

No. 3

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

DUPLICATE

M. D.

Depot Battalion

Regiment

Regtl. No. 3057060

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname **Farrington**
2. Christian name **Norman**
3. Present address **South Bay, Ont.**
4. Military Service Act letter and number **BC 840027**
5. Date of birth **July 28, 1893**
6. Place of birth **Point Traverse, Ont.**
(town, township or county and country)
7. Married, widower or single **Married**
8. Religion **Methodist**
9. Trade or calling **Farmer**
Bertha
10. Name of next-of-kin **Frank Farrington**
11. Relationship of next-of-kin **Father** *Wife*
12. Address of next-of-kin **South Bay, 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 **Kingston, Ont.** (b) Date **Mar. 11, 1918** (c) Category **C.1**

DECLARATION OF RECRUIT

I, **Norman Farrington**, do solemnly declare that the above particulars refer to me, and are true.

Norman Farrington

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age **24** yrs. **8** mths.

Height **5** ft. **11½** ins.

Chest measurement } fully expanded **38** ins.
range of expansion **2** ins.

Complexion **Dark**

Eyes **Brown**

Hair **Brown**

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

Slight Goitre.
Thachycardia pulse
standing 120.
lying 100.
Flat Feet

R. W. Smith Lt. Col.

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

Regt.

Place **Kingston, Ont.**Date **March 5, 1918**

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname	2. Christian name	3. Present address	4. Military Service Act number and number of the Act	5. Date of birth	6. Place of birth	7. Height in feet and inches	8. Weight in pounds	9. Trade or occupation	10. Name of next of kin	11. Relationship to next of kin	12. Address of next of kin	13. Number of previous military or naval service	14. Particulars of previous military or naval service	15. Medical examination under Military Service Act, 1917	16. Name of medical officer	17. Date of examination	18. Category	

DECLARATION OF RECRUIT

I, the undersigned, do hereby declare that the above particulars are true and correct to the best of my knowledge and belief.

