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18	Name Jas Front Surfer
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22	¥5

Army Form B. 217.

do solemnly declare that the above answers made by Jas Booth Surgeand-Signature of Witness.

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

Witness my hand.

should be returned to him on re-e

which

of Discharge,

possible, his Parchment Certificate re-enlisted in the (Regiment)

×

former Service, and to produce,

particulars of his

the

Recruit is to be asked

4 2 . i

ink as follows, viz .- (Name

the (Date)

Signature of Recruit Signature of Witness Jus Booth

CERTIFICATE OF MAGISTRATE OR ATTESTING OFFICER.

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.

Signature of the Justice

If any alteration is required on this page of the Attestation, a Justice of the Peace should be requested to make it and under Section 80 (6), Army Act, 1881.

The Recruit should, if he require it, receive a copy of the Declaration on Army Form B. 318.

equivalent to years months.	Distinctive Marks.
Height 55 feet 1010 inches.	
Weight 16 14/00, lbs.	
Chest Measurement 36 inches.	the buck of left needs
Complexion No.	200
Eyes Rhie Man	
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Religious denomination	
Note.—Civilian Medical Practitioners on making the primary examination of	
A Civilian Madical Practitioner in that acquired to 611 the in	tedient Regulations, and to be filled in in all cases.
Should the Medical Officer be of opinion that the recruit has served before a note to that effect in the column for distinctive marks.	e, he will (unless the man acknowledges to any previous service) ma
CERTIFICATE OF PRIMARY MEDICAL EVAN	IN A MARKANIA AND A SAN AN
CERTIFICATE OF PRIMARY MEDICAL EXAM	INATION—(by a Civilian Medical Practitioner.)
I have examined the above-named Recruit and find that he de Scrofula; phthisis; syphilis; impaired constitution; defecti- hernia; hæmorrhoids; varicose veins beyond a limited extent	oes not present any of the following conditions, viz.:-
hernia; hæmorrhoids; varicose veins beyond a limited extentinveterate cutaneous disease; chronic ulcers; traces of corporal	; marked varicocele with unusually pendent testicle
the letters D., or B.C.; contracted or deformed chest; chapter	punishment, or evidence of having been marked with
defect calculated to unfit him for the duties of a soldier.	out value of spine, or any other disease or physics
He can see at the required distance with either eye, his hear joints and limbs, and he declares he is not subject to fits of any d	ert and lungs are healthy, he has the free use of hi
I consider him fit for service in the Army. I have filled up the above "Description" in pencil.	
	her R. 7 R
4 / /	W. More Brown In B. , Civil Medi
	20 H. Owen Laylor hand Practition
Note.—This Certificate should be left blank when the Recruit is examined	in the first instance by an Approving Medical Officer.
CERTIFICATE OF FINAL MEDICAL EXAMINA Examined by me in accordance with above Certificate, I const I have completed the above Description in ink.	:.le_ 1:_e _ 1:
I have completed the above Description in ink. Oate 49: 187.	B. A. for the Arm
I have completed the above Description in ink. Oate 187. 4. 187. Clace Insert here " iit," or " unnt."	Medical Officer.
I have completed the above Description in ink. Oate 187. 4. 187. Clace Insert here " sit," or " unnt."	Medical Officer.
I have completed the above Description in ink. Oate 187. 4. 187. Clace Insert here " iit," or " unnt."	Medical Officer.
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I have completed the above Description in ink. ate April 4 ': 1877. lace	Surgeon, Approvi
I have completed the above Description in ink. Pate April 4 " / W] Clace Low Low Lawrence with above Certificate, I consider the recruit unfit, he will state the state of Primary Military Certificate of Primary Certificate of Primary Military Certific	for the Arm B. Hinney Surgeon, Approving Medical Officer. Method of the Arm Medical Officer. Method of the Arm Medical Officer.
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I have completed the above Description in ink. Date April 4 ': 1867. Place London Medical Officer consider the recruit unfit, he will state the state of Primary Military or service in the three years of the service in the three years of the service in the three years or	The Arm Surgeon, Approving Medical Officer.
I have completed the above Description in ink. Date April 4 '' / / / / / / / / / / / / / / / / /	The Arm Surgeon, Approving Medical Officer.
I have completed the above Description in ink. Date About 4 1867 Place Insert here "Bt," or "unnt." Certificate of Primary Militor I hereby certify that the above-name for service in the three for service in the three field accordingly approved and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with. I accordingly approve, and appoint him to supplied with.	The Army Surgeon, Approving the here briefly the cause of unfitness. Surgeon, Approving Medical Officer. Aledical Officer. The Surgeon, Approving Medical Officer. Aledical Officer. The Surgeon, Approving Medical Officer. Aledical Officer. The Surgeon, Approving Medical Officer. Aledical Officer. Recruiting Officer. The Corps. The Surgeon, Approving Medical Officer. The Surgeon of the Army Medical Officer.
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I have completed the above Description in ink. Date April 4 '' / / / / / / / / / / / / / / / / /	sider him for the Arm B. A. Surgeon, Approving Medical Officer.

