

8
V
DUPLICATE

11 M. D. 1st Depot Battalion B.C. Regiment
Regtl. No. 2022027

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

main
2/4/18

1. Surname..... LOUGHEED
2. Christian name..... Elmer
3. Present address..... R.R. No. 1 Steveston, Point Grey, B.C. Canada
4. Military Service Act letter and number..... 283438
5. Date of birth..... October 26th 1891
6. Place of birth..... Thornbury, Ontario
(town, township or county and country)
7. Married, widower or single..... single
8. Religion..... Church of England
9. Trade or calling..... Carpenter
10. Name of next-of-kin..... Israel Lougheed
11. Relationship of next-of-kin..... Father
12. Address of next-of-kin..... R.R. No. 1. Steveston. Point Grey Vancouver B.C.
13. Whether at present a member of the Active Militia..... no
14. Particulars of previous military or naval service, if any..... none
15. Medical Examination under Military Service Act:—
(a) Place Vancouver B.C. (b) Date Nov. 16/1917 (c) Category A

DECLARATION OF RECRUIT

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

Elmer P. Lougheed (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....	26	yrs.	-	mths.	Distinctive marks, and marks indicating con- genital peculiarities or previous disease. scar on left instep lump on left foot inside instep
Height.....	5	ft.	10 $\frac{1}{2}$	ins.	
Chest	}	fully expanded.....	34	ins.	
measurement		range of expansion.....	2 $\frac{1}{2}$	ins.	
Complexion.....	fresh				
Eyes.....	brown				
Hair.....	light brown				

As Supper Ins. Lt. Col.
for O. C. 1st Depot Btlh.
B.C. Regt.
Place Vancouver, B.C. Date March 8th. 1918.

100-100

100-100

100-100

100-100

100-100

100-100

100-100

100-100

DESCRIPTION OF SUBJECT

100-100

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DESCRIPTION OF SUBJECT

100-100

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100-100

11. M. D. 104. Depot Battalion B6. Regiment

Regtl. No. 2077027

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1.)

1. Surname *Lougheed*
2. Christian name *Elmer. David* *sgt. Lt.*
3. Present address *R.R. 1, Mission, Point Grey, British Columbia Canada.*
4. Military Service Act letter and number *243438.*
5. Date of birth *Oct 26th 1891.*
6. Place of birth *Thorubury, Ontario.*
(town, township or county and country)
7. Married, widower or single *Single*
8. Religion *Church of England.*
9. Trade or calling *Carpenter.*
10. Name of next-of-kin *Israel Lougheed.*
11. Relationship of next-of-kin *Father.*
12. Address of next-of-kin *R.R. 1, Mission, Point Grey, Vancouver B.C.* SUFFICIENT ADDRESS
13. Whether at present a member of the Active Militia *No.*
14. Particulars of previous military or naval service, if any *None.*
15. Medical Examination under Military Service Act:—
(a) Place *Vancouver B.C.* (b) Date *Nov. 16th 1917.* (c) Category *A.*

DECLARATION OF RECRUIT

I, *David Elmer Lougheed*, do solemnly declare that the above particulars refer to me, and are true.

Elmer D. Lougheed (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age *26* yrs. mths.
Height *5' 10 1/2* ft. ins.
Chest measurement } fully expanded *34* ins.
range of expansion *2 1/2* ins.
Complexion *Fresh.*
Eyes *Brown.*
Hair *Light Brown.*

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

*Scar on left instep
Lump on left foot
inside instep.*

W. Dupper *sgt. Lt.*
O. C. *104.* Depot Btl. *B6* Regt.

Place *Vancouver B.C.* Date *March 8th 1918.*

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

1. Surname
2. Christian name
3. Present address
4. Military Service Certificate number
5. Date of birth
6. Place of birth
7. Married, widowed, or single
8. Religion
9. Trade or calling
10. Name of next of kin
11. Relationship of next of kin
12. Address of next of kin
13. Whether at present a member of the Reserve
14. Particulars of previous military or naval service, if any
15. Medical Examination under Military Service Act—
 (a) Present (b) Past (c) Category

DECLARATION OF RECRUIT

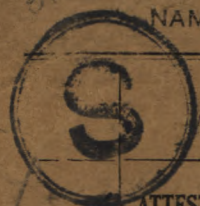
I hereby declare that the above particulars are true to the best of my knowledge and belief, and I am not a member of the Reserve.

DESCRIPTION ON CALLING UP

Apparent age: _____
 Height: _____
 Chest: _____
 Measurement of chest: _____
 Complexion: _____
 Eyes: _____
 Hair: _____

REGIMENTAL DOCUMENTS

NAME LOUGHREED-ELMER DAVID P^t REGT. NO. 2022027 UNIT 1st BN B.C. Regt. HQ. FILE NO. _____



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

32112

DISCHARGE

Category

med. unfit.

DESERTION

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

1 TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

2 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCFEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

