

117TH EASTERN TOWNSHIP  
Q/S BATTALION C. E. F.

# ATTESTATION PAPER.

No. 749241

Folio. C

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... *Ladd*
- 1a. What are your Christian names?..... *William Hiram*
- 1b. What is your present address?..... *Waterloo. P. Que*
2. In what Town, Township or Parish, and in what Country were you born?..... *Barnston. P. Que*
3. What is the name of your next-of-kin?..... *Mrs M J Ladd*
4. What is the address of your next-of-kin?..... *Barnston P. Que*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
5. What is the date of your birth?..... *5<sup>th</sup> July 1882*
6. What is your Trade or Calling?..... *Principal of Waterloo Academy*
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?..... *7<sup>th</sup> Hussars for 3 years*  
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 H. Ladd*, 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.

Date *20 June* 191 *6* *W. H. Ladd* (Signature of Recruit)  
*David Robinson Lt* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William H. Ladd*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *20 June* 191 *6* *W. H. Ladd* (Signature of Recruit)  
*David Robinson Lt* (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 *Waterloo* this *twentieth* day of *June* 191 *6*.  
*W. D. P. Rockwell* (Signature of Justice)

# Description of *Wilbur Herman Ladd* Enlistment.

Apparent Age.....*33*.....years.....*11*.....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.*11* ins.

Chest measurement. { Girth when fully expanded.....*37* ins.  
 Range of expansion.....*2* ins.

Complexion.....*Light*

Eyes.....*Blue*

Hair.....*Brown*

Religious denominations. { Church of England.....*X*  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic.....  
 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.....*June 20*.....191*6*.

Place.....*Halifax, Que*

*E. D. Blake*

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.

*Wilbur Herman Ladd*.....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.

*E. D. Blake*.....(Signature of Officer)

Date.....*June 23*.....191*6*

117TH EASTERN TOWNSHIP,  
 C/S BATTALION C. E. F.

REGIMENTAL DOCUMENTS

NAME *Ladd, Wilbur Horan*

REGT. NO. *749241*

UNIT *56th K.*

H. Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

DEATH

Category

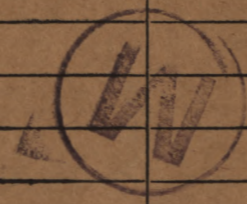
DISCHARGE

Category

DESERTION

01891

*1/2*



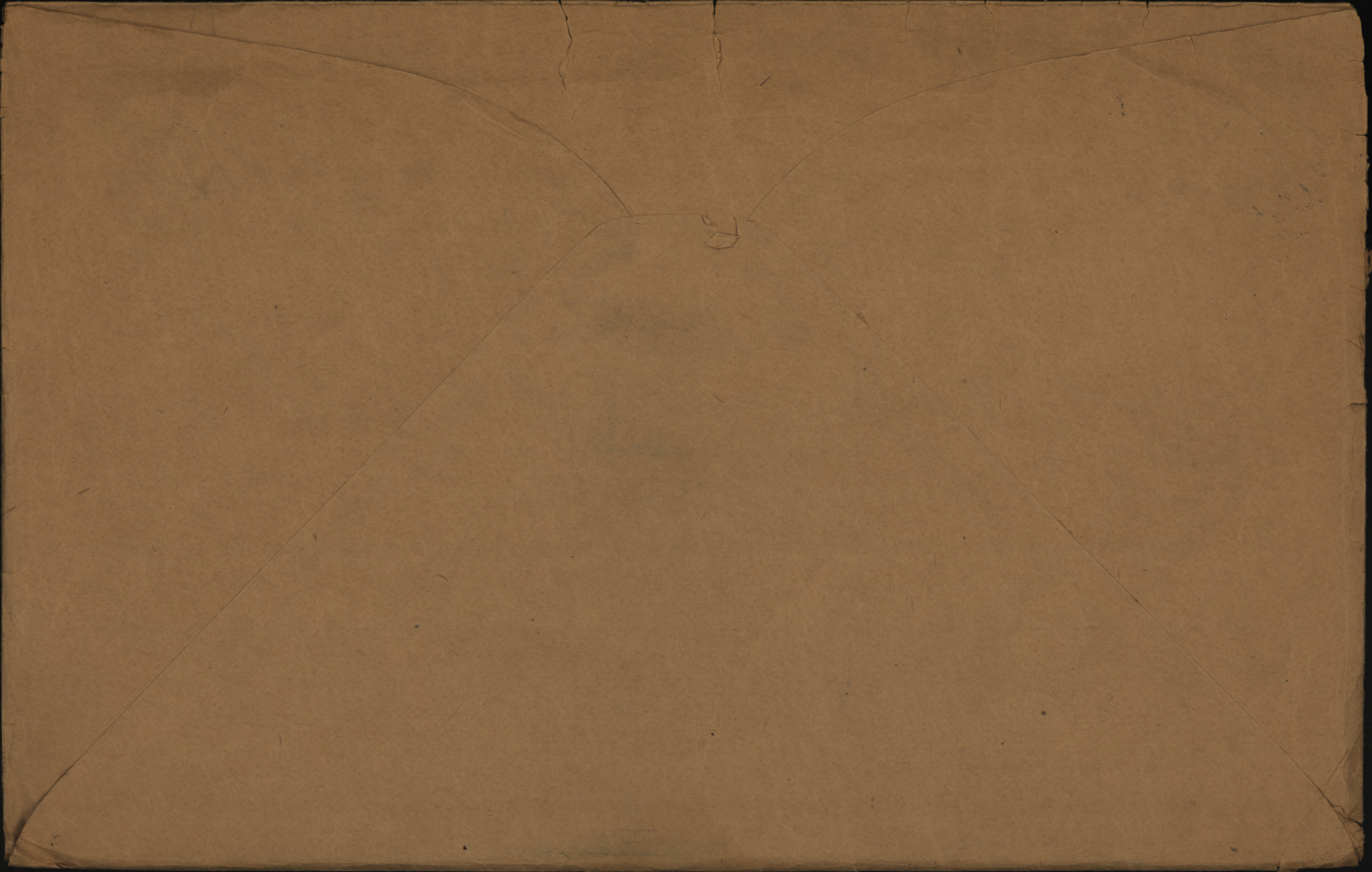
*9. misc.  
1. a & w 3212  
1. pay card  
1. R148  
1. M 3 W 67  
1. R122  
1. pay card*

*copy  
copy*



*188/20*

*3  
10-4  
25-9  
27-9  
3*



Surname

Christian Name or Names

Reg. No.

**Ladd**  
Rank

Unit **W.H.**

Co. Troop **749241**

Batty.

**Pte**  
Hospital

**5th.C.M.R.**

Date of Admission

**32 Stat "imereux 8-5-17"**

Transferred *Eastbourne*

Hosp. *19.5.17*

Hosp.

Hosp.

Hosp.

Diagnosis

**S.W. Hip & Lt Leg** *gl*

(1)  
Later Diagnosis (if changed)

*NS?*

(2)

(3)

Additional Diagnosis: if more than one state present

*Died 5.7.17.  
appendicomy Heart failure.*

DISPOSITION

*P.* Date

**C.L.15-5-17 A375**

REMARKS

*24.5.17 B246*

*6.7.17 B274.*

*10.7.17 B276. (2) note. (Cause of death)*

**A.M.D. 2 DEPT.**

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

*Not eligible for 14/15 Star.*  
*Not*  
*Albur.*  
*Iran.*

649-L-7138.

Ladd Wm. H. Pte. #749241.-117th Bn.

*5th. C. M. R.*

Medals  
& Dec. (mother)

Mrs. M.J. Ladd,  
~~Ayers Cliffe, P.Q.~~

*R.M.D. # 4*

*Coaticook*

P.&.S. (mother) See above.

*S.R.*

*Que.*

*Serial No 767955*

Memorial  
Cross. (mother)

See above.  
(Not married)

*Des* JUN 1 1920 *69741*

*(L)*

JAN 19 1921

Scroll Desp. \_\_\_\_\_ Reqn. No. 710979

" redesp. 27-7-21. 3623

Plague Desp. JAN 18 1922 Reqn. No. 4359

678

*NY*



Reg. No. 749241 Name Lada. W.H.  
 Rank Pvt Corps 117 Age 34 Service   
 Ledger No.  Serial No.

