

No. 3

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

ORIGINAL

M. D. Depot Battalion

Regiment

3060082

Regtl. No.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname..... Douglas

2. Christian name..... Gilbert Llewellyn

3. Present address..... R. R. #3 Lakefield, Ont.

4. Military Service Act letter and number..... PC 922401

5. Date of birth..... Oct. 5, 1896

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

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

8. Religion..... Presbyterian

9. Trade or calling..... Farmer

10. Name of next-of-kin..... William Walter Douglas

11. Relationship of next-of-kin..... Father

12. Address of next-of-kin..... Lakefield, Ont.

13. Whether at present a member of the Active Militia..... No

14. Particulars of previous military or naval service, if any..... Nil

15. Medical Examination under Military Service Act:—
(a) Place Peterboro, Ont. (b) Date Nov. 16, 1917 (c) Category A.11

DECLARATION OF RECRUIT

I, Gilbert Llewellyn Douglas, do solemnly declare that the above particulars refer to me, and are true.

Gilbert L. Douglas (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... 21 yrs..... 7 mths.

Height..... 5 ft..... 5 3/4 ins.

Chest measurement } fully expanded..... 35 1/2 ins.
range of expansion..... 3 ins.

Complexion..... Dark

Eyes..... Brown

Hair..... lt. Brown

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

L. Green Lt. Col.
O. C. 1st Depot Bn., E.O. Regt., C.E.F.
O. C. Depot Btl.

Regt.

Place Barriefield, Ont. Date May 17, 1918

18-1-19am

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.....

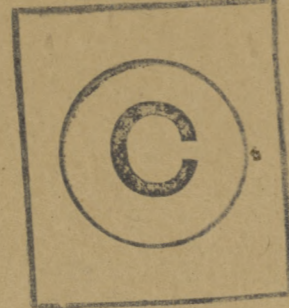
Last Pay Certificate.....

M.F.W. 71 /

129 /

Dental /

Q2B122 /



Name DOUGLAS GILBERT LLEWELLYN

Regt. No. 3060082 Rank Plt

Corps 1st Depot Bn. E. & R. C. E. F.

