

# Sabretache

THE OFFICIAL JOURNAL OF  
THE CALGARY MILITARY HISTORICAL SOCIETY  
www.cmhsc.ca

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When we think of the sad deaths of Canadian Soldiers in the World War 1 we think of the vast cemeteries in foreign lands. The straight rows of our national tombstones surrounded by green lawns and flowers. Then there are the sad numbers of those who simply disappeared in the horrible explosions or were left on the battlefields unidentified. We remember them with the inscriptions at the Menin Gate Memorial or on the beautiful Vimy Ridge Memorial.



Menin Gate Memorial



Some how, under great circumstances a young Canadian Soldier made it back to Canada to be buried in his home town cemetery in Arcola, Saskatchewan. One hundred years have past and the seasons have slowly dissolved some of the beauty of the stone.



IN  
LOVING MEMORY  
OF  
PTE. LEON AYLES  
8TH BATT.C.E.F.  
BORN MAY 24TH 1891  
DIED AUG. 3RD. 1917  
*A brave saint lies buried here  
who died a glorious death in  
his country's cause*

AYLES

The Arcola Cemetery is located west of Arcola and can be accessed by taking Balmoral Avenue and heading west roughly 2.5 kilometres

**The Long Journey Home of  
Pte. Leon Ayles.  
Continued on Page 3**

THE OFFICIAL JOURNAL OF THE  
CALGARY MILITARY HISTORICAL SOCIETY

The  
CALGARY MILITARY HISTORICAL SOCIETY

is a non-profit registered society  
which fosters the study of the  
military and the police, and the heritage of  
Canada, the British Empire, and the world  
as well as the preservation of military  
artifacts and records.

The CMHS meets once every calendar month  
at: Petty Officers' Mess  
HMCS Tecumseh  
1820 - 24th Street SW  
Calgary AB T2T 0G6

## Notice of Next Meeting

The next CMHS meeting will be held on

**Tuesday, August 15th, 2017**  
**19:00 (7:00 pm)**

At the Petty Officers' Mess, HMCS Tecumseh.

Members are reminded that an offering of foodstuffs for the Legion Food Bank is considered your unofficial entrance fee to our regular scheduled meetings.

The unofficial agenda of this meeting will be:

Introduction of guests, Minutes of last meeting Correspondence, Membership report Treasurer's report, Old business / New business Break, Show & Tell  
The President, **Allan Ross** would like to invite everyone to remain after the meeting for an informal time of fellowship.

## Minutes of the last meeting of The Calgary Military Historical Society

Meeting held on July 18, 2017 at the Petty Officer's Mess, HMCS Tecumseh

### 1. Meeting called to order

By President Allan R. at 7:05 PM. 23 members in attendance.

### 2. Minutes of Previous Meeting.

No omissions or corrections. Member Bob M. moves that the Previous Meeting Minutes be accepted. Seconded by Garrot L. Approved.

### 3. Newsletter. No issues or concerns.

### 4. Treasures Report. No Report - Floyd S. AWOL - To be tabled at next meeting.

### 5. Membership Report. No Report - Floyd S. AWOL - To be tabled at next meeting.

### 6. Correspondence: - Regards from Tim Popp.

### 7. Announcements:

- Calgary Military Show - October 7, 2017 event at Hillhurst Sunnyside is a go. For table rentals & show information Contact Martin
- Military Museum Family Day event July 20, 2017.

### 8. Old Business. None.

### 9. New Business: None

### **BREAK**

### 10. Ticket book auction:

- Conducted by David G.
- Book Auction - Herb J. donated 7 issues of the Canadian Airborne Regiment Journal.

### 11. Show and Tell:

Darryl K. - German M40 helmets, 1946 Norwegian issue, 1950's/60's West German border guard and Finnish Army - Canadian 1943 Regulations for Drivers.

Herb J. - Broome County PQ Civil Protection Corp wedge cap and 2 "CVP" arm bands.

Brad M. - WWI German M17 helmet camo pattern painted. WWII German uniform dressed.

John E. - Discusses his fathers WWII service, Service Corp attached to Calgary Highlanders.

Alan M. - Selection of ornate beer steins, most repos.

