

ORIGINAL

A

No. 2 M. D. 1st. Depot Battalion 2nd. C.O.R. Regiment

Regtl. No. 3110509

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

M.S.A.

(Class ONE.)

1. Surname..... Welsh

2. Christian name..... Charles Wellington

3. Present address..... 67 Onterio St. Toronto Ont.

4. Military Service Act letter and number..... 829786

5. Date of birth..... June 28th 1888

6. Place of birth..... Goldstone, Ont.
(town, township or county and country)

7. Married, widower or single..... Single.

8. Religion..... Meth

9. Trade or calling..... Box Maker

10. Name of next-of-kin..... Wm. N. Welsh

11. Relationship of next-of-kin..... Fath er

12. Address of next-of-kin..... Norman St., Palmerston

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..... Toronto Ont. (b) Date..... 29th Nov. (c) Category..... A-2

SUFFICIENT ADDRESS

DECLARATION OF RECRUIT

I, Charles Wellington Welsh, do solemnly declare that the above particulars refer to me, and are true.

Chas Wellington Welsh (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... 29 yrs. 5 mths.

Height..... 5 ft. 5½ ins.

Chest measurement } fully expanded..... 35½ ins.
range of expansion..... 2½ ins.

Complexion..... good.

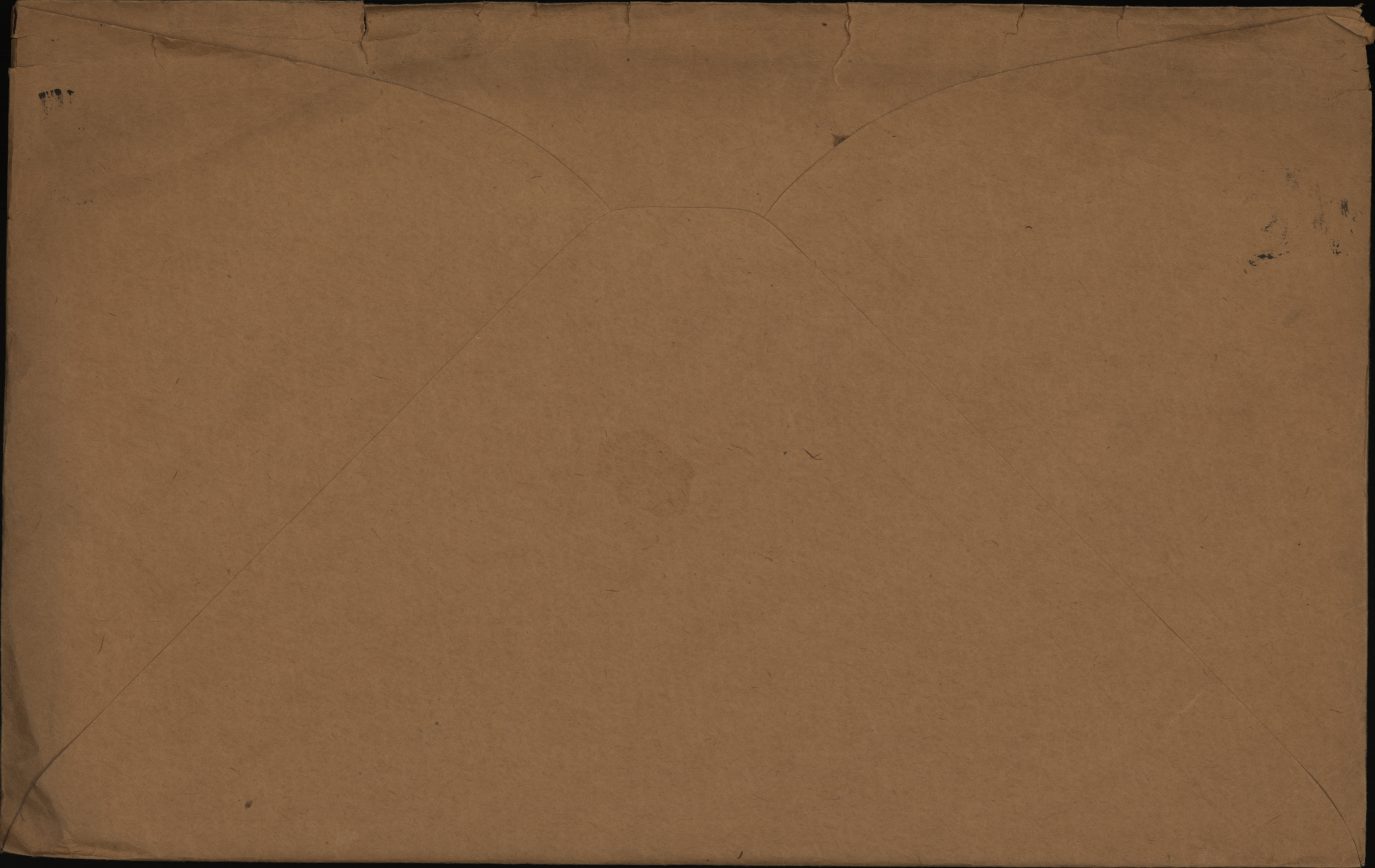
Eyes..... grey.