CONN.

Total amount of Service forfeited towards pension, and not allowed to reckon towards G. C. Pay brought forward from the old Record; Total Service forfeited towards pension, and not allowed to reckon towards G. C. Pay brought forward from the old Record; Total Service forfeited towards from the old Record;	STATEM	ENT o	f the SERVICES of	No. 9	/2 Name	Willia	in al	low
Total amount of Service forfeired towards pension, and not allowed to recknot owards G. C. Pay brought forward from the old Record; Total Service forfeired towards from the old Record; Total Service forfeired as above	in which served	or	. 1		Dutes	allowed to recken for fixing the rate of Pension	Reserve not allowed to reckon towards G. C. Pay.	certifying correctness of Entries
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Total Service forfeited as above				Co Co Co Co	2			
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Corps	Battn.	of the SERVICES of	Army	2 Name Period of S ench I	ervice in lank	Amount of Service towards Lim. Engagt.	Amount of Service for fixing the rate of Pension	Amount of Service towards G. C. Pay
nervoll nent sunt	Depôt	Casualtics, &c.	Private	Hril of	To	years days	years days	years day
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I hav	ve exan	nined the above details,		rvice as above em in every res or Officer Co	Paymaster,	.		
Furt	ier Serv	rice from the	to th		when			

MILITARY HISTORY SHEET.

Country	From	service or	To	ea men, v	YEARS	DAYS	rds G. C. Pa	y or Pension).
- Nome	1.4.84.	31.		03	16	DAIS	N.B.—7	The Country
	1.4.8/						not neces	shown it is
		_					separately	sary to shew the service in nt stations of
							same count	ry. England, and Ireland to
		-					be shewn	under the
		<u> </u>					general terr	n " Home."
				******			For mod Foreign Se	e of computing rvice, see Sec.
							XIX., Qu	een's Regula-
	-						tions.	
2. Educated at	Royal Military As Royal Hibernian M	ylum_						Initials of Officer making the Entry
6 W	Royal Hibernian A	intary	School 4/	1	. V.		1	
3. Name and Address of Next of Kin		141			25	Her/ve	Seller	- Gest
	(———							
4. Campaigns								
				-				
	/							
5. Wounded								
		-,						1
6. Effects of Wounds				-				
7. Special instances of gallant conduct								
8. Medals, decorations, and annuities								
and annuities								
9. Injuries in or by the								
Service								
To whom								
10. Married		٠.						
Flace and Date	Not mas	nul						aul
11. Passed Classes of								
Instruction								
12. Certificates of Edu-	186							
cation	4 Class.	~						and
13. Character on being passed to Reserve	On 1st transfer On 2nd transfer	900						
14. Numerical position of Officers on transfer to	n roll of Non-Committee Reserve					7		
15. Character on being						4	1.	
Discharged					+46.1	Section .		
16. Place of Discharge								
17. Intended place of								
Residence on Discharge								
18. Cause of Discharge		-				-		
19. Pension awarded	-						•	
on Died	****	-			10 APR - 10 APR - 1	2 - P		
20. Died	Will the	-						
21. Notes	DEPART.	-	100		13			-
Nora.—The	se entries are to be made from	n time to ti	me as the	y coour, as	d initial d by the	Other makin	g the entry.	
The state of the s	No. of the Park	A.	منتها	150	-	Α.	24	-

MEDICAL HISTORY of

Surname alton	Christ	an Name Wel	liam
Enlisted on 1 day of Ale	18 97,	Finally approved by	I.B. Aunt
Sirthplace { Parish Heach No.	elper	Surgeon	major from: fre
Age (last birthday) 23			
Former Trade Jam. ha	1:/	Examined for re-engage	gement,
Height	Inches.	day of	18
Weight 16 H lbs.		aay or	
Chest Measurement	Inches.	• Considered	
Physical Development Vm	4		Surgeon
Small Pox Marks 71 mg		• If unfit, state disability.	
Vaccination Marks Arm L. Number		Re-vaccinated on 6	to de theil 8/
When Vaccinated / /		1.11	1
Marks on body, congenital or otherwise		Arm	Number
home.		many	Well surgeon cots of
On Enlistment Joined3/	Corps.	REGIL. NU	IBER. DATE.
Fransferred to	n. Guar	do 912	2 4.4.87
APP	EARED BEFORE A	MEDICAL BOARD.	
Station Date		Disease	Result
General remarks as to habits, conduc	t, &c. food	temperate	
General remarks as to habits, conduction of the second conduction of th		awfolten	Bu Gint + and 3
N.B.—This sheet to be disposed of in accordan		Day 110 Med Day on the	