Mike C. - Can Boer War SA Service Medals including Post Office Corp Sgt. Johnson's one of only five issued to Postal Corp.

Bob M. - Selection of medals including, Japanese "Order of the Rising Sun" in high quality Lacquer case, Nazi Germany "Order of the Red Cross", French WWII North Africa with Algerian bar.

David L. - Discusses Princess Mary Box recipient classes and bullet pencils.

Alan Mac. - Selection of Irish Regiment medal ribbons for Korean Service.

Barry E. - Correction, Last meeting Canadian cavalry canteen and holder is Pattern 1940 not Pattern 1937.

David G. - Indian Army 1919 medal with 3<sup>rd</sup> Afghanistan Bar.

Allan R. - Set of CEF 187 Battalion Insignia, cap, collars & shoulders

### 12. Adjournment:

President Allan R. calls for motion to adjourn. Member Susan E. moves to adjourn. Seconded by Mike C. Approved.

**Meeting Adjourned. 20:40**

In June of 1915, 24 year old, Leon Ayles, a laborer in Arcola Saskatchewan signed up to the Canadian Overseas Expeditionary Force in Winnipeg, Manitoba. He had been a member of the 90th Regiment Militia centred in Winnipeg so it was an obvious choice to go there. At that time the 61st Battalion was recruiting in the southern part of Saskatchewan and Manitoba and that is the unit he signed up with. The unit would sail for England in April of 1916.



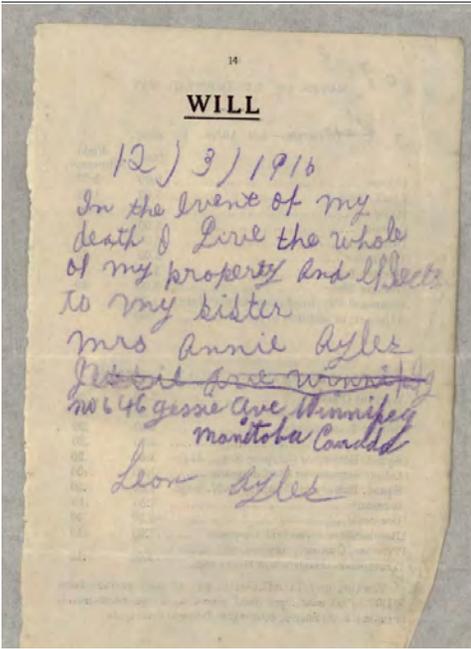
Strangely enough the Battalion, delayed its overseas movement due to the fact that they had put together a hockey team and had begun to play in the Winnipeg Patriotic League in the fall of 1915. The team progressed to the finals of this league and managed to defeat the opposing team, the Winnipeg Monarchs. The Monarchs were the 1915 Allan Cup Champions. The 61st then faced challenges from other teams for possession of the 1916 Allan Cup and defeated in succession the Winnipeg Victorias, Fort William and the Regina Victorias. As no more challengers stepped forward to face the 61st, the 61st was declared as the winner of the 1916 Allan Cup in the spring of 1916.

Like most Canadian recruits, he received the briefest of initial training in Canada and then when they arrived in England, they would undergo four months of British warfare training prior to being sent to France. Leon was a typical Canadian soldier who trained hard and played hard. His records show that he was confined to barracks for being drunk in Hyde more than once. He would be docked 3 days pay for loss of government property. Possibly some personal equipment. Seven days confined to barracks for being insolent to an N.C.O. Etc. In December of 1915 he and others from the unit would be transferred to the 8th (Winnipeg) Battalion. On December 25th of 1915 he would arrive in France.

