

ATTESTATION PAPER.

No. 2700685

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... DAVIE
- 1a. What are your Christian names?..... Clarence
- 1b. What is your present address?..... 15 North St. Halifax N.S?
- 2. In what Town, Township or Parish, and in what Country were you born?..... Halifax N.S.
- 3. What is the name of your next-of kin?..... Mrs. Annie Davie
- 4. What is the address of your next-of-kin?..... 15 North St. Halifax N.S.
- 4a. What is the relationship of your next-of-kin?..... Mother
- 5. What is the date of your birth?..... December 7th 1901.
- 6. What is your Trade or Calling?..... Plumber
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... No
- 9. Do you now belong to the Active Militia?..... Yes
- 10. Have you ever served in any ^{or Naval} Military Force?..... 63rd H.R. since Dec 14th 1915.
If so, state particulars of former service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... No
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 14. If so, what was the nature of the disability?..... --
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... No
- 16. If so, what was the reason?..... --

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I,..... do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Refuses to re-attest.(Signature of Recruit)

Date.....191(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

.....(Signature of Recruit)

Date.....191(Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at.....this.....day of.....191 .

.....(Signature of Justice)

Description of Clarence Davis. on Enlistment.

Apparent Age... 18 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 5 ins.

Tattoo-- Left forearm

Chest measurement { Girth when fully expanded..... 33 ins.
 Range of expansion..... 2 ins.

Woman, crossed hands.

Complexion Medium

Eyes Brown

Hair Dk. Brown

Religious denominations. { Church of England..... Yes
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
 (Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye ; his heart and lungs are healthy ; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him*.....for the Canadian Over-Seas Expeditionary Force.

Date.....191

Place..... Refuses to re-attest.

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Clarence DAVIE.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

.....(Signature of Officer)

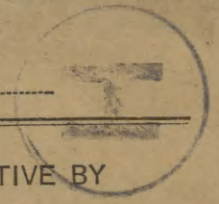
Major. For Lieut-Col.

Date.....March 21st.....1919..... Commanding 6th Det. C.G.R. C.E.F..

