

ATTESTATION PAPER.

No. 41781

261

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

41781

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Henry Scott Forest*
2. In what Town, Township or Parish, and in what Country were you born? *Leoticook, Que. Can.*
3. What is the name of your next-of-kin? *Mrs Mary Forest*
4. What is the address of your next-of-kin? *Leoticook, Que. Can.*
5. What is the date of your birth? *Oct 8. 1896*
6. What is your Trade or Calling? *Farmer*
7. Are you married? *No*
8. Are you willing to be vaccinated or re-vaccinated? *yes*
9. Do you now belong to the Active Militia? *yes*
10. Have you ever served in any Military Force? *No*
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? *yes*

H. Forest (Signature of Man).

R. S. Spence (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *H. S. Forest*, do solemnly declare that the above answers made by me to the above questions 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.

Date *8.1.15* 1914. *H. Forest* (Signature of Recruit)

R. S. Spence (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *H. S. Forest*, 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.

Date *8.1.15* 1914. *H. Forest* (Signature of Recruit)

R. S. Spence (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 *Wichford* this *8th* day of *Jan* 1914.

H. H. H. H. (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

H. H. H. H. (Approving Officer)

Description of H. S. Forest on Enlistment.

Apparent Age 19 years 2 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. 7 ins.

Chest measurement { Girth when fully expanded 34 1/2 ins.
Range of expansion 2 1/2 ins.

Complexion Fair

Eyes Blue

Hair Brown

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

*Triangular scar below
buttock on left thigh
"3 freckles"*

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 7. 1. 15 1914.

Place Elrington

W. H. Burnham M.D.
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.

H. S. Forest.....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.

H. H. Burnham.....(Signature of Officer)

Date 7. 1. 15 1914.

20-7-18 SW

- 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.....1
- 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.....3
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

Name *FOREST... H. ENRY. SCOTT.*
Regt. No *41781*... Rank *2nd Lt.*
Corps *6th Bty. 2nd Art. Bde*

M 13145

20-4-15
Med 419
21

Killed in Action

Index Card.....
Casualty Card.....
Non-Effective Card.....
Part II Order Card.....
Change of Address Card.....
Honour & Award Card.....

H

2
4-6
4-6
12-6

20-13-15-1
20-13-15-1
misc
Pay 1

1-10-20
8th S.

MEDICAL HISTORY SHEET.

41781

Surname Forest Christian Name Henry Kett

Examined { on 17 day of Nov. 1914
at Salisbury

Approved by

W. H. Burroughs

Birthplace { City or Town Stanton Coaticook
County Stonewall

Rank 1st M.O.

Apparent age 19

Trade or occupation Farmer

Height 5 Feet 7 Inches.

Weight 135 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 34 1/2 inches.

Physical development Good

Small-Pox Marks Large one on rt arm
small one on lt "

Vaccination Marks { Arm / Right 1 Left 1
Number 1+1

When Vaccinated last Oct. 10. 14

(a) Marks indicating congenital peculiarities or previous

Identific. disease 2 triangular scars below

buttocks on left thigh "3 grey spots"

(b) Slight defects but not sufficient to cause rejection

over parietal bones in hair

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS.
<u>Oct</u>	<u>Pos.</u>	<u>W. H. B.</u>
		M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Sept.</u>	<u>Pos.</u>	<u>W. H. B.</u>
		M.O.
		M.O.
		M.O.

Enlisted on 1st day of August 1914 at Coaticook

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>35 Battery</u>	<u>C. 41781.</u>		
Transferred to.. ..	<u>6th Battery.</u>			
	<u>2nd Regt. C. 7. A.</u>	<u>C 41781.</u>		<u>Oct. 26. 1914</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

Surname..... Christian Name.....

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				
Salisbury Plain	Oct 18	17	11	14	~~10~~ 12		14	Adenitis sigmoidea (non-farinal) 4	21	Adenitis followed injury to thigh - incision - complete recovery ?	Hammond ?

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				

Name Forest Jnr. H. S.

M. F. W. 41

5m.-6-15.

1772-39-889

649-H-70

Regimental No. 41781

Unit 2nd Hld. Art. Bde.

Date of enlistment

Place of “

Married (yes or no)

Amount of pay assigned monthly \$18.00 *Apr. 1915*
See all

Dep. All.
~~To whom payable~~

no.

Name and address of next-of-kin

Mrs. Charlotte E. Lovell
P.O. Box 294
Coaticook, Que.

