

No. 3

ORIGINAL

M. D. Depot Battalion 1st Depot Bn., E.O. Regt., C.E.F. Regiment

WRA

73rd Battery, C.F.A., C.E.F.

Regtl. No. 3058171

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

db

(Class I)

- 1. Surname Welsh
- 2. Christian name Harold Edward
- 3. Present address Wooler, Ont. Gen. Dely.
- 4. Military Service Act letter and number PC 925979
- 5. Date of birth 5th May, 1896.
- 6. Place of birth Moira, Ont.
(town, township or county and country)
- 7. Married, widower or single Single
- 8. Religion Methodist
- 9. Trade or calling Teacher (Principal)
- 10. Name of next-of-kin William F. Welsh
- 11. Relationship of next-of-kin Father
- 12. Address of next-of-kin Moira, Ont. Gen. Dely.
- 13. Whether at present a member of the Active Militia No
- 14. Particulars of previous military or naval service, if any No
- 15. Medical Examination under Military Service Act:—
(a) Place Trenton, Ont. (b) Date 13th Oct., 1917. (c) Category A2

DECLARATION OF RECRUIT

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

H. E. Welsh (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....	<u>21</u>	yrs.....	<u>6</u>	mths.	Distinctive marks, and marks indicating congenital peculiarities or previous disease.
Height.....	<u>5</u>	ft.....	<u>7½</u>	ins.	
Chest measurement } }	fully expanded.....	<u>36</u>	ins.	Nil	
	range of expansion.....	<u>2½</u>	ins.		
Complexion.....	<u>Fair</u>				
Eyes.....	<u>Blue</u>				
Hair.....	<u>Brown</u>				

R. W. Smith Lt. Col.
O.C. 1st Depot Bn., E.O. Regt., C.E.F.
O. C. Depot Btln.

Place Barriefield Camp, Ont Date 6th May, 1918.

ORIGINAL

Dept. of the Army, Adjutant General's Office, Washington, D.C.

Serial No. 303817

M.D.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname	Elsh
2. Christian name	Harold Elsh
3. Present address	Wooler, Ont. Can. 1917
4. Military Service Act number	12 32373
5. Date of birth	27th May, 1898
6. Place of birth	Wooler, Ont.
7. Married, widower or single	Single
8. Religion	Methodist
9. Trade or calling	Teacher (Elementary)
10. Name of next-of-kin	William A. Elsh
11. Relationship of next-of-kin	Father
12. Address of next-of-kin	Wooler, Ont. Can. 1917
13. Whether at present a member of the Active Army	No
14. Particulars of previous military or naval service, if any	No
15. Medical examination under Military Service Act	No

DECLARATION OF RECRUIT

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

Signature of Recruit

DESCRIPTION ON CALLING UP

Age	19
Height	5 ft 6 in
Complexion	Fair
Build	Slender
Stature	Medium
Complexion	Fair
Build	Slender
Stature	Medium
Complexion	Fair
Build	Slender
Stature	Medium

Place of birth: Wooler, Ont. Can. 1917

Signature of Recruit

Signature of Officer

2/1/17 cont

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Proceedings of Court of Inquiry or on men

Reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for

Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

ASB/22 1

msw 71 - 1

Dental 1

msw 129 1

M. F. W. 62.

50m.-9-16.