1 LAST PAY CERTIFICATE (M.F.W. 44)

2 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

M 21192

1 A F W 3118

1 *misc*

2 A F I 1237

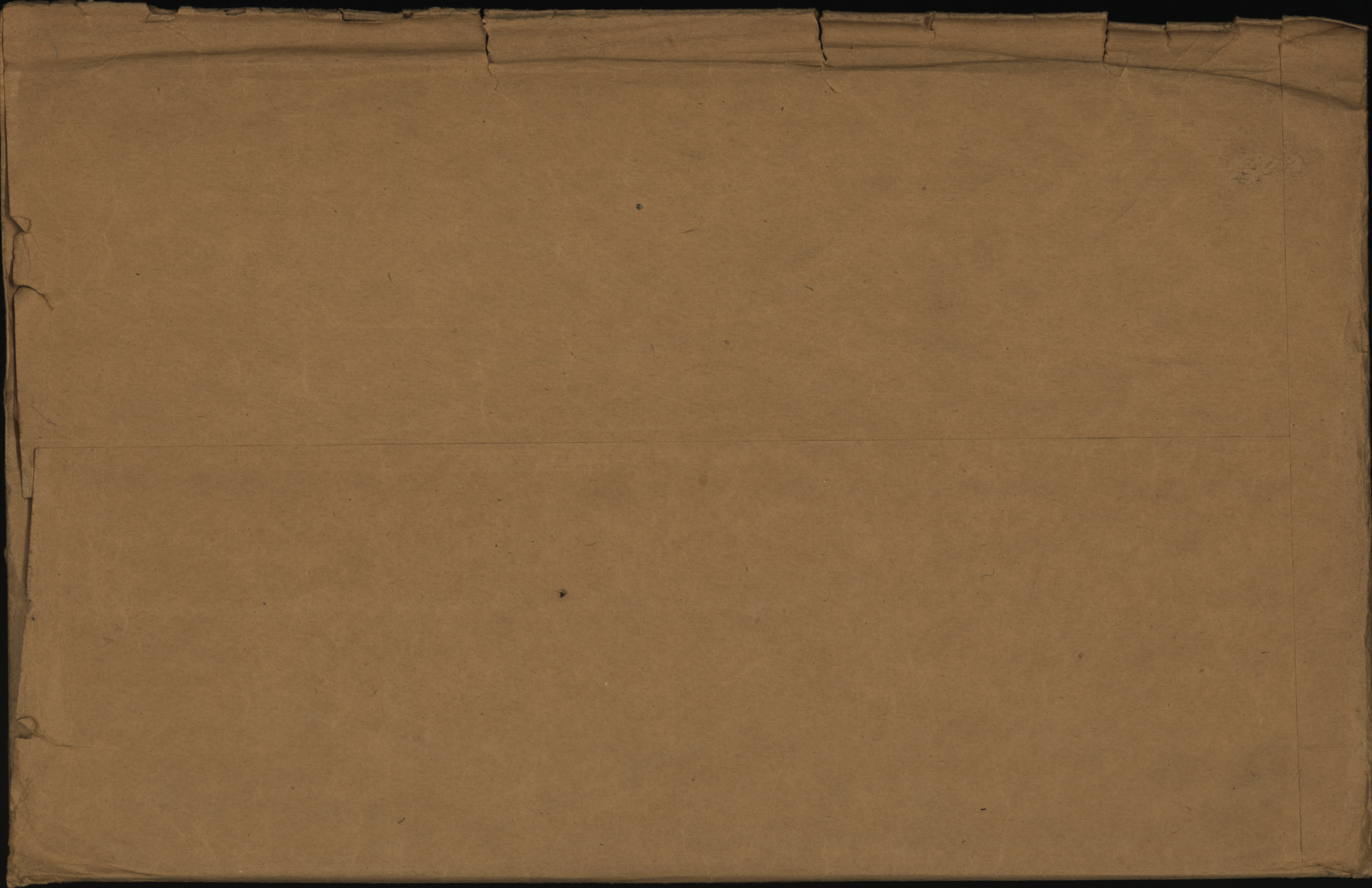
1 C.A.D.C. 50069 A

1 MFW 67

1 *card*

1 *Cas card*

R 177



*Name BLUGHEED, Elmer. Rank Pte. Regtl. No. 2022027.
 Original unit 7th Bn. Present unit 7th Bn. M. or S. M. Age 27 Religion C of E. Fyle Depot 7519
 Ref. H.Q.

Port, ship, and date of arrival Halifax "Essequibo" 23/1/19.

Next of kin Father. Israel Lougheed, R. R. #1, Steveston, Point Gray, Vancouver

Address on leave

Address on discharge R. R. #1 Steveston B. C.

Transportation issued Yes Date Character on discharge

Previous occupation Carpenter Date and place of enlistment Vancouver, 8th March '18

Diagnosis G. S. W. abdomen. 13 Date of Medical Boards Mar. 7. 1919

Date.	Remarks	Pt. 2 Order No.
6/2/19	T.O.S. from O sea 13/1/19 Posted to Cus. Coy. 1/2/19 Leave 17/2/19	37/189c
1-1-19	PTA 14 day Subs ill	HSDO 33/228
17-2-19	Posted to (Shanghney)	HSDO 37/256
13-3-19	So Discharge Section	HSDO 43/5. g.

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

(over)

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192
150M-6-18.
1772-39-1243.

Surname

Christian Name or Names

Reg. No.

LOUGHEED

E.D.

2022027

Rank

Unit

Pte.

Sask. 46

Cas. List.

83 Gnl. Boulogne

9-10-18.

16-10-18 A345-3

GSW R. Thigh ⁶.21-10-18 A349-I Gene me H. Eastbourne ¹⁵⁻¹⁰⁻¹⁸

19-11-18 B374

C.R.L.S. Burton.

15-11-18.

23-12-18 B403

5 Can Gen L'pool.

19-12-18

Debility ^{add}

17-1-19 B422-2

Invalided to Canada
13-1-19

AND 2 DEPT.

E.D. 1300 S. O.M.F.C. London.

D.M.S. 1300. 50M-30-8-18.

Cas. List.

A.T. Serum }
Dose and Date } 1st

2nd

AT 1500

FIELD AMBULANCE NOTES.

Morphia }
Dose and time }

Date of wound or }
onset of illness }

Religion

CR

16 98.4 72

Army Form W. 3118.

FIELD MEDICAL CARD.

No. 2022027 Rank

Name

Unit

Battle Casualty Accidentally Wounded. "Sick"

(Strike out description which does not apply).

No. of F.A.

Date of admission

F.A. diagnosis

M F

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

SW Thigh M.

Base Hospital diagnosis (alterations or additional)

Atty 120

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S.

30 CCS

Date of entry

27.9.18

7. Abdomen

No. of Hospital

839

Date of entry

9/10/18

one wound (ant. by L. clear)

Post. for 3rd

TV P. wound

W.C.

Puncturing wound below R.

chest of skin. Abdominal symptoms
Slight No. Shallow

2 rays please

Small sharpnel bullet present
(under the + at depth of -)
J.C. Haddow
Capt.

See notes

Capt Campbell

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

SURNAME.

Lougheed.

CHRISTIAN NAMES

Elmer D.

REGL. NO.

2022027

RANK

Pte

UNIT

B.C. Regt 1st Dps Bn.

FORMER CORPS

Inf

11.

CARD NO.

X

881013-3-19 M.U.
10073014-3-19 #11100

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Lougheed, Israel

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

R.R. No. 1 Steveston Point Grey
Vancouver, B.C.

COUNTRY OF BIRTH

Canada

Thornbury Ont

DATE

Oct 26th 1891

PLACE OF ATTESTATION

Vancouver, B.C.

DATE

Mar 8th 1918

o/s. 15/5/18. $\frac{1254}{9}$

R/C. 26-1-19 $\frac{207}{23}$ Pte

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

LEDGER No. 331

OS
SERIAL No. A 9339 37

REG. NUMBER

1022024

NAME

Lougheed Elmer

RANK

Pte

CORPS

7th

AGE

27

SERVICE

6 2/12 4 7/12 7 1/12

NAME OF HOSPITAL

Shaughnessy

PLACE

Vancouver

DATE OF ADMISSION

1-2-18

DISEASE

U & W Abscesses

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO

12-3-18

IN CATEGORY

M. F. W. 2553.

50m.—6-18.

1772-39-1332.

P. T. O.

REMARKS:.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

[illegible]

REGT'L. No. 2022027

NAME

H. Q. FILE NO 649

RANK AND CORPS

FOLLOWS

CABLE

NO.

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

Inf. K.

Israel Laughhead "fitter"
R. R. No 1 Steveston, Point Grey
Vancouver B. C.

4-8

W 3977	17-10-18	Adm. 83	Gen. H. Boulogne
W 4934	16-10-18	Art-9th	Gen. R. High

LIST No. 1.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B. 349	Central Trib. Et Eastbourne	15-10-18	gsw. R. & right.
B. 374	10 Cont ² spec. Et Buxton.	15-11-18	" " " "
B. 403	10 S ¹ Con. Gen. Et Kirkdale Liverpool	19-12-18	Dehility
B. 422	Invalided to Canada.	13-1-19.	gsw. et. right

SURNAME.

^u
~~Longhead~~

11

CARD NO.

CHRISTIAN NAMES

Elmer

FOLL.

REGL. NO.

2022027

RANK

Pte.

UNIT

B. Co. Regt. 1st. Opo. Bn.

T. O. S. Mar. 8 1918

D. O. Part II No. 67

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

DATE

no card
29-7-18
S. D.

Duplicate attestation paper to M. H. Q. with
Nominal Roll #12. d/16-3-18.