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
Camp Vincent, Quebec	27. 7. 16	Colic
Back to Unit	31. 7. 16	

HOSPITALS

DATE

DIAGNOSIS

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

No. 749241 RANK

*pte*

NAME

*Ladd W<sup>m</sup> #.*

T. O. S. 20-6-16

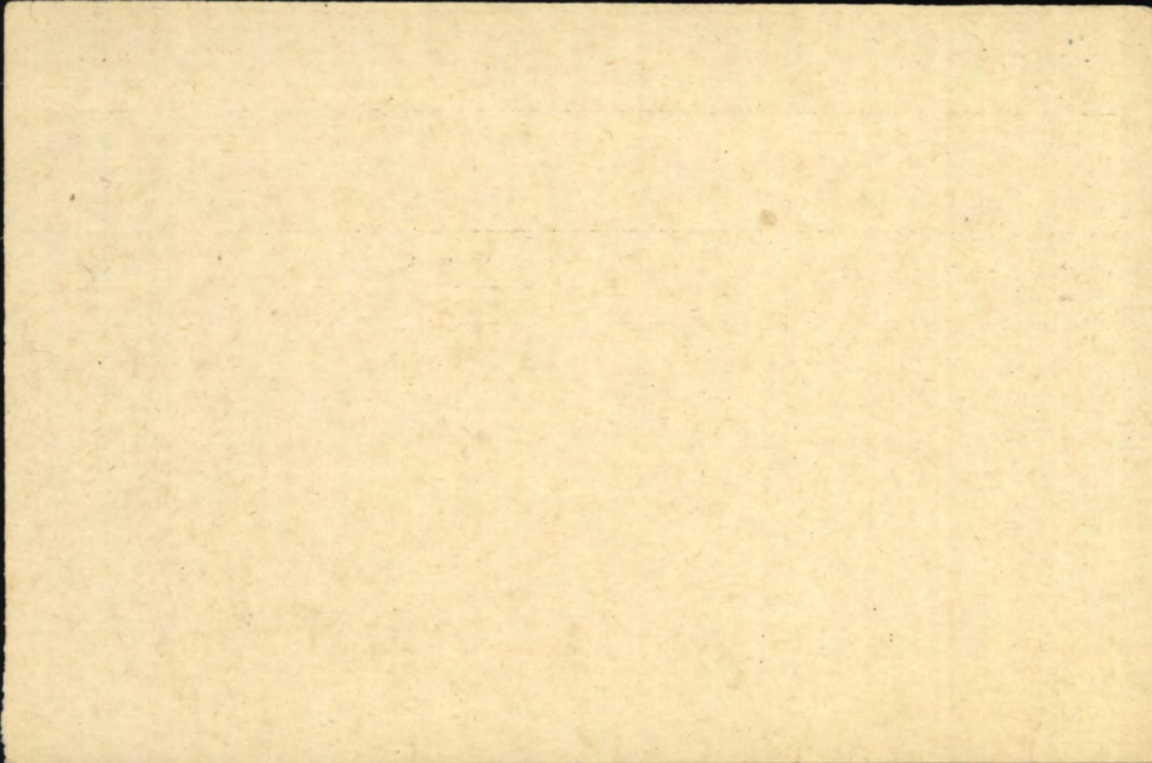
UNIT

*117th Battalion*

D.O.# 147-23-6-16

M. D. *5-*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i> <i>June 20</i>	<i>1916</i> <i>June 30</i>	<i>✓</i>		
	<i>July</i>	<i>✓</i>		
	<i>Aug.</i>	<i>✓</i>		
<b>UNIT SAILED</b> <b>AUG 14 1916</b>				



SURNAME.

*Ladd* (St. 1649-2-7138)

CARD NO.

*D*

CHRISTIAN NAMES

*Willbur Hiram*

FOLL.

REGL. No.

*749241*

RANK *pl*

UNIT

*117th*

*Pn*

FORMER CORPS

*7th Hussars 3 yrs*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Ladd Mrs M. J.*

RELATIONSHIP TO SOLDIER

*Mother*

ADDRESS

*Bariston. P. Q.*

COUNTRY OF BIRTH

*Canada. Bariston P. Q.*

DATE

*July 5th 1882*

PLACE OF ATTESTATION

*Waterloo. P. Q.*

DATE

*June 20th 1916*

*Sailed from Halifax*



*14-516 per J. J. Empress of Britain*

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

*Principal of Waterloo Academy*

RELIGION

*yes*  
*Church of England*

DESCRIPTION.

APPARENT AGE

*33* YEARS

*11* MONTHS

HEIGHT

*5* FEET

*11* INCHES

CHEST MEASUREMENT

*37* INCHES

EXPANSION

*2* INCHES

COMPLEXION

*Light*

EYES

*Blue*

HAIR

*Brown*

DISTINGUISHING MARKS

*Not stated*

MEDICAL EXAMINATION.

PLACE

*Waterloo P. Q.*

DATE

*June 20<sup>th</sup> 1916*

*Present Address Waterloo P. Q.*

REGT'L. No.

749241

NAME

Ladd ~~William~~ Hiram

H. Q. FILE No. 649

RANK AND CORPS

Pte. 5<sup>th</sup> C. M. R. Norm 117

FOLLOWS

No.

FOLLOWS

CABLE	NO.	DATE	NATURE OF CASUALTY
	M 4494	14-5-17	Adm. to No. 32 Stat. Hosp. Wimereux May 8 <sup>th</sup> 17. Gsw. left leg hip ✓
	M 5683	6-7-17	Died Mil. Hosp. Eastbourne July 5 <sup>th</sup> . 1917. cause not stated. ✓
	M. 5689.	7-7-17.	Re my Telegram M. 5683. Cause of Death ascertained to be <sup>appendectomy</sup> heart failure. ✓
	A 9 B 2090	(Rec'd. 5-9-17)	Wid at Military Hospital Eastbourne Appendectomy Heart Failure July 5 <sup>th</sup> 1917.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 375.	# 32 Stat Wimereux	8-5-17	S. W. <sup>Hip</sup> L. Leg.
B. 246	Mil. Eastbourne.	19-5-17.	" " " " " 26-6-17.
B 274	Military Eastbourne	5-7-17.	Died (not stated) Appendectomy heart- failure as per H. L. B 276



*ms. P.*

Number... 749241... Rank... a-L-Cpl...

Surname... LADD

Christian Name... Wilbur Hiram

Unit... 5<sup>th</sup> C. M. R. Theatre of War... France

Date of Service... 1-12-16

Remarks... **D**

Latest Address... Mrs. M. A. Ladd

~~Payee V. L. P. 2.~~

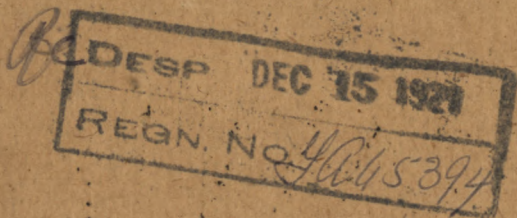
Roll No. **B** 0 R. M. L. - 4

Page 4304 coaticook. P. 2.

~~A~~  
~~R~~

423150 *Vist* MAY 2 7 1921

B+V. Retd. - 27/6/21



Name Ladd, William Rank

Nivam

Private Reg. No. 449247

Unit 5th Co. M.P.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O m	W.O. List
8.5.14	To 32nd Stpt Ho.	Wimereu	S.W. Hip + L. Leg	1375	-4494	4/5/17
19.5.14	Mil Hosp.	Eastbourne	Do	B. 246	14/5/17	
5-7-17	C.B. Above Repts	Dead		B274	15625	6/17
Cause of Death Appended as per Medical Report				B276		



Deceased  
#749241

ORIGINAL

ORIGINAL  
MEDICAL HISTORY SHEET.

Surname Radd Christian Name Wilbur Hiram

Examined { on 20th day of June 1916  
at Waterloo

Approved by C. B. Blake, M.D.

Birthplace { City or Town Barnstow  
County Stanslead

Rank \_\_\_\_\_ M.O.

Apparent age 33

Trade or occupation Principal of Waterloo Academy

Height 5 Feet 11 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 35 inches.  
Maximum expansion 2 inches.

Physical development Normal

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. X  
Number one

When Vaccinated last In childhood

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		23 MAY 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date.	Result.	VACCINATIONS.
13/10/16		EEI
		M.O.
		M.O.
		M.O.
Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
7/27/16	1/2 B	err
7/31/16	.13	err
8/9/16	.13	err
		M.O.
		M.O.
		M.O.

Enlisted on 20th day of June 1916 at Waterloo Que

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>117th</u>	<u>749241</u>		<u>20/6/16</u>
Transferred to	<u>5th C.M.R.</u>			<u>NOV 30 1916</u> <u>NOV 27 1916</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

CANADIAN

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.

Surname *Ladd* Christian Name *William* *Strom*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.		
		Admission into Hospital.			Discharge from Hospital.								
		Day	Month	Year	Day	Month	Year						
<i>Talcoiter: Comp. Hosp.</i>							<i>July 27<sup>th</sup> 1916</i>	<i>31</i>	<i>1916</i>	<i>Intestinal Colic &amp; recovery.</i>		<i>R. H. ... Capt., O.C. A.M.C. Training Depot No. 4.</i>	
<i>Fairfield Genl Hosp: Easton</i>		<i>18</i>	<i>V</i>	<i>17</i>	<del><i>5</i></del>	<del><i>VIII</i></del>	<del><i>17</i></del>			<i>G &amp; W. Leg Comp<sup>d</sup> Fract Fibula. Appendicitis</i>	<i>47</i>	<i>Disease changed (tried 42 hours after Laparotomy) for Removal of Appendix</i>	<i>A. Sanborn</i>
		<i>1</i>	<i>7</i>	<i>17</i>						<i>apparently of old standing (vide supra) acute all over state of in Hospital. Laparotomy performed on 3<sup>rd</sup>: death from heart failure</i>		<i>DIED in Fairfield Genl VAD Hospital Easton July 5<sup>th</sup> 1917</i>	<i>L. S. ... Surgeon</i>

COPY  
**FORM OF WILL**

LM/CWN

I, Wilbur Hiram Ladd (Name in full)

Regimental Number 749241 serving in 117th Batt.,

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

I devise all my real estate unto

Mrs M.L. Ladd,  
Barnston  
Quebec

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

absolutely, and my personal estate I bequeath to

Mrs M.L. Ladd,  
Barnston,  
Quebec

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

**NOTE**

This space for the  
appointment of  
Executor if  
necessary.