Date and place discharged 25-4-15

Reason for discharge *Killed in action*

Character on discharge

U. Job 82314. M. & D. 5786-25-6-15-5000.

[illegible]

Name and address of next-of-kin



Date and place discharged

Reason for discharge

Character on discharge

E. H. S.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

401

To Whom *Forest. Mrs. Mary.*
Address *Coaticook*
*Quebec.*By Whom Assigned *Forest. Hy. S.*
Regtl. No. *417817*
Rank *Gr.*
Corps *Am. Col. 2nd Bde.*Rate *8/18⁰²* per month.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Casualties
Sept.				
Oct.		{ 122441	36	
Nov.		{ 112515	18	
Dec.		42956	18	
Jan.	1915	74177	18	
Feb.		5679	18	
March		28036	18	
Apl.				
May				<i>Killed in action May 1915</i>
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

NAME FOREST, Henry Scott

Regimental No. 41781

Name and address of next-of-kin

Unit 2nd Brigade C.F.A..

Mrs Mary Forest

Date of enlistment ~~8th January, 1915~~

Coaticook, P.Q...

Place of Birth Quebec, Canada

Married (yes or no) No.

Date and place discharged *France*

Amount of pay assigned monthly \$18.00 Assign pay stopped today Reason for discharge

Reason for discharge Killed in Action 25 ⁴/₇₅

To whom payable

Character on discharge

Assg't O.K. per A.P. List 5 ⁴/₃/16

C. L. #41

[illegible]

N.E. Branch
Feb 9c

ad 2. rek:

Bleed. Nil.

✓
3530

Total amount due $22\frac{7}{8} + 25\frac{1}{8} = \$236.60$

Less assigned pay 126.00

Other charges. 3.30

Pⁿ in Cash. 4/- 6 Dollars

Balana due

$$107.30 = 22.0.11\frac{1}{2}$$

13. 0.0

7. 1. 0

Statement of
MAR 8 1916
Account rendered

Cash found in effects *Nil*

719
PAY OFFICE, N. E. BRANCH.
SEP 1914
CANADIAN CONTINGENTS

[illegible]

SURNAME.

Forest

CARD NO.

CHRISTIAN NAMES

Henry

FOLL.

D

REGL. No. 41781

RANK Dr.

UNIT 2nd. C. F. A. Bde. (Amm. Col.)

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Forest, Mrs. Mary

RELATIONSHIP TO SOLDIER

ADDRESS

Coaticook, P. Q.

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

Valcartier, P. Q.

DATE

Sept. 22nd 19140197-10-74 $\frac{36}{12}$

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

From Quebec, Per. S.S. "Jeremia" 3-10-14

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

Present Address:-

Next of Kin *Canada.*

Gn 5

Reg. No. 41781

Dead

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
no date (5.5.3/5/15)		→	Killed in action.	AA.		
Daily Gas. Sheet no: 41 states date of death to be 25 th April, 1915.						

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

NAME *Forest, Henry S.*

H. Q. FILE No. 649-

REG'T'L. No. *41781*

RANK AND CORPS

Gunner 2nd Field Artillery Bde.

CABLE

NO.

DATE

NATURE OF CASUALTY

NO. *787.*

X FOLL.

C662 3/5/15 Killed in action.

B2090A. Reven 26-6-15 " " " April 25th '15

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

✓ 41

Killed in Action

649-F-70

H.A.G.

Forest, Henry S. ^{coll.} Gnr. #41781 2nd Fld. Arty. Bde
Eligible for 14-15 Star, Gnr. 2nd Bde. 6th Bty. CEF.

Medals & Decs. *WM* Father Mr. Jos. Forest, Box 172.
Union St. Coaticook, Que.

P. & S. Father Same as above.

Serial No. 779991

Mem. Cross Mother Mrs. Mary Forest,
Address as above.

Scroll Desp. FEB 1 1921 Reqn No 2-19130

Plague Desp. 25 3/4 Reqn No P. 43155

Desp OCT 9 1920

(m) C26304 *2*

JAS

688

M

a m
Number..4.1.7.8.1..... Rank... *Sur.*

Surname.. *F.O.R.E.S.T.*

Christian Names.. *Henry Scott*

Unit... *C. 7. a.* Theatre of War.. *France*

Dates of Service... *11-2-15*

Remarks.....

Latest Address.. *Mr. Jos. Forest. Box 172*
Union St. Coaticook. Que.

Roll No.

"B" Page 1614

G.A. 254. Recp

APR 15 1921

G.A. 39701 Recp

SEP 21 1921

No.

RANK *Ste.*

NAME _____

NAME *Forest, H.*

S.