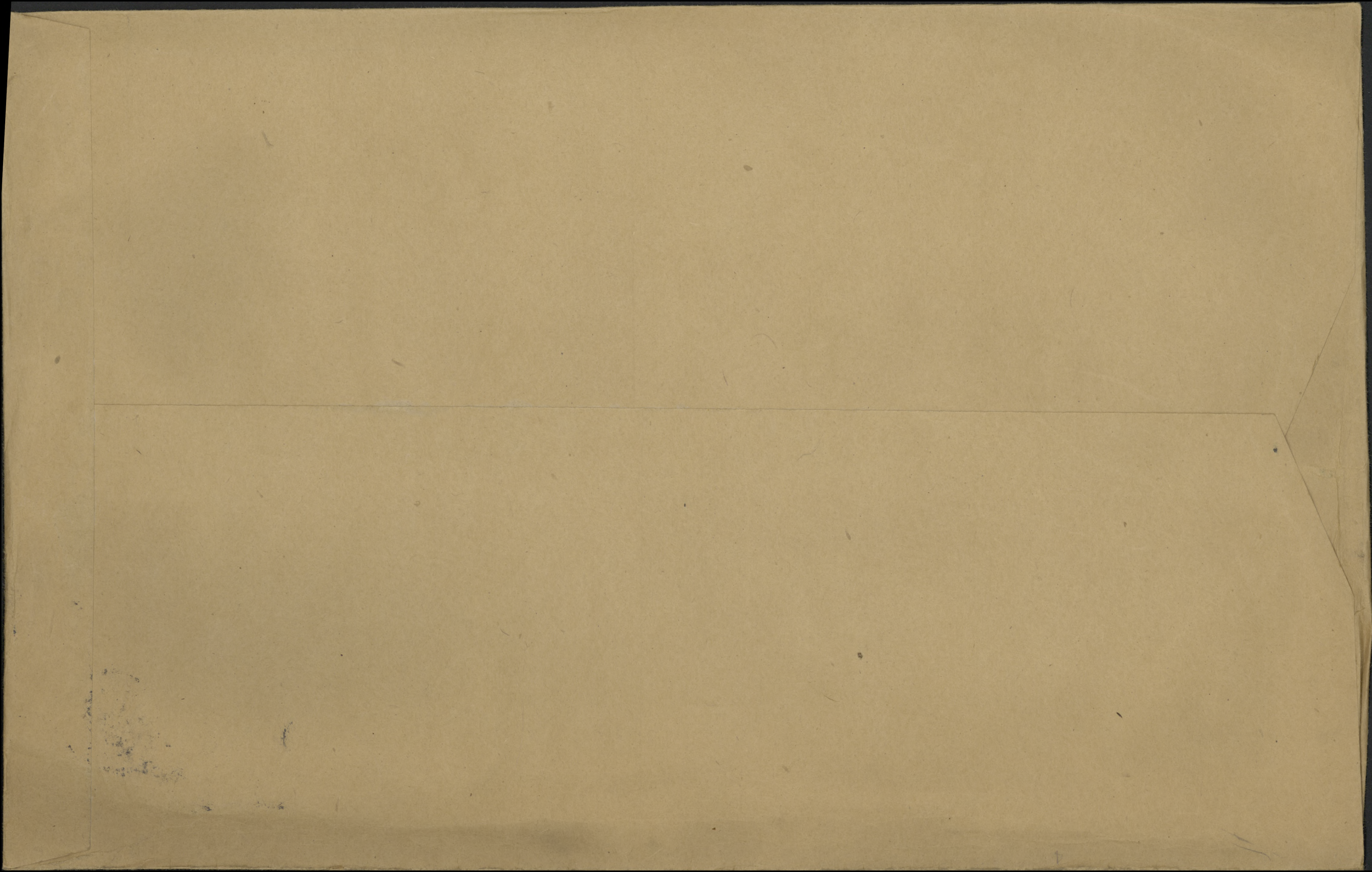
Demobilization

22630



Plt

1-5
25-5
33-5
2



CASE HISTORY SHEET.

Ongwanada Military Hospital Kingston Ont. Station
No. 3060082 Rank Pte. Name Douglas, Llewelin Age 21
Unit 1st. E.O.R. Completed years of service C. 1/12 ^{Where and how long}
Date of admission 25-6-18 Date of discharge 10-7-18
Diagnosis T.B. Suspect. Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE Patient had Measles, Mumps, And scarlet fever. Injuries in knee in 1914 following kick from a horse. Fracture of rib in Nov. 1915.

P.I. Slight night sweats when he gets a cold. Morning cough for two or three years. Some thick expectoration. No history of haemoptysis Rib fractured in Nov. 1915. SINCE THIS TIME HE HAS HAD PAIN in left chest. worse at intervals. most noticeable when he is tired, No history of dyspnea. At present six pounds under maximum weight.

P.E. Man is round shouldered flat chested with a somewhat protuberant abdomen, probably due to his mode of carriage. No palpable glands in neck. Some colaps of chest wall over 7.8.9. ribs below left nipple following an injury four years ago. Some diminution of breath sounds over this area., probably due to an old traumatic pleurisy, otherwise negative.

29-6-18. X-ray. Heart and Aorta Normal.
2. Bases of Lungs:- Irregular shadows due to peribronchia thickening.
3. Roots:- No marked change.
4. Apices and upper Lobes:- Clear

FAMILY HISTORY Father and Mother alive and well. One sister dead of Typhoid.
(Tuberculosis, mental or nervous diseases.) Two brothers alive and well

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE To unit Negative findings.

(and disposal made of case.)

Date 10-7-18

W. Smith
Medical Officer i/c case.

CASE HISTORY SHEET.

Ongwanada Military Hospital. Kingston Ont Station.

No. 3060082 Rank Pte Name Douglas Gilbert Age 21

Unit 1st. E.O.R. Completed years of service ^{Where and how long} C. 1/12

Date of admission 19-7-18 Date of discharge 5-8-18

Diagnosis Dyspepsia Place of origin.....

CONDITION ON ADMISSION AND PROGRESS OF CASE. P.H. Mumps, Measles.

P.I. Unwell three months ago. Acute reoccurrence three days ago.

Complains of unability to keep food down. Vomits it about one half hour after meals, aggravated by over ripe fruit etc. Gas on the stomach constantly. (Heartburn) Lost two or three Pounds in two weeks. No pain except that reclining below a previously fractured rib.

P.E. Man is well nourished. Lungs and Heart:- Negative.

Abdomen:- Negative findings. No tenderness over epigastric area

No history of appendicitis or gall bladder infections.

Genito Urinary:- Negative.

Gastric Analysis:- Total Acidity 32

Free H.C.L. 10

Lactic Acid 0

Blood 0

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE, To unit.

(and disposal made of case.)