Signature of Recruit

DESCRIPTION ON CALLING UP

1. Height	2. Weight	3. Chest	4. Forearm	5. Hand	6. Foot	7. Teeth	8. Eyes	9. Ears	10. Nose	11. Mouth	12. Throat	13. Lungs	14. Heart	15. Stomach	16. Intestines	17. Kidneys	18. Bladder	19. Prostate	20. Testes	21. Penis	22. Vagina	23. Uterus	24. Ovaries	25. Fallopian tubes	26. Cervix	27. Vaginal opening	28. Anus	29. Rectum	30. Sigmoid	31. Colon	32. Small intestine	33. Duodenum	34. Jejunum	35. Ileum	36. Cecum	37. Appendix	38. Gall bladder	39. Pancreas	40. Spleen	41. Liver	42. Gall stones	43. Kidney stones	44. Bladder stones	45. Prostate stones	46. Testis stones	47. Penis stones	48. Vagina stones	49. Uterus stones	50. Fallopian stones	51. Cervix stones	52. Vaginal stones	53. Anus stones	54. Rectum stones	55. Sigmoid stones	56. Colon stones	57. Small intestine stones	58. Duodenum stones	59. Jejunum stones	60. Ileum stones	61. Cecum stones	62. Appendix stones	63. Gall bladder stones	64. Pancreas stones	65. Spleen stones	66. Liver stones	67. Gall stones	68. Kidney stones	69. Bladder stones	70. Prostate stones	71. Testis stones	72. Penis stones	73. Vagina stones	74. Uterus stones	75. Fallopian stones	76. Cervix stones	77. Vaginal stones	78. Anus stones	79. Rectum stones	80. Sigmoid stones	81. Colon stones	82. Small intestine stones	83. Duodenum stones	84. Jejunum stones	85. Ileum stones	86. Cecum stones	87. Appendix stones	88. Gall bladder stones	89. Pancreas stones	90. Spleen stones	91. Liver stones	92. Gall stones	93. Kidney stones	94. Bladder stones	95. Prostate stones	96. Testis stones	97. Penis stones	98. Vagina stones	99. Uterus stones	100. Fallopian stones	101. Cervix stones	102. Vaginal stones	103. Anus stones	104. Rectum stones	105. Sigmoid stones	106. Colon stones	107. Small intestine stones	108. Duodenum stones	109. Jejunum stones	110. Ileum stones	111. Cecum stones	112. Appendix stones	113. Gall bladder stones	114. Pancreas stones	115. Spleen stones	116. Liver stones	117. Gall stones	118. Kidney stones	119. Bladder stones	120. Prostate stones	121. Testis stones	122. Penis stones	123. Vagina stones	124. Uterus stones	125. Fallopian stones	126. Cervix stones	127. Vaginal stones	128. Anus stones	129. Rectum stones	130. Sigmoid stones	131. Colon stones	132. Small intestine stones	133. Duodenum stones	134. Jejunum stones	135. Ileum stones	136. Cecum stones	137. Appendix stones	138. Gall bladder stones	139. Pancreas stones	140. Spleen stones	141. Liver stones	142. Gall stones	143. Kidney stones	144. Bladder stones	145. Prostate stones	146. Testis stones	147. Penis stones	148. Vagina stones	149. Uterus stones	150. Fallopian stones	151. Cervix stones	152. Vaginal stones	153. Anus stones	154. Rectum stones	155. Sigmoid stones	156. Colon stones	157. Small intestine stones	158. Duodenum stones	159. Jejunum stones	160. Ileum stones	161. Cecum stones	162. Appendix stones	163. Gall bladder stones	164. Pancreas stones	165. Spleen stones	166. Liver stones	167. Gall stones	168. Kidney stones	169. Bladder stones	170. Prostate stones	171. Testis stones	172. Penis stones	173. Vagina stones	174. Uterus stones	175. Fallopian stones	176. Cervix stones	177. Vaginal stones	178. Anus stones	179. Rectum stones	180. Sigmoid stones	181. Colon stones	182. Small intestine stones	183. Duodenum stones	184. Jejunum stones	185. Ileum stones	186. Cecum stones	187. Appendix stones	188. Gall bladder stones	189. Pancreas stones	190. Spleen stones	191. Liver stones	192. Gall stones	193. Kidney stones	194. Bladder stones	195. Prostate stones	196. Testis stones	197. Penis stones	198. Vagina stones	199. Uterus stones	200. Fallopian stones	201. Cervix stones	202. Vaginal stones	203. Anus stones	204. Rectum stones	205. Sigmoid stones	206. Colon stones	207. Small intestine stones	208. Duodenum stones	209. Jejunum stones	210. Ileum stones	211. Cecum stones	212. Appendix stones	213. Gall bladder stones	214. Pancreas stones	215. Spleen stones	216. Liver stones	217. Gall stones	218. Kidney stones	219. Bladder stones	220. Prostate stones	221. Testis stones	222. Penis stones	223. Vagina stones	224. Uterus stones	225. Fallopian stones	226. Cervix stones	227. Vaginal stones	228. Anus stones	229. Rectum stones	230. Sigmoid stones	231. Colon stones	232. Small intestine stones	233. Duodenum stones	234. Jejunum stones	235. Ileum stones	236. Cecum stones	237. Appendix stones	238. Gall bladder stones	239. Pancreas stones	240. Spleen stones	241. Liver stones	242. Gall stones	243. Kidney stones	244. Bladder stones	245. Prostate stones	246. Testis stones	247. Penis stones	248. Vagina stones	249. Uterus stones	250. Fallopian stones	251. Cervix stones	252. Vaginal stones	253. Anus stones	254. Rectum stones	255. Sigmoid stones	256. Colon stones	257. Small intestine stones	258. Duodenum stones	259. Jejunum stones	260. Ileum stones	261. Cecum stones	262. Appendix stones	263. Gall bladder stones	264. Pancreas stones	265. Spleen stones	266. Liver stones	267. Gall stones	268. Kidney stones	269. Bladder stones	270. Prostate stones	271. Testis stones	272. Penis stones	273. Vagina stones	274. Uterus stones	275. Fallopian stones	276. Cervix stones	277. Vaginal stones	278. Anus stones	279. Rectum stones	280. Sigmoid stones	281. Colon stones	282. Small intestine stones	283. Duodenum stones	284. Jejunum stones	285. Ileum stones	286. Cecum stones	287. Appendix stones	288. Gall bladder stones	289. Pancreas stones	290. Spleen stones	291. Liver stones	292. Gall stones	293. Kidney stones	294. Bladder stones	295. Prostate stones	296. Testis stones	297. Penis stones	298. Vagina stones	299. Uterus stones	300. Fallopian stones	301. Cervix stones	