MARRIED	SINGLE	WIDOWER	TRADE OR CALLING	RELIGION	DESCRIPTION.	APPARENT AGE	YEARS	MONTHS	HEIGHT	FEET	INCHES	CHEST MEASUREMENT	INCHES	EXPANSION	INCHES	COMPLEXION	EYES	HAIR	DISTINGUISHING MARKS	MEDICAL EXAMINATION.	PLACE	DATE
---------	--------	---------	------------------	----------	--------------	--------------	-------	--------	--------	------	--------	-------------------	--------	-----------	--------	------------	------	------	----------------------	----------------------	-------	------

No G. A. P.

Number. 202 2027 Rank

Surname. LUGHEED

Christian Name. Elmer David

Unit. 46th Bn. Can. Inf. Theatre of War. France

Date of Service 20-9-18

Remarks.

Latest Address

R.R. #1, Sturveston, B.C.

Roll No.

Page 5353

YR 45-5-42

OCT 6

1920

[Signature]

LOUGHEED, Elmer David, Pte. 2022027 46th.Bn.

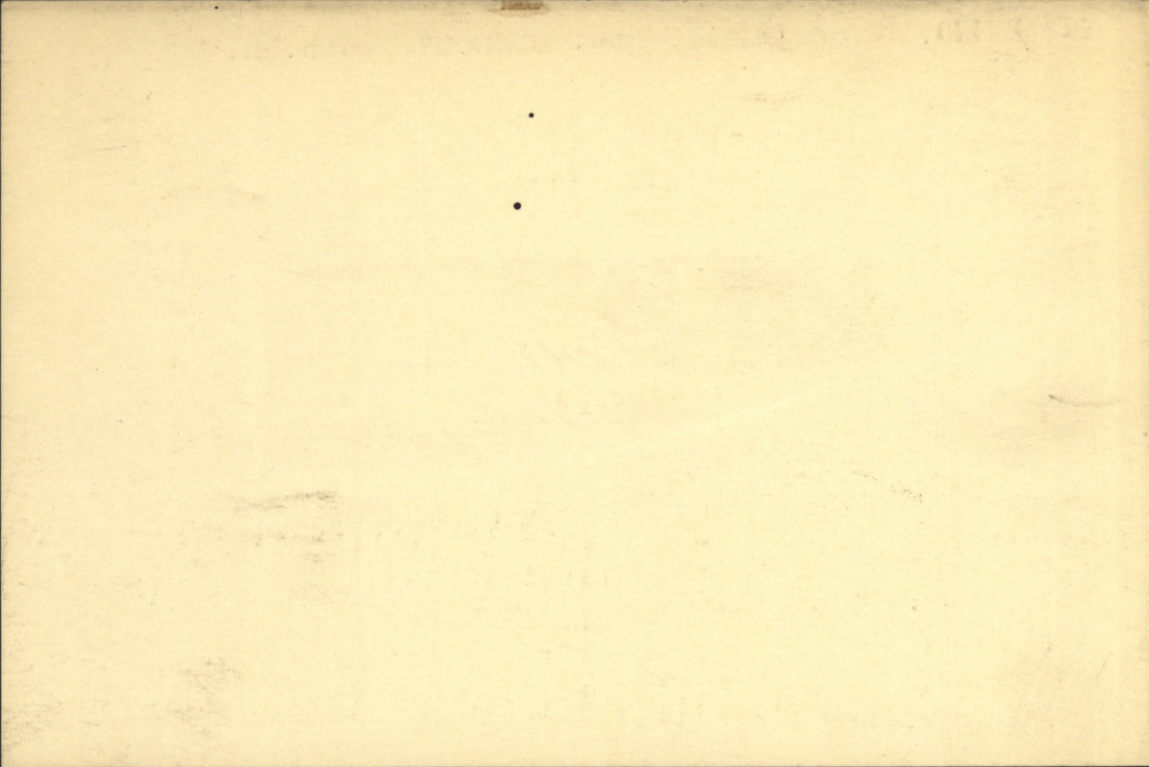
649-L-16769

Medals despd

Cross *hil* no ~~inf.re-marriage~~ or Mother

Married after Dis.

Mother Dead



No. 202079

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

LOUGHEED. E.

REGIMENT

46th

RANK

Pte

No.

2022027

Date of Examination in England

20/12/18

Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

5, 20,

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

} No

Signature of Dental Officer

A handwritten signature in dark ink, appearing to read 'H. A. Smith' or similar, written over a horizontal line.

DIRECTIONS TO
DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



DENTAL CERTIFICATE FOR DEMOBILIZATION
CANADIAN ARMY DENTAL CORPS O.M.C.

DIRECTIONS TO
DENTAL OFFICERS

1. This form will be made out for each individual at the time of demobilization in England or France.
2. It should be completed by the dental officer concerned.
3. In reference to the number of teeth which will be stated.

LOUGHEED E
No. 2022027
20/1/40
Regiment
Date of Examination in England or France

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30

PRESENT DENTAL REQUIREMENTS

045
2.20

1. Teeth
 2. Extraction
 3. Crown
 4. Dentures
- (a) Full Upper
(b) Part Upper
(c) Full Lower
(d) Part Lower

Has he ever received Dental Treatment? No
Has he ever received Dental Treatment? (Yes) No

- (a) In Canada
(b) In England
(c) In France

Signature of Dental Officer

ORIGINAL

To be made out in duplicate.

H.Q. 54-21-23-53

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..... 1st Depot Battalion, B. C. Regt. CEF
VANCOUVER, B. C.

(2) Regimental Number 2022027

(3) Full Name of Soldier Longheed Elmer

(4) Place of Birth Thornbury Ontario

(5) Are you married, or not? Single

(6) If married, state,
(a) Full name of your wife..... NOT APPLICABLE

(b) Present Postal Address..... NOT APPLICABLE

(7) Are you a widower? No

(8) Have you any children?..... NOT APPLICABLE

If so, give number of boys and girls..... NOT APPLICABLE

Also their names and ages..... NOT APPLICABLE

(9) Is your Father alive?

If so, state name and address

(10) Is your Mother alive?

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?

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.

VANCOUVER, B. C.

MAR 22 1918

Date

A. Valland

LIEUT. & A/ADJ. Officer Commanding.
1st Depot Battalion, B. C. F.
VANCOUVER, B. C.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be filled for all Ranks:-
Regtl. No. 2022027 Rank Plt Name Loughred E
Comp. No. 11 District Depot C.E.F., who was Dischd
13-3 191 to

The following is a statement of the account of the above named
from 1-3 1919 to 13-3 1919 the inclusive date
of Discharge or Transfer.

Dr.	Cr.
Bal. Dr. from prev. month.....	Bal. Cr. from prev. month.....
Advances.....	Reg. Pay <u>13</u> da. C. <u>14.30</u>
"	Fld. Allee. " "
A.P. & S.A.	Sep. Allee (monthly)
Other Charges <u>10.89</u> <u>70.00</u>	Other Allee. <u>Clothing</u> <u>35.00</u>
Payt. on transf. or disch. <u>49.30</u>	Other Credits.....
Bal. Cr. (to be pd by new Unit).....	Bal. Dr. (to be deducted by New Unit).....
<u>119.30</u>	<u>119.30</u>

A monthly stoppage of nil has been paid on account of
Assigned Pay for the month of 1919 to Assignee
and Sep. Allee. for the month of 1919

On Transfer of an Officer

Outfit Allee. of p..... has been paid by the Paymaster, M.D. No.