**IMPORTANT  
NOTE**

this third day of August A.D. 191 6

This must be signed  
and Dated by  
THE SOLDIER  
HIMSELF.

Wilbur Hiram Ladd Signature of Soldier.

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

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

Signature of First Witness C.H. Foss

Address of Witness Sherbrooke Que  
Occupation of Witness Private 749060-117th Formerly Express and Ticket Agent

THE TWO  
WITNESSES

MUST  
SIGN HERE

Signature of Second Witness Thomas Skailes

Address of Witness Waterville Que.

Occupation of Witness Private 748255-117th Formerly Electrician

*Attest*  
*Coyne*  
*St. Leonard*

REGISTERED MAIL

MADE IN CANADA

REGISTERED MAIL

ANNEX



Pte Ladd - C.M.R.

Autopsy  
July 7/17

Fairly well nourished man -

Wound Scar on rt leg.

Laparotomy Wound rt side abdomen

Lungs. marked congestion especially at bases.

Patches of bronchitis present

Substance of lung somewhat friable

Heart.

Enlarged + fatty

Muscle of heart walls thin + friable

Stomach - Cavity contains  $\frac{1}{2}$  in. clot.

Abdomen.

- much dilated  
Intestines adherent to abdominal wall - Colon much dilated

Intestines show signs of congestion + peritonitis, + are matted together.

Some thick yellow pus present on rt side shut off by adhesions.

Meenteric glands enlarged

Some fibrous nodules present

Scattered over post. abdominal wall.

Appendix - difficult to find. lifted up + touched under caecum - It is long, thin + fibrous + bound down to surrounding tissues by fibrous bands. The tip is free + there is no sign of present inflammation.

Kidneys - somewhat fatty - congested  
Liver - somewhat enlarged & fatty  
Spleen - Congestion

Russell White Capt name.

ORIGINAL

To be made out in duplicate.

DUPLICATE

H.Q. 54-21-23-53

No

N. P.

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..... 117th EASTERN TOWNSHIPS  
OVERSEAS BATT., C. E. F.

(2) Regimental Number..... 749241

(3) Full Name of Soldier..... William Hiram Sudd

(4) Place of Birth..... Banston, Quebec.

(5) Are you married, or not?..... No.

(6) If married, state,  
 (a) Full name of your wife.....  
 (b) Present Postal Address.....

(7) Are you a widower?..... No.

(8) Have you any children?.....  
 If so, give number of boys and girls.....  
 Also their names and ages.....

(9) Is your Father alive?..... *no.*

If so, state name and address .....

(10) Is your Mother alive?..... *Yes*

If so, state name and address..... *Barnes Mrs M. V. Ladd*

..... *Barnston, Ill.*

(11) If your Mother is a widow.....

Are you her sole support, or not?..... *I am 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?..... *Sun Life*

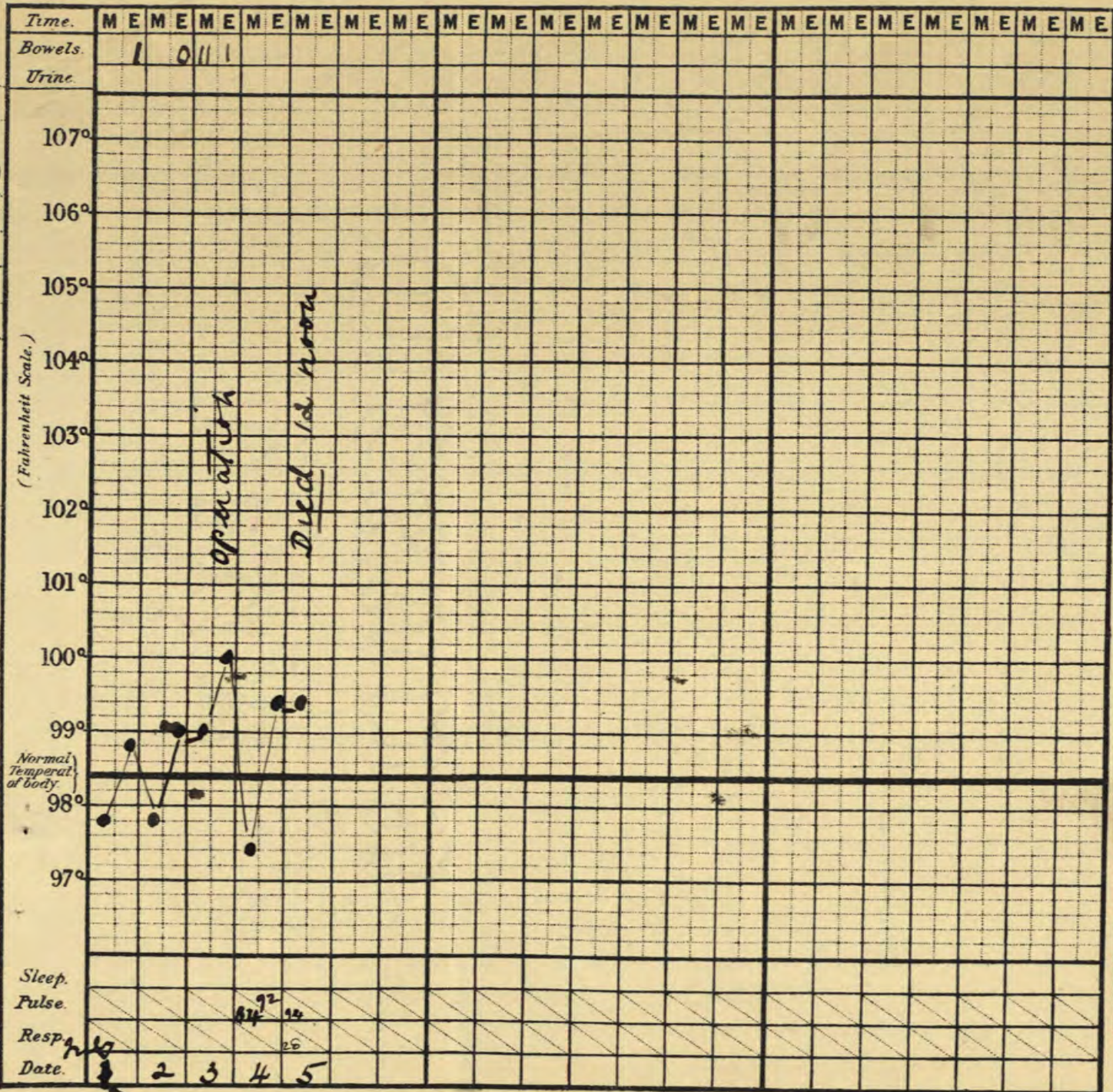
Have you made arrangements for payment of your Insurance premium..... *yes.*

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 8 1916**.....

*A. Whitehead*  
CAPT.  
FORG 1178 E. T. O/S BATT. C.  
Officer Commanding.

DISEASE.



