

DUPLICATE

931748

ATTESTATION PAPER.

No.

No. 2 CONSTRUCTION, B.B. C.E.R.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Harael
- 1a. What are your Christian names?..... George
- 1b. What is your present address?..... Detroit Mich., U.S.A.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Treton, Kentucky. U.S.A.
- 3. What is the name of your next-of-kin?..... Lizzie Richardson
- 4. What is the address of your next-of-kin?..... Paducah Ky. U.S.A.
- 4a. What is the relationship of your next-of-kin?..... Sister
- 5. What is the date of your birth?..... July 16th
- 6. What is your Trade or Calling?..... Laborer
- 7. Are you married?..... No.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No.
- 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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Harael, 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.

Geo Harael (Signature of Recruit)

Date January 18th 1917 Byoung (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Harael, 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.

Geo Harael (Signature of Recruit)

Date January 18th 1917 Byoung (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 Windsor Ont. this 8th day of January 1917.

James G. Johnson (Signature of Justice)

219

Description of George Harael on Enlistment.

Apparent Age 35 years 6 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. 9 ins.

Chest measurement { Girth when fully expanded: 37 ins.
 Range of expansion: 2 ins.

Complexion Colored

Eyes Dark

Hair Black

Both Eyes 20/20

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist Yes.
 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* XII for the Canadian Over-Seas Expeditionary Force.

Date January 18th 1917.

Place Windsor Ont.

[Handwritten Signature]
 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.

George Harael 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.

[Handwritten Signature] Lt Col.
Company No. 2 Construction Battalion, C. E. F. (Signature of Officer)

Date January 18 th 1917.

[Handwritten initials]

REGIMENTAL DOCUMENTS

NAME HARVEY GEORGE Pfc REGT. NO. 931748 UNIT #2 Coon Bn H. Q. FILE NO. _____

(H)

19
S

(M)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Demobil

DESERTION

13-29
20-29
28-30
T

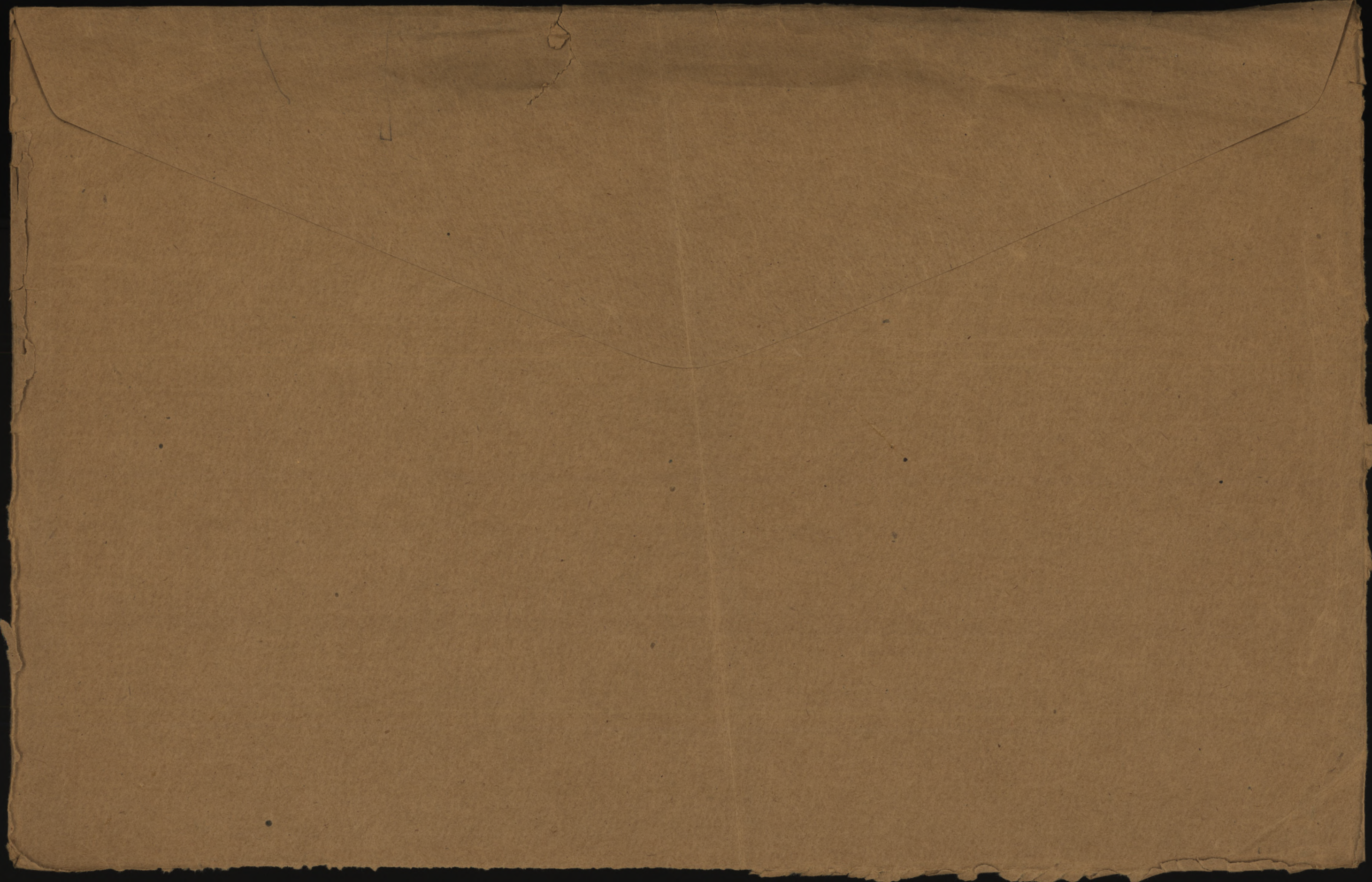
(H)