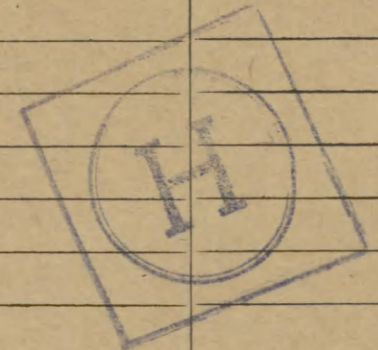
REGIMENTAL DOCUMENTS

Plu NAME *David Clarence*

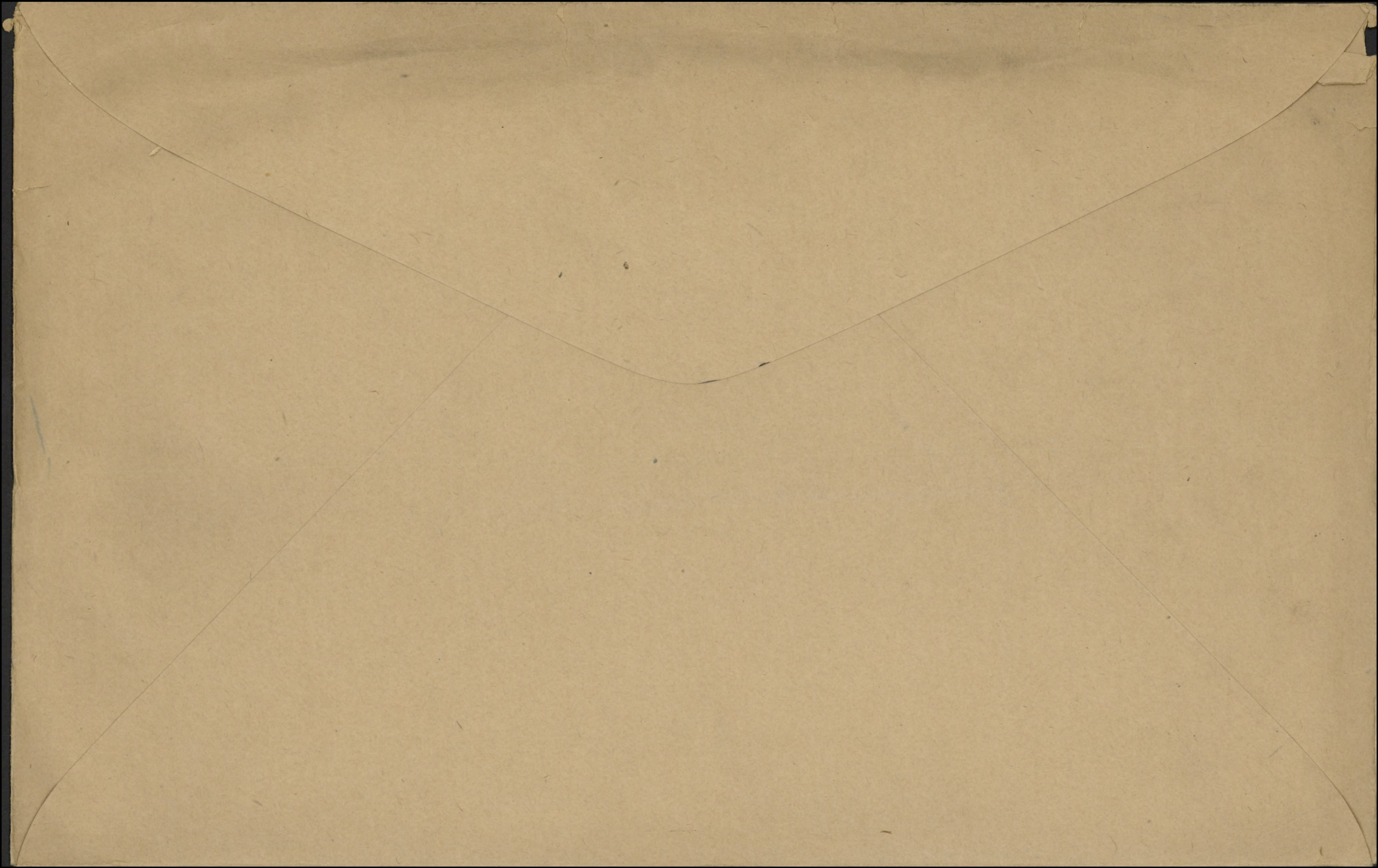
REGT. NO. *2700683* UNIT *63rd Reefs* H. Q. FILE NO. _____



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
1 TRAINING HISTORY SHEET (M.F.W. 113)					
3 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				04445	
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
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)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Misconduct</i>
1 MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 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)					



*4-10
19-10
29-10
1*



MEDICAL HISTORY SHEET.

Surname Davie Christian Name Blair

Examined { on 14 day of Dec 1915
 at McNabs
 Birthplace { City or Town Halifax N.S.
 County "

Approved by V. F. Connor
 Rank Capt M.O.

Apparent age 18
 Trade or occupation Plumber
 Height 5 Feet 5 Inches.
 Weight 118 Lbs.
 Chest measurement { Minimum 31 inches.
 Maximum expansion 2 inches.
 Physical development fair
 Small-Pox Marks _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
 Number _____

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

When Vaccinated last _____
 (a) Marks indicating congenital peculiarities or previous disease _____

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection _____

Enlisted on 14 day of Dec 1915 at McNabs

	CORPS	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>63 RHA</u>	<u>5367</u> <u>2700685</u>		
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Halifax</u>	<u>30.10.18</u>		<u>AA Ex. wash</u> <u>Ex. wash</u>
<u>Halifax</u>	<u>17/12/19</u>		<u>Category A</u> <u>W.M. Zindman</u> <u>Ex. wash</u>

N. B.—This sheet 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.



DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

DEPARTMENT OF
VETERANS' AFFAIRS

OCT 12 1956

WAR SERVICE RECORDS
OTTAWA - CANADATHIS REPORT
IS NOT VALID
WITHOUT THE
IMPRINT OF
THE OFFICIAL
STAMP OF THE
DEPARTMENTService Rank and/or Number 2700685 Name Clarence DAVIE