Name { **P<sup>ts</sup> Ladd**

Age \_\_\_\_\_

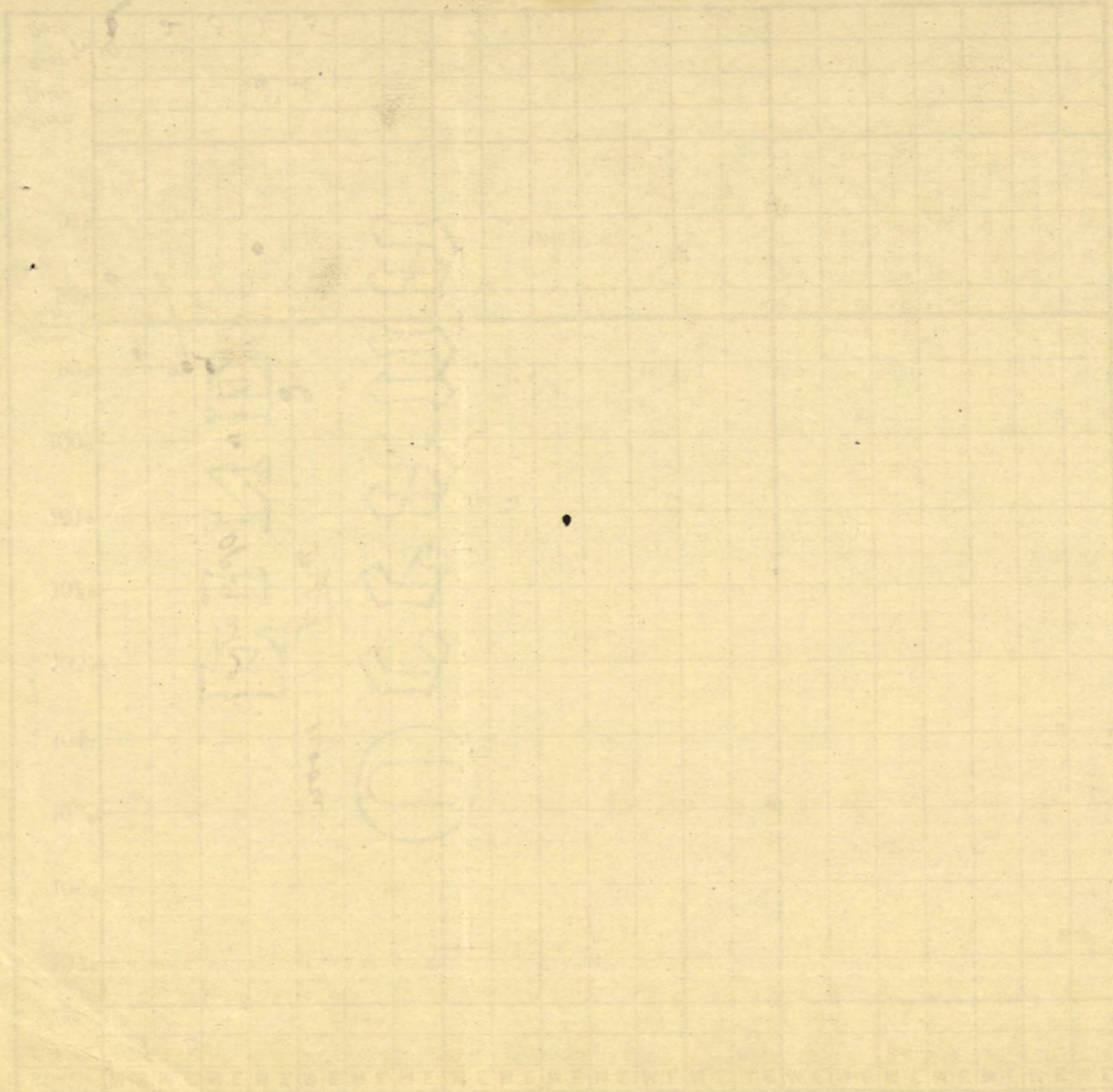
Diet \_\_\_\_\_

Case Book N<sup>o</sup> \_\_\_\_\_

Notes of Case.

Date of admission **May 19<sup>th</sup> 17**

Discharged **Died July 5<sup>th</sup>**



100  
 90  
 80  
 70  
 60  
 50  
 40  
 30  
 20  
 10  
 0

10  
 20  
 30  
 40  
 50  
 60  
 70  
 80  
 90  
 100

100 90 80 70 60 50 40 30 20 10 0

DISEASE.

Notes of Case.

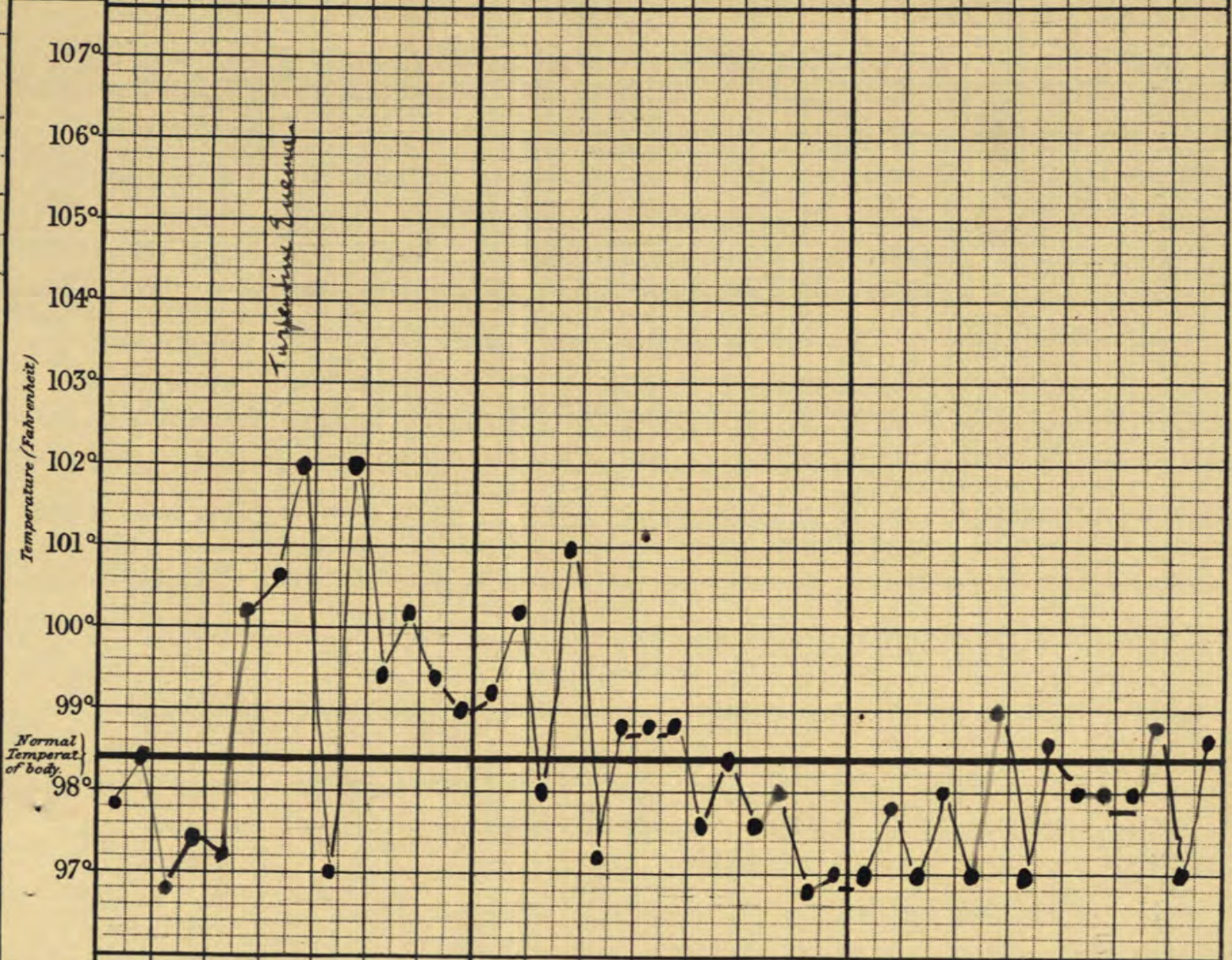
Name { <sup>P.H.</sup>  
Ladd

Age

Diet

Case Book N<sup>o</sup>

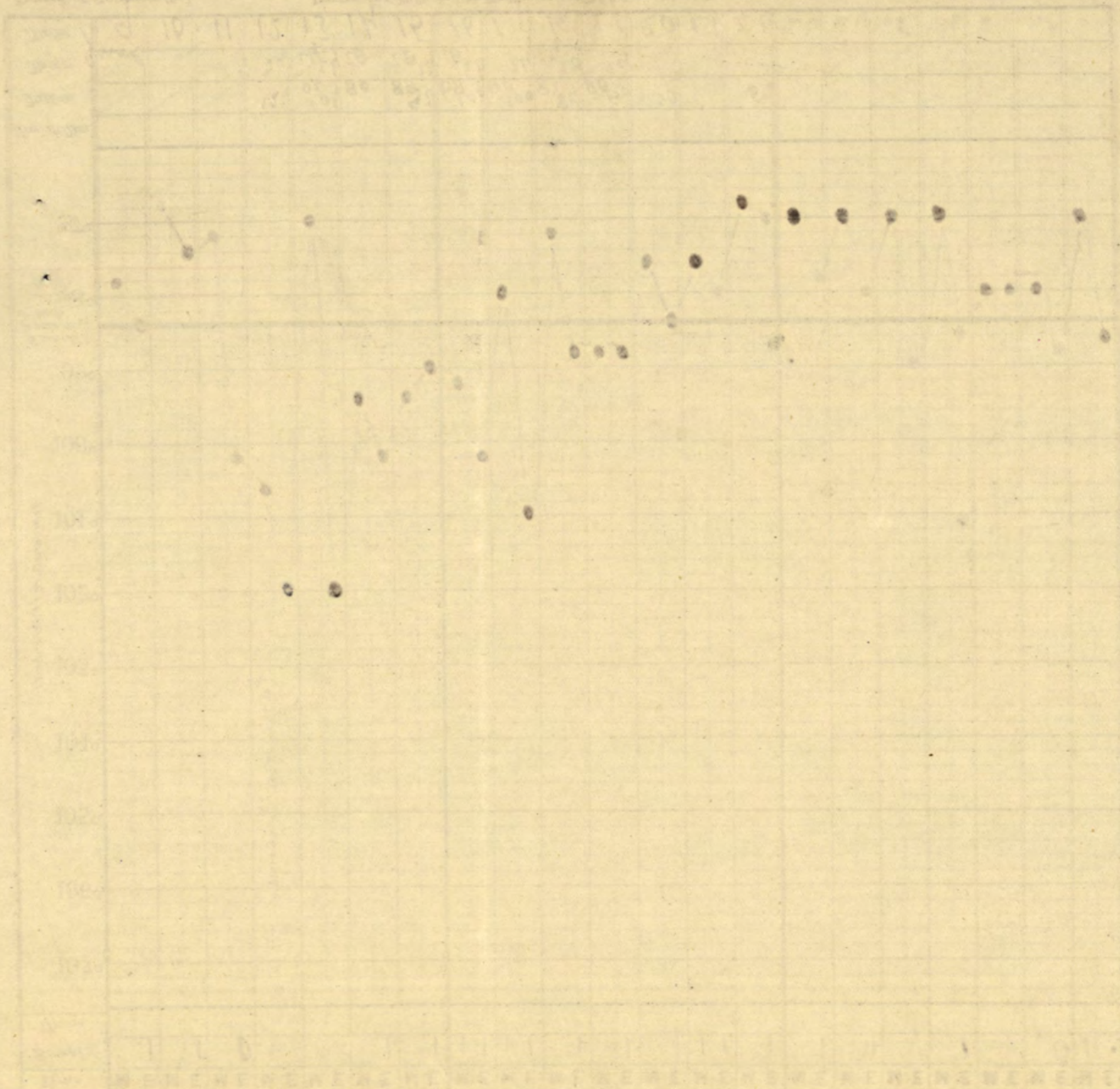
Time.	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E					
Bowels.			0																																				
Urine.																																							



Day of Dis.																																							
Pulse.				124	102	104	80	88	92	68	100	82	84	80	80	60	52																						
Resp.				34	24	24	28	28	24	16	26	24	24	26	24																								
Date.	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29																		

Date of admission.  
May 19<sup>th</sup>

Result



V. E. BAYD & CO. 30 COMPTON ST. 2ND FLOOR N.Y.C.



# 4 HOUR CHART.

DISEASE.