302. Vaginal stones	303. Anus stones	304. Rectum stones	305. Sigmoid stones	306. Colon stones	307. Small intestine stones	308. Duodenum stones	309. Jejunum stones	310. Ileum stones	311. Cecum stones	312. Appendix stones	313. Gall bladder stones	314. Pancreas stones	315. Spleen stones	316. Liver stones	317. Gall stones	318. Kidney stones	319. Bladder stones	320. Prostate stones	321. Testis stones	322. Penis stones	323. Vagina stones	324. Uterus stones	325. Fallopian stones	326. Cervix stones	327. Vaginal stones	328. Anus stones	329. Rectum stones	330. Sigmoid stones	331. Colon stones	332. Small intestine stones	333. Duodenum stones	334. Jejunum stones	335. Ileum stones	336. Cecum stones	337. Appendix stones	338. Gall bladder stones	339. Pancreas stones	340. Spleen stones	341. Liver stones	342. Gall stones	343. Kidney stones	344. Bladder stones	345. Prostate stones	346. Testis stones	347. Penis stones	348. Vagina stones	349. Uterus stones	350. Fallopian stones	351. Cervix stones	352. Vaginal stones	353. Anus stones	354. Rectum stones	355. Sigmoid stones	356. Colon stones	357. Small intestine stones	358. Duodenum stones	359. Jejunum stones	360. Ileum stones	361. Cecum stones	362. Appendix stones	363. Gall bladder stones	364. Pancreas stones	365. Spleen stones	366. Liver stones	367. Gall stones	368. Kidney stones	369. Bladder stones	370. Prostate stones	371. Testis stones	372. Penis stones	373. Vagina stones	374. Uterus stones	375. Fallopian stones	376. Cervix stones	377. Vaginal stones	378. Anus stones	379. Rectum stones	380. Sigmoid stones	381. Colon stones	382. Small intestine stones	383. Duodenum stones	384. Jejunum stones	385. Ileum stones	386. Cecum stones	387. Appendix stones	388. Gall bladder stones	389. Pancreas stones	390. Spleen stones	391. Liver stones	392. Gall stones	393. Kidney stones	394. Bladder stones	395. Prostate stones	396. Testis stones	397. Penis stones	398. Vagina stones	399. Uterus stones	400. Fallopian stones	401. Cervix stones	402. Vaginal stones	403. Anus stones	404. Rectum stones	405. Sigmoid stones	406. Colon stones	407. Small intestine stones	408. Duodenum stones	409. Jejunum stones	410. Ileum stones	411. Cecum stones	412. Appendix stones	413. Gall bladder stones	414. Pancreas stones	415. Spleen stones	416. Liver stones	417. Gall stones	418. Kidney stones	419. Bladder stones	420. Prostate stones	421. Testis stones	422. Penis stones	423. Vagina stones	424. Uterus stones	425. Fallopian stones	426. Cervix stones	427. Vaginal stones	428. Anus stones	429. Rectum stones	430. Sigmoid stones	431. Colon stones	432. Small intestine stones	433. Duodenum stones	434. Jejunum stones	435. Ileum stones	436. Cecum stones	437. Appendix stones	438. Gall bladder stones	439. Pancreas stones	440. Spleen stones	441. Liver stones	442. Gall stones	443. Kidney stones	444. Bladder stones	445. Prostate stones	446. Testis stones	447. Penis stones	448. Vagina stones	449. Uterus stones	450. Fallopian stones	451. Cervix stones	452. Vaginal stones	453. Anus stones	454. Rectum stones	455. Sigmoid stones	456. Colon stones	457. Small intestine stones	458. Duodenum stones	459. Jejunum stones	460. Ileum stones	461. Cecum stones	462. Appendix stones	463. Gall bladder stones	464. Pancreas stones	465. Spleen stones	466. Liver stones	467. Gall stones	468. Kidney stones	469. Bladder stones	470. Prostate stones	471. Testis stones	472. Penis stones	473. Vagina stones	474. Uterus stones	475. Fallopian stones	476. Cervix stones	477. Vaginal stones	478. Anus stones	479. Rectum stones	480. Sigmoid stones	481. Colon stones	482. Small intestine stones	483. Duodenum stones	484. Jejunum stones	485. Ileum stones	486. Cecum stones	487. Appendix stones	488. Gall bladder stones	489. Pancreas stones	490. Spleen stones	491. Liver stones	492. Gall stones	493. Kidney stones	494. Bladder stones	495. Prostate stones	496. Testis stones	497. Penis stones	498. Vagina stones	499. Uterus stones	500. Fallopian stones	501. Cervix stones	502. Vaginal stones	503. Anus stones	504. Rectum stones	505. Sigmoid stones	506. Colon stones	507. Small intestine stones	508. Duodenum stones	509. Jejunum stones	510. Ileum stones	511. Cecum stones	512. Appendix stones	513. Gall bladder stones	514. Pancreas stones	515. Spleen stones	516. Liver stones	517. Gall stones	518. Kidney stones	519. Bladder stones	520. Prostate stones	521. Testis stones	522. Penis stones	523. Vagina stones	524. Uterus stones	525. Fallopian stones	526. Cervix stones	527. Vaginal stones	528. Anus stones	529. Rectum stones	530. Sigmoid stones	531. Colon stones	532. Small intestine stones	533. Duodenum stones	534. Jejunum stones	535. Ileum stones	536. Cecum stones	537. Appendix stones	538. Gall bladder stones	539. Pancreas stones	540. Spleen stones	541. Liver stones	542. Gall stones	543. Kidney stones	544. Bladder stones	545. Prostate stones	546. Testis stones	547. Penis stones	548. Vagina stones	549. Uterus stones	550. Fallopian stones	551. Cervix stones	552. Vaginal stones	553. Anus stones	554. Rectum stones	555. Sigmoid stones	556. Colon stones	557. Small intestine stones	558. Duodenum stones	559. Jejunum stones	560. Ileum stones	561. Cecum stones	562. Appendix stones	563. Gall bladder stones	564. Pancreas stones	565. Spleen stones	566. Liver stones	567. Gall stones	568. Kidney stones	569. Bladder stones	570. Prostate stones	571. Testis stones	572. Penis stones	573. Vagina stones	574. Uterus stones	575. Fallopian stones	576. Cervix stones	577. Vaginal stones	578. Anus stones	579. Rectum stones
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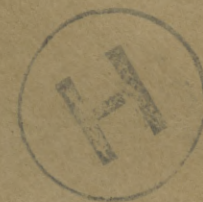
26/26/9.