H. Q. 1772-39-935.

Name WELSH HAROLD EDWARD

3058171

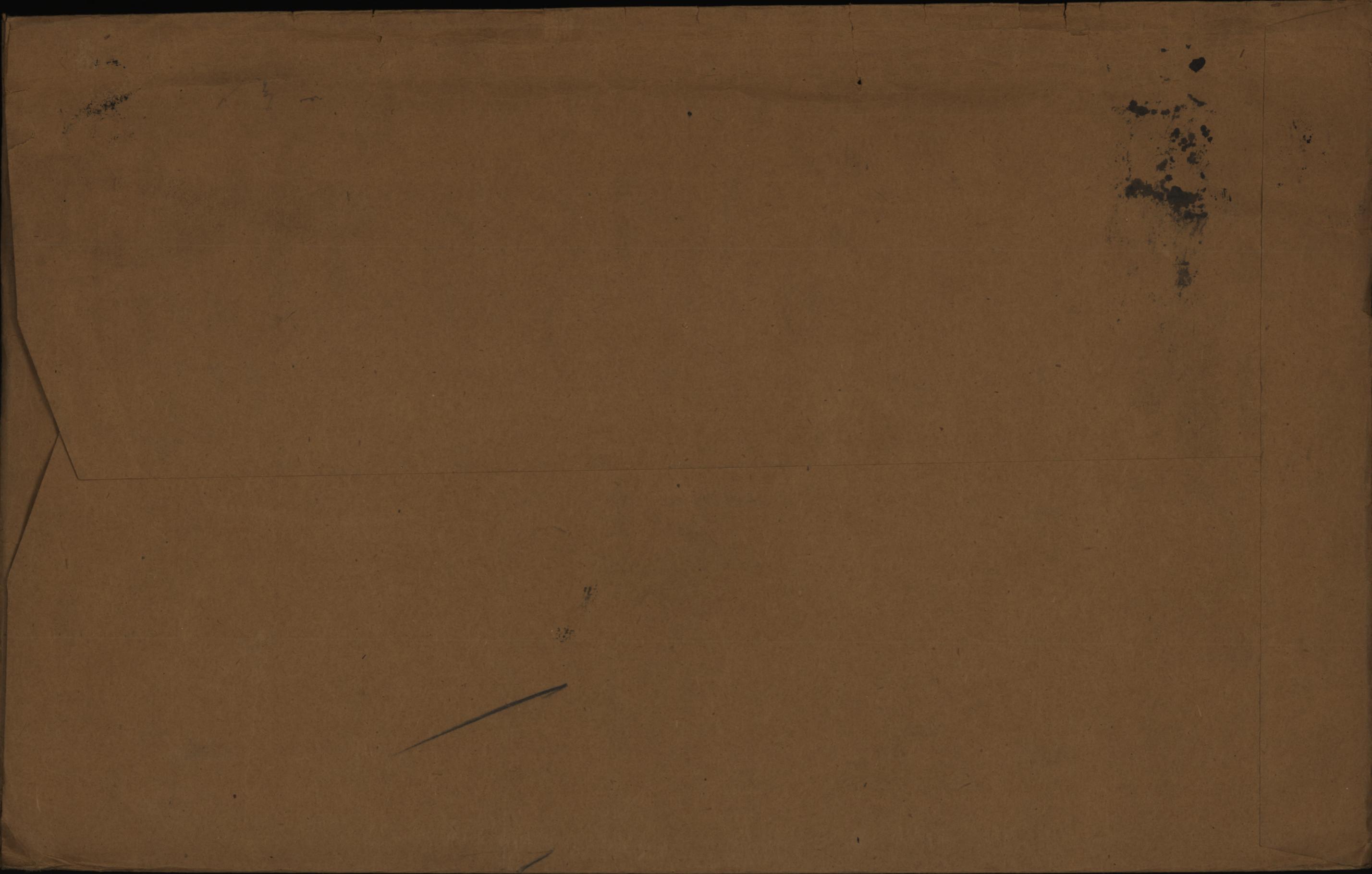
Regt. No. Rank Gun

Corps No 3 Depot Hd Bty C.S.A.

Demobilization



13825



SURNAME.

Welsh

3

CARD NO.

4

CHRISTIAN NAMES

Harold Edward

S.O.S Dec 11-12-18
with 6040 of 10-12-18
deserve 2nd Lieut. 1st Lt.

REGL. NO.

30 5-8171.

RANK

Pte.

UNIT

East. Ont. Regt. 1st Dps. Bu.

T. O. S. May 4 1918

FORMER CORPS

Wel.

D.O. Part II No 123

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Welsh, William F.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Gen. Del. Moira, Ont.

COUNTRY OF BIRTH

Canada. Moira, Ont.

DATE

May 5th 1896.

PLACE OF ATTESTATION

Barrie Field Camp, Ont.

DATE

May 6th 1918.

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

13
NAME

WELSH, Harold Edward,

REGIMENTAL NO.

3058171

RANK

Pte.