Name Pte Ladd

Age 34

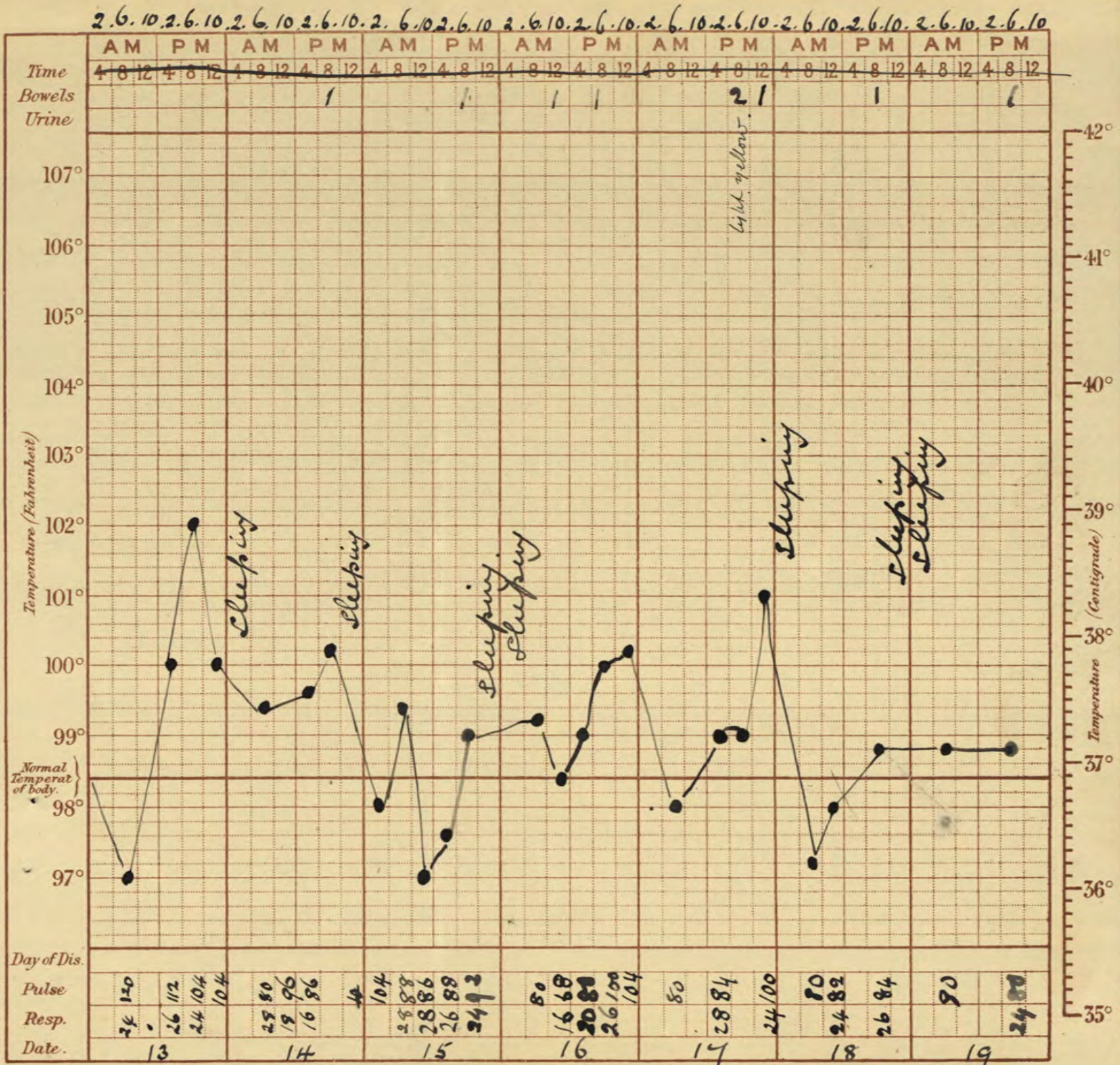
Diet \_\_\_\_\_

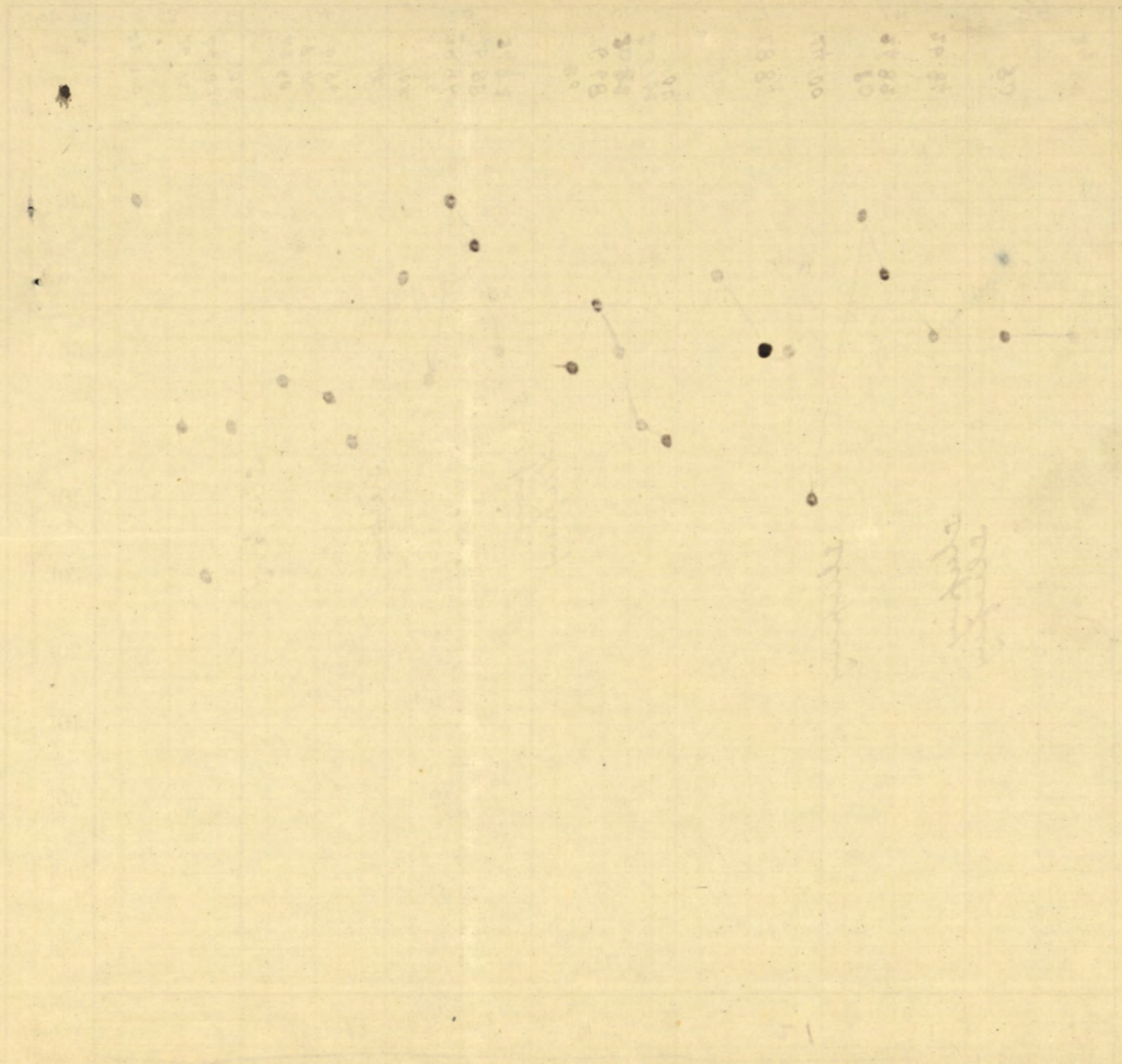
Case Book N° \_\_\_\_\_

Notes of Case \_\_\_\_\_

Date of admission  
May 19<sup>th</sup> 1917

Result \_\_\_\_\_





Handwritten notes in Chinese characters, possibly identifying the constellation or stars shown in the diagram above.