REGIMENTAL DOCUMENTS

O. H. M. S.

NAME *FARRINGTON* *NORMAN* *He* *1013* *1919*

02153



NON-EFFECTIVE BY... *De mob* ... CATEGORY...

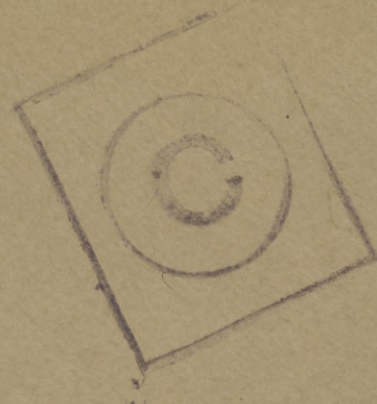


CONTENTS

- ATTESTATION PAPER (M. F. W. 23, 133 or 51) *2*
- CASUALTY FORM (M. F. W. 54 or A. F. B. 103) *1*
- TRAINING HISTORY SHEET (M. F. W. 113) *1*
- FIELD CONDUCT SHEET (M. F. W. 178 or A. F. B. 122) *1*
- REGT. CONDUCT SHEET (M. F. B. 263 or A. F. B. 121)
- COMPANY CONDUCT SHEET (M. F. B. 263 A or A. F. B. 121)
- MEDICAL HISTORY SHEET (M. F. B. 313 or A. F. B. 178) *1*
- DENTAL HISTORY SHEET (M. F. B. 465) *1*
- MEDICAL REPORT (M. F. B. 177 or A. F. B. 179)
- MEDICAL EXAMINATION (M. F. W. 129) *1*
- 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)
- DECLARATION, COURT OF INQUIRY (M. F. B. 259 or A. F. B. 115)
- LAST PAY CERTIFICATE (M. F. W. 44) *1*
- PROCEEDINGS ON DISCHARGE (M. F. W. 218 or A. F. B. 263) *1*
- PARTICULARS OF CHARACTER (A. F. W. 3226)
- COPY OF PARACHUTE DISCHARGE CERTIFICATE (M. F. W. 394) *1*
- DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 322)
- UNIT INDEX CARD (M. F. W. 71 or 192) *1*

ggl form 135 - 1

2 pay card



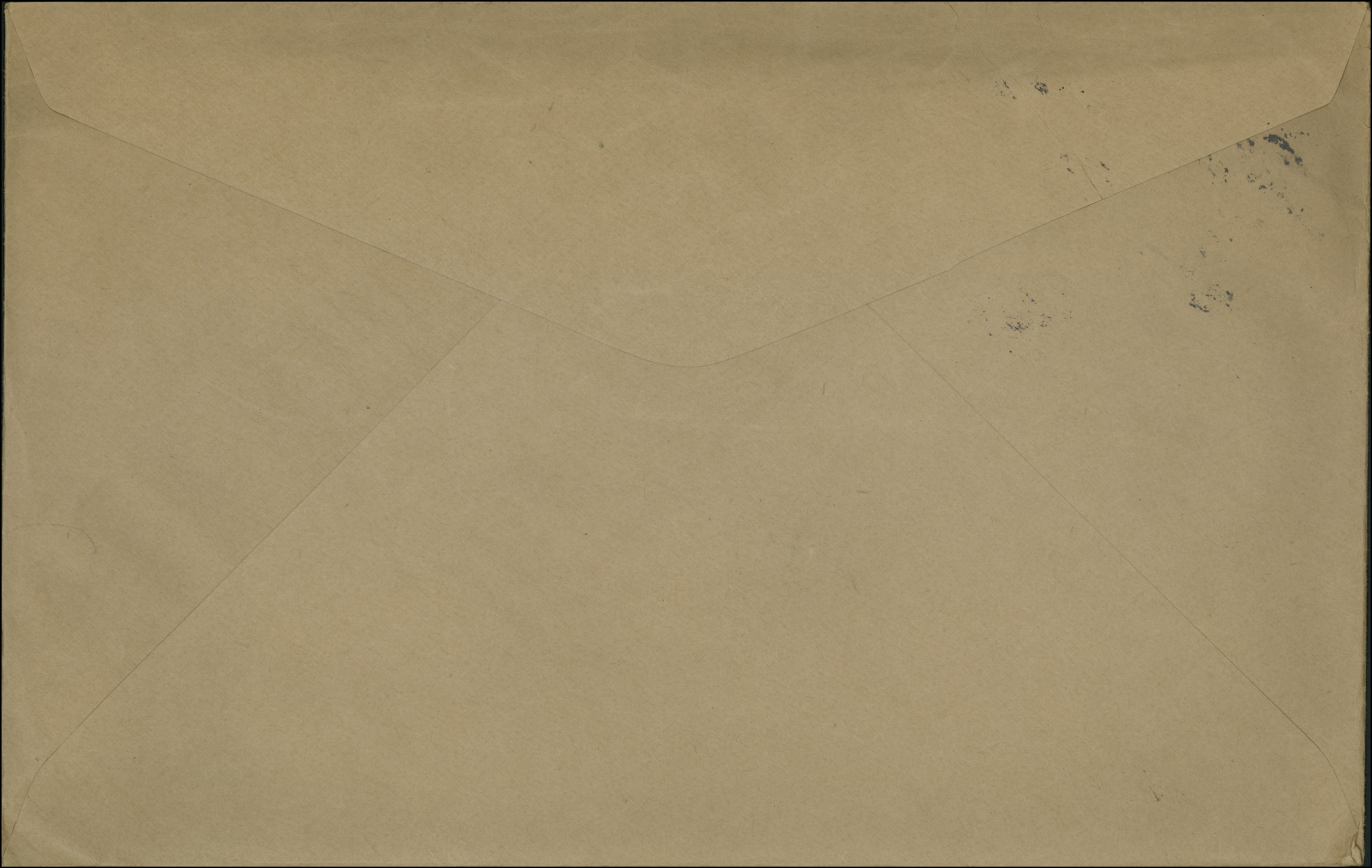
2

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4-9
5-9
2

M. F. B. 276.

FORM-5-18

H. Q. 1772-39-67



SURNAME.