REMARKS:-

- State (1) date of enlistment.....
- (2) if married and if Sep. Allee. Card has been submitted no
- (3) Authority for transfer.....
- (4) Cause of Discharge..... Auth. for Discharge.....

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

Date 13-3-19 1919

Place... Vancouver, B.C.

[Signature]
..... Captain

A/P 15⁰⁰ Cancelled 1-2-19

CANADIAN GOVERNMENT PRINTING OFFICE

REVENUE DEPARTMENT

Form No. 100 (1919)

For use by the Collector of Customs in reporting to the Minister of Finance the results of the examination of the goods imported into Canada.

The following is a statement of the amount of the goods imported into Canada during the month of January, 1919.

Description of Goods	Amount
Woolen goods	1000
Cotton goods	2000
Silk goods	500
Linen goods	300
Other goods	100
Total	4800

Signature of Collector of Customs

Date

Month and Year

Amount of Goods

Value of Goods

Number of Goods

Weight of Goods

Volume of Goods

Area of Goods

Length of Goods

Width of Goods

Height of Goods

Depth of Goods

Thickness of Goods

Weight of Goods

Volume of Goods

Area of Goods

LTR Rank Name ^U LONGHEED, Elmer DAVID Reg'l No. 2022027 -
Unit 11th Dft 1st Bn B.C. If in perm. Corps, }
What Unit? } Married or Single Single.
Place and Date of Enlistment Vancouver, March 8th, 1918. Place of Birth Thornbury Ont.
Name and Address, Next-of-Kin Israel Longheed
R.R.1. Steveston Point Grey Vancouver B.C. Relationship Father r.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No.	8370
File R.L.	
Category	MIL CAN

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.-9546-16.

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.				
1-8-18	1st Res	Arrived in England	Seaford	27-5-18	S/S AJANA
13-9-18	1st Res	So. S. to 1st Bn Overseas	Seaford	23, 5, 18	Pt 2-0 132
1-10-18	7 Bn	S. S. to 46 Bn	Field	20-9-18	Pt 2 113 8001024/11018
16.10.18	46 Bn	Wounded	✓	9-10-18	CHA 345
24.10.18	S.R.D.	T.O.S. from 46 Bn	Bshott	15-10-18	Pt 272446B Pt 119/10.18
14.1.19.	S.R.D.	Inval. to Canada	No 566. H. Liverpool	13-1-19.	61 B 422
19.1.19.	S.R.D.	S.O.S. of Report on being invalided to Canada for further Med treat.	Branshott.	13-1-19	Pt 110.16.

[illegible]

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. *11th Bn. 1st Depot Battalion, B. C. Regt. C.E.F.*
VANCOUVER, B. C.

Regimental No. *2022027* Rank *Pte* Name *Loughheed Elmer David*
C. E. F.

Enlisted (a) *8-3-18* Terms of Service (a) *12 Months* Service reckons from (a) *8-3-18*

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

Extended Re-engaged Qualification (b) *Civil Carpenter*
Military

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		<i>S. O. S., 1st Depot Batt'n VANCOUVER, B. C.</i> <i>PROCEEDED ON 15/5/18</i> <i>Embarked Halifax</i> <i>Disembarked Liverpool</i>		<i>No record</i> <i>15/5/18</i> <i>27/5/18</i>	
JUN 1 - 1918	<i>1st Res Bn</i>	TAKEN ON STRENGTH OF 1st CAN. RES. BATTN.	<i>Seaford</i>	<i>28</i> MAY 28 1918	<i>M 2 D.O. 132</i> <i>137</i>
JUN 1 - 1918	<i>1st Res Bn</i>	<i>On command Legation</i>	<i>Seaford</i>	MAY 28 1918	<i>M 2 D.O. 132</i>
JUN 12 1918	<i>1st Res. Bn.</i>	<i>Returned from Command</i>	<i>Seaford</i>	JUN 11 1918	<i>Pt 2. D.O. 141</i>

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

Casualty Form Active Service

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				

CERTIFIED CORRECT.
 19 SEP 1918
 CAN. RECORDS, LONDON.

SEP 13 1918 *R.M.*
 DECIDED ON DRAFT TO *74* *BATT Seaford.*
 SEP 13 1918 *P.T. II. D.O. 221*
J. J. Styles *66/*
 Captain,
 Adjutant, 1st Canadian Reserve Battalion.

	<i>CAN B</i>	ON STRENGTH 7 TH BATTN CAN. BASE DEPOT	<i>14.9.18</i>	<i>Pl. 11 No 110. d/</i>
		Do CAN. CORPS REINF. CAMP	<i>16.9.18</i>	<i>NR</i>
	<i>CCRC</i>	an. CAN. CORPS REINF. CAMP	<i>16.9.18</i>	<i>NR</i>
<i>21-9-18.</i>	<i>CCRC</i>	Transfd to 46th Cdn Battn	<i>20-9-18.</i>	<i>KR Wire 551.</i>
<i>21-9-18.</i>	<i>C.C.R.C.</i>	<i>T.O.S. 46th.Bn fm 7th.Bn.</i>	<i>21-9-18.</i>	<i>K.R.Wire.551.Pt.2.O.102.</i>
<i>=do=</i>	<i>=do=</i>	<i>To Unit.</i>	<i>21-9-18.</i>	<i>NR.1666.</i>
<i>1-10-18</i>	<i>O.C.46th.</i>	<i>Joined.</i>	<i>22.9.18</i>	<i>B213.</i>
<i>28-9-18.</i>	<i>-do-</i>	<i>Wounded</i>	<i>27-9-18.</i>	<i>K.I.17/1459.</i>
<i>28.9.18</i>	<i>3066 S</i>	<i>Law Higher</i>	<i>27.9.18</i>	<i>K4613</i>
<i>12.10.18</i>	<i>do</i>	<i>do</i>	<i>27.9.18</i>	<i>L9251</i>
<i>9.10.18</i>	<i>83 Cnl</i>	<i>do</i>	<i>9.10.18</i>	<i>L4291</i>
<i>13.10.18</i>	<i>do</i>	<i>do</i>	<i>13.10.18</i>	<i>"</i>
<i>14-10-18.</i>	<i>A.T.St.</i>	<i>INVALIDED WOUNDED & posted</i>	<i>14-10-18.</i>	<i>W3083/6309.Pt.11.O.119/18.</i>
	<i>David.</i>	<i>to Sask.Regtl.Dept,Bramshott.</i>		<i>Lt-Col.,A.A.G.CAN.SECT.</i>

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2022027 (Rank) Private

Name (in full) Elmer David Longheed enlisted in
the 1st B.C. Depot Battalion

CANADIAN EXPEDITIONARY FORCE at Vancouver B.C. on the 8th
day of March 1918.

HE served in France with the 46th Battalion

and is now discharged from the service by reason of

MEDICALLY UNFIT

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

Age 27 years

Height 5' 10½"

Complexion Fresh

Eyes Brown

Hair Light Brown

E. Longheed
Signature of Soldier

Marks or Scars

Nil

H. A. Andrews
Issuing Officer

Captain
Rank

Date of Discharge March 13th 1919

for O.C. District Depot Fl
Appointment

Signed at Vancouver B.C. this 13th day of March 1919.

in Military District No. Eleven

File Reference No. D.D.L 7519

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

WAR SERVICE BADGE CLASS " "

No. 62305 ISSUED

9444 11

On committalization the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

CASE HISTORY SHEET.