THAM HOH

**DISEASE.**

Name { *Pte. Sudd.*

Age

Diet

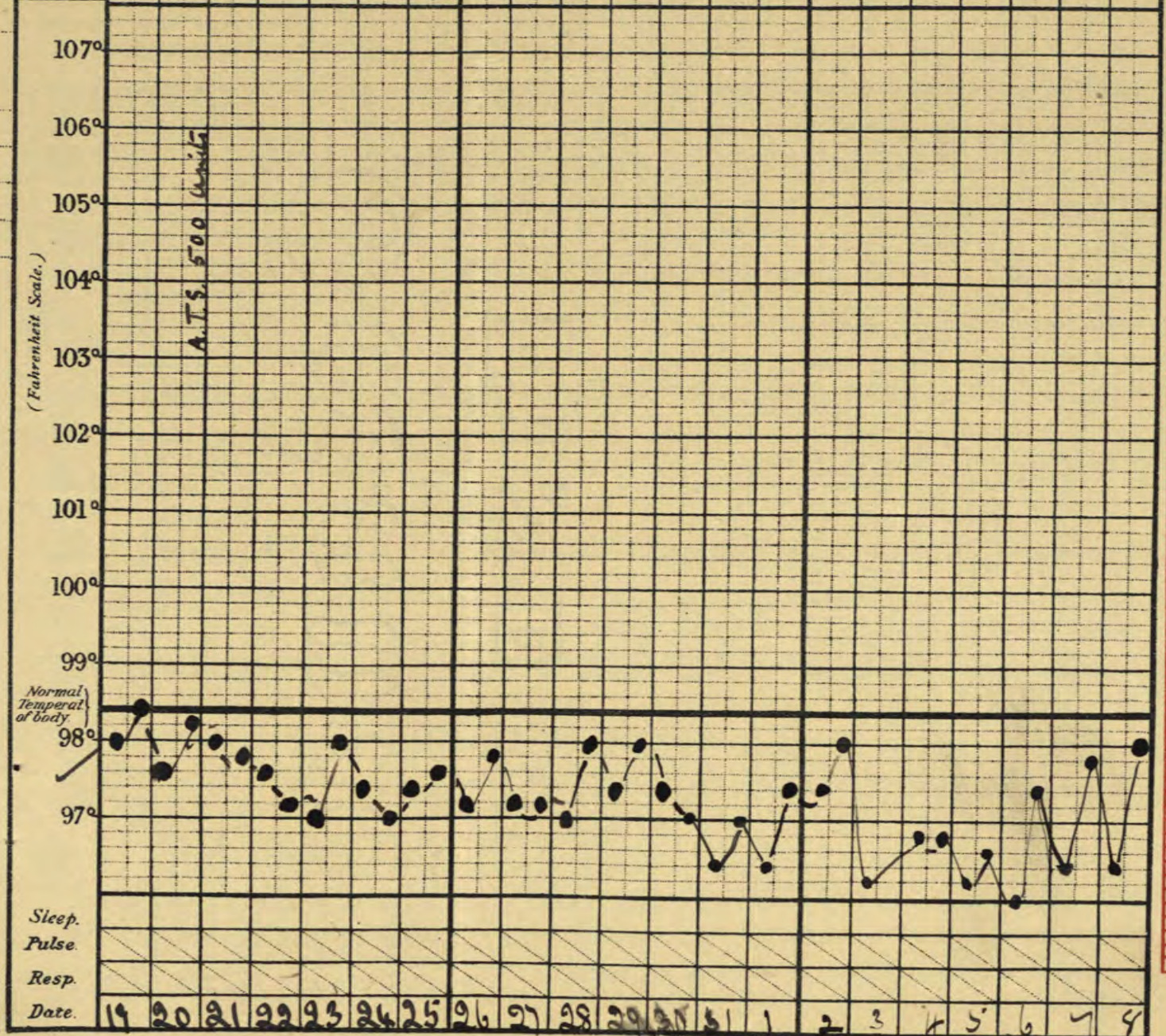
Case Book No

Notes of Case.

Date of admission.  
*May 19th*

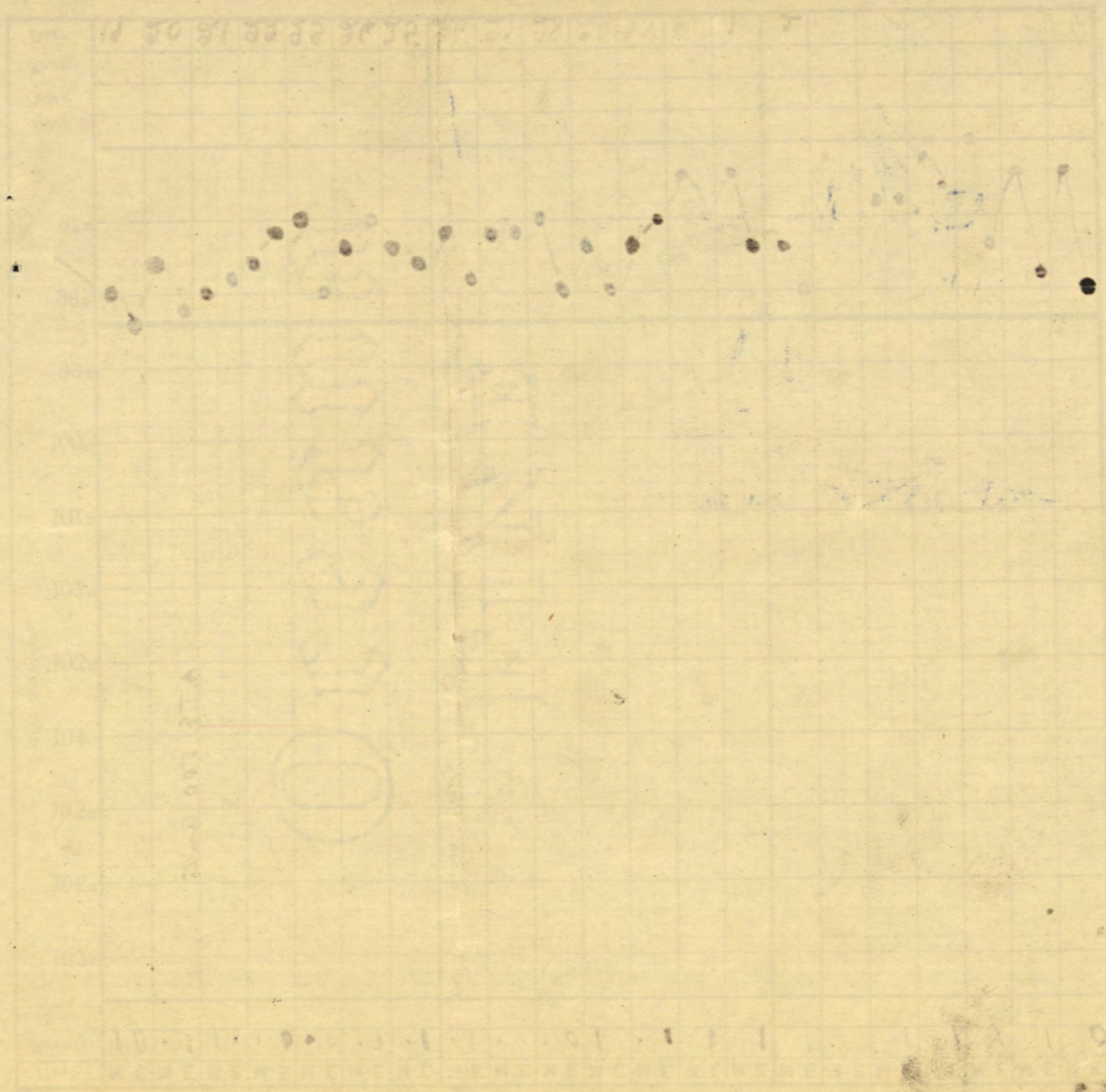
Discharged

Time.	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E	
Bowels.	1	0	.	1	0	.	0	.	0	.	1	.	1	.	1	.	0	.	1	.	1	.	1	.	1	.	1	.	1	.	1	.	0
Urine.																																	



Ward 10/21

7



310  
3000

*D.B.M.*

**Fill in Only.—Unit, Number, Rank and Name.**  
**Casualty Form—Active Service.**

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

Unit, Regiment or Corps 117th E.T. O/S Batt' C.E.F.

Regimental No. 749241 Rank Pte. Name Wilbur Hiram Ladd.  
C. E. F.