Farrington.

CHRISTIAN NAMES

Norman.

REGL. No.

3054060

RANK

Pte.

UNIT

East. Ont. Regt. 1st Dps. In.

FORMER CORPS

Nil.

2
 2011-131 of 8-11-18 2nd
 24 R.
 19064: 5-3-1926.9.P.
 FOWL
 SOS Demob 6.3-192

T. O. S.

Mar. 4 1918

D.O. Part II No

63

NEXT OF KIN.

NAMES IN FULL

Farrington, Mrs Bertha

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

South Bay, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada

Point Traverse, Ont. DATE July 28th 1893

PLACE OF ATTESTATION

Kingston, Ont.

DATE

Mar. 5th 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

No.

57060 RANK

Pte

NAME

Fairington R.

T. O. S. J-3-18

UNIT

1st. Depot. Battalion E. Regt.

D. 063. Apr. pay list

M. D.

3

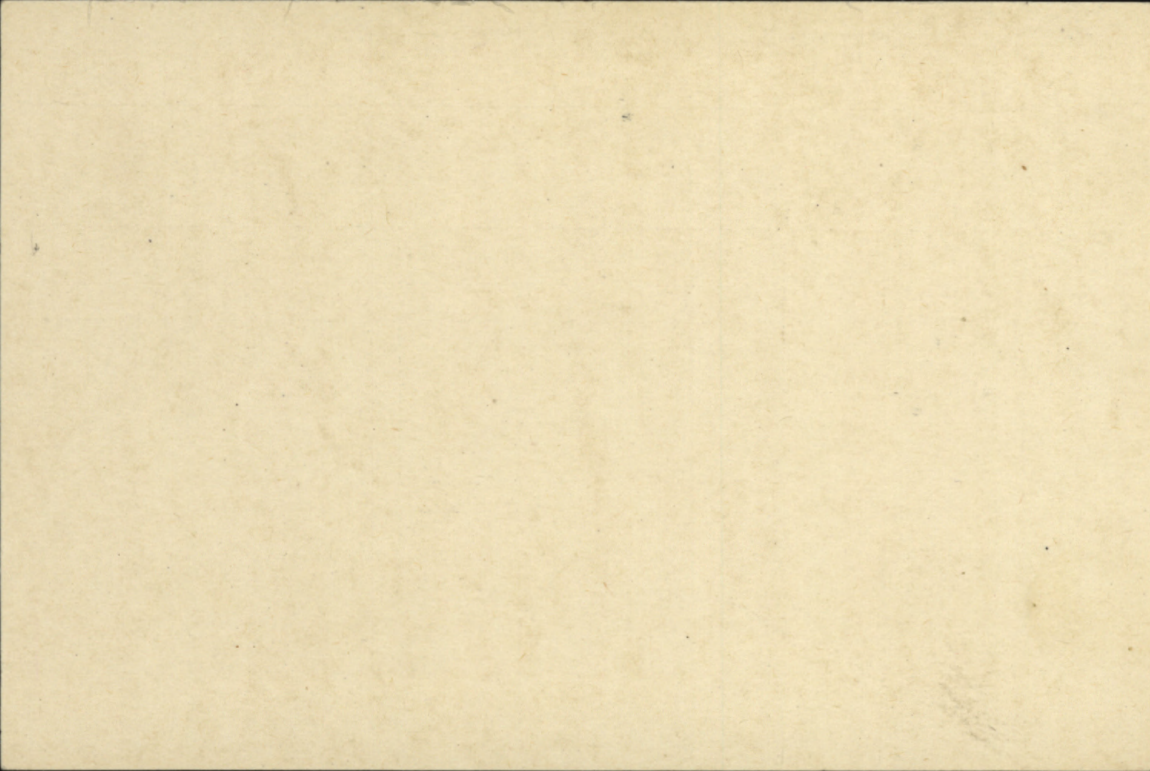
PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1918 Mar 5	1918 Apr 30	✓
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No. 3057060 RANK *Cte*NAME *Farrington N.*

T. O. S.

UNIT

*[1st. Depot. Bu Ed. Regt.*M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1918 May 1</i>	<i>1918 May 31</i>	<i>22'</i>		
<i>June</i>		<i>u</i>		



1274-265-
REG. No. 3057060 NAME Farrington
(SURNAME FIRST)
RANK Pte CORPS 1st Bn.
AGE 24 SERVICE 6.3/12 13/365
NAME OF HOSPITAL Elmhurst 1 PLACE Kingston
DATE OF ADMISSION 18-5-18
DISEASE Mumps. Pharyngitis & Enlarged Tonsils
DISCHARGE 18-6-18
OPERATION
DISCHARGED TO DUTY yes.
TRANSFERRED TO
DISCHARGED BY MEDICAL BOARD. Over

REMARKS

Admitted Military Wards. 19. 8-2-19.
(¹² Infl Pharynx) Enlarged Tonsils Duty 20.2.19.