Hair..... brown.

Distinctive marks, and marks indicating congenial peculiarities or previous disease.
Vision both eyes D
D20. Hearing normal
Nasal spurs.

G. B. Rozy MAJOR
For. O.C. 1st. Depot Bn., 2nd C. O. R. Depot Btltn.
Regt.

Place..... Niagara-on-the-Lake. Date..... 6th June, 1918.



low
com.

Number 3110209 Rank Spe

Surname WELSH

Christian Name Charles Wellington

Units C E Theatre of War ENG

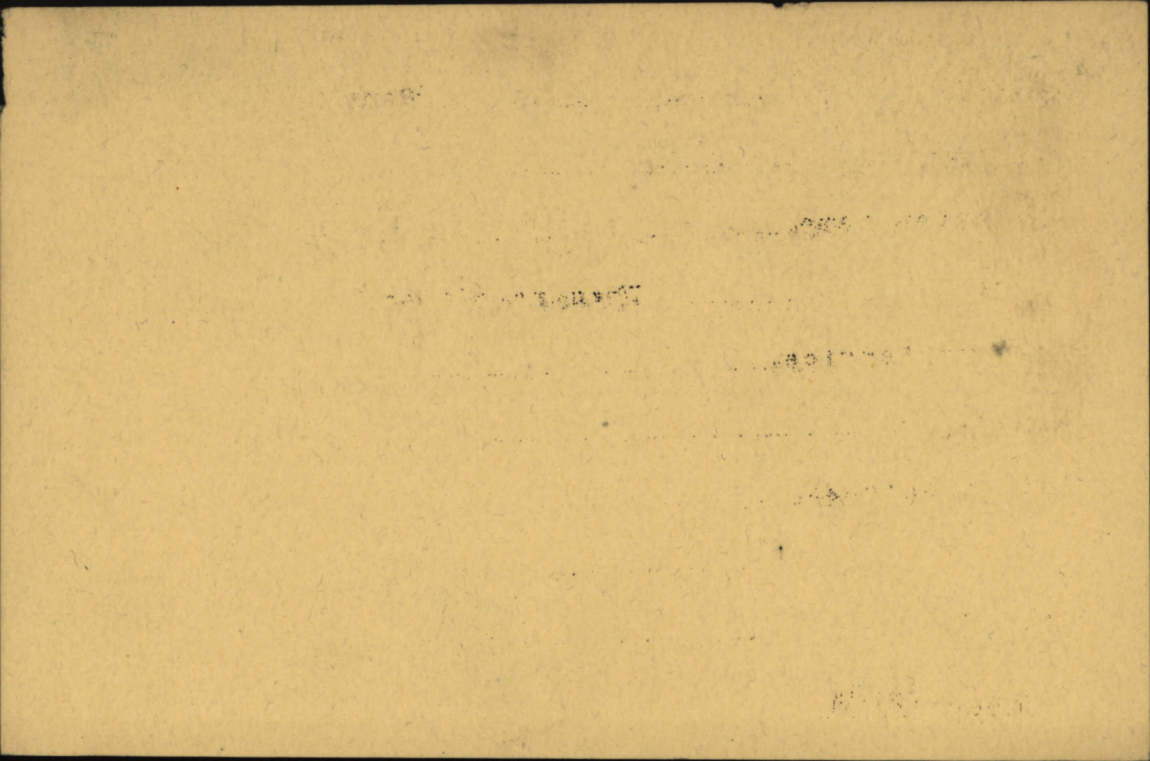
Date of Service 12.8.18

Remarks

Latest Address Dufferin St
Palmerston

Roll No. A Page 2694 Ont

200m.-2-21.M.