4535

- ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 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)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

ASR
3/1/48

07525



931748

I.D. number
No. d'identification

HARAE L

Surname
Nom de famille

George

Given names
Prénoms

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

Box: 4035

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»



Name **HARAEI, George** Rank **Pte.** Regtl. No. **931748**

No. **2** Const. **No. 2** Const. Fyle Depot **1DD 10-H-355**

Original unit **Bn.** Present unit **Bn** M. or S. **S** Age **36** Religion **Meth.** Ref. H.Q. **ID 30-H-1277**

Port, ship and date of arrival **Halifax, Olympic, 17-1-19.**

Next of kin **Sister, Lizzie Richardson, Paducah, Ky. U.S.A.**

Address on leave.....

Address on discharge **411 South 12th, St., Paducah City, Kentucky, USA**

Transportation issued Yes No Date..... Character on discharge.....

Previous occupation **Labourer** Date and place of enlistment **Windsor, Jan. 18th, 1917.**

Diagnosis **No disability** Date of Medical Boards **21-1-19 London, Ont.**

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
10-1-19	No. 1 D.D.	
20-1-19	Posted to Cas. Coy.	21
24-1-19	Discharged from H.M.S. On Demobilization. (P.D.F)	22

*—Name will be given in full ; surname first.

Date

Remarks

Pt. 2 Order No

M. F. W. 192

150m.-5-18

1772-39-1243

SURNAME.

Harrell

CARD NO.

I

CHRISTIAN NAMES

George

S.O.S. No. 24-1-19

Memor. FOLL. doc.

REGL. NO.

931748

RANK

PLT

W.O. 22922-2-19

#.1.1.1

UNIT

No 2 Construction

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Richardson, Lizzie

RELATIONSHIP TO SOLDIER

ADDRESS

Paducah, Ky. U.S.A.

COUNTRY OF BIRTH

U.S.A. Treton, Ky.

DATE

16th July

PLACE OF ATTESTATION

Windsor, Ont.

DATE

8/1/17.

A/C 17-1-19 ²⁵²/₂₁ I

From Halifax, S.S. "Southland" 28/3/17.

MARRIED - SINGLE *yes* WIDOWER -

TRADE OR CALLING *Labourer* RELIGION *Methodist-*

DESCRIPTION.