Date 5-8-18

W. J. ...
Medical Officer i/c case.

6462

CASE HISTORY SHEET

308082 Pts Douglas Gilbert Kingston Ont
 1st. E.O.R. 19-7-18
 5-8-18 Dyspepsia

P.M. Man is well nourished. Lungs and Heart: Negative.
 Abdomen: Negative findings. No tenderness over epigastric area.
 No history of appendicitis or gall bladder infections.
 Genito Urinary: - Negative.

32	Total Acidity
10	Free H.G.I.
9	Lactic Acid
0	Blood

P.I. Unwell three months ago. Acute recurrence three days ago.
 Complaints of inability to keep food down. Vomits it about one half hour
 after meals, aggravated by over ripe fruit etc. Gas on the stomach comes
 faintly. (Heartburn) Last two or three hours in two weeks. No pain
 except that resulting below a previously fractured rib.

P.H. Meals, Measles.

To unit.

[Handwritten signature]

18-8-18

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3060082 (Rank) Private
Name (in full) Douglas, Gilbert Llewellyn enlisted in
the 1st Depot Battalion, C.O. Regt
CANADIAN EXPEDITIONARY FORCE at Barnesfield Ont on the Seventeenth
day of May 1918
HE served in Canada
and is now discharged from the service by reason of On Demobilization
Auth. R.O. 1328.

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

Age 22 yrs 2 months
Height 5' 5 3/4"
Complexion Dark
Eyes Brown
Hair Light Brown

Marks or Scars Nil

G. L. Douglas
Signature of Soldier

R. W. Smart Lt-Col
Issuing Officer
C.O. 1st Depot Bn., E. U. Regt., C. E. F.

Rank

Date of Discharge 31-12-1918

Signed at Belleville Ont this thirty first day of December 1918.

in Military District No. Three

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

On demobilization, particulars called for on back
of Discharge certificate will not be completed
H.Q. 16-I-240 of 18/11/18. 3.M.D. 66-I-501 of 21/11/18.

3060082

M.S.A.

MILITARY SERVICE ACT, 1917. MEDICAL HISTORY SHEET.

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

1. Surname Douglas Christian name Gilbert Howllyn
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 922401
3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
4. Address (including street and number, if any) R. R. No. 3, Inverfield, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 16 day of Nov. 1917, by the undersigned medical board sitting at Peterboro, Ont.

5. Age as stated 21 Years 1 Months. 6. Apparent age 21 Years _____ Months
7. Height 5 Feet 5 1/2 Inches. 8. Weight 115 Pounds.
9. Chest measurement { Minimum 32 1/2 Ins. 10. Complexion Dark { Eyes Brown
Maximum 35 1/2 Ins. Hair Dark Brown
11. Physical development Good { Good
Fair
Poor 12. Smallpox marks nil
13. Number of vaccination marks { Right arm 0
Left arm 1 14. When vaccinated last Infancy
15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

16. Slight defects but not sufficient to cause rejection small goitre, small Varicocoele
The man denies having had { Rheumatism We find no evidence of past { Rheumatism
Tuberculosis Syphilis 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 A.2 R. D. 30 L. D. 30
Hearing - normal.

Stewart Cameron President
H. Carlwood Major Member. T. ... Major Member.

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

Joined 17th day of May 1918 at Barriefield Camp

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>1st Depot Bn.</u>	<u>E. O. Regt.</u>	<u>C. E. F.</u>	
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Bellville</u>	<u>Dec 31/18</u>	<u>low 100% and pharynx under finger left hand. small goitre</u>	<u>Edinell</u>

EX. CERT
Ckd. by HL

Signature of Man G. L. Douglas

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

FEB 20 1919

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. 3060082 Rank Pte. Name Douglas Gilbert Kervellyn
C. E. F.

Enlisted (a) 17-5-18 Terms of Service (a) C.E.F. Service reckons from (a) 17-5-18

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) Farmer.

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				
		Discharged En.O. / ON DEMOBILIZATION.			L. Baker. Lieut. Capt & Adjt. 1st Depot Bn., E.O. Regt., C.E.F.

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

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 Pte. Name Douglas Surname Douglas L.
Unit of Corps 1st Depot Bn. I.O.R. (If a soldier) Regt. No. 1306082
Born at Wexham, Ox. on, (date) Oct. 5th 1896.
Signature (for identification) L. Douglas

The examination is to be made by one Medical Officer.

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

Weight

105 lb.

Colour of eyes

Brown

Height

5 ft. 7 in.

Identification Marks, Scars, etc.