ENLISTED AT

Kingston, Ont.

PROMOTIONS, &c.
AND DATE

DATE

6-5-18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

Single

NEXT OF KIN

William F. Welsh

RELATIONSHIP

Father

ADDRESS OF

Moira Ont.

ASSIGNMENT OF PAY \$

20.00

C.

TO

Wife ~~Atter~~ Carrie Welsh
Moira Ont.

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

No.

2058171

RANK

Cte

NAME

Welsh, Harold E

T. O. S.

4-5-18

UNIT

1st. Depot Bn Co. Regt.

dls. 123. 3. 5. 18

M. D.

3

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

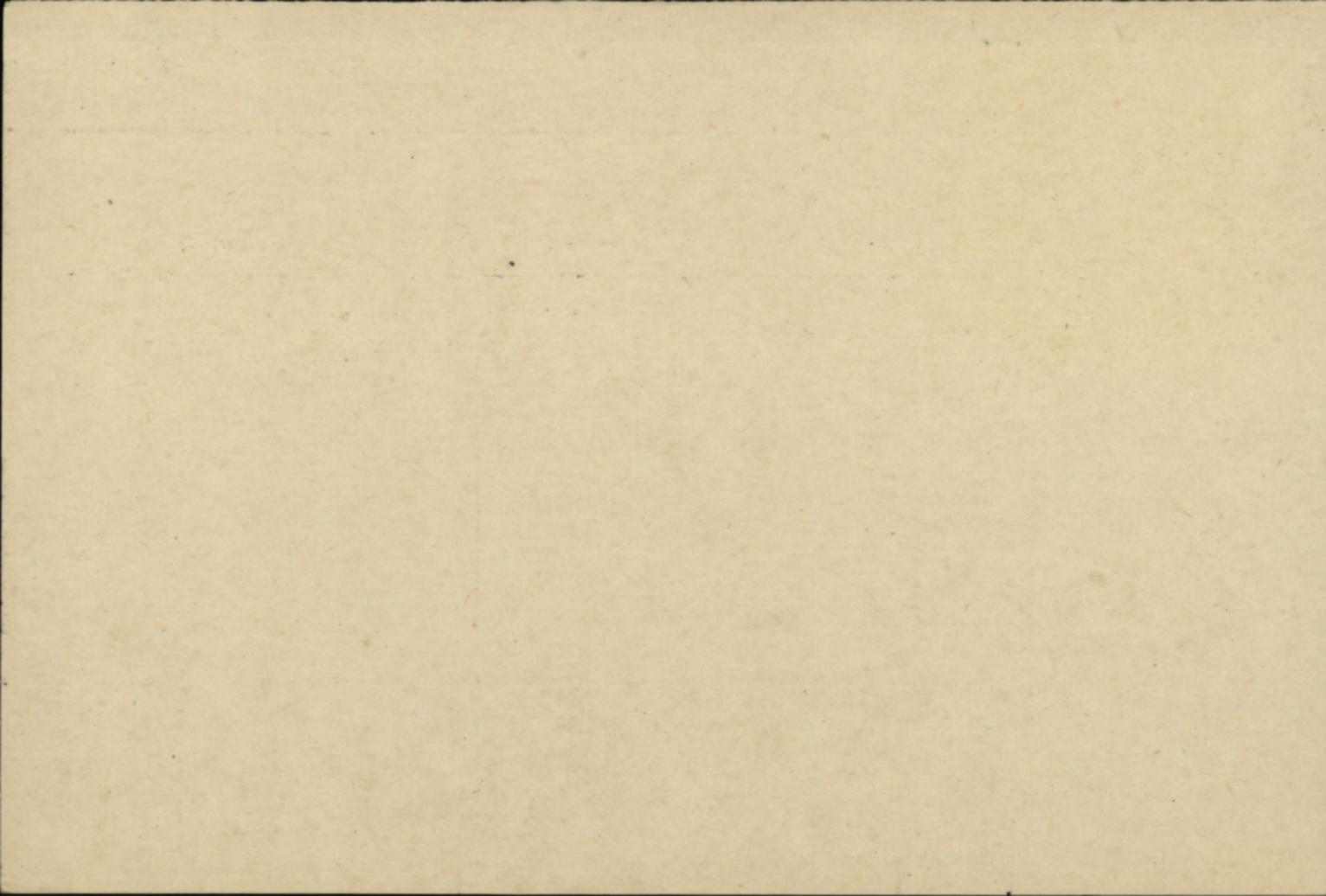
AUTHORITY

1918
May 41918
May 11

u

Transf dls 1st Bty 11/5/18

dls 131. 11-5-18



73rd Battery, C.F.A., C.E.F.