Shawmeyer Hospital. Vanermer Station.
 No. 2022027 Rank Plt Name Lougheed E Age 27
 Unit 7th Bn Completed years of service C 2 1/2 E 7 1/2 F 7 1/2
 Date of admission 1 2 19 Date of discharge 13/3/19
 Diagnosis G.S.W. abdomen Place of origin Cambray

CONDITION ON ADMISSION AND PROGRESS OF CASE. - Complaint - Fatigue on any unusual exercise also Soreness in lower Extremity of abdominal wound.
History: Wounded in right hip 13 days after going to France - Shrapnel pierced the iliac bone 3" behind the right ant-Sup Spine of the ilium F. B. removed from the mucous membrane of the Caecum through a 6" abdominal incision. Had trouble with bowels for 3 months after injury. Always constipated - Slow regaining his strength
Present Condition

I am rather poorly nourished man - States that he is easily fatigued on exertion - Heart - not enlarged - Pulse falling 80 - agh. mild exercise 88 - Pulse regular, moderate in lungs - Normal vesicular breathing over both lungs.
1 1/2" oval Scar 3" behind right ant-Sup Spine of the ilium - 6" oblique linear Scar one inch in front of the ant-Sup Spine - Scars well healed & not tender - Complaining of soreness

FAMILY HISTORY. at lower Extremity of wound on lifting or walking fast - No rupture - Other Systems negative.

3/3/19 Boarded Cat 6 Blackburn

TREATMENT.
 (Especially any specific or special form.)

CONDITION ON DISCHARGE,
 (and disposal made of case.)
 Date 13/3/19 Medical Officer i/c case.

ASSIGNED PAT. <i>F</i>	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: <i>LOUGHEED Elmer</i>								
EFFECTIVE DATE: <i>1/8/18</i>		EFFECTIVE DATE: <i>1/8/18</i>		NUMBER: <i>2022027</i>								
AMOUNT: <i>\$15.00</i>		AMOUNT: <i>2189</i>		PARTICULARS OF RANK OR APPOINTMENT								
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				<table border="1"> <tr> <th>AUTHORITY</th> <th>DATE EFFECTIVE</th> <th>RANK OR APPOINTMENT</th> </tr> <tr> <td></td> <td></td> <td><i>Private</i></td> </tr> </table>	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT			<i>Private</i>		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT										
		<i>Private</i>										
<i>Mr. Rebecca Lougheed Mother</i> <i>R.R. No. 1 Sturgeson</i> <i>Vancouver B.C.</i>												
UNIT AND TRANSFERS												
ORIGINAL UNIT: <i>1st Depot Bn B.C. Regt.</i>												
DATE ACCOUNT FIRST OPENED: <i>1/5/18</i>												
<table border="1"> <tr> <th>AUTHORITY</th> <th>DATE EFFECTIVE</th> <th>DATE LEDGER SHEET T.S.P.D.</th> <th>UNIT TRANSFERRED TO</th> </tr> <tr> <td><i>DO/132 II</i></td> <td><i>28/5/18</i></td> <td></td> <td><i>1st Can. Res. Batta.</i> <i>Can. Sect.</i></td> </tr> </table>				AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T.S.P.D.	UNIT TRANSFERRED TO	<i>DO/132 II</i>	<i>28/5/18</i>		<i>1st Can. Res. Batta.</i> <i>Can. Sect.</i>	
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T.S.P.D.	UNIT TRANSFERRED TO									
<i>DO/132 II</i>	<i>28/5/18</i>		<i>1st Can. Res. Batta.</i> <i>Can. Sect.</i>									
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS												
UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK												
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT					
<i>24/1/18</i>	<i>3329</i>	<i>Buxton</i>	<i>243</i>	<i>1/1/18</i>	<i>3329</i>	<i>L.H. balance</i>	<i>8871</i>					
<i>1/1/18</i>	<i>3397</i>	<i>✓</i>	<i>973</i>									
<i>1/1/18</i>	<i>3722</i>	<i>✓</i>	<i>973</i>									
			<i>2189</i>									
DAILY RATES OF PAY AND ALLOWANCES												
AUTHORITY		PAY	F.A.	P.F.A.	SUBS. CE ALL. CE							
<i>DO/132 II</i>		<i>28/5/18</i>	<i>100</i>	<i>10</i>	<i>10</i>							
PARTICULARS OF RENDERING NON-EFFECTIVE: <i>Transf. to Canada 5/1/18 Buxton 20/4/18 14/1/18 Invalided</i>												
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION	
<i>3/4/18</i>	<i>Sal. from Canada</i>								<i>23.00</i>			
<i>June</i>	<i>P. Pay 1/5/18-30/6/18</i>	<i>6710</i>		<i>A.R. 1572 14/6/18 1 Res B</i>	<i>487</i>					<i>15</i>		
		<i>6710</i>		<i>1806 27/6/18</i>	<i>487</i>				<i>80.36</i>			
					<i>974</i>					<i>30</i>		
<i>July</i>	<i>P. Pay</i>	<i>3410</i>		<i>A.R. 1993 9/7/18</i>	<i>4867</i>							
		<i>3410</i>		<i>2442 26/7/18</i>	<i>973</i>				<i>56.06</i>	<i>45</i>		
<i>Aug.</i>	<i>P. Pay</i>	<i>3410</i>		<i>Can A.P.</i>				<i>15</i>				
				<i>AR 2762 17/8/18 1 Res Bn</i>	<i>973</i>							
				<i>AR 2891 28/8/18</i>	<i>973</i>				<i>53.70</i>	<i>45</i>		
<i>Sep</i>	<i>P. Pay</i>	<i>3410</i>		<i>Can A.P.</i>	<i>1946</i>			<i>15</i>				
		<i>33</i>		<i>AR 3148 17/9/18 1 Res Bn</i>	<i>973</i>							
				<i>AR 3301 12/9/18</i>	<i>487</i>							
				<i>AR 1841 19/9/18</i>	<i>357</i>				<i>53.53</i>	<i>45</i>		
<i>Oct</i>	<i>P.P.</i>	<i>3410</i>		<i>C.A.P.</i>	<i>1817</i>			<i>15</i>				
		<i>3410</i>						<i>15</i>	<i>74.63</i>			
<i>Nov</i>	<i>✓</i>	<i>33</i>		<i>AR 3160 18/11/18 B.R.B.</i>	<i>243</i>				<i>105.20</i>			
<i>Dec</i>	<i>✓</i>	<i>3410</i>		<i>C.A.P. Nov & Dec</i>				<i>30</i>	<i>109.30</i>			
	<i>Intend'd Pay 31/12/18</i>	<i>130</i>							<i>110.60</i>			
				<i>AR 3722 16/12/18 Buxton</i>	<i>973</i>							
				<i>" 3329 26/11/18</i>	<i>243</i>							
				<i>" 5613 22/12/18 endorsed on R.R. 56.8.11</i>	<i>487</i>							
				<i>" 3597 11/16/18 1st Res Bn</i>	<i>973</i>				<i>83.84</i>			
					<i>2919</i>			<i>30</i>				

CANADIAN
ASSIGNED PAY AUDITED
OK. C.R. Webb
AUDIT CLERK
DATE *12-5-19*

NUMBER

2022027

RANK

NAME

LOUGHEED Elmer

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
				AK 5867 31/7/18 565# end on 2 PE 487							
				" 6333 1/1/19 " " 487							
				AK 9427 29/1/18 6 MH Eastham 65					7825		
					10 59						
				Lo 8 to 6 an 31/1/18 D.O. 16 1/1/19 818							

This space to be for numbers.