NAME

Farrington No

REGIMENTAL NO. *3057060*

RANK

Pte

ENLISTED AT *Kingston Ont.*

PROMOTIONS, &c.
AND DATE

DATE *2/2/18*

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE *M.*

NEXT OF KIN *Mrs Bertha Farrington*

RELATIONSHIP

Wife.

ADDRESS OF *South Bay, Ont.*

ASSIGNMENT OF PAY \$ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

[illegible]

ORIGINAL

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

LAST PAY CERTIFICATE

No. 57

Regimental No. 2057060 Rank. Plt Name. Farrington N.
Unit #2 Det. CBR who was* Discharged
On 6/3/19 191, to 6/3/19 191
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/3/19 to 6/3/19 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		14.01
Regimental Pay 66 days at \$ 1 c.		6.60
Field Allowance 66 days at \$ 10 c.		2.10
Separation Allowance		2.50
Clothing Allowance		1.00
Post Discharge Pay (Final Payment)		
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No. 280064	51	
*Other Charges		
Balance on transfer or on discharge, cheque No. 280068	115.61	
Total	166.61	166.61

*Give particulars.

A monthly stoppage of \$ 20.00 (†) has not (‡) been paid on account of
Assigned Pay for the month of March 1919 }
and Separation Allowance for month of March 1919 } (to) Assignee Mrs M B Farrington
(Address) South Bay, Ont
(†) 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.

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

REMARKS:—

State (1) date of enlistment 2/2/18 married or single M
(2) Separation Allowance, entitled or not Yes (3) Reason for discharge Service
(4) Authority for discharge or transfer 2064

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 6/3/19

Place K Camp

Paymaster; 2nd Det. Canadian Garrison Regt. Captain Paymaster

- N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

[illegible]

CASE HISTORY SHEET.

ELMHURST ISOLATION HOSPITAL

KINGSTON, ONTARIO.

No. 3057060. Rank Pte Name Farrington N. Age 24.

Unit 1st Depot Completed years of service Where and how long } Canada 3 mos 13 days.

Date of admission 2 18. 5. 18. Date of discharge 18. 6. 18.

Diagnosis Mumps. Place of origin Dry Dock Bks, Kingston.

CONDITION ON ADMISSION AND PROGRESS OF CASE Normal case.

Right Parotid swollen, Temp. 100, pulse 95, resp. 20; rest in bed.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Usual routine Calomel and Saline, milk diet; no other medicine required; permitted up 7th day.

(Especially any specific or special form.)

CONDITION ON DISCHARGE Normal.

(and disposal made of case.)

Date June 18th 1918.

M. F. B. 313a.

50M.-11-17.

1772-39-439.

W. A. Coon Rebels Quao
Medical Officer i/c case.

A 10509

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 Farrington Christian name Norman.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
3. Consecutive number on schedule of men reporting for service (if he appears on it).....
4. Address (including street and number, if any)..... South Bay, Ontario.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11th day of March 1917, by the undersigned medical board sitting at Kingston, Ont.

5. Age as stated 24 Years 8 Months. 6. Apparent age 24 Years..... Months
7. Height 5 Feet 11 1/2 Inches. 8. Weight 175 Pounds.
9. Chest measurement { Minimum 36 Ins. 10. Complexion dark. { Eyes Brown.
Maximum 38 Ins. { Hair Brown.
11. Physical development. fair { Good Fair Poor 12. Smallpox marks Nil.
13. Number of vaccination marks { Right arm 0 14. When vaccinated last Never.
Left arm 0
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Slight goitre.
Tachycardia pulse standing 120, lying 100. Flat-feet.

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

Cl.

Vision R. 20/60.

L. 20/40.

Hearing.

R. S. G. G. G.

Capt. AMC. President.

A. J. G. G. G.

Capt. AMC. Member.

A. J. G. G. G.

Capt. AMC. Member.

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

Joined 5th day of March 1918 at Kingston.

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

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>W. Camp 3/3/18</u>	<u>3/3/18</u>	<u>Goitre & flat feet</u>	<u>Cl.</u>

Signature of Man Norman Farrington

Surname Farrington Christian Name Norman

Surname Farrington Christian Name Norman

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
M.L. Hards 7/6/91		8	7	1921	19	7	1921	Gonorrhea 2 months	15	Inoculation - throat treated. Drain for abscess.	A.H.W.

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. 3057060 Rank Pte. Surname Farvington
(Given name in full) Korman
Unit or Corps 2nd C.S.R. Birthplace South Bay Oad.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 170 lbs. Height 5 ft. 11 1/2 in. Colour of Eyes Brown
Nutrition Good
Pulse 120
Condition of arteries Good
Vision Rt. 260 Left 40
Hearing (conversational voice) Rt. 27 ft. Left 27 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).

nil

Opinion as to general health and physical condition 63

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 See below Genito Urinary Sytem No Cardio-Vascular System See below
Special Senses No Integumentary System No Respiratory System No
Disturbance of mentality No Muscular System No Digestive System No
Osseous and Joint System See below 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.