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 1st Depot Bn., E.O. Regt., C.E.F.

Regimental No. 3058171 Rank Plte Name Welsh Harold Edward

Enlisted (a) 6/5/18 Terms of Service (a) 6 mo & over 4 months Service reckons from (a) 6/5/18

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

Extended Re-engaged Qualification (b) Civil teacher (principal)

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				
9/5/18	1st Depot Bn. C.O.R.	Transferred to 13th Bty. C.F.A.	Kingston	11/5/18	D.O. # 131 W. Langhille Capt. & Adj. 1st Depot Bn., E.O. Regt., C.E.F.
<p>Discharged on demobilization effective Dec. 11th, 1918. Authority 3 M. D. 2606-172 of 20-11-18.</p> <p><i>H. J. Mooney Capt</i> for Lt.-Col. O.C. #3 Depot Field Battery, C.F.A.</p>					

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3058171 (Rank) Gunner

Name (in full) Harold Edward Welsh enlisted in
the 1st Depot Battalion, E.O.R., transferred to 73rd Battery, C.F.A.,
and to No. 3. Depot Field Battery, C.F.A.
CANADIAN EXPEDITIONARY FORCE at Kingston, Ontario. on the Sixth
day of May 1918.

HE served in CANADA
and is now discharged from the service by reason of Demobilization of Forces
Auth. 3.M.D. 26-6-172 of 20-11-18

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

Age 22 years 7 months
Height 5 feet 7-1/2 inches
Complexion Fair
Eyes Blue
Hair Brown

Marks or Scars
- - - - - N I L - - - - -

H. E. Welsh
Signature of Soldier

R. F. J. J. J.
Issuing Officer
Lieut.-Colonel.
Rank

Date of Discharge December 11th, 1918

April 1st, 1918.
Appointment

Signed at Kingston, Ontario. this Eleventh day of December 1918.

in Military District No. 3.

File Reference No. 3.M.D. 66/W/182

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

*On demobilization
Bill for on Reverse
Discharge certificate will
be completed G.O. 16 S. 240
Particulars of
1911/18.*