No. 62305 ISSUED CH4411

Proceedings on Discharge.

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

No.	<u>2022027</u>
Rank	<u>Private</u>
Surname	<u>Lougheed</u>
Christian name	<u>Elmer David</u>
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	<u>1st B.C. Depot Bn.</u>
Date of discharge	<u>March 13th 1919.</u>
Place of discharge	<u>Vancouver B.C.</u>

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age <u>27</u> years <u>-</u> months.	Descriptive marks <u>Nil</u>
Height <u>5</u> feet <u>10 1/2</u> inches.	
Complexion <u>Fresh.</u>	
Eyes <u>Brown</u>	
Hair <u>Bl. Brown</u>	
Trade	
Intended place of residence (To be given as fully as practicable.)	

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

MEDICALLY UNFIT

Authority for discharge.....

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.

Deceased 25 June, 1938.
649-L-16769

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.)

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

File
10/21/20

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

**MEDICAL DOCUMENTS
FORWARDED TO
S.C.R. OR B.P.C.
ON
20-3-19.**

(OVER)

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, and that I have received my permanent discharge certificate.

(Place).....

(Date).....

E. Laughed

(Signature of Soldier.)

A. J. Ayler

(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.....years.....days.

11. **Confirmation of Discharge.**

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

(Place).....

(Date).....

(Signature).....

H. B. Andrews Capt.
for U. C. District Depot, XI

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

E. Laughlin

Reg. Conduct Sheet	Minutia form B. 302	Attestation Paper	Minutia Form W. 23
Discharge Certificate	" " B. 303a	Particulars of Receipt	W. 13
Field Conduct Sheet	W. 13	Proceedings on Discharge	H. 13
Copies of Convictions, by C. E.	in 315		
Med. Hist. Sheet	Minutia form B. 313		
Casualty Form	W. 34		
Medical Report for Invalids	B. 337		
Dental History Sheet	B. 402		
Last Pay Certificate	W. 44		
Duplicate Discharge Certificate	W. 304		
Form of Will	W. 82		
Form of Discharge Certificate			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable:

Other Commanding

the date and number of receipt with amount of same is to be noted hereon

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }
Battery } Conduct Sheet, " B. 263a
Company }

or
Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or
Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

SPECIALIST'S REPORT

Shanghaing 200.

Station.

7-11-22 1917

No. 2022027 Rank. P.L. Name. Louhead E Unit. 7-11-22

Pathological condition present:- Defective hearing

Hard summer removed from
such car.
Hearing normal.

Estimated percentage of disability?

Is this disability due to service?

If not, has it been aggravated by service?

If "yes" give percentage due to such aggravation?

Will further treatment be of benefit?

Probable duration of disability?

Recommendations:-

Signature of Specialist.....

W. L. L. Capt
edgsea



Handwritten text, possibly a signature or address, written in cursive script. The text is mirrored across the page, suggesting bleed-through from the reverse side.

Handwritten text at the bottom of the page, likely a signature or date, also appearing to be bleed-through from the reverse side.

Reserve for M.H.C.

Regt. No. 202202 Rank Pte Surname LOUGHEED Christian Name ELMER
 Unit or Corps—(a) Overseas from United Kingdom 46 BN (b) In United Kingdom
 Born at—Town Thornbury County or Province Ontario Country Canada
 Date of Birth—Day 30th Month October Year 1891 Age 27 yrs. 1 months.
 Joined at Vancouver B.C. Date March 8th 1918
 Former Trade or Occupation Rancher
 Permanent marks or peculiarities that will serve for future identification:

nil

Height—feet 5 inches 10½ Colour of eyes Grey

Signature of Soldier (for identification purposes) Lougheed Elmer

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)

DEBILITY

Disabilities
Group (b)

NA

Disabilities
Group (c)

NA

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

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	<u>Active service conditions</u>	<u>France</u>	<u>Sept 1918</u>
(ii.) As to Group (b) above.	<u>NA</u>	<u>NA</u>	
(iii.) As to Group (c) above.	<u>NA</u>	<u>NA</u>	

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?

(i.) As to Group (a) above? NO

If yes, has Active Service aggravated it? NA

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

If yes, has Active Service aggravated it? NA

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

If yes, has Active Service aggravated it? NA

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? NA

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

5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? *Not*

(ii.) While off duty? *Applicable*

(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).

Past Illnesses: - Smallpox at 23. Family history: mother has cancer. Wounded 27.9.18 by shrapnel below crest of Rt Ilium and penetrating abdomen. 30th C.C.S 27.9.18. Foreign body removed from mucous membrane of caecum (F.M.C), 83rd Gen Hosp 9.10.18. Eastbourne 15.10.18. C.R.X Buxton 15.11.18. States that ever since being wounded he has suffered from obstinate constipation, and general depression and lack of energy.

7. PRESENT CONDITION.

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

states normal weight 155. Now 142 lbs. Appears extremely emaciated. Face pale and thin and expression listless. Entry wound of shrapnel bullet two inches below highest point of Rt iliac crest, and oblique operation wound Rt lower quadrant both healed. Pulse regular and full. Radial artery easily palpable. Heart negative. Lungs, occasional wheezing at end of inspiration otherwise negative. Appetite fair. Complaints of obstinate constipation since wounded. Extreme debility unfit him for service.

8. OPERATION. (i.) Was one performed? *YES*

(ii.) If so, state what.

Removal of foreign body from mucous membrane of caecum

(iii.) Was one advised and declined? *NO*

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? *NO*

(ii.) If so, describe: *NA*

10. DO YOU RECOMMEND:—

(a) Fit for duty? *NO*

(b) Fit for base duty? *NO*

(c) Invalid to Canada? *YES*

(d) Discharge from the Service as permanently unfit? *NO*

Date of Report *3-12-18* 191

Signed

W. J. Law Capt. C.M.C.

Officer in medical charge of case.

Station *Canadian Red Cross Special Hospital*

BUXTON, DERBY.

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

Philip Burnett Col. C.M.C.

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

Dated at

Canadian Red Cross Special Hospital

BUXTON, DERBY.

Station, on

3-12-18

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.

Yes

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier	Caused ? 20 Aggravated ? 20	(b) Misconduct of the Soldier	Caused ? 20 Aggravated ? 20
-------------------------------	--------------------------------	-------------------------------	--------------------------------

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%.)

2/10

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.)

2/10

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

(i.) Is it permanent ?

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

2/10

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

2/10

18. Remarks.

Condition fully described in Part I

19. Recommendation :—(a) Fit for duty ?

20

(b) Fit for base duty ?

20

(c) Invalid to Canada ?

Yes

(d) Discharge from service as permanently unfit ?

20

Classification for the Military Hospitals Commission.

2

Date of Board

9-12-18.

Station

Canadian Red Cross Special Hospital,
BUXTON, DERBY.