6-D-275
loss 1+2 pharynx index finger left hand & small toe

2. NUTRITION AND DIATHESIS?

normal

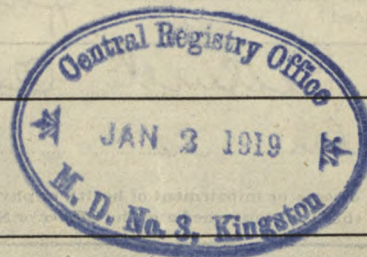
After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

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

normal

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

normal



5. HEART ?

Abnormal Sounds ?

none

Abnormal Size ?

no

Pulse Rate ?

80

Intermittence or Irregularity ?

none

Muscular Tone ?

good

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

none

(b) Blood Pressure

normal

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

normal.

8. GENITO-URINARY SYSTEM ?

Urinalysis—S.G. ?

1.020

Reaction ?

acid

Albumen ?

none

Sugar ?

none.

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

Vision :

Rt. Eye

20/30

L. Eye

20/30

Hearing :

Rt. Ear

normal

L. Ear

normal

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

small goitre

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

fit C I no 1008.

Examined at

Bellville Ont.

Signed

E. B. Bennett, Capt. D. M. S.
G. L. Douglas.

Date

Dec. 31/18

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 must be sent at once to the O. C. concerned and the Officer or Soldier brought before a Medical Board.

NAME

Douglas Gilbert Llewellyn

REGIMENTAL NO.

3060082

RANK

Pte.

ENLISTED AT

Barriefield Camp, Ont.

PROMOTIONS, &c.
AND DATE

DATE

May 17/18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN

William Walter Douglas,

RELATIONSHIP

Father

ADDRESS OF

Lakefield, Ont.

ASSIGNMENT OF PAY \$

C.

TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

No. 30 60082 RANK

Pvt

NAME

Douglas, G. L.

T. O. S. 17-5-18

UNIT

1st Depot. Co., E. O. Regt.

D.D. 136-16-5-18.

M. D.

3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 May 17 June	1918 May 17	n. u.	Leave fr 17/5/18 to 1/6/18	D.D. 138-18-5-18.



REG. NO. 3061082 NAME Douglas Hewellin (SURNAME FIRST)

46 B42745-6462

RANK Pte CORPS R.E.C.B.