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE
2. Date and Place of Birth: 7th December, 1901. Halifax, N.S.
3. Date and Place of Appointment, Enlistment or Enrolment: 14th December, 1915. Halifax, N.S.
4. Unit on Appointment, Enlistment, or Enrolment: 63rd Regiment (Halifax Rifles)
5. Theatres of Service: CANADA
6. Date and Place of Retirement or Discharge: 18th December, 1919. Halifax, N.S.
7. Reason for Retirement or Discharge: "Misconduct"
8. Rank on Retirement or Discharge: Private
9. Medals and Decorations: Nil
10. Remarks: Nil

*25 Almon Street,
Halifax, N.S.*

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Height: 5 Feet 5 Inches.
 Eyes: Brown Hair: Dark-Brown Complexion: Medium
 Marks or Scars: Tattoo left forearm.

Ottawa, Ont., Canada

October 12th, 19 56.

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DESCRIPTION OF TIME OF REFERENCE OF DISCHARGE

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CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2700685 (Rank) Pte

Name (in full) David Clarence enlisted in
the 63rd Regt.

CANADIAN EXPEDITIONARY FORCE at Halifax NS on the fourteenth
day of December 19 15

HE served in Canada

and is now discharged from the service by reason of

MISCONDUCT

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

Age 18 years

Height 5 feet 5 inches

Complexion medium

Eyes Brown

Hair Dark Brown

David
Signature of Soldier

Marks or Scars

Scars on left forearm

G. J. Shaw
Issuing Officer

Captain
Rank

Date of Discharge December 18 1919

Signed at Halifax NS this 17th day of December 19 19

in Military District No. Six

File Reference No. _____

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

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. 2712685 Rank PTE Surname DAVIE
(Give name in full)
CLARENCE
 Unit or Corps 6th Div' Dept Birthplace Halifax N.S.

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

1. GENERAL DESCRIPTION:

Physique good Weight 140 lbs. Height 5 ft. 7 in. Colour of Eyes brown
 Nutrition good
 Pulse 104
 Condition of arteries normal
 Vision Rt. 20/20 Left 20/20
 Hearing (conversational voice) Rt. 25 Ft. Left 25 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Female figure and
clipped back hair
on left arm

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 Yes
 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.

Myocardial Ischemia noted probably
due to excessive smoking. No signs
of organic cardiac disease, and no
enlargement of heart.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at...*Halifax, 28*.....(Canada)

Date*Dec 17/19*..... Signed *[Signature]*.....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 *[Signature]*.....

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

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

[OVER]

No. 5367

RANK

Pvt.

NAME

David B

T. O. S. 14-12-15

UNIT

63rd Regiment Halifax Rifles.

(D.O. 351 of 17-12-75)

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 14 1916	1915 Dec 31 1916	✓		
Jan		✓	abs 28-12-15 to 1-1-16	D.O. 4 of 4-1-16
Feb		✓		
Mar		✓	abs 27-2-16 to 4-3-16	D.O. 66 of Mar payroll
Apr		✓	" 12-13-2-16	D.O. 75 of Mar payroll
May		✓	ab 9-20-4-16	115
June		✓		
July		✓		
Aug		✓	ab 17-8-16	D.O. 238
Sept		✓	ab 10-11-9-16	D.O. 256
Oct		✓	ab 17-30-8-16. 48 hrs detn from 31-8-16	D.O. 245 - 1-9-16
Nov		✓	ab. 2-13-11-16	D.O. 319
Dec 1917.		✓		
Jan.		✓	120 hrs detn from 8-1-17	D.O. 13-13-1-17
Feb		✓		
Mar		✓		

1917.	1917.		L. David C.
Apr.	✓	Abs. 16.-25. 10 Days, Detn. 28-3-17.	DO. 92.
		Abs. 21-25.	DO. 116.
May.	✓	Ab. 11-12.	DO. 134.
June.	✓		
July.	✓		
Aug.	✓	Ab. 10-12.	DO. 225.
Sept.	✓	Ab. 23. 9. 17.	DO. 268.
Oct.	✓	Ab. 18-19.	DO. 295.
Nov.	✓		
Dec.	✓		
1918.	✓		
1918.	✓		
Jan.	✓	Absentee 15. 2. 18.	DO. 510 of 20. 2. 18.
Feb.	✓		
Mar.	✓		
Apr.	✓	10 days detention from 13-4-18	D.O. 102 of 13-4-18
May.	n.	Transfd. to 6 th Bn. C. S. R. 23-5-18	D.O. 127.