Signatures of the Board.

President.
Shankar C. C. C.

Approved

COLONEL,
A.D.M.S. CANADIAN RED CROSS
BUXTON, DERBY.

A.D.M.S.

Dated at

Station

ASSISTANT DIRECTOR
OF
MEDICAL SERVICES
12 DEC 1918
CANADIANS
BUXTON AREA.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the

day of

191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at

this

day of

91

Signatures of
the Board

President.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

L. 10401

Aug 11/18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15 ²			
-----------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 2022027

Rank Pt Promoted Reverted Discharge

Soldier's Name Elmer Lougheed

Battalion 2^d Dep Bn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS. REBECCA LOUGHEED,
R.R.#1, STEVESTON,
VANCOUVER, B.C. 15 15.00

2 % 2022027 PTE ELMER LOUGHEED
FIFTEEN DOLLARS

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1915					
Aug.	4 37954		15	15	
Sept.	M 45151		15	15	
Oct.	S. 51413.		15	15	
Nov.	M 56769		15	15	
Dec.	S 62566		15	15	
1919 Jan	475127		15	15	

11328-E-10.

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 12-5-19

AP A/c Closed 31-1-19

MW 11 Ret'd per Essequibo

Destray 6/33 Date 26-1-19 F.X. 29-1-19

at 2019 759 Clerk Eklaenduse

AUTHORITY
FOR
NEW ACC'T.

a.274. 2-7-18)4.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion				
Beneficiary				
Relationship				
Address				

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

REGT. NO. *2022029* RANK *PTF* NAME (IN FULL) *LOUGHEED ELMER*

5

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS		Bought to 3/1/18			PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
					DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE	
TO WHOM PAID	RELATIONSHIP				PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE	DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE

[illegible]

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

Certified that all payments have been made on this account for 1911. H. covering authority has been received to date.

Paymaster, Demob

I certify that all payments of War Service
Gratuity have been made on this account
according to the period of Service shown on
the M.F.W. 2595 received.

Officer i/c War Service Gratuity
M.D. No. 11

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 11th Draft 1st Depo Bn. B.C.Rgt Regimental Number 2022027

*Substantive Rank _____ Surname Longhead Christian Names Elmer. David

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
24.10.18	SR 10.	P-II 119 2/30.10.18	T.O.S. from 46 th Bn	B Shott	15.10.18.	LIEUT.
						FOR RECORDS, C.O.M.F.
6-1-19		OVERSEAS	T.O.S. DISTRICT DEPOT XI	HASTINGS PARK VANCOUVER, B. C.	13-1-19	D. O. Pr. II 37/189 1919
		DISCHARGED	MEDICAL UNFITNESS	VANCOUVER, B. C.	13, 3, 19	D. O. (Part II) 73/6C 1919
						Capt. For O.C. District Depot XI

To be folded on this line.

Nothing to be written in this margin.

W1889-PP1150 500,000 5/18 G.W.P.Co.(3490)

[illegible]

Nothing to be written in this margin.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	2022027	Pt	Loughleed	E.
Year	Unit.	Age.	Service.	
	46 Canadians			
Station and Date.	Disease			
C.M.H. Boston 15.11.18	G.S.W. Rt Buttock penetrating Abdomen G.W. 18.11.18			
	Wound shell 27.9.18. Penetrating wd below right crest of Ilium. Abdomen. symptoms slight. X-ray showed small Sharpsnel Bullet present. Entrance wd. on the side of Ilium. wd. excised. Track followed thro' Ilium. Incision made thro' muscle over right iliac region. Opening found in Peritoneum. G.B. removed from mucous membrane of Caecum. Abdominal opening closed in layers. I.P. in entrance wd. Base. One wd. anterior dry & clean. Posterior granulating T. normal. A.T.S. 1500. 27.9.18. On admission Operation wd. inner side of Anter Sup-Iliac right- stitched clean healed. Wd in right buttock clean & granulating no signs of facial escape. Stitches removed from abdomen. Bowels obstinate. 20/10/18. A.T.S. 500. Treated with Lig Paraffin & Ray Sulph			

Station
and Date.

12/10/18

Wd. soundly healed.
to Ypson.

509 H
20/12/18

No change in condition
of Volcanida

Ralph B. Co. Off

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1c-T 2356 Year	2022027	Pte.	LOUGHEED	Elmer
1918.	Unit.	Age.	Service.	
Station and Date.	46th Canadian Bn.	26	7/12.	
Disease	G.S.W. Buttock.			
ENLISTED.	March 8 th 1918.	Vancouver, B.C.		
ARRIVED ENGLAND.	June 1 st 1918.			
WOUNDED.	Sept 13. 1918.			
COMPLAINT.	Slight pain right abdomen. Constipation.			
DURATION PRESENT ILLNESS.	Sept 27 th 1918			
PAST ILLNESSES	Negative.			
16-11-18	FAMILY HISTORY.	Negative.		
S.G. 1.020	HISTORY PRESENT ILLNESS.	Wounded 27.9.18. Below crest		
Sugar - Nil	right ilium.	30 th CCS 27.9.18.		
Alb - Nil	Bullet removed from mucous membrane of caecum.			
Reaction Acid	(F.M.C.)	83 rd Hosp 9.10.18.	Eastbourne	
	15.10.18.	Constipated.		
	C. R. X.	Bursdon	15.11.18.	
	CONDITION ON DISMISSION.	Fairly well nourished.		
	Bullet wound is long oblique operation wound			
	RT abdomen healed.	Complains of obstinate		
	constipation.	Slight puffiness of eyelids.		
	Urinary exam. negative.	No oedema of		
	feet or legs.	States he has feeling of		
	dragging RT abdomen on walking far.			
	Other systems negative.			

Station
and Date.

TREATMENT.

Abdominal massage daily. 14 Dec

18/12/18. Trans to No 569 Hosp Liverpool for Swallowing to Canada

W B Boyd Major CMUS

CONDITION ON DISCHARGE.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET

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

1. Surname LONGHEED Christian name ELMER.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 283438
3. Consecutive number on schedule of men reporting for service (if he appears on it) 74
4. Address (including street and number, if any) R.R.1, Steveston, B.C. Canada. P+S Grey

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 16th day of November, 1917, by the undersigned medical board sitting at VANCOUVER, B. C.

5. Age as stated 26 Years 1 Months. 6. Apparent age 26 Years 1 Months
7. Height 5 Feet 10½ Inches. 8. Weight 134 Pounds.
9. Chest measurement { Minimum 31½ Ins. 10. Complexion fresh { Eyes brown
Maximum 34 Ins. { Hair lt. brown
11. Physical development good { Good Fair Poor 12. Smallpox marks none
13. Number of vaccination marks { Right arm 0 14. When vaccinated last none
Left arm 0
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar on left instep
Lump on left foot inside instep.

16. Slight defects but not sufficient to cause rejection
- The man denies having had { Rheumatism We find no evidence of past { Rheumatism
Tuberculosis Tuberculosis
Syphilis Syphilis
- (Strike out disease admitted or suspected.)

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

A

Signature of Man

Waterbury, R. M. President States not previously examined.
W. Murphy Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
6/4/18	DE Wally Capt	M.O.	16/3/18	DE Wally Capt	M.O.
		M.O.	23/3/18	DE Wally Capt	M.O.
		M.O.	7/4/18	DE Wally Capt	M.O.