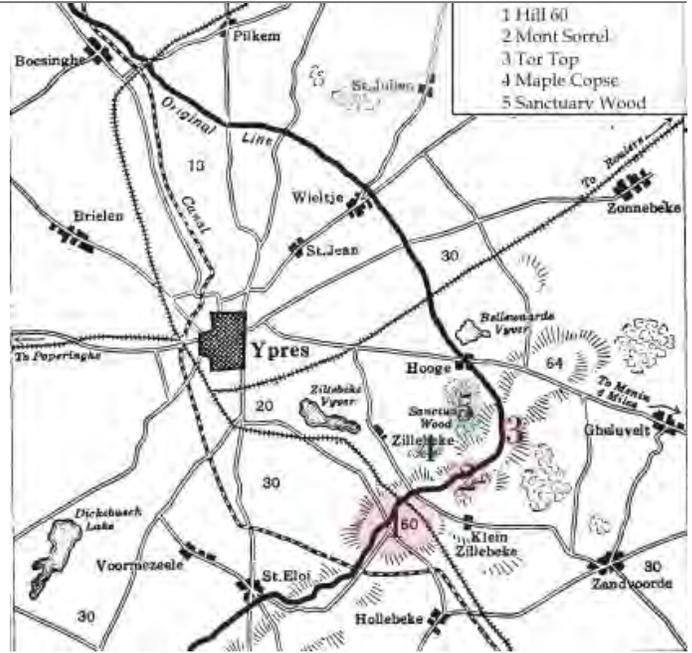
Like all other units the 8th Battalion would serve their time in the trenches, being in reserve, being pulled back to rest areas and then back to trenches in a continuous rotation.

WAR DIARY OR INTELLIGENCE SUMMARY			Army Form C, 2118	
Instructions regarding War Diaries and Intelligence Summaries are contained in F. S. Regs. Part II and the Staff Manual respectively. Title Pages will be prepared in manuscript.				
Place	Date	Hour	Summary of Events and Information	Remarks and references to Appendices
	Feb.	14 <sup>th</sup>	(Continued) and roads. Moved to trenches in afternoon and took over usual trenches from 5 <sup>th</sup> Battrn. Nights are getting shorter and we could not get in overland until after 6 p.m. and at that time the moon was so bright that a man could be seen on the road at 500 yds. distance. Night was quiet and we got in without a casualty. Had 12 <sup>th</sup> Royal Scots on right and 10 <sup>th</sup> Battrn. on left. Scouts were active but moonlight prevented any very advanced work. Very heavy bombardment 5 miles to north.	
	Feb.	15 <sup>th</sup>	Clear day but very high wind and no shelling. Bombardment to the north kept up all day and became intense towards night. At 10.50 p.m. a large fire was seen in the German lines some miles to the North East of us, which lasted 25 minutes, and gave forth light flashes frequently as if of explosions. Our scouts were active and located several enemy working parties which were fired on by our machine-guns. Rained at night.	
	Feb.	16 <sup>th</sup>	Clear day but no shelling in our sector. Trench mortar fired two rounds from Artors Farm between 4 and 5 p.m. on gap in German trench. At night parties of the enemy could easily be detected by aid of field-glasses going up and down the Messines Road and were fired on with machine-guns and rifles with apparently good effect. Our scouts were active but owing to extremely bright moonlight were unable to approach close to German lines. They located a large party however working on wire to right of Artors Road and we had the 13 <sup>th</sup> Batty. fire a couple of salvos into them. Received a draft of 24 men today and Lieut. N. H. Macdonald joined us.	
	Feb.	17 <sup>th</sup>	During afternoon enemy shelled all along front line with 4.1 and Field guns sending in 41 shells without any material damage and	

Extract for the War Diary of the 8th Battalion showing a couple of normal days in February at the front.



On March 12th of 1916 Leon would write out his will.



According to the reports, Leon Ayles long journey home would start on April 14th, 1916 near Hill 60 in the Ypres Salient where he was "Dangerously Wounded." "Was wounded by a rifle bullet in spine. Bullet lying transversely between hebral arches of the 10th and 11th dorsal vertebrae posterior to the spinal column." Transferred to England as "Dangerously Ill"

460948. Ayles. L. C.C.A.C. 9.181-31.

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				
25.12.15	O.C. 8 Bn.	Taken on strength 8 Bn.	France.	14.12.15.	Part II O. 43.
25.4.16	8th Bn.	Dang. wounded.	St. John Amb. Etaples	23/4/16	Can. list 340. O.N.
18/5/16	do	Trans. to Eng.		17.5.16	do 9358