T. O. S.

UNIT

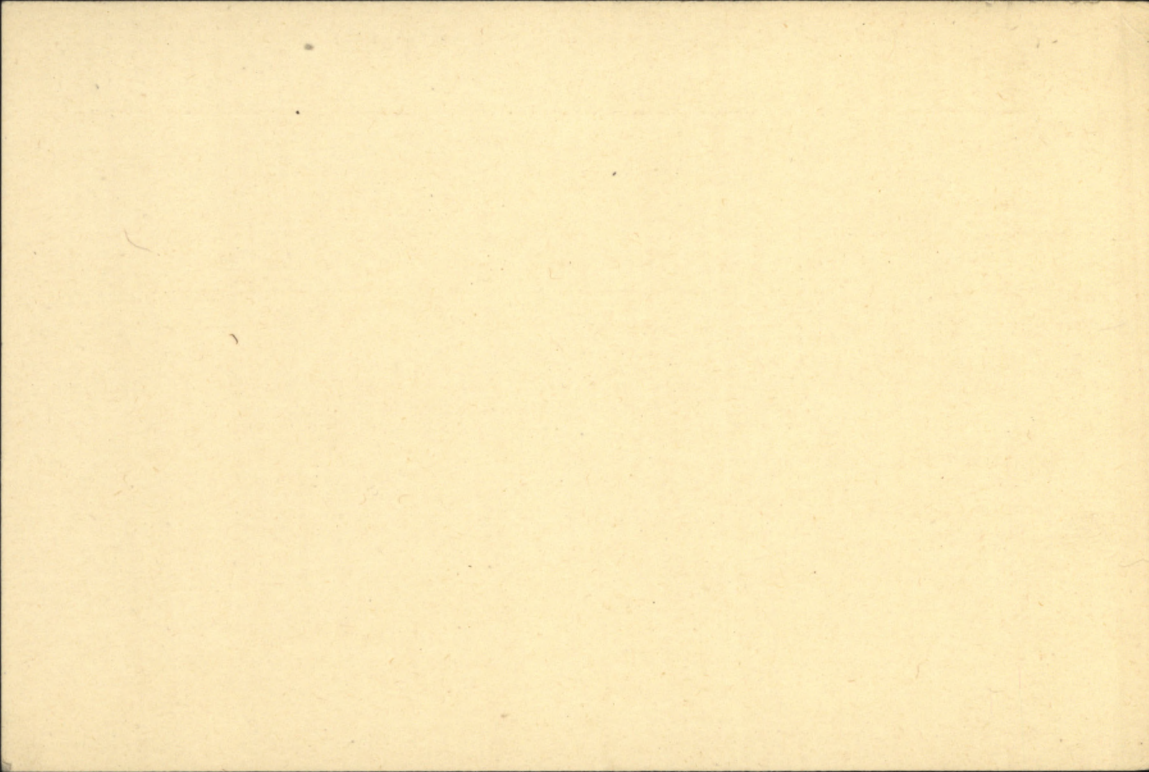
UNIT 22nd Battery, 7th Bde, C. F. A., C. E. F.

(Active Militia numbering)

M. D.

4

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1914 Aug 13	1914 Aug 29	✓		



No. 41781 RANK Plt (Sr)

