Caused? NO
Aggravated? NO

(b) Misconduct of the Soldier {
Caused? NO
Aggravated? NO

14. 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, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.)

60%

15. THE PENSIONABLE DISABILITY—(see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, or all).

ALL

16. Permanency of the Pensionable Disability estimated next above in (15).

(i) Is it permanent?

NO

(ii) If not permanent, what is its probable minimum duration (in months)?

12 MONTHS

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

NOT APPLICABLE

18. Remarks.

Board recommends I. to C. and not P.U.

19. Recommendation:—(a) Fit for duty?

(b) Fit for base duty?

(c) Invalid to Canada? **Yes**

(d) Discharge from Service as permanently unfit?

Classification for the
Military Hospitals
Commission.

Date of Board **4-5-17**

Station **Epsom, Surrey.**

Signatures
of
the Board

A. K. Haywood, Major

President.

C. K. Dowson, Capt.

Approved **W. S. ...** Captain C.A.M.C., A.D.M.S.

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

Station

A.D.M.S. CANADIANS,
LONDON AREA,
LONDON.

16 MAY 1917