R. 149.

Name **Ayles ~~Leon~~ Leon** Rank **Private** Reg. No. **460948**

Unit **8th Battalieu**

Next of Kin **Canada**

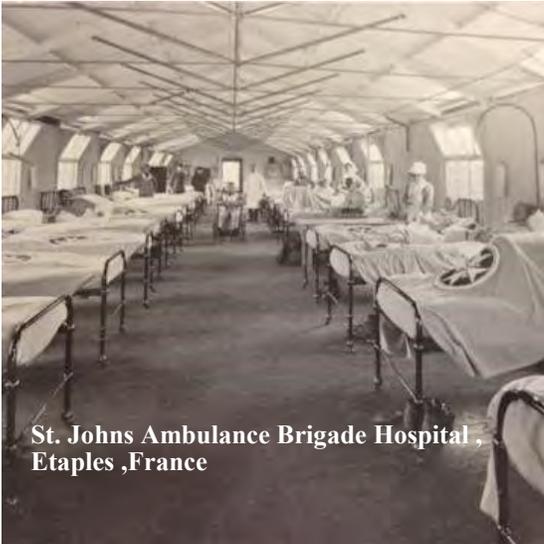
Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
Apl 22	St. Johns Amb. Brig.	Etaples	G.S.W. Spine.			
			Dang. Ill	A340	M5581	
17-5-16	Transferred to England		G.S.W. Spine			
			Dang Ill	A358		
18-5-16	King George Hosp.	London S.E	Hemiplegia			
			Dang Ill	B.69		
18-8-16	Moore Bks. Hsp.	S'Cliffe	GSW. Spine	B150		

Forms I. 1237 10		COPY.			Army Form I. 123
MEDICAL CASE SHEET.*					
No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.	
	460948.	Pte.	Ayles.	L.	
Year	Unit.	Age.		Service.	
1916.	8th Canadians.	23.		11/12.	
Station and Date.	Disease				
THE KING GEORGE HOSPITAL.	GUNSHOT WOUND SPINE. PARAPLEGIA.				
	Note from St. John Ambulance Brigade Hospital.				
	"Patient admitted on April 21st with complete paraplegia.				
	When admitted had severe bed sore over sacrum. This has recently increased in size.				
	Anaesthesia as high as 8th Dorsal segment. Complete paralysis below this.				
	Retention of urine.				
	X-Ray showed:-				
	Rt. Hoemothorax - heart displaced to the left.				
	Fracture neck 11th rib.				
	Rifle bullet lying transversely between hebral arches of 10th and 11th Dorsal vertebrae, posterior to the cord".				
May 17th, 1916.	C.O.A. Patient running a high temperature with dry coated tongue. Troublesome cough. Has vomited after food several times. Original wound quite healed, but has a very deep spreading septic bed sore.				
May 18/16.	Pt. was aspirated.				
June 27th, '16.	Operation, Col. Armour. Laminectomy, 10th, 11th, and 12th vertebrae explored, laminae of 10th and 11th found fractured. Bullet removed. All pressure on cord relieved.				
July 1st, 1916.	Patient suffered considerable pain.				
July 15th, 1916.	General condition good. Bed sore much cleaner.				
July 29th, 1916.	Temp. now up to about 100 each evening.				
	Bed sore cleaning.				
	Has incontinence of urine.				
	General health is fairly good.				

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

**The timeline .**

- April 14th, 1916 Gravely wounded in the Ypres Salient near Hill 60.
- April 24th, 1916 Arrive at the St. John's Ambulance Brigade Hospital, in Etaples France.
- May 14th, 1916 begin the transfer to England. Aboard hospital ship HMHS. St. Denis
- May 17th, 1916 Arrives at the King George Hospital in London.
- May 18th/16 Patient is aspirated. (to remove (a fluid) from a body cavity by use of an aspirator or suction syringe.
- June 27th, 1916 , Operation is preformed (**Laminectomy** ) surgery that creates space by removing the lamina — the back part of the vertebra that covers your spinal canal. Also known as decompression surgery, **this enlarges the spinal canal to relieve pressure on the spinal cord. The bullet is removed.**
- August 3rd, 1916 Medical Board Approves Leon Ayles to be Invalided to Canada provided he can have **necessary medical care en route.**
- August 17th 1916 Transferred to C.C.A.C. Canadian Casualty Assembly Centre in Folkstone.
- August 27th. Transferred to Moore Barracks Hospital in Shorncliffe.
- September 28th, 1916 is put aboard the S.S. Olympic and travels to Halifax, Nova Scotia. He travels on a improvised water bed.