No. 5367 RANK

Pvt.

NAME

Davie, G.

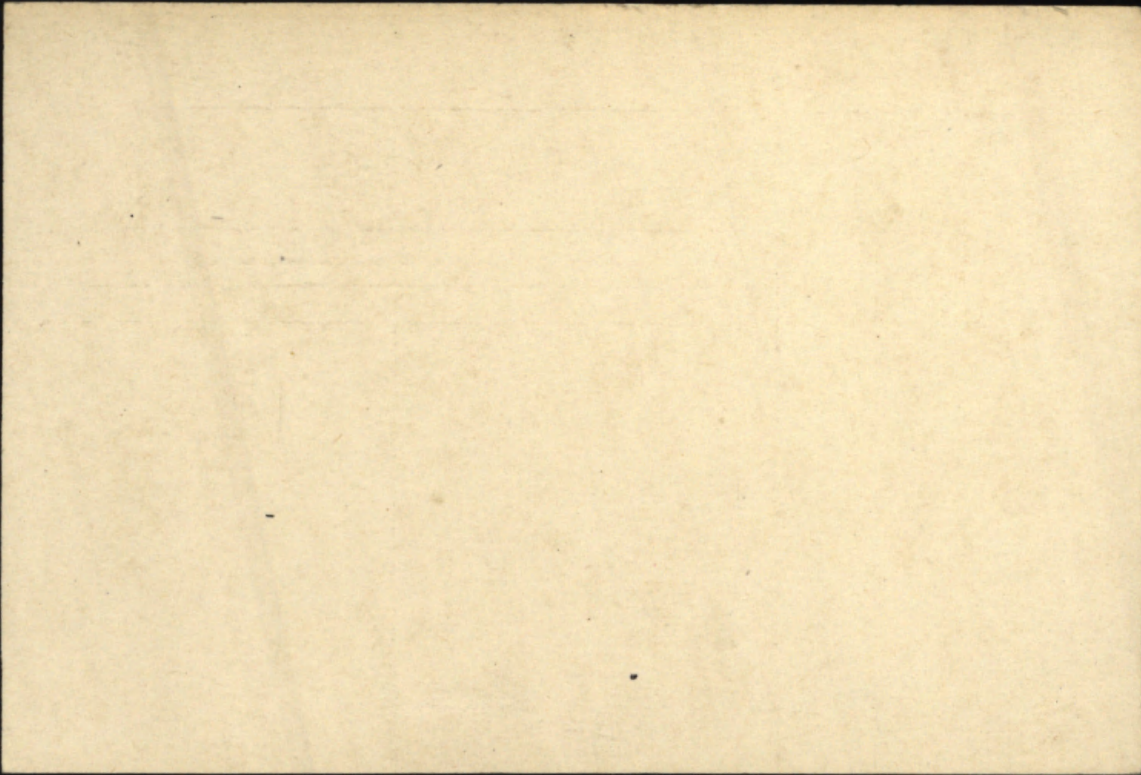
T. O. S.

UNIT

6th Bn. G. I. R.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 April 1	1918 April 30	n	63rd Regt.	
May		n		
June		n		



REMARKS:

Dos Misc 18-12-19
20351 of 17-12-19 1100

H Q

M. D. No.

Surname

Davis

T. O. S.

19

Christian names

L. Clarence

D. O. Pt. II

of

Regtl. No.

2700685 Rank Pte

S. C. S.

July 7th 1919

Unit

Can. Gas. Regt.

Reason

Deserter

Released from clou custody
auth letter filed d/16-12-19

A. h.

A.O. 192 of 11-7-19 to Det. C.G.R.