R. Procter
Name of Officer

Lieut - Col.
Rank

April 11/1918
Appointment

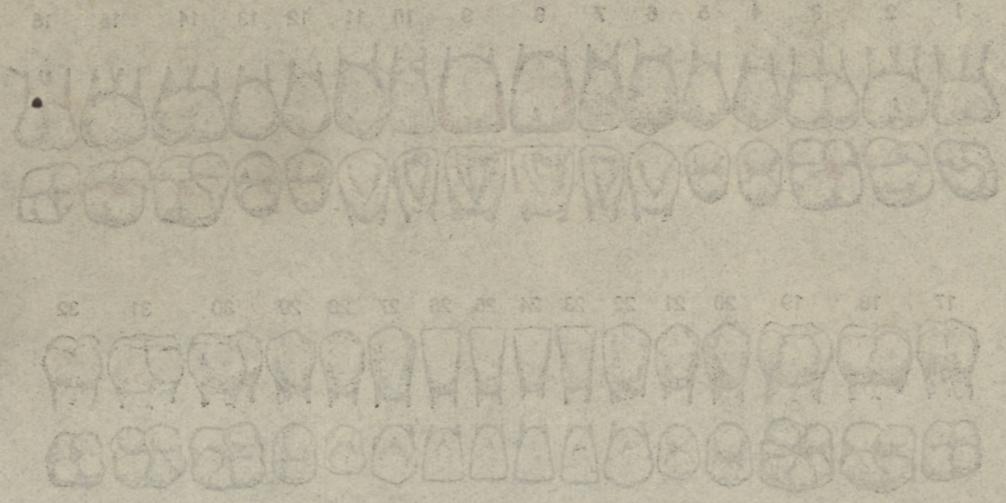
INSTRUCTIONS

1. On examination the condition of patient's teeth to be marked on diagram in red ink.

2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

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



DATE OF EXAMINATION: _____
 NAME OF PATIENT: _____
 NAME OF DENTIST: _____

CHANDRA VENKA DEVIJAT COOKS DENTAL 9

DEVIJAT HISTORICAL SHEET

REPRODUCED FROM THE HISTORICAL RECORDS OF THE DENTAL BOARD OF CANADA

MADE IN CANADA

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 Welsh Christian name Harold Edward

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 925979

3. Consecutive number on schedule of men reporting for service (if he appears on it) _____

4. Address (including street and number, if any) Wooler Ont

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 13th day of Oct 1917, by the undersigned medical board sitting at Neuton, Ont

5. Age as stated 21 Years 6 Months. 6. Apparent age 21 Years 6 Months

7. Height 5 Feet 7 1/2 Inches. 8. Weight 140 Pounds.

9. Chest measurement { Minimum 33 1/2 Ins. Maximum 36 Ins. 10. Complexion Fair Eyes Blue Hair Brown

11. Physical development good { Good Fair Poor 12. Smallpox marks None

13. Number of vaccination marks { Right arm None Left arm 1 14. When vaccinated last 3 years ago

15. Distinctive marks and marks indicating congenital peculiarities or previous disease None

16. Slight defects but not sufficient to cause rejection None

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 AV

Edw Kidd Lt Col AMC President.

W Blakelee Capt AMC Member.

A. J. Brown Capt AMC Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>29/6/18</u>	<u>PH</u>	<u>Desmues</u> M.O.	<u>21/6/18</u>	<u>PH</u>	<u>Desmues</u> M.O.
		M.O.	<u>25/6/18</u>	<u>PH</u>	<u>Desmues</u> M.O.
		M.O.	<u>29/6/18</u>	<u>PH</u>	<u>Desmues</u> M.O.

Joined 6th day of May 1918 at Kingston Ont

CORPS	REG'TL NUMBER	HABITS	DATE
<u>1st Depot Bn., F.C. Regt, C.E.F.</u>	<u>73 Battery</u>		<u>6/5/18</u>
	<u>3058171</u>		<u>12/5/18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Kingston</u>	<u>Dec 18. 1918</u>		<u>As Suptd Lt Col A. J. Brown Capt.</u>

Signature of Man Welsh, Harold, Edward Wooler, Ontario

Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank *Gus.* Name *Harold E* Surname *Welsh*
Unit of Corps *3rd Depot Battery* (If a soldier) Regtl. No. *305-8171*
Born at *Moira Ont.* on, (date) *May 5th 1896*
Signature (for identification) *H. E. Welsh*

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight *160* lbs. Colour of eyes *Blue*
Height *5 ft. 7 1/2* in. Identification Marks *nil*

66-20-182

2. NUTRITION AND DIATHESIS?

Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

normal no

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

normal no



5. HEART?

normal
Abnormal Sounds? *none*
Abnormal Size? *no*
Pulse Rate? *80* Intermittence or Irregularity? *none* Muscular Tone? *good*

6. ARTERIES.—(a) Any hardening or nodulation?

no
(b) Blood Pressure. *S. B. P. 115- D. B. P. 84*

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

normal

8. GENITO-URINARY SYSTEM?

normal
Urinalysis—S.G.? *1020* Reaction *alkaline* Albumen? *none* Sugar? *none*

9. SKIN, MIDDLE EAR, EYE or any other part?

normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

none

11. Opinion as to the health and physical condition of the one examined?

Man physically fit for Category A II as a soldier

Examined at *Kingston Ont.* Signed *E. Keddell Col* M. O.
Date *6-12-18* Signed *H. E. Welsh* M. O.
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding

John A. M. C.
for D/ A.D.M.S. Mil. District No. 3 DEC 10 1918
For A.D.M.S. Mil. District No. 3

Medical Examination of a Soldier

General Information for General Service of a Soldier fit for duty

This form is to be filled out by the examining officer and is to be reported on this form. The service man should be examined by a Medical Board and the results reported on this form.