Enlisted (a) 20-6-16 Terms of Service (a) Duration of war Service reckons from (a) 20/6/16

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) \_\_\_\_\_

CERTIFIED CORRECT.  
8 DEC. 1916  
CAN. RECORDS LONDON

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			
	Embarkation	Canada	Aug 14/16	
	Arrival	England	Aug 24/16	
	appointed <u>1st Corp.</u>	<u>Seaford</u>	<u>Nov 15/16</u>	<u>Part 2 # 272. Bas 19/16.</u>
	<u>Reverts to Permanent Grade.</u>	<u>Seaford.</u>	<u>Nov. 26/16.</u>	<u>Part 2 # 280. Nov. 26/16.</u>
	<u>Proceeded for Overseas Service</u>		<u>NOV 27 1916</u>	<u>Part II Order No. 284</u>
	<u>Transferred to 5th C.M.</u>		<u>NOV 30 1916</u>	<u>DE Stewart Lieut. &amp; Asst. Adj. for O.C. 117th E.T. Battalion.</u>
	<u>O. C. C. B. D.</u>	<u>Landed in France.</u>	<u>Taken on</u>	<u>Nom. Roll d/</u>
		<u>strength 5<sup>th</sup> <del>2nd</del> Cdn. Bn.</u>	<u>1/12/16</u>	<u>Pt II D.O. 67 d/ 8/12/16</u>
		<u>Left for Unit 3rd <del>2nd</del> Bn.</u>	<u>22/12/16</u>	<u>Nom. Roll d/ 22/12/16</u>
	<u>3rd <del>2nd</del> Bn.</u>	<u>Arrived Unit for duty</u>	<u>25/12/16</u>	<u>B. 213 d/NR.</u>
<u>29-12-16</u>	<u>as</u>	<u>Left for unit</u>	<u>Free</u>	<u>29-12-16 NR.</u>
<u>30-12-16</u>	<u>unit</u>	<u>joined</u>	<u>do</u>	<u>29-12-16 B213. Dec. 193 8/17.</u>
<u>12.5.17</u>	<u>"</u>	<u>wounded in action</u>	<u>"</u>	<u>7.5.17. B213. Dec 240.</u>
<u>5/5/17.</u>	<u>32 <del>32</del> <u>staly</u></u>	<u>s.w. sh. 2 leg. &amp; hip.</u>	<u>32 <u>staly</u></u>	<u>8/5/17. 213034/11957.</u>
<u>12-5-17.</u>	<u>6 <del>6</del> <u>ret.</u></u>	<u>" " " "</u>	<u>6 <u>ret.</u></u>	<u>7.5.17. 430. E. 4041. Dec. 240. 9. 2. 6. 17.</u>
		<u>Inf.</u>	<u>33. AT.</u>	<u>8-5-17.</u>

(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				
18/5/17.	32 Staly.	S. W. Leg. R. Invaliden <del>Spander</del> . Spander to 2 <sup>e</sup> Quebec Reg Depot Shoreham.	M/S. St Andrew.	18/5/17.	3033/05254, St U <sup>e</sup> 0504 13/5/17
18.5.17.	32 Staly.	W. R. Leg. from Grubula. Inf. England.	32 Staly.	18.5.17.	63034-0223.
18.5.17.	9.24.9.	W. Leg. R. Reg. L. Bast. R. Inf.	H. St. Andrew.	7.5.17.	436 E. 4050 SEP 295.
12/5/17.	12 G 70	do.	12 G 70	7.5.17	326 2402. 05224.
"	"	do.	622	7.5.17	

*[Handwritten Signature]*

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

13948

Oct 22-8-17 ✓

FORM OF WILL

649 R 9138

Pte. Wilbur Hiram Ladd Name, in full.

Regimental Number 749291 serving in the 117th Eastern Townships Battalion, of the Canadian Expeditionary Force, do hereby revoke all former wills by me made, and declare this to be my last will.

I bequeath all my real estate to

59803

my mother, Mrs M. J. Ladd,  
Barnston,  
Quebec, Can. Name and address or person or persons to whom it is to go.

absolutely, and my personal estate I bequeath unto

Mrs M. J. Ladd,  
Barnston,  
Quebec. Name and address of person and or persons to receive personal estate. (#) (see note)

In witness whereof I have hereunto set my hand.

This 25 day of October, 1916.

Wilbur Hiram Ladd - Signature

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

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

Name of Witness E. J. Wilson

Address of Witness Barnston

Occupation of Witness Sgt - 117 ESB

NAME of Witness C. Gross

Address of Witness Barnston

Occupation of Witness Capt 117 ESB

FORM OF WILL

Name, in full, John D. Smith

Residential Number 1234, serving in the Fifth Eastern

Regimental Battalion, of the Cavalry Expeditionary Force,

do hereby revoke all former wills by me made, and declare

this to be my last will.

I bequeath all my real estate to

John D. Smith

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

absolutely, and my personal estate I bequeath unto

John D. Smith

Name and address of person who is to receive personal estate. (See notes)

In witness whereof I have hereunto set my hand

THIS 5th day of October, 1916.

John D. Smith Signature

Personal estate includes everything payable to me in bank, insurance policy, in fact everything except real estate.

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

Name of Witness John D. Smith

Address of Witness 1234

Occupation of Witness 1234

Name of Witness John D. Smith

Address of Witness 1234

Occupation of Witness 1234

Name of Witness John D. Smith

Address of Witness 1234

Occupation of Witness 1234



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

*Bank Account*

To Whom

Address

Rate \$ *20.<sup>00</sup>/<sub>100</sub>*

By Whom Assigned

Regtl. No.

Rank

Corps

*Credit*  
*Cau Bank of Commerce*  
*Coaticook*  
*P.Q.*

*Ladd*

*749 241*

*pte*

*117 Bat*

*W.H.*

*"6"*

SEP 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				

Pensions Notified Date *12. 24. 1914.*  
~~Killed in Action~~  
 Died of Wounds Date *5. 24. 17.*  
 Missing *6/24/14*  
 C. L. *24* Clerk *Stewart*  
 Date Noted *12. 7. 1914.*

1872

1872

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

*Can Bank of Commerce*

Credit PAYMENTS.

Name of Soldier

*Ladd W.H.,  
717 Batt "6" pte*

L. L. Job 310.-Req. 6374.

*#749241  
20.<sup>00</sup>*

*SEP 1 1918*

*Boo*

*Cancelled*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.		<i>P18942</i>	<i>20</i>	
Oct.		<i>P23702</i>	<i>20</i>	
Nov.		<i>V27819</i>	<i>20</i>	
Dec.		<i>P33269</i>	<i>20</i>	
Jan.	<i>1917</i>	<i>P39326</i>	<i>20</i>	
Feb.		<i>P45350</i>	<i>20</i>	
March		<i>V51405</i>	<i>20</i>	<i>20 m</i>
April		<i>H2959</i>	<i>20</i>	<i>20 w.</i>
May		<i>H9375</i>	<i>20</i>	<i>6.27. 30/6/17. 200<sup>00</sup> Stewart 12/17</i>
June		<i>715648</i>	<i>20</i>	<i>A/c closed 30/6/17 Cas Stewart 12/17</i>
July		<del><i>H23159</i></del>	<del><i>20</i></del>	<i>cu H. 23159 clb. Stewart 12/17</i>
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	<i>1918</i>			
Feb.				
March				
April				
May				
June				
July				

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.				

A.G.R. Rank Name LADD, Wilbur Hiram Reg'l No. 749241  
 Unit 117th Bn. If in perm. Corps, } Married or Single Single.  
 What Unit? }  
 Waterloo, }  
 Place and Date of Enlistment 20th June, 1916. Place of Birth Barnston, P. Que.  
 Name and Address, Next-of-Kin Mrs. M.I. Ladd,  
 Barnston, P. Que. Relationship Mother.

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

N/E. R.B. No. 6262  
 File R.L.  
 Category 2 of W.

Discharge, Date and Place Reason 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.	Emp. of Britain	24 AUG. 1916	
19.11.16	O C 117	Appointed A/L Corporal	Susford	15.11.16	D.O. PTD 272
27.11.16	"	Reverts to Perm Grade of own reg for 7/8 "	"	26.11.16	" " 284
1.12.16	"	Transferred to 5th C.M.R.	"	30.11.16	" " 284
8.12.16	5th. CMF	Taken on Strength,	Field.	1.12.16	Pt, 2, O-67
15.5.17	"	Adm. 32 Stat. Dep.	Wimereux St. Omer.	8.5.17	C/L A275 SW 1/2 hip. L. leg.
24-5-17	"	" Mil HQ	Eastbourne	19.5.17	B246
25-3-17	12 RD	JOS from 5 C M R	Storbham	19.5.17	— 41
13-6-17	56 MR.	(God) prob'd 1 Q RD	Jula	18.5.17	PTD 58

A.F.B. 103 CHECKED  
 6 DEC. 1916

ASBm.

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.				
6. 4. 17	5 <sup>6</sup> MR.	Died Mil Hosp	Eastbourne	5. 7. 17	CLB 274 <i>not stated</i>
24. 8. 17.	1 <sup>st</sup> QRD.	SOS. having Died.	Shoreham	5. 4. 17	PR 11 DO 151
10. 7. 17	5. CMR	Cause of death now ascertained to be Appendectomy Heart Failure			CLB 276

MARRIED OR SINGLE *Single*  
 PLACE OF BIRTH *Barnston Que.*  
 NAME AND ADDRESS OF NEXT OF KIN *Mrs. M. J. Ladd  
 Barnston Que*  
 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
<i>Appointed 2/Corp.</i>	<i>15-11-16</i>	<i>F.T.O. 272</i>
<i>1/Privates to ranks</i>	<i>26-11-16</i>	<i>F.T.O. 280</i>
<i>Died</i>	<i>5-7-17</i>	<i>C.R.B. 274 4/7/17</i>