25 W. 2
Plans 14-078

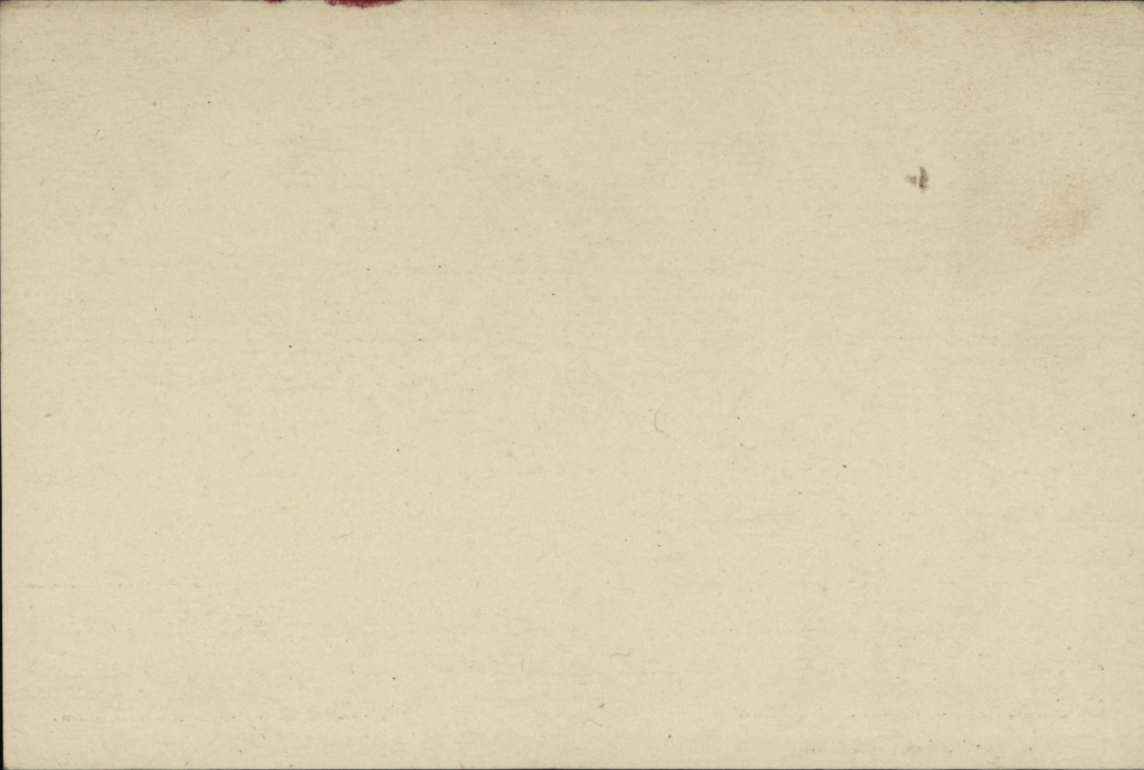
Surname Welsh
 Christian names Charles Wellington
 Regtl. No. 3110509 Rank Pte
 Unit 2nd Gen. Ont. Regt. 1st Dep. Bn.
 74th Draft. C. E.

H. Q.
 M. D. No. 24 Apr 174 of 23-6-18
 T. O. S. June 6th 1918
 D. O. Pt. II 158 of 7/6/18
 S. O. S. 15-7 19 19
 Reason Demob
 Auth. 50.199 of 18/7/19

Next of kin Welsh William Relationship Father
 Address Norman St. Palmerston Also notify:

Ont.

BORN—Place Canada. Goldstone, Ont. Date June 28th 1888.
 ATTESTED—Place Nesqueon-on-the-Lake, Ont. Date June 6th 1918.
 O/S 3-3-18. 1877
 R/C 12-7-19 371 Pte
57.