1. NAME	
2. GRADE	
3. COMPANY	
4. REGIMENT	
5. DIVISION	
6. BRANCH	
7. SERVICE NUMBER	
8. DATE OF EXAMINATION	
9. NAME OF EXAMINING OFFICER	
10. GRADE OF EXAMINING OFFICER	
11. PLACE OF EXAMINATION	
12. OCCASION OF EXAMINATION	
13. REASON FOR EXAMINATION	
14. RESULTS OF EXAMINATION	
15. RECOMMENDATION	
16. SIGNATURE OF EXAMINING OFFICER	
17. GRADE OF EXAMINING OFFICER	
18. DATE	
19. NAME OF SOLDIER	
20. GRADE OF SOLDIER	
21. COMPANY	
22. REGIMENT	
23. DIVISION	
24. BRANCH	
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260. DATE OF EXAMINATION	
261. NAME OF EXAMINING OFFICER	
262. GRADE OF EXAMINING OFFICER	
263. PLACE OF EXAMINATION	
264. OCCASION OF EXAMINATION	
265. REASON FOR EXAMINATION	
266. RESULTS OF EXAMINATION	
267. RECOMMENDATION	
268. SIGNATURE OF EXAMINING OFFICER	
269. GRADE OF EXAMINING OFFICER	
270. DATE	
271. NAME OF SOLDIER	
272. GRADE OF SOLDIER	
273. COMPANY	
274. REGIMENT	
275. DIVISION	
276. BRANCH	
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278. DATE OF EXAMINATION	
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299. PLACE OF EXAMINATION	
300. OCCASION OF EXAMINATION	
301. REASON FOR EXAMINATION	
302. RESULTS OF EXAMINATION	
303. RECOMMENDATION	
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305. GRADE OF EXAMINING OFFICER	
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311. DIVISION	
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449. GRADE OF EXAMINING OFFICER	
450. DATE	
451. NAME OF SOLDIER	
452. GRADE OF SOLDIER	
453. COMPANY	

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Kingston, Ont. 5/12/18

DIRECTOR, W. T. CONNELL, M.D.

URINE ANALYSIS

FOR DR. *Elliot*
Capt Lloyd
Patient's Name *Welsh 3058171*
Amount voided 24 hours _____
Amount examined *3 ii*
Color *straw*
Odor *ch*

Reaction *alkaline*
Specific Gravity *1020*
Clearness *cloudy*
Character of sediment (if any) *nil*

CHEMICAL EXAMINATION

Albumin _____
Sugar *nil*
Acetone _____
Diacetic Acid _____
Bile _____
Indican *nil*
Urea _____

MICROSCOPICAL EXAMINATION

Epithelium _____
Pus _____
Blood _____
Casts _____
Chemical sediments *nil*

Bacteria _____
Remarks _____

SNP 115
DBP 84

Smassell
Capt A Mc

E. Papp *ant. smc*
Examiner.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

ORIGINAL



December 1918.
Folio. 20.
Acc't. 19.

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 3058171 Rank Gunner Name Welsh, Harold Edward

Corps #3 Depot Field Battery who was* Discharged

On Dec. 11/18. 191... to
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Dec. 1/18. 191...
to Dec. 11/18. 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month	1	10	Balance Cr. from prev. month		
Advances } No.			Reg'tl. Pay <u>11</u> days at \$ <u>1.00</u> c.	11	00
by } No.			Field Allow. <u>11</u> days at \$ <u>.10</u> c.	1	10
Assigned Pay and Sep'n Allice. No.			Separation Allowances* (Monthly)		
<u>D.A. Without Pay to M.N.</u>			<u>Clothing R.O. 716.</u>		
Other charges <u>Dec. 1/18.</u>	1	10	Other Allowances*	35	00
Payment on transfer or discharge No. <u>3298</u>	44	90	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	47	10	Total	47	10

*Give particulars.