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0 /	Station, or Troop Ship	Date of arrival at the Station, or of Embarkation	into Hosp	nion opital	Discharge from Hospi Yr. Mo.	spital	Diseases according to Nomenclature. (a) Primary. (b) Secondary.	Number of Days in Hospital	Remarks on nature of the disease; how ind severe; if completely recovered from; wheth treatment was adopted. In venereal cases, primary disease, and whether mercury has be accident, state whether it occurred on duty.	or any particular	Signature of Surgeon.
William	Caterhaw Currage Dublew	6. 4.89. 8.9.89 10.19.69	90 1	"	90-1		No buty to buty reflected	-	Vickenie - Nest -	limple.	Saskdrien
Christian Name									•		
lon											
Surname											

Award Sheet.—Disablement Pension.

harge Documents received.	K 10 0 10	- i i ja	
1	NG 18 . 5 . 18	Case Numb	F. S. E. 20
rame, alton Willi	m	SEI	RVICE.
legi. No. 19707 Rank	Private	Clas	for Pension.
egiment Grenadies &	wards 4th Bo Batta	Corps. WT. I.	II. III. IV. V. Total.
ate of Discharge 20 - 2 /6.	Date of commencement of Pension	a syp.	9
DA1: 6 DOI .4	or Peneron 1.1.	bola (S. Ro.)	194
ause of Discharge Physica	Sy unget.	2	edahrs. 13
ent to Secretary, R.H., Chelsen, for assessment	nent of service gallant conduct pension	(Date).	62
ate of gallant conduct peusion awarded	gallant conduct		
isability for which invalided	plaia	Returned from R.H., Chelsen	for H S
pinton of Walter Part Due to	service during war wit	Degree of Disablemen	Perman
(Due to	nor oggravated by J	h Germany	
pinion of D.G.A.M.S. Aggravated by	nor aggravated by	h Germany	
Jucapacili	1: 2 1 5		
tificial Appliance required			
tificial Appliance supplied		A.A.B. advised_	(De
spital or Special Treatment suggested_	Hospital G. P	3 months	
-brent or obcome trememe aufRenced	e way man O. I	Smonths	
Action (aken		,	
Init. Date.			. 4 1 1
Init. Date.	Pension or Gr	AWARD.	
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Init. Date. W.348/a	Graving Rung	AWARD.	ooker(Ini
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to Records Lifection to 1.0. Card and D, 400)	Duration from to na Degree of Disablement Non-attributable	AWARD. Atuity. 2 32.10	Children's Allowance.
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Init. Date. F. W.3484a	Duration from to na Degree of Disablement Attributable Non-attributable Names of Child Separation Allowance issued to	AWARD. Atuity. J 32.10 on ture Golden	Children's Allowance. Number Proposer Dates of Birth.

Casualty Form-Active Service.

	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as	Place	Date	Remarks taken from Army Form B. 21 Army Form A. 36, or oth
Date	From whom received	A. 36, or in other official documents. The authority to be quoted in each case		- 1 10	official documents
		Decepational and sent	Ken.	13/1/1	
		,			1
		,			Y
			1		

 ⁽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.

18787M.18

Medical	Report	on	an	Invalid.
Medicar	ALC DOT 0	.,		

1. Unit 5th (les & Genacio Guaras 7. Former Trade Tale

2. Regimental No. 19707.
3. Rank

4. Name William alter.

5. Age last birthday るつ.

Ris Enlisted on \$ 10.1914

7s. If with previous service in Army, state-

(a) Former Unit; General Sch

(b) Regimental No. ; タル.

(e) Date of Discharge; 31. 3.1904.

(d) Cause of Discharge. Jermination

Disability in respect of which invaliding is Proposed. (Other disabilities should be reported upon in answer to question No. 19).

hujalya

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the ease. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

Date of origin of disability.

States 1914 States Chelmer Barrecks.

Place of origin of disability.

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

Not appeditionary Force.

Ale states that he gothers

Rheuwetien Through being constants he Barracks. Has here done full military Duly.

Give your opinion as to the causation of the disability, stating whether in your opinion it is-

(a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condi-tion to which it is attributed should be stated, see Notes on page 3).