N^o of Kin

L. Davis Mrs. Annie

Relations ip

Mother

Address

15 North St.
Halifax, N.S.

Also notif

20351 of 17-12-19 misc
600

Refuses to re-attest

BORN-Place

Canada, Halifax, N.S. Date Dec 7th 1901

ATTESTED-Place

Refuses to Re-attest

Date

O/S

R/C

Complexion Medium Eyes Brown Hair DK Brown

NAME

M^c Donald, John J.

φ

RANK & NO.

Saddler.

41842.

CORPS

2nd Bfde

C. F. A.

ENLISTMENT, PLACE

Quebec

DATE

26th Sep 1914 S

FORMER CORPS

Nil

COUNTRY OF BIRTH

Canada East Bay. C. B.

NEXT OF KIN

M^c Donald M^r M. J.

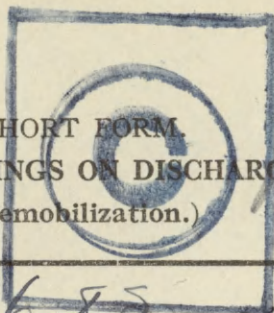
ADDRESS OF NEXT OF KIN

East Bay. C. B. Canada

DISCHARGE, PLACE

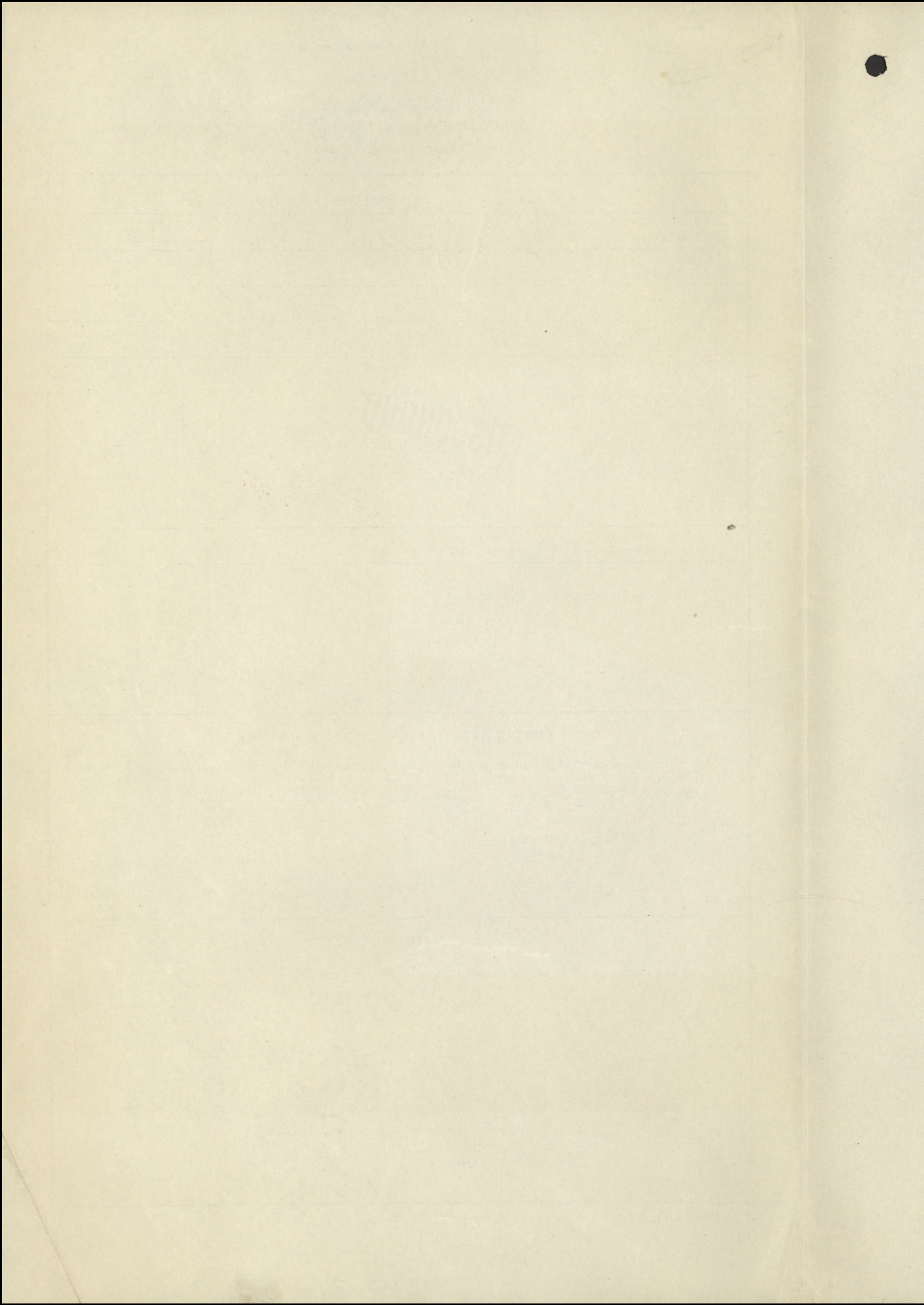
DATE

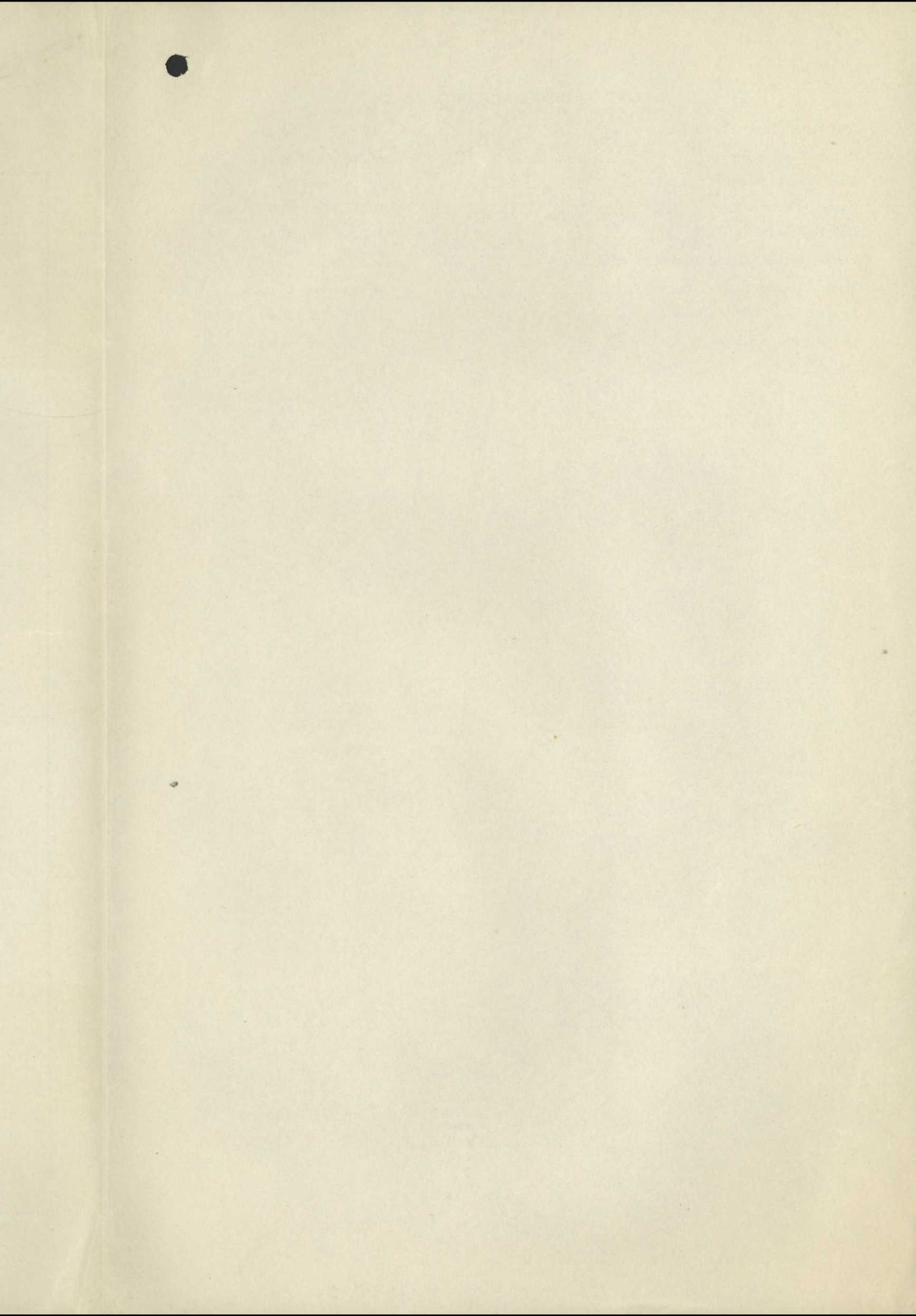
SHORT FORM
PROCEEDINGS ON DISCHARGE.
(Demobilization.)