AGE 21 SERVICE 6/12

NAME OF HOSPITAL Onkwana PLACE Kingston

DATE OF ADMISSION 25-6-18 19-7-18

DISEASE I.B. suspect (2) Dyspepsia

DISCHARGE 10-7-18 5-8-18

OPERATION

DISCHARGED TO DUTY yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

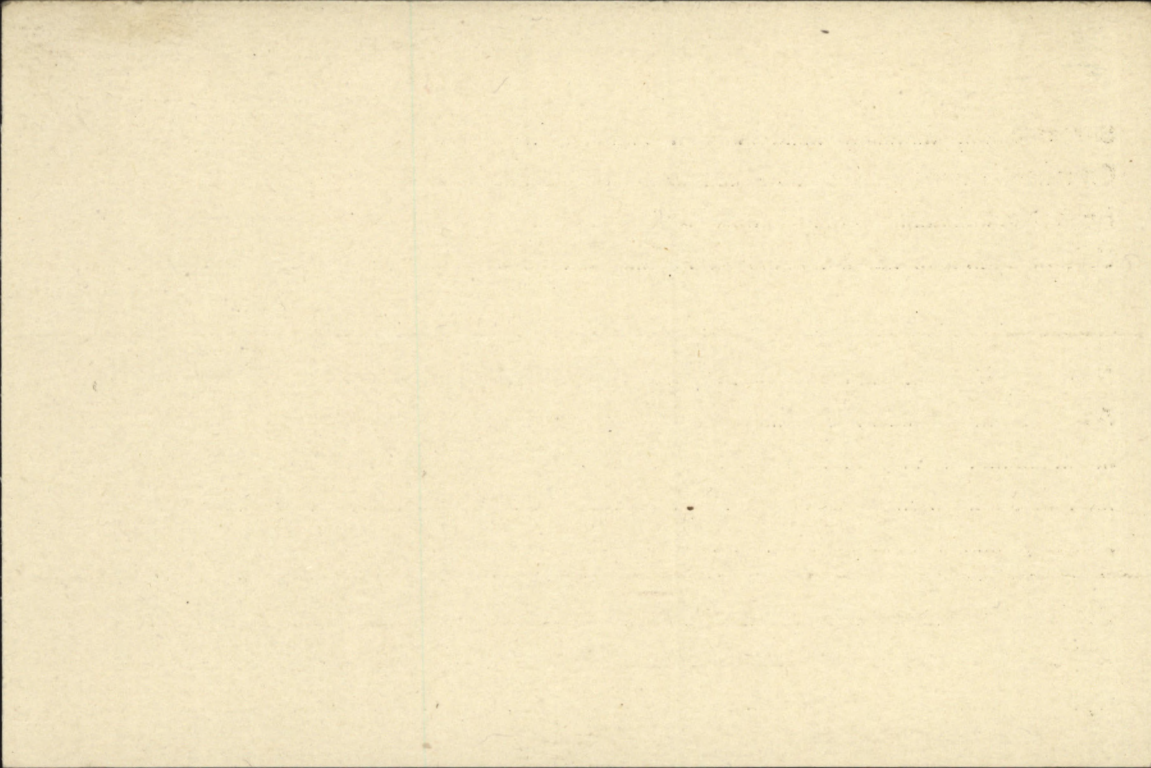
REMARKS

*

H. Q.
 M. D. No. 3.
 Surname *Douglas*
 Christian names *Gilbert Lewellyn*
 Regtl. No. *306 0082* Rank *Pte.*
 Unit *East Ont. Regt. 1st Depo. Bn.*
 T. O. S. *May 17th 1918*
with br. pt. 2 of 138. 18-5-18.
 D. O. Pt. II *106* of
 S. O. S. *31-12-1918* *3*
 Reason *Demol*
 Auth. *P.O. 191-1-191/80K*

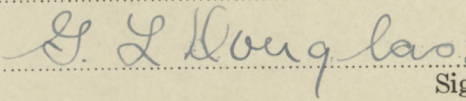
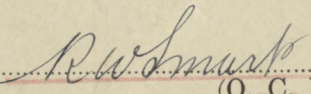
Next of kin *Douglas William Walter* Relationship *Father*
 Address *Lakefield, Ont.*
 Also notify:

BORN—Place *Canada Warsaw, Ont.* Date *Oct 5th 1896*
 ATTESTED—Place *Barrie, Ont.* Date *May 17th 1918*
 O/S R/C



SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

DEPT
 MILITIA & DEFENCE
 JAN 13 1919
 H. R. _____
 CANADA

1. No.	3060082.	
2. Rank.	Private.	
3. Name.	DOUGLAS, Gilbert Llewellyn	
4. Unit.	1st Depot Battalion, E.O.R., CEF.,	
5. Date of Discharge	31/12/18.	Place Belleville, Ont.,
6. Reason for Discharge	On Demobilization.	
7. Authority.	R.O. 1328.	
8. Proposed Residence after Discharge	Lakefield, Ont., R.R. #3,	
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.		
10.	CONFIRMATION.	
The discharge of the above named man is hereby confirmed.		
Place	Belleville, Ont.,	
Date	31/12/18.	
Signature  Lt-Col (O. C. Discharging Unit.) O. C. 1st Depot Bn., E. O. Regt., C. E. F.		

16/1/19

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

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 3060082 Rank Pta Name Douglas, G. L.
 Corps 1st Depot Bn., E. O. Regt., C.E.F. who was* discharged
 On Dec. 31st 1918 .., to
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Dec. 31st 1918 ..
 to Dec. 31st 1918 .., the inclusive date of transfer or discharge.

Dr.		\$	c.	Cr.		\$	c.
Bal. Dr. from prev. month				Balance Cr. from prev. month		14	30
Advances } No.				Reg'l. Pay ... <u>1</u> ... days at \$ <u>1.00</u>		1	00
by } No.				Field Allow. ... <u>1</u> ... days at \$... <u>10</u>			10
Assigned Pay and Sep'n Allee. No.				Separation Allowances* (Monthly)			
Other charges				Other Allowances* ... <u>Clothing</u>		35	00
Payment on transfer or discharge No. <u>6380</u>			<u>50.40</u>	Other Credits*			
Balance Cr. (to be paid by the new unit)				Bal. Dr. (to be deducted by new unit)			
Total			<u>50.40</u>	Total		<u>50</u>	<u>40</u>

*Give particulars.

A monthly stoppage of \$... nil (†) has (‡) been paid on account of Assigned
 { Pay for the month of 191... }
 { and Sep'n Allee. for month of 191... } (to) Assignee

(†) 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 17th, 1918 ..
 (2) if married and if a Separation Allowance Card has been submitted no ..
 (3) cause of discharge authority .. R. O. 1328 ..
 (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 .. Dec. 31st, 1918 ..

Place .. Belleville, Ont. ..

J. M. Thomson Capt.
 Paymaster.

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.