St. Johns Ambulance Brigade Hospital , Etaples ,France



Hospital Ship H.M.H.S. St. Denis

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present ?

*In defining the extent of his inability to earn a livelihood, estimate it at 1, 2, 3, or total incapacity.*

25. If an operation was advised and declined, was the refusal unreasonable ?

26. Do the Board recommend

(a) Fit for duty ? /

(b) Fit for light duty ? /

(c) Invalided to Canada ? /

(d) Discharge as permanently unfit ?

Total. **APPROVED**

Not applicable.

Yes; to Canada, provided he can have necessary medical care en route.

Signatures :-

Station London.

Date August 2/1916.

Approved.

Station London

Date Aug 3rd 1916

David Donald President.

W. Davis Members.

W. B. Macdonald Administrative Medical Officer.

Captain, R. A. M. U.

August 3rd Approval to be "invalided to Canada"



Exterior view of the King George Military Hospital along Stamford Street, London, England, 1915



H.M.S. Olympic in camouflage paint.

**Timeline-** October 5th, 1916 Arrives in Halifax.

- October 31st. Arrives in Winnipeg and taken to the Winnipeg General Hospital He would reside and be treated there.
- July 21, 1917 Leon was transferred to the Beach Convalesce Home. He was sent with an orderly and a special invalid chair was provided.
- July 25th, 1917 returns to the Winnipeg General Hospital
- August 3rd, 1917—Died.
- August 5 His body was taken under Military Escort to the C.P.R. Depot. And shipped to Arcola Sask. August 6th.
- August 29th Court of Enquiry. Inquiring into and reporting upon the Circumstances surrounding the death of 460948 Pte. Leon Ayles. late 61st Battalion C.E.F.

The.....**Court**.....having assembled pursuant to order, proceed to

take evidence.

a/R.S.M., E.S.Pratt, was then called and testified as follows:-

I am a/R.S.M., at the Receiving Depot "G"mUnit M.H.C.C., I was employed in the Casualty Clearing Depot during the month of August and from there I assumed my duties as a/R.S.M., December 1st, 1916, being at the commencement of "G" Unit Military Hospital Commission Command, and have therefore, knowledge of the deceased, Pte. Leon Ayles. Pte. Ayles arrived from Quebec on October 31st, 1916, as a stretcher case, and was taken then, directly to the Winnipeg General Hospital, at which place he was a Patient, until the 21st day of July, when with the permission of the Doctors in charge, he was taken to the Beach Convalescent Home. A special Orderly from the Hospital was sent with him. He was, at that time, in a special invalid chair, purchased for him by the Military Hospital Commission Command. On July 25th he was returned from the Beach Convalescent Home, owing, I believe, to the fact that conditions in that Home did not agree with him. He was sent at once to the Winnipeg General Hospital. I heard nothing of him until August 4th, 1917, when it was reported to me that he had died of General Paralysis and Contributory Exhaustion, his death having occurred at 11.30 p.m. August 3rd. His body was sent to Arcola, Sask., in charge of his Father, where it was buried.

*E.S. Pratt* a/R.S.M.,  
Receiving Depot.

M. F. B. 303.  
150M.-7-16.  
H. Q. 1772-39-133.

Editors Note: I put these questions to Dave Love, Director and Historian of the Calgary Military Historical Society

**From:** David Gale <david@sunnyspotservice.ca> **To:** D Love <dlove@davincibb.net> **Subject:** WW1 casualty

Hello David.

Doing some checking on a Canadian lad in WW 1. His record says "dangerously wounded" April 14th, and he was taken to the St. John's Ambulance Brigade Hospital in Etaples, April 25, 1916. He would not be shipped to England till May 18th. He was then taken to King George Hospital where the bullet was removed from his spine June 27th.

Would he have been left so long at various points because they thought he would die?