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) welsh. C. W.
 REGIMENT C.A.M.C RANK Pte No. 3110509
 Date of Examination in England 29-6-19 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 43
2. EXTRACTIONS 14
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 no
- (b) In England no
- (c) In France no

Signature of Dental Officer B. E. Brownlee
Capocase

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3110509 Rank pts Surname WELSH
 (Given name in full) CHARLES WELLINGTON
 Unit or Corps C & M C Birthplace GOLDSTONE ONT

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

I. GENERAL DESCRIPTION: *estimated*

Physique good Weight 130 lbs. Height 5 ft. 6 in. Colour of Eyes grey
 Nutrition good
 Pulse 72 regular
 Condition of arteries soft
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
scar 1" long left skin.

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of Mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Wich Epsom (Overseas)

Date 28/6/19

Signed W. J. O'Connell M.O.
Major

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature E. J. Walsh

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

MEDICAL HISTORY SHEET.

ORIGINAL

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 Welsh Christian name Charles Wellington
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 829786
- 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
- 4. Address (including street and number, if any) 67 Ontario St. Toronto Ont.

M.S.A.

Signature of Man *Charles Wellington Welsh*

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 29th day of Nov. 1917, by the undersigned medical board sitting at Toronto Ont.

- 5. Age as stated 29 Years 5 Months.
- 6. Apparent age _____ Years _____ Months
- 7. Height 5 Feet 5 1/2 Inches.
- 8. Weight 128 1/2 Pounds.
- 9. Chest measurement { Minimum 33 Ins. Maximum 35 1/2 Ins.
- 10. Complexion good. { Eyes grey Hair brown
- 11. Physical development good. { Good Fair Poor
- 12. Smallpox marks _____

- 13. Number of vaccination marks { Right arm _____ Left arm _____
- 14. When vaccinated last _____

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nasal Spurs.

16. Slight defects but not sufficient to cause rejection
The man denies having had { Rheumatism Tuberculosis Syphilis } We find no evidence of past { Rheumatism Tuberculosis 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 A2 Vision both eyes D20. Hearing normal.

E. Frankish President.

W. Check Member. E. Hooper Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>10-9-18</u>		<u>Full course</u>	<u>27-6-18</u>	<u>M.O.</u>	<u>Full course</u>
			<u>27-7-18</u>	<u>M.O.</u>	<u>Full course</u>
			<u>26-7-18</u>	<u>M.O.</u>	<u>Full course</u>

CERTIFIED TRUE COPY

CAPT. *W. C. Hooper*
FOR: LT.-COLONEL
O. C. Mobilization Centre
HAMILTON, ONT.

Joined _____ day of _____ 191 at _____

CORPS	REG'TL NUMBER	HABITS	DATE
	<u>3110509</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Camp Niagara ST. JOHNS, P.Q.</u>	<u>June 7/18</u> <u>JUL 4 1918</u>		<u>A2 W/Post Capt, Pres. S.M.B.</u> <u>Au Capt W. C. Hooper</u> President Medical Board, St. Johns, P.Q.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3110509 (Rank) Pte.
Name (in full) Charles Wellington Welsh enlisted in
the 1st Depot Bn., 2nd Cent. Out. Regt.
CANADIAN EXPEDITIONARY FORCE at Niagara, Ont. on the 6th
day of June 19 18
HE served in Cdn. Engineers & C.A.M.C. in England
Demobilization.
and is now discharged from the service by reason of Medical Unfitness.

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

Age 31
Height 5'5 1/2"
Complexion Good
Eyes Grey
Hair Brown

Marks or Scars.....

Scar 1" long left shin.

C.W. Welsh

Signature of Soldier.

H. J. ... Capt.

Issuing Officer. No. 2 D. D.

Date of Discharge

No. 2 DISTRICT DEPOT

JUL 15 1919

TORONTO

Rank

Date JUL 15 1919 19.....

NB.- 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.

PK

Charles H. Chapman, Detroit

1st Deputy A. J. Carson, Mich.

PK

Chas. Chapman & Co. in Mich.

June 18

31

5' 2 1/2"

Dark

Blue

Blue

Wm. W. W.

NO. 2 DISTRICT DEPUTY
JUL 1 1918

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

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

500M.—9-16

H. Q. 1772-39-9:0.

2

Casualty Form—Active Service.

Unit, Regiment or Corps.....
 Regimental No. 311089 Rank Plt Name Welsh Charles W.
 C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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).....