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *749241* RANK *Pte.* NAME *Ladd* *10<sup>th</sup> Hiram*  
 IF IN PERM. CORPS WHAT UNIT *117TH EASTERN TOWNSHIP O/S BATTALION C. E. F.*  
 TRANSFERRED TO *5 R.M.P.* DATE *16-12-16* AUTHORITY *190.284*  
 TRANSFERRED TO *Sub Div 2* DATE *1/7/17* AUTHORITY *C.R.B. 274 4/7/17*  
 PLACE OF ATTESTATION *Waterloo Que* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *June 20/16* TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ *70.00* DATE EFFECTIVE *Sept 1/16*  
 PAYABLE TO *Canadian Bank of Commerce* RELATIONSHIP  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE *1/8/17* REASON *Died 5/7/17 C.R.B. 274 4/7/17*  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	C.						\$	C.																
<i>Aug 9/16</i>									<i>19 10</i>	<i>19 10</i>									<i>19 10</i>					<i>Balance from Canada.</i>			
<i>30-9-16</i>	<i>30</i>	<i>1</i>	<i>30 00</i>		<i>30</i>	<i>10</i>	<i>3 00</i>			<i>33 00</i>											<i>20 00</i>		<i>44 33</i>	<i>7 77</i>			
<i>1-10-16</i>																											
<i>31-10-16</i>	<i>31</i>	<i>1</i>	<i>31 00</i>		<i>31</i>	<i>10</i>	<i>3 10</i>			<i>34 10</i>											<i>20 00</i>		<i>27 80</i>	<i>14 67</i>			
<i>1-11-16</i>	<i>14</i>	<i>1</i>	<i>14 00</i>		<i>14</i>	<i>10</i>	<i>1 40</i>																				
<i>30-11-16</i>	<i>16</i>	<i>1.05</i>	<i>16 80</i>		<i>16</i>	<i>10</i>	<i>1 60</i>			<i>33 80</i>											<i>20 00</i>	<i>25</i>	<i>20 25</i>	<i>28 12</i>	<i>✓</i>		
<i>1-12-16</i>																											
<i>15-12-16</i>	<i>15</i>	<i>1</i>	<i>15 00</i>		<i>15</i>	<i>10</i>	<i>1 50</i>			<i>16 50</i>											<i>20 00</i>	<i>172</i>	<i>29 02</i>	<i>15 60</i>	<i>✓</i>		
<i>31-12-16</i>	<i>16</i>	<i>1</i>	<i>16</i>		<i>16</i>		<i>1 60</i>			<i>17 60</i>													<i>120 90</i>	<i>156 50</i>			
<i>1917</i>			<i>12 20</i>				<i>12 20</i>																<i>41 36</i>	<i>28 84</i>			
<i>1/31-17</i>	<i>31</i>	<i>1.00</i>	<i>34 10</i>							<i>34 10</i>											<i>20</i>		<i>29 59</i>	<i>33 35</i>			
<i>1/28-2-17</i>	<i>28</i>	<i>"</i>	<i>30 80</i>							<i>30 80</i>											<i>20</i>		<i>23 49</i>	<i>40 66</i>			
<i>1/31-3/17</i>	<i>31</i>	<i>"</i>	<i>34 10</i>							<i>34 10</i>											<i>20</i>		<i>40 06</i>	<i>34 70</i>			
<i>1/30-4/17</i>	<i>30</i>	<i>"</i>	<i>33 00</i>							<i>33 00</i>											<i>20</i>		<i>20 00</i>	<i>7 70</i>			
<i>1/31-5-17</i>	<i>31</i>	<i>"</i>	<i>34 10</i>							<i>34 10</i>											<i>20</i>		<i>25 23</i>	<i>56 57</i>	<i>Died 5/7/17 C.R.B. 274 4/7/17</i>		
<i>1/30-6-17</i>	<i>30</i>	<i>"</i>	<i>33</i>							<i>33</i>											<i>20</i>		<i>20</i>	<i>69 57</i>			
<i>1/31-7-17</i>	<i>31</i>	<i>"</i>	<i>34 10</i>							<i>34 10</i>											<i>20</i>		<i>20</i>	<i>83 67</i>	<i>I. Sub Div 2 1/7/17 C.R.B. 274 4/7/17</i>		
<i>Summa</i>			<i>368 20</i>						<i>19 10</i>	<i>387 30</i>											<i>220 -</i>	<i>1 97</i>	<i>303 63</i>	<i>83 67</i>			

*W. Schmidt*

Statement of  
 NOV 8 1917  
 Account rendered

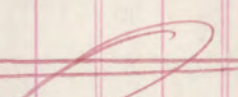
*Can. A.P. \$200.00 (1-9-16 to 30-6-17 @ 20.00) per B.P. form of 12-7-17*

749241. Pte Ladd J. H.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS										
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT								
			\$	C.						\$	C.																	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE
From July.			368	20					19	10	384	30					29	97	42	97	8	72	220	1	97	303	63	83	67						
																					4	26					4	26	79	41			Pr. 853 charge. H.C. Hap. Endhouse.		
																												85	85	78	56			In R. 5 C.M.R. June 1917.	
																																		20 <sup>00</sup> ad. July 17 not paid per B.A. 2/12-7017	
W.C. Ecklin 1917 Dec							20	-	20	-																									W. Ottawa for 5 ment 3/12/14. W.C. Ecklin N.E. 28/14.

Balance transferred to N. E. Branch

98 56      98 56





FAIRFIELD COURT HOSPITAL,  
(V.A.D. Sussex 2)  
EASTBOURNE.

(2)

CASE SHEET. 662

No. [REDACTED] Name. Rank.

799241 5 CORP. Ladd W. Pte.

Admitted.

Discharged.

continued.

The Appendix was neither seen nor felt -  
plands in mesentery much enlarged.  
& many small nodules in peritoneum were  
felt. ? tubercular -

after operation Patient slept till 2 am.

4 July 17 Had a comfortable night - T. 97.4 - P. 84  
expressed himself as being comfortable but  
hungry. Had a fairly comfortable day -  
sick several times. - ET 99-2 P. 92.

5 July, 1917 Not slept very well - vomited twice  
T 99-4. P 94 - at 8-30 appeared  
fairly well -

at 9-30 am Sister called me to him from  
another Ward, as he was much worse.

a running pulse of 150 - R 36 Ashy grey colour  
complaining of pain in left side under ribs  
& great difficulty in breathing - The heart's  
action further weakened & he died at 11-50 am

A. Edgar Peck

M.O.

5 July 17

FAIRFIELD COURT HOSPITAL

1000 W. 10th St. S.  
MINNEAPOLIS, MINN.

CASE SHEET



M. H. EASTBOURNE

①

FAIRFIELD COURT HOSPITAL,

(V.A.D. Sussex 2)

EASTBOURNE.

CASE SHEET.

661

No. [REDACTED] Regt. Name. Rank.

74924 56MR Ladd W P6

Admitted.

Discharged.

May 18<sup>th</sup> 1917 July 5<sup>th</sup> 1917

G. & W. R<sup>l</sup> leg - Comp<sup>d</sup> Fract. R Fibula 7.5.17.  
on admission - a long wound over outer part  
of lower third of Fibula leading down to bone.

27-5-17. Superficial wound only, healthy surface

11-6-17. Complained of abdominal (general) pain  
some distension of abdomen. T. 100-2.

12-6-17. T. 100.6. P. 124 R 34 - Still pain worse on left side  
good result from Turps enema. some shifting dulness  
in abdomen - Rectal examination negative.

14<sup>th</sup> to 17<sup>th</sup> abdominal discomfort some fulness  
Irregular P 80 to 90 - T. 100-100 -

18 Easier Temp normal.

21 Some resistance & tenderness over McBurney's  
spot found for first time - Shifting dulness gone.

26 More definite resistance over caecum.  
Temp normal - pulse quiet.

1 July a definite lump to be felt in caecal  
region

3 July Laparotomy performed - Bowel found  
firmly adherent to abdominal wall &  
extensive adhesions of intestines, there  
was great difficulty in separating these.

(over)

M.O.

BARNEYS CO. HOSPITAL

1700 BROADWAY

NEW YORK CITY

CASE SHEET

*[Faint, illegible handwritten text, likely bleed-through from the reverse side of the page.]*

Regtl. No., Rank and Name Pte William Ladd Corps 5 T.R. Canadian M.R.

Disease T. B. ? Hospital Central Military

To Officer i/c Laboratory. Ward \_\_\_\_\_

Please carry out an examination of the accompanying specimen of Mesenteric Gland with special regard to T. B.

Date 14.7.17

O. i/c \_\_\_\_\_ Ward \_\_\_\_\_

LABORATORY REPORT.

R. Stebbins

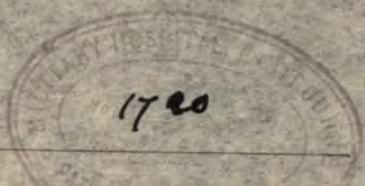


The gland shows  
chronic inflammatory (tubercular)  
change.

R. Stebbins

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

R. Stebbins  
17.7.17



Date of Examination \_\_\_\_\_

O. i/c Laboratory.

Amesbury, N. H., Oct. 1, 1917

Dr. J. M. [unclear]

Hospital [unclear]

Wm. [unclear]

T. R. ?

~~Amesbury, N. H.~~

It is my duty to report to the attending physician

T. R.

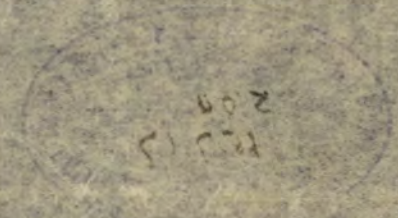
Oct. 1, 1917

Amesbury, N. H.

LABORATORY REPORT

Robert [unclear]

[Faint, mostly illegible handwritten text]



Amesbury, N. H.  
Oct. 1, 1917

Wm. [unclear]

1700

Amesbury, N. H.

Amesbury, N. H., Oct. 1, 1917