Goitre - fairly well marked - present in 1918
not due to or aggravated by service
Her Feet - moderate in amount - seen 1918
in type - not due to or aggravated by service
Cardia - apex beat in 5th space nipple line - venous
not diffuse - sounds normal - but rapid - 120
Standing 5' 10" after 10 min. rest to 10' 10" lines

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at *in camp* (Canada)

Date *3/3/19* Signed *W. J. Clarke* M.B.

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 *W. J. Farrington*

(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.)

Pressure 140 returning to normal in 2 minutes. R.P. Systolic 110 Diastolic 70. Not due to or aggravated by nervous system. Pupils - equal & reacting. Reach to light & accommodation - free reflexes - not exaggerated. No tremor - eyelids - upper - tense & closed. Eyelids - no rhinorrhea.

APPROVED

MAR 3 1919

R. J. Richardson CAPT.
FOR A. D. M. S. M. D. 2

2nd Detachment,

MAR 6 1919

2nd Det., C. G. R., C. E. F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

M.S.A.

This is to Certify that No. 3057060 (Rank) Private

Name (in full) FARRINGTON, Norman enlisted in

the 1st Depot Battalion Eastern Ontario Regiment

CANADIAN EXPEDITIONARY FORCE at Kingston, Ont. on the 5th

day of March 19 18

HE served in CANADA

and is now discharged from the service by reason of

"DEMOBILIZATION"

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

Age 25 years 8 months

Height 5 feet 11½ inches

Complexion Dark

Eyes Brown

Hair Brown

Norman Farrington
Signature of Soldier

Marks or Scars

Nil.

R. Blackley
Issuing Officer

for O. C. 2nd Det., Can. Garr. Regt., C. E. F.

Rank

Date of Discharge March 6th, 1919

Appointment

Signed at TORONTO this 6th day of March 19 19

in Military District No. -2-

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.

M. F. W. 39a.

250m.—6-18.

H. Q. 1772-39-882.

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 the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

DAILY RATE OF PAY AND ALLOWANCES

PAYMASTER

M. OR S.

REGT. NO. 5057060

RANK Pte.

NAME (IN FULL) Farrington N.

ACCOUNT CLOSED. NOT SIGNED.
RESPONSIBLE OFFICER S.O.S. PRIOR ^{copy}
H. Q. CIRCULAR No. 102 (LOCAL 120).

ASST. DIRECTOR PAY SERVICES, M.D. No. 2.

Proceedings on Discharge.



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

No. 3057060

Rank Private

Surname FARRINGTON.

Christian name Norman

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 2nd Det., C. G. R., C. E. F.

Date of discharge March 6th, 1919

Place of discharge TORONTO

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 25 years 8 months.

Height 5 feet 11½ inches.

Complexion Dark

Eyes Brown

Hair Brown

Trade Farmer

Intended place of residence South Bay Ont.
(To be given as fully as practicable.)

Descriptive marks

Nil.

2. The above-named man is discharged in consequence of

"DEMOBILIZATION"

Authority for discharge ROUTINE ORDER #1328"

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.

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.)

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

28-10-52
AS
9-10-52

M. F. B. 218.

200M.—5-18.

H. Q. 1772-39-113.

4-3

(OVER)

E. R. J.

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.)

None

Norman Harrington

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet, “ B. 263a	or Particulars of Recruit	“ W. 133
or Field Conduct Sheet	“ W. 178	Proceedings on Discharge	“ B. 218
Copies of Convictions, by C. P.		in MS.	
Med. Hist. Sheet,	Militia form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge (b) Attestation. (c) Medical History Sheet.	
Casualty Form	“ W. 54		
Medical Report for Invalid§	“ B. 227		
Dental History Sheet	“ B. 465		
Last Pay Certificate	“ W. 44		
Duplicate Discharge Certificate	“ W. 39A		
‡Form of Will	“ W. 82		
§Only if discharged “Medically unfit.”			
‡Only if man has not been overseas.			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

5. He is in possession of the following number of G. C. Badges:

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

6. Medals and Decorations.....

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).....

(Date).....

Commanding.....

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, and that I have received my permanent discharge certificate.

(Place) TORONTO H. Farrington (Signature of Soldier.)

(Date) March 6th. 1919 A. P. Shockey (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.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) TORONTO.....

(Signature).....

(Date) March 6th. 1919.....

for G. C. 2nd Det., Can. Garr. Regt., C. E. F.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *3*

NAME OF SOLDIER *Harrington M.*

REGIMENT *C.G.R.*

RANK *Pte*

No. *3057060*



Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyorrhea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
												U	L	P			Gold	Porcelain				
<i>Sept 27th</i>	<i>1918</i>		<i>1/30</i>																<i>J.V. Saunders</i>	<i>3</i>	<i>Can't # 18, 19. Incomplete.</i>	
<i>Discharge Exam. At Exhibition Camp</i> <i>Date. MAR - 1 1919</i> <i>Certificate issued for DENTALLY FIT</i>																						
<i>Wearring Capt.</i>																						

INSTRUCTIONS

1. On examination the condition of patient's mouth 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.

On examination, the condition of the teeth should be noted on

the following points:

On first use of report form of dental work made, the

Only such records to be made on this sheet as will show

1. Condition of examination, etc.

2. Condition of teeth, etc.

3. Condition of tissues

REMARKS

DATE

NAME

AGE

SEX

TOOTH

NO.