A monthly stoppage of \$ NIL (†) has (‡) been paid on account of Assigned

{ Pay for the month of 191... } (to) Assignee
{ and Sep'n Allice. for month of 191... }

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of \$ has been paid by Paymaster, Military District No.

REMARKS:—

- State (1) date of enlistment May 6/18.
- (2) if married and if a Separation Allowance Card has been submitted No. No.
- (3) cause of discharge Demobilization authority #3 M.D. 26-6-172
- (4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date May 11/18.
Place Kingston, Ont.
L. MacKinnon Lieut. Paymaster, #3 Depot Field Battery

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

CAHADIAN CONINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

1918
1917
1916

This certificate is issued to the holder for all moneys due to him for his services as a member of the Expeditionary Force...

Holder's Name: [Name]

Rank: [Rank]

Issue Date: [Date]

The following is a statement of the amount of the above named force...

Particulars	Debit	Credit	Balance
Pay for [Description]		1 10	1 10
Pay for [Description]		1 10	2 20
Pay for [Description]		1 10	3 30
Pay for [Description]		1 10	4 40
Pay for [Description]		1 10	5 50
Pay for [Description]		1 10	6 60
Pay for [Description]		1 10	7 70
Pay for [Description]		1 10	8 80
Pay for [Description]		1 10	9 90
Pay for [Description]		1 10	10 00
Pay for [Description]		1 10	11 10
Pay for [Description]		1 10	12 20
Pay for [Description]		1 10	13 30
Pay for [Description]		1 10	14 40
Pay for [Description]		1 10	15 50
Pay for [Description]		1 10	16 60
Pay for [Description]		1 10	17 70
Pay for [Description]		1 10	18 80
Pay for [Description]		1 10	19 90
Pay for [Description]		1 10	20 00
Pay for [Description]		1 10	21 10
Pay for [Description]		1 10	22 20
Pay for [Description]		1 10	23 30
Pay for [Description]		1 10	24 40
Pay for [Description]		1 10	25 50
Pay for [Description]		1 10	26 60
Pay for [Description]		1 10	27 70
Pay for [Description]		1 10	28 80
Pay for [Description]		1 10	29 90
Pay for [Description]		1 10	30 00
Pay for [Description]		1 10	31 10
Pay for [Description]		1 10	32 20
Pay for [Description]		1 10	33 30
Pay for [Description]		1 10	34 40
Pay for [Description]		1 10	35 50
Pay for [Description]		1 10	36 60
Pay for [Description]		1 10	37 70
Pay for [Description]		1 10	38 80
Pay for [Description]		1 10	39 90
Pay for [Description]		1 10	40 00
Pay for [Description]		1 10	41 10
Pay for [Description]		1 10	42 20
Pay for [Description]		1 10	43 30
Pay for [Description]		1 10	44 40
Pay for [Description]		1 10	45 50
Pay for [Description]		1 10	46 60
Pay for [Description]		1 10	47 70
Pay for [Description]		1 10	48 80
Pay for [Description]		1 10	49 90
Pay for [Description]		1 10	50 00
Pay for [Description]		1 10	51 10
Pay for [Description]		1 10	52 20
Pay for [Description]		1 10	53 30
Pay for [Description]		1 10	54 40
Pay for [Description]		1 10	55 50
Pay for [Description]		1 10	56 60
Pay for [Description]		1 10	57 70
Pay for [Description]		1 10	58 80
Pay for [Description]		1 10	59 90
Pay for [Description]		1 10	60 00
Pay for [Description]		1 10	61 10
Pay for [Description]		1 10	62 20
Pay for [Description]		1 10	63 30
Pay for [Description]		1 10	64 40
Pay for [Description]		1 10	65 50
Pay for [Description]		1 10	66 60
Pay for [Description]		1 10	67 70
Pay for [Description]		1 10	68 80
Pay for [Description]		1 10	69 90
Pay for [Description]		1 10	70 00
Pay for [Description]		1 10	71 10
Pay for [Description]		1 10	72 20
Pay for [Description]		1 10	73 30
Pay for [Description]		1 10	74 40
Pay for [Description]		1 10	75 50
Pay for [Description]		1 10	76 60
Pay for [Description]		1 10	77 70
Pay for [Description]		1 10	78 80
Pay for [Description]		1 10	79 90
Pay for [Description]		1 10	80 00
Pay for [Description]		1 10	81 10
Pay for [Description]		1 10	82 20
Pay for [Description]		1 10	83 30
Pay for [Description]		1 10	84 40
Pay for [Description]		1 10	85 50
Pay for [Description]		1 10	86 60
Pay for [Description]		1 10	87 70
Pay for [Description]		1 10	88 80
Pay for [Description]		1 10	89 90
Pay for [Description]		1 10	90 00
Pay for [Description]		1 10	91 10
Pay for [Description]		1 10	92 20
Pay for [Description]		1 10	93 30
Pay for [Description]		1 10	94 40
Pay for [Description]		1 10	95 50
Pay for [Description]		1 10	96 60
Pay for [Description]		1 10	97 70
Pay for [Description]		1 10	98 80
Pay for [Description]		1 10	99 90
Pay for [Description]		1 10	100 00