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				
JUL 5 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT,	TORONTO	1919	PART II D 199
JUL 15 1919	S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,		PART II L 199

W. C. Roberts
 For O. C. No. 2 District Depot.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

M.S.A.

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

M. F. W. 54. (A. F. B. 10s.)

500M.—9-16
H. Q. 1772-39-9.0.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BN., 2nd C. O. R.

Regimental No. 3110509 Rank Pte Name Melch. Charles Wellington
C. E. F.

Enlisted (a) June 1/18 Terms of Service (a) 10 years 6 months after Service reckons from (a) June 1/18

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) Boy maker

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				
Transferred to		<u>Can Eng</u>	<u>Bungau</u>	<u>14 6-18</u>	
From 1st Depot Batt'n, 2nd C. O. R.					
		<u>Trans. to Can Eng</u>	<u>St. John</u>	<u>19/6/18</u>	<u>- D. O. 174</u>
		<u>Trans to Balance</u>			
		<u>D.S. Draft #44 C.E.</u>	<u>St. Johns.</u>	<u>12/7/18</u>	<u>D. O. 87.D. Part II</u>
		<u>Embarkation</u>	<u>Montreal</u>	<u>12-7-18</u>	
		<u>Dis Embarkation</u>	<u>Halifax</u>	<u>18-7-18</u>	
		<u>Embarkation</u>	<u>Canada</u>	<u>3.8.18</u>	
		<u>Dis Embarkation</u>	<u>United Kingdom</u>	<u>15-8-18</u>	
		<u>T.O.S. from Canada</u>	<u>Seaford</u>	<u>15-8-18</u>	<u>Part II Ord 94</u>
<u>9-9-18.</u>	<u>Held</u>	<u>Ans to 1st CORP</u>	<u>"</u>	<u>24/1/19</u>	<u>" 20</u>
<u>24/1/19</u>	<u>"</u>				

W. J. Wishes Lieut. C.E.
for Lieut. Colonel, C.E.
Commanding 2nd Canadian Engineers Reserve Bn.

2) 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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
25-1-19	1 CERB	Joseph 2 CERB	Seaford	24-1-19	P 2021
15-5-19	do	Solwene Coastguard Seaford		15-5-19	PT 115
					PT 115
					Capt. C.
					Adj. CERB
20	CORP	TOS. promotion to 1st CERB	Wick	10-6-19	PT 200 135
20	do	TOS. to 2nd Lt. [unclear]			
1st 6-19	664	TOS. from Camb. Co. Epsom and 10/7659 of 7-6-19	Epsom	15-5-19	
5/7/19	CW 20	SOS out to be [unclear]	Epsom	PT 200 186	169/1919

Embark RMS-Carmania
 Liverpool 5.7.19
 Capt. & A. [unclear]

Charles Capt.
 For Officer Commanding,
 M.C. Casualty Company.
 169/1919
 5/2/19
 [Signature]

Rank _____ Name *WELSH Charles, Wellington* Reg'l No. *3110509*
 Unit *74th Dft CAN ENG* If in perm. Corps, }
 What Unit? } Married or Single *Single*
 Place and Date of Enlistment *Niagara-on-the-lake June 1918* Place of Birth *Goldstone, Ont*
 Name and Address, Next-of-Kin *Wm. N. Welsh*
Norman St., Palmerston Relationship *Father*
 Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____
 Separation Allowance \$ _____ Payable to _____
 Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

Came

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.				
		<i>Arrived in England.</i>		<i>15 8 18</i>	<i>SS CANAFCNSHIRE</i>
<i>9.9.18</i>	<i>2 CERB</i>	<i>T. O. S from Canada</i>	<i>SEAFORD</i>	<i>16 Aug 18</i>	<i>DO-94</i>
<i>24-1-19</i>	<i>"</i>	<i>SOS to CERB</i>	<i>"</i>	<i>24-1-19</i>	<i>" 20x1 CERB 21/25-19</i>
<i>15.5.19.</i>	<i>1 CERB</i>	<i>SOS to CAINC</i>	<i>"</i>	<i>15.5.19.</i>	<i>DO. 112. 135 4106-19</i>
<i>10-6-19</i>	<i>canocan</i>	<i>SOS to MCHP Epsom</i>	<i>Witley</i>	<i>15-6-19</i>	<i>-135-8 164 of 15-6-19</i>
<i>5-7-19</i>	<i>MCHP</i>	<i>SOS to Canada</i>	<i>Rb Epsom</i>	<i>5-7-19</i>	<i>-136</i>