CRANIAL YARD DENTAL CO. 1914

DENTAL HISTORY SHEET

MAR 1 1914

Military Wards
Toronto General Hospital

BASE HOSPITAL, TORONTO
Department of Ear, Nose and Throat

Date January 9-1919

Name Fanning W. H. No. 3057060 Unit 2 C. 9 R.

Age 25 Enlisted In Out Patient for

Diagnosis Enlarged Tonsils

History: Has had chronic sore throat - for months -
acute attack two weeks ago

R.

L.

Ext. Facies	Scars on right side of face - facial nerve
Nasal Septum	to right
Inf. Turbs.	+
Mid. Turbs.	
Nas. Pharynx	Clear
Pharynx	dry -
Tonsils	Enlarged - cryptic
Teeth	
Accessory Sinuses	
Larynx	
Ext. Aud. Canal	
Memb. Tym.	
Mastoid	
X Ray	

R.

Hearing H. V. v. C 256 Air Bone C 512 Weber

L.

Treatment and Progress recommend removal of Tonsils

Feb 11-19. Tonsillectomy - general anaesthetic -
large cryptic tonsils

18-19 Throat healed - went to 2 C. 9 R.
Lucas

copy

A29320

W. E. HOSPITAL TORONTO

the Out Patient for

Needle Spectrum

the Tube

M.L. Tube

the Pharynx

the

the

the

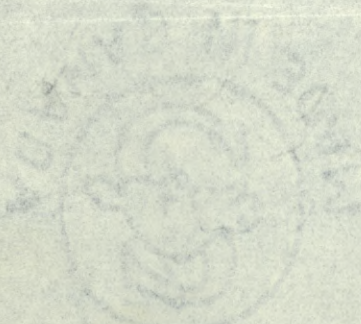
the

the

the

the

C 512 Air Bone C 516



the

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

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

500M.—9-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1st Depot Bn., E. O. Regt., C. E. F.

Regimental No. 3057060 Rank Pte. Name Farrington Norman
C. E. F.

Enlisted (a) 5/3/18 Terms of Service (a) During War & 6 months Service reckons from (a) 5/3/18

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				
		<i>Transferred to 3 Bn. 1st Regt 23/9/18</i>			<i>J. A. M. [Signature] Capt. & Adj. 1st Depot Bn., E. O. Regt., C. E. F.</i>
<i>30/9/18.</i>		<i>Transferred to M. D. No 2 and struck off strength. D.O. #168 29/9/18</i>			<i>[Signature] Capt. & Adj. No. 3 Bn., Canadian Garrison Regt., C. E. F.</i>
5-3-19	2nd Det. C.G.R.	S.O.S. on Disch. OMed. Unfit. C.R.O. #1328	Toronto	6-3-19	<i>Part 2 D.O. #64 [Signature] Lieut. O. I. C. Records, 2nd Det., Can. Garr. 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, Shoeing 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				

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *Korman*..... 2. Surname *Farrington*.....
3. Rank *Otc*..... 4. Original Unit *1st C.O.R.*..... 5. Reg. No. *3057060*.....
6. Address, in full, to which future payments of gratuity are to be forwarded
South Bay Ont.....
7. Date of enlistment in the C.E.F. *March 5 1918*.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs Bertha Farrington*.....
9. Relationship of such dependent *Wife*.....
10. Address, in full, of such dependent *South Bay Ont*.....
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*.....
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
No.....
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*.....
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service. *1st C.O.R. March 5/18 to Sept 23/18. 3rd C.G.R. Sept 23/18 to Sept 29/18. 2nd C.G.R. Sept 29/18 to March 6/19*.....
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *1st C.O.R. March 5/18 to Sept 23/18. 3rd C.G.R. Sept 23/18 to Sept 29/18. 2nd C.G.R. Sept 29/18 to March 6/19*.....
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*.....
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*.....

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.....

No

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid

No

20. Have you been issued with a War Service Badge? If so, what class?

No

21. Have you, during the present war, served in the Imperial Forces?

No

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled

No

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

No

(b) If so, was such reversion in consequence of misconduct or inefficiency?

No

24. Are you now serving in the C.E.F. If not, give:—(a) Date of discharge

March 6/19

(b) Reason for discharge *Demobilization*

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.....

No

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit.....

No

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

No

(b) If so, are you in receipt of full pay and allowances from that Department?

No

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant:

Norman Harrington

Place of Residence:

South Bay, Ont.

Declared before me at:

Toronto, Ont.

This

6

day of

March

19*18*.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

P. Blackley
attorney

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>5/3/19</i>	<i>70</i>	<i>20</i>		

Certified Correct.

[Signature]
District Paymaster.