Go 136/21 10-6.

1. No.	2700685	
2. Rank	PTE	
3. Name	David Clarence	
4. Unit	63 Regt.	
5. Date of Discharge	18.12.19	Place Halifax N.S.
6. Reason for Discharge	H MISCONDUCT Not submitted to H.S. Canada only.	
7. Authority	R.O. 1420	
8. Proposed Residence after Discharge	15 North St. Halifax N.S.	
9. CERTIFICATE TO BE SIGNED BY SOLDIER.	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? 39	
	Signature of Soldier: <i>David</i>	
10. CONFIRMATION.	The discharge of the above named man is hereby confirmed.	
Place	Halifax N.S.	
Date	December 18. 1919	
Signature	<i>G. I. Shawleaph</i> (O. C. Discharging Unit.)	





LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
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

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

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

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

2700685 Unit, Regiment or Corps *Company 1st Battalion 6th Bn C.G.R.*
 Regimental No. *5367* Rank *Squad* Name *Clayton Davis*
 Enlisted (a) *16-12-15* Terms of Service (a) *2 years* Service reckons from (a) *16-12-15*
 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)

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>Struck off strength of Comp Unit on transfer to 6th Bn C.G.R.</i>	<i>Halifax NS</i>	<i>9-11-18</i>	<i>RG 1439</i>
		<i>Taken on strength 6th. Batt. C.G.R., C.E.F.</i>	<i>HALIFAX, N. S.</i>	<i>10-11-18</i>	<i>W. T. Suckling, Lieut Officer i/c Records 6th Batt. C.G.R., C.E.F.</i>
		<i>Struck off strength 6th. Batt. C.G.R., C.E.F.</i>	<i>HALIFAX, N. S.</i>	<i>21-12-18</i>	<i>W. T. Suckling, Lieut Officer i/c Records 6th Batt. C.G.R., C.E.F.</i>
		<i>Declared Deserter</i>	<i>Cancelled</i>	<i>D.O.P.T. 57-6</i>	
		<i>S.O.S. as deserter 17-7-19.</i>	<i>Halifax NS</i>	<i>17-7-19</i>	
		<i>above entry of 11-7-19 is cancelled.</i>	<i>D.O. P.T. II</i>	<i>204-1 (26-7-19)</i>	
		<i>Struck off strength 6th. Batt. C.G.R., C.E.F.</i>	<i>Halifax NS</i>	<i>31-7-19</i>	<i>A. Mackay, CAPT. Adj't 6th Batt Canadian Grenadier Regt C. E. F.</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, Shoening Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

(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				
2-8-19	#689.R.	I.O.S. # 689 and posted to # [unclear] (Auth. O.G.F.O. 1594)		1-8-19	D.O. 214 G. J. Shaw CAPTAIN ADJUTANT NO. 6 DISTRICT DEPOT
17.12.19 6.8.19	I	Deserting His Majesty's Service D. Lacking by neglect his equipment, clothing & Regimental necessaries Is under suspension for six (6) months			D.O. 218 Shaw O. & CASUALTY COMPANY NO. 6 DISTRICT DEPOT
17.12.19	S.O.S.	an discharge as from		18.12.19	D.O. 351 Shaw CAPTAIN O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