93-I-52 of 5.7.19

Engin

SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)



1. No. *3110509*

2. Rank. *Pte*

3. Name. *Welsh Charles Wellington*

4. Unit. *Canal*

5. Date of Discharge *JUL 15 1919* Place *TORONTO, ONT.*

6. Reason for Discharge **DEMOBILIZATION**
 SERVICE IN FRANCE *Bel*
 NEXT OF KIN *Father*
 RELIGION *Methodist*
 CATEGORY *A1*

7. Authority. **OCCUPATION** *No. 2, D.D., Part II, D.O. No. 199*

8. Proposed Residence after Discharge *C.W. Welsh*
Dufferin St Palmerston ont can

CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
 M. F. W. ?

Charles Wellington Welsh
 Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place... *No. 2 DISTRICT DEPOT* *Embark R. S. Armenia*
 Date... *JUL 15 1919* *Liverpool 5.7.19*
TORONTO *Capt. & Adj. Gen.*

Signature... *H. J. [unclear]* *Capt.*
 (O.C. Discharging Unit.)

LIST OF DISCHARGE DOCUMENTS

1. Discharge Certificate	2. Discharge Certificate
3. Discharge Certificate	4. Discharge Certificate
5. Discharge Certificate	6. Discharge Certificate
7. Discharge Certificate	8. Discharge Certificate
9. Discharge Certificate	10. Discharge Certificate
11. Discharge Certificate	12. Discharge Certificate
13. Discharge Certificate	14. Discharge Certificate
15. Discharge Certificate	16. Discharge Certificate
17. Discharge Certificate	18. Discharge Certificate
19. Discharge Certificate	20. Discharge Certificate
21. Discharge Certificate	22. Discharge Certificate
23. Discharge Certificate	24. Discharge Certificate
25. Discharge Certificate	26. Discharge Certificate
27. Discharge Certificate	28. Discharge Certificate
29. Discharge Certificate	30. Discharge Certificate
31. Discharge Certificate	32. Discharge Certificate
33. Discharge Certificate	34. Discharge Certificate
35. Discharge Certificate	36. Discharge Certificate
37. Discharge Certificate	38. Discharge Certificate
39. Discharge Certificate	40. Discharge Certificate
41. Discharge Certificate	42. Discharge Certificate
43. Discharge Certificate	44. Discharge Certificate
45. Discharge Certificate	46. Discharge Certificate
47. Discharge Certificate	48. Discharge Certificate
49. Discharge Certificate	50. Discharge Certificate
51. Discharge Certificate	52. Discharge Certificate
53. Discharge Certificate	54. Discharge Certificate
55. Discharge Certificate	56. Discharge Certificate
57. Discharge Certificate	58. Discharge Certificate
59. Discharge Certificate	60. Discharge Certificate
61. Discharge Certificate	62. Discharge Certificate
63. Discharge Certificate	64. Discharge Certificate
65. Discharge Certificate	66. Discharge Certificate
67. Discharge Certificate	68. Discharge Certificate
69. Discharge Certificate	70. Discharge Certificate
71. Discharge Certificate	72. Discharge Certificate
73. Discharge Certificate	74. Discharge Certificate
75. Discharge Certificate	76. Discharge Certificate
77. Discharge Certificate	78. Discharge Certificate
79. Discharge Certificate	80. Discharge Certificate
81. Discharge Certificate	82. Discharge Certificate
83. Discharge Certificate	84. Discharge Certificate
85. Discharge Certificate	86. Discharge Certificate
87. Discharge Certificate	88. Discharge Certificate
89. Discharge Certificate	90. Discharge Certificate
91. Discharge Certificate	92. Discharge Certificate
93. Discharge Certificate	94. Discharge Certificate
95. Discharge Certificate	96. Discharge Certificate
97. Discharge Certificate	98. Discharge Certificate
99. Discharge Certificate	100. Discharge Certificate

W. W. 1234

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 13
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 361).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A-1
 Checked by No. 21
CMS.
 Date 2/7/19