His record shows he was wounded in Ypres Salient near Hill 60. The 8th Battalion that he was supposed to be in records show "Sorrell Hill"

Your thoughts Thanks David

**From D. Love** In World War 1, and continuing up to present times, the care and evacuation of wounded (and sick, etc.) followed, wherever possible, a tightly organized series of interlocking stages. I say wherever possible because as you can appreciate, factors such as the volume of wounded at any particular time or place, availability of equipment and transport, effect of enemy operations, etc., etc., etc. would have its effects. However notwithstanding this, the steps or stages of medical treatment and transport were highly disciplined and worked well. The time spent in each stage by a wounded, etc. soldier would also depend on the nature and severity of his/her wounds, sickness and the like. The stages I mention are summarized as follows along with the basic type of treatment done.

1) transport of wounded from battlefield to first medical treatment - done by stretcher bearers and/or soldiers of the unit. The only medical treatment at this time was generally applying the individual's field dressing to his wounds.

2) regimental aid post - here the unit's medical officer and medical orderlies would provide necessary advanced first aid and basic treatment to either try to save an individual's life and stabilize him for transport to the rear where more extensive medical treatment could be done. It was reasonably rare that an individual would be operated on at this point.

3) advanced field dressing station - operated by a portion of a field ambulance that was designated to the particular unit. As the name would imply, emphasis was on further stabilizing the wounded, controlling bleeding and the such, however the station was better equipped to carry out operations and more extensive treatment. The advanced field dressing stations were still very close to the front line trenches.

4) Field ambulance - the remainder of the field ambulance designated to the particular unit would continue the treatment of wounded. Here, however, a decision would usually be made regarding the further disposition of the wounded. A field ambulance had the capacity to keep wounded there. Lightly wounded soldiers or soldiers who were sick would often complete their healing at a field ambulance. Likewise, soldiers who were mortally wounded may be kept there until their passing where they would receive comfort and palliative care. Operations were routinely carried out here.

5) Casualty clearing station - this was in reality a smaller hospital which was relatively mobile, not unlike that seen in the TV series MASH. More detailed and extensive treatment was carried out here, more healing, more stabilization, etc. It was for the most part a full service but basic active care facility and fairly large. It was also here that determination of where an individual was sent for further treatment and convalescence.

6) Stationary or General Hospital - these were full-fledged hospitals which full services. The stationary hospitals tended to be a bit smaller with a bit less capability of handling all types of injuries, etc. They were also a bit more mobile, but generally stayed in one location for extended periods of time. General hospitals were more extensive with large staffs and higher capacity for wounded.

7) Convalescent Hospitals - these were found either in the UK or Canada. Soldiers who required longer periods of healing and convalescence would be sent to these types of facilities. They may be for general convalescence or may handle patients with specific types of wounds such as ear, nose and throat, tuberculosis, venereal disease. The specialized convalescent hospitals often had their specialty mentioned in their names.

8) Medical discharge with or without further medical treatment back in Canada, as appropriate. A wounded/sick soldier would usually have an evaluation of some sort and in varying details at each stage of his/her journey. Depending on condition, it would be decided to expedite the soldier further down the line, keep the soldier there to either stabilize or heal, or keep the soldier there until they passed. Depending upon circumstances, both relating to the individual as well as what was happening in the area, a soldier may bypass various stages.

Type of transport used depended upon the stage. In the initial stages from battlefield removal, regimental aid post, and occasionally advanced dressing station, wounded were usually ambulatory or transported by horse ambulance. Field ambulances tended to use horse ambulances. Casualty Clearing Stations had motor ambulances and usually delivered their wounded to subsequent stages, i.e. hospitals, etc., by hospital train. Movements across the English Channel and from the UK to Canada were by hospital packet and hospital ship respectively.

In the case of your guy, my impression is that he was treated carefully due to the severity of his wounds. By officially stating that he was "dangerously wounded", the medical people were saying that either he could possibly go either way - heal or die. If the wound was considered terminal, the term "gravely wounded" was often used. The fact that it was mentioned that his spine was involved would easily explain why his medical journey took so long. Spinal injuries took extra care due to their nature and transport had to be such that trauma of travel had to be minimized, i.e. a smooth ride was critical and thus transport would be done when the conditions of transport and the health of the patient allowed such.

Cheers, David.