Particulars: [List of items and amounts]

Total: [Sum of all items]

By Authority of the [Authority]

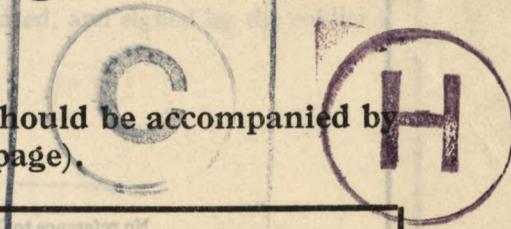
Witness my hand and seal this [Date] day of [Month] 19[Year]

Signature: [Name]

This space to be for numbers

Proceedings on Discharge.

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



No. **3058171**

Rank **Gunner**

Surname **WELSH**

Christian Name **Harold Edward**
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) **No. 3. Depot Field Battery, C.F.A.**

Date of Discharge **December 11th, 1918.**

Place of Discharge **Kingston, Ontario.**

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age **22** years **7** months.
Height **5** feet **7-1/2** inches.
Complexion **Fair**
Eyes **Blue**
Hair **Brown**
Trade **Teacher**

Descriptive Marks

N I L

Intended place of residence } **Wooler, Ont.**
(To be given as fully as practicable.)

2. The above-named man is discharged in consequence of **On Demobilization**
Auth. 3.M.D. 2606-172 of 20-11-18.

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. **Good.**

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

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.)

Teacher.

5. He is in possession of the following number of G. C. Badges: - - - - - **N I L** - - -

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

- - - - - N I L - - - - -

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) **Kingston, Ontario.**

J. P. Mooney Capt
for **Lieut.-Colonel.**

(Date) **December 11th, 1918.**

Commanding **No. 3. Depot Field Batty,**
C.F.A.

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.

(Place) **Kingston, Ontario.**

H. E. Helst (Signature of Soldier.)

(Date) **December 11th, 1918.**

G. W. Haughlin (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 **219** ays.

Total.....years **219** ays.

11. Confirmation of Discharge.

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

(Place) **Kings ton, Ontario.**

R. Procker
(Signature)
Lieut.-Colonel.

(Date) **December 11th, 1918.**

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
H. E. Smith

<p>Attestation Paper, Militia Form B. 232</p> <p>Proceedings on Discharge, B. 218</p>	<p>Reg. Conduct Sheet, Militia Form B. 203</p> <p>Conduct Sheet, B. 203a</p> <p>Squadron Battery Company</p>
<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of:</p> <p>(a) Proceedings on Discharge</p> <p>(b) Attestation</p> <p>(c) Medical History Sheet (in the event of such having been prepared)</p>	<p>Copies of Convictions by C.P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalids*, B. 227</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, D. 877</p> <p>*Only if discharged "Medically unfit"</p>

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.

NOT CHARGED DEC 2 6 1918

DEC 27 1918

DEC 28 1918

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	
*Only if discharged "Medically unfit."	

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.

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 computed) -

Total -

11. Confirmation of Discharge.

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

Place: Sturgeon, Ontario,

Date: December 11th, 1918.

Signature: R. Procher

Rank: Major