Joined 8th day of March 1918 at Vancouver B.C.

CORPS	REG'TL NUMBER	HABITS	DATE
<u>1st Depot Battalion, B. C. Regt. C.E.F.</u>	<u>2022027</u>		<u>8-3-18</u>
Joined on enlistment <u>VANCOUVER, B. C.</u>			
Transferred to <u>7 Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>VANCOUVER, B. C.</u>	<u>MAR 15 1918</u>	<u>FROM</u>	<u>23 J. Maiderm Kapf</u>
			<u>assault Capt</u>
			<u>Invalid to Canada</u>

Canadian Red Cross Special Hospital,

BUXTON, DERRY

N. B. This sheet is to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

VISION: Right 20/20 Left 20/20 Haring: Normal R & L.

Vancouver B.C. 7/18 Rebilit discharge at home at

Surname
 Longhead
 Christian Name
 Elmer

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				
Eastbourn Military		18	10	18	14	11	18	G.I.V. Rt. Bullock. Sent. Abol.		FB removed from wall of caecum. Stitched up, healed to com. Hpl. Canadian.	giving left hand
CANADIAN RED CROSS SPECIAL HOSPITAL BUXTON, DERBYSHIRE.		14	11	18	18	12	18	Debility	35	Stakes normal. Weight 155 lbs Nov 14. Appears extremely emaciated. Face pale thin expression listless. Entry wound of Throat bullet two inches below highest point of Rt. sternal oblique operation wound. Rt. lower quadrant, both healed. Pulse regular & full. Radial artery faintly palpable. Heart negative lungs. occasional wheezing at end of inspiration. Other signs negative. Appetite fair. Complains of obstinate constipation since wounded. Extreme debility unfits him for service. Signed Major C. A. M. C.	
No. 3 CANADIAN GENERAL HOSPITAL LIVERPOOL		18	DEC	1918	13	JAN	1919	DD		No change in Condition to Canada Ralph B. C. M.	
H. M. A. T. "ESSEQUIBO"		JAN	13	1919	JAN	28	1919	DD	13	Condition Discharged.	W. L. L. L. aff. L. L.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Vancouver B.C. DATE 7.3.19

1. 1 (a) Unit 46th Bn (b) Regimental No. 20 220 27 (c) Rank pte
 (d) Surname LOUGHEED (e) Christian name Elmer
 (f) Home address 3765 Beatrice Street South Vancouver.
 (g) Next of Kin Isreal Lougheed (h) Relationship father
 (i) Address of Next of Kin 3765 Beatrice Street S. Vancouver.

2. Age last birthday 27 Date of birth Oct. 30. 1891

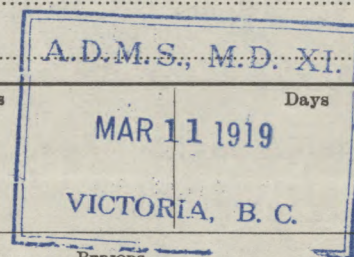
3. Enlistment, or Appointment (if an Officer) (a) Place Vancouver B.C. (b) Date 8.3.18

4. Personal description:
 (a) Height 5'10½" (b) Weight 153 (c) Complexion fair
 (d) Colour of hair lt. brown (e) Colour of eyes grey (f) Identification marks, Scars, etc. none

5. Former trade or occupation farmer.

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

	Years	
	From	To
Canada <u>Mar. 8. 1918-Apr. 1918</u>	<u>Feb. 1919</u>	<u>present</u>
England <u>Apr. 1918-Sept. 1918</u>	<u>Oct. 1918</u>	<u>Feb. 1919</u>
France or other theatres of War	<u>Sep. 1918</u>	<u>Oct. 1918</u>



7. Original disease, or injury GSW abdomen

(a) Date of origin Sep. 27. 1918 (b) Place of origin Cambrai.
 (c) Cause Ball shrapnel.

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

debility (slight)

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

Tall slight man nutrition fair. States that he feels well but tires easily on exertion. Heart-not enlarged. No murmurs, pulse regular, moderate tension. Rate sitting 80 after mild exertion 88. Normal in 1½ minutes. Lungs-normal vesicular breathing throughout both lungs. 1½" scar 3" posterior to right anterior superior spine of ilium. One inch in front of spine extending obliquely from above downward is a 6" linear scar well healed and not tender. Shrapnel ball removed from abdomen through this abdominal incision. States that lifting or waking fast causes soreness in lower part of this wound. At present time he feels fatigued after waking 3 miles. States that he is improving all the time.

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

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

Special Senses.....no Respiratory System.....no Integumentary System.....no

Disturbances of Mentality.....no Digestive System.....no Muscular System.....as stated

Osseous and Joint Systems.....no Any other general condition.....as stated

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

After thirteen days in France was wounded in right hip in Sept. 27. 1918. Was invalided to England on this account. F.B. was removed from mucous membrane of caecum through an abdominal incision. Had difficulty in keeping bowels moving until Dec. Wounds healed readily but he remained more or less debilitated until recently.

Disability: Debility.

History: Past illnesses, smallpox ar 23. F.H. mother has cancer. Wounded 27.9.18 by shrapnel below crest of rt ilium and penetrating abdomen. 30th CCS 27.9.18. F.B. removed from mucous membrane of caecum. FMC. 83rd Gen. Hosp. 9.10.18 Eastbourne 15.10.18. CRX Buxton 15.11.18. States that ever since being wounded he has suffered from obstinate constipation and general depression and lack of energy. Present condition. States normal weight 155. Now 142 lbs. Appears extremely emaciated. Face pale and thin and expression listless. Entry wound of shrapnel bullet two inches below highest point of rt iliac crest and oblique operation wound rt lower quadrant both healed. Pulse regular and full. Radial artery easily palpable. Heart-negative. Lungs-occasional wheezing at end of inspiration. Otherwise negative. Appetite fair. Complains of obstinate constipation since wounded. Extreme debility unfits him for service.

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

n.a.

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

The regimental documents will be referred to.

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

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

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

surgical. rest

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

no

16. Can the former trade or occupation be resumed? yes

(If not, briefly state why)

17. Recommendations.

discharge

G. S. [Signature]
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

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

I complain in addition of.....

A.R.T.

E. Lougheed Rank.
Signature of invalid examined.

7, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior and not included in Section 10 (a.)

1914-small pox.

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

as stated

11.—(a) Did the disabling condition have its origin before enlistment?

no

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

n.a.

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

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

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surgical. rest

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(If the answer is "yes" state nature of treatment required and probable duration)

no

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yes

(If not, briefly state why)

17. Recommendations.

discharge

Medical Officer by whom the case is brought forward.

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

I complain in addition of.....

A.R.T.

Signature of invalid examined. Rank.

4

OPINION OF THE MEDICAL BOARD

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

9.a. Can lift a bucket of coals without discomfort. Recently he required to use opening medicine only once a week or fortnight.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

no

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

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

yes

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

PLACE Vancouver B.C.

DATE 7.3.19.

A. P. Thompson President.
W. A. Demot } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

.....President

PLACE.....

DATE.....

APPROVED BY.....APPROVED BY.....

W. A. Demot
For Assistant Director of Medical Services. M.C.

Director-General of Medical Services.

DATE MAR 11 1919

DATE.....