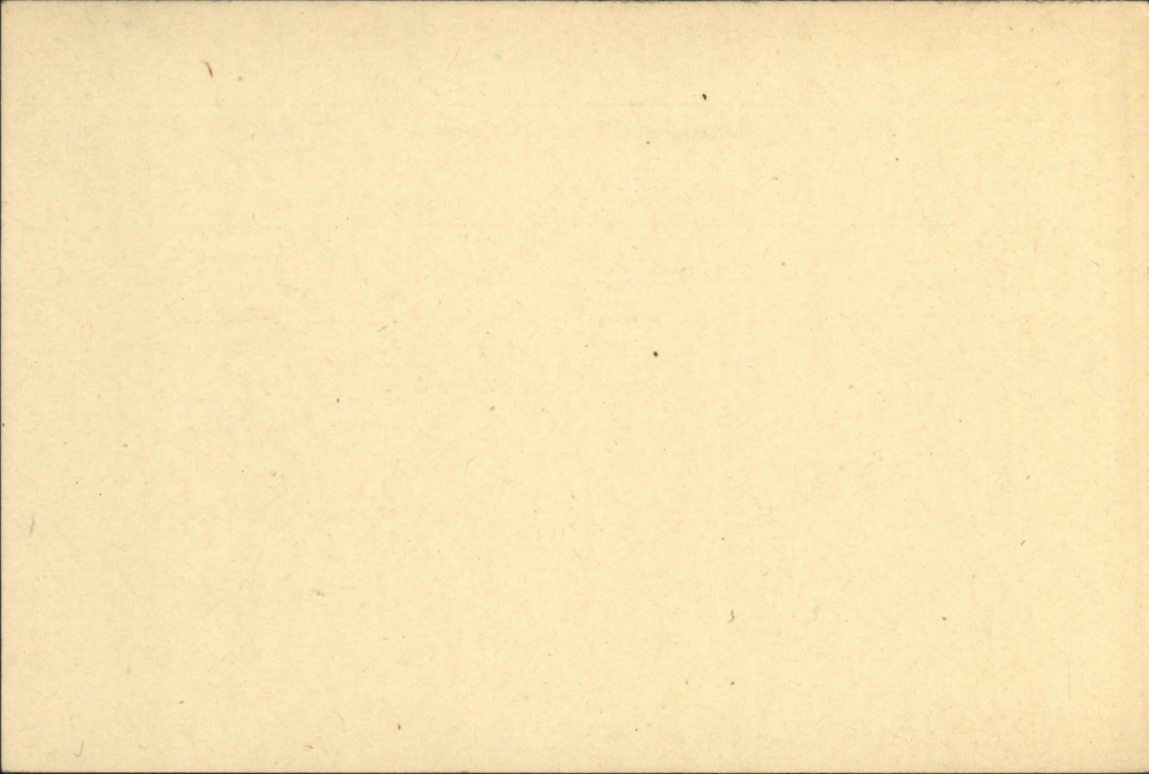
NAME Forest M. Henry

T. O. S.

UNIT Ammunition Column, 2nd Brigade, C. I. A. - C. E. F.

M. D. Val

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Aug 29 Sept 22	1914 Sept 21 Oct 31	✓ ✓	transf to 6th Regt nov.	Oct-paylist.



Surname Christian Name or Names Reg. No.
 Forest. HENRY. S. 41781.
 Rank Unit Co. Troop Batty
 Gnr. 6th. Batty. 2nd Bde. C.F.A.
 Hospital Date of Admission
 No.1. Gen. Bulford. 17-11-15.

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Adenitis. ing.

(1)
Later Diagnosis (if changed)

(2)

Bubo

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

To duty:-. 10-12-14. Date

Killed in action

REMARKS

R. OF O. Nol. Gen.

A.D. Bk. 1 g. H. A 198.

C.L. 3-5-15. 41.

A.M.D. 2 DEPT.
 Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank and Name

FOREST, Henry Scott

Regimental No.

41781

Name and Address of Next-of-kin

Unit

2nd Bgde C.F.A.

Mrs Mary Forest,

Date of enlistment

Coaticook, P.Q.

Place of birth

Quebec, Canada.

Married (Yes or No)

No

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

Report

Date

From whom
receivedRecord of promotions, reductions,
transfers, casualties, etc., during active
service. The authority to be quoted
in each case

Place

Date

REMARKS
Taken from Official Documents

3-5-15. W.O.

Killed in action

R.F.B. 104-93. for Estates 20-12-15.

25-4-15- base sheet #41 9/11

30

[illegible]

NAME

ADDRESS

REMARKS

ACCOUNT No.

NAME

ADDRESS

REMARKS

ACCOUNT No.

NAME

ADDRESS

REMARKS

ACCOUNT No.

NAME

ADDRESS

REMARKS

ACCOUNT No.

NAME 41781. Gun. Henry. S. FOREST.

REMARKS Killed. in action 23/4/1915

opened for
purpose of
adjustment.
28.2.38.
J.A.P.

DATE

CHEQUE
No.ABSTRACT
No.

PARTICULARS

AMOUNT

DATE

CHEQUE
No.ABSTRACT
No.

PARTICULARS

AMOUNT

DATE

CHEQUE
No.ABSTRACT
No.

PARTICULARS

AMOUNT

DATE

CHEQUE
No.ABSTRACT
No.

PARTICULARS

AMOUNT

1938.

26.28

Cancellation Credit Slip
for Cheque No. 302 dated
12/5/1916. for. £2.94.

Outstanding up to this
date, and. to William
Forest. (brother) who died

22/9/17. Cheque being
presented for payment

by executor of his
estate thro Bofm. Office

see file 649-F-70.

Part of DR 15411 27/5/20.

294

294

Cheque No. 32491

Date. 5.3.38

Voucher No. 74

Cheque payable to:-
Executors of Estate of
William Forest.

as share of Estate late.

Gunner H.S. Forest. No.
41781.

294

294

Note. Note for distribution
was £35.30 for particulars
as to distribution see
649-F-70.

[illegible]