(b) constitutional or hereditary, and not aggravated by service during the present war.

(c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c.

se states this he have had Therefor attributes to present was Nο

	i.e.	General health - 4000
3.	What is his present condition?	Paus comblemed of chiefly in
	Weight should be given in all cases u	when the shoulders and high leg; an
	it is likely to afford evidence of progress of the disability.	"Con Mayor of owelling of well fort,
	progress of the assaulting.	So the hour symp
	If the disability is an injury, wa	will be at a formal
	caused—	" " Jack F. Park.
	(a) In action?	(us a bill a chile
	(b) On field service?	In apparent
	(e) On duty?	
	(d) Off duty?	,
5	Was a Court of Inquiry held on	the (
	injury?	· ·
	If so—(a) When?	(
	(b) Where?	
	(e) Opinion?	>
3.	Was an operation performed? If what?	1 so, NO
7.	If not, was an operation advised	and No
••	declined?	
0	In case of loss or decay of teeth. I	In the .
"	loss of teeth the result of wor	ands, (
	injury or disease, directly* attributo active service?	Itable
0	Give particulars of any other disabi	ilities
IJ.	existing, but not in themselves suffi	licient \
	to cause invaliding, and state whe they are attributable to or have	been been
	aggravated by service during the pr	
	war.	
20.	Do you recommend—	1 1
	(a) Discharge as permanently un (b) Change to England?	slit, or yes permanully huf
	(b) Charge to England	
		7. 7. he Even head
		Officer in medical charge of case.
exc	I have satisfied myself of cept †	f the general accuracy of this report, and concur therewith,
Sta	ation	
		Officer in charge of Hospital.
Da	te	
1~	s of teeth on or immediately after active	service, should be attributed thereto, unless there is evidence that it is due to some
-	•	other cause.
	† Dele	ete this word if no exceptions are to be made.
		19/2

Opinion of the Medical Board.

Notes,—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pension vary directly according to whether the disability is, (1) caused or aggravated by service in the present war, (a) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentiate between them.
- (iv). In answering question 21 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

 (v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where it is caused by military service.

there there is a special liability to contract the disease.

- 1. (a.) State whether the disability is clearly
 - (i.) Service during the present war;
 - (ii.) Climate;
 - (iii.) Ordinary military service;
 - (iv.) Want of proper care on the man's part, eg., intemperance, misconduct, &c.; or
 - (v.) Whether it is constitutional or hereditary.
 - (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it?
- 22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which?
- 23. Is the disability permanent?
- 24. If not permanent, how soon do the Board recommend re-examination?
- What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present? Degrees of disablement should be ex-

pressed in the following percentages:—100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.

- 26. If an operation was advised and declined, was the refusal unreasonable?
- 27. Do the Board recommend-
 - (a) Discharge as permanently unfit, or
 - (b) Change to England?
- 28. If discharge is recommended it should be stated whether further medical treatment (including orthopædic training) is desirable in a
 - (a) Sanatorium;
 - (b) Hospital;
 - (c) Convalescent home;
 - (d) Asylum; or
 - (e) Other institution either as an inpatient or an out-patient, and if so the period for which recommended.
- 29. With reference to Army Council In-struction No. 144 of 1917, is any surgical appliance recommended?
- 30. Does the man require the constant attendance of another person?

4/come

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Anopular DB. 3 hoth

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DUKE OF YORKS HEADQUARTERS, CHELSEA

Members.

3 0 JAN 1918 Date.

Approved.

Station DUKE OF YORKS HEADQUARTERS.

3 0 JAN 1918

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

Surname	Mond	Christian Name			William		
Birthplace :—Parisl	11	Table IGI	Cou	nty	Jednys REGULAI	R ARMY.	
Examined	}	on 5 day		191\t on at	day of	191	
Declared Age	ofbulk	42 hours h	ouths all	670			
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(b) Slight defects but to cause rejection		(6)		(b)			
Approved	by (Signature) (Rank)	Steplew		ayor			
		′ Ro	Mr C 12 3	mcer.		Medical Officer.	
Enlisted	{	at		at			
	(on day	Regtl. N	191 on	day of Corps	Regtl. No.	
Joined on enlistment			197		COLP	aogu, su.	
Transferred to	·}						
Became non-effective by		on day		191 on	day of	191	
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	(Rank)	-1		1		[P.T.Q.	

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date.	Brief details and Signature.
2.10.16	TMB. CIGATHO 12 2 Melen Moyo. TMBCII h. The Sugar Moyo. TMBE N. 7 Mc Cum 17.0%

Table IV.-Service Table.

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