APPARENT AGE *35* YEARS *5* MONTHS

HEIGHT *5* FEET *9* INCHES

CHEST MEASUREMENT *37* INCHES EXPANSION *2* INCHES

COMPLEXION *Colourless* EYES *Dark* HAIR *Black.*

DISTINGUISHING MARKS *Both eyes 20/20*

MEDICAL EXAMINATION. PLACE *Hindsen, Ont.* DATE *Jan 8th 1917.*

Present Address.
Detroit, Mich. U.S.A.

No. 931748 RANK

Pte

NAME

Harold George

T. O. S. 18-1-17

UNIT

No 2. Construction Battalion

D.O. 21. 24-1-17

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Jan 18	1917 Jan 31	✓		
Feb.		✓		
Mar		✓		



Number

931748.

Rank

~~PT~~ Spr. 

Surname

HARAE L

Christian Name

George.

Units

COR. CC

Theatre of War

Franca

Date of Service

17-5-17

Remarks

Latest Address

411 South 12th St.,

c/o General Delivery, Paducah City,

Roll No.

B. Page 18076 Kentucky, USG

200m.-2-21. vi.

18¹⁰/₂₃

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date	Remarks

*Deep on temp card 28 7/3
Reg'n No. - 7545
29 10/23*

-Name will be given in full; surname first.

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

Casualty Form—Active Service.

Unit, Regiment or Corps. *2nd Const. Unit*
 Regimental No. *931748* Rank *Pte* Name *Daniel George*
 C. E. F. *Daniel George*
 Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....
 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).....

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>10-1-19</i>	<i>Simons</i>	<i>Taken on strength No. 1 District Depot</i>	<i>London, D.O. 21</i>	<i>21</i>	<i>F. G. Herman Lieut</i> <i>NO. 1 DISTRICT DEPOT</i>
DISCHARGED		<i>LONDON, ONT. JAN 24 1919</i>			<i>J. A. Millard Major</i> <i>O. C. Discharge Section, No. 1 D. D.</i>
		ON DEMOBILIZATION			

(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.]

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				

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

Clw.wat

M. F. W. 54. (A. F. B. 10)

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. #2 Construction Battalion CEF.

Regimental No. 931748 Rank Pte. Name George Harael

C. E. F.

Enlisted (a) 18/1/17 Terms of Service (a) Duration of war Service reckons from (a) 18/1/17

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 Date	From whom received	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
<i>17/1/17</i>	<i>O.C. and Const Battr.</i>	<i>Enlisted, Canada</i>	<i>Halifax, N.S.</i>	<i>25/3/17</i>	
		<i>Disenlisted, England</i>	<i>Liverpool</i>	<i>17/4/17</i>	<i>✓</i>
		<i>Proceeded Overseas</i>	<i>Seaford</i>	<i>17/1/17</i>	<i>PT. D.O. #</i> <i>From maple</i> <i>for</i> <i>Adjutant, No. 2 Construction Bn, C.E.F.</i>
<i>21.5.17.</i>	<i>OC.</i>	<i>Forfeits 5 days pay for Making away with Iron Rations</i>	<i>Landed in France</i>	<i>17-5-17 N.R.</i>	<i>7ld. 21.5.17 B2069 Part II 119 25/7/17</i>
<i>5/1/18</i>	<i>OC Unit</i>	<i>Att to 1 Dist CFC.</i>		<i>30/12/17</i>	<i>B213</i>
<i>7-9-18</i>	<i>OC 38 Ck</i>	<i>Granted 14 day leave</i>	<i>uk</i>	<i>5.9.18</i>	<i>B213 No 52 7/18 29/18</i>
<i>28.9.18</i>	<i>do</i>	<i>Repairs from leave</i>	<i>uk</i>	<i>23.9.18</i>	<i>B213</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.

19

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				
5-12-18	38686	10 days SP No 2 29.11.1918 for AWL from 1300 hrs 26-11-18 to 0730 hrs 29-11-18. Defects 3 days pay by Rev.			Broken at 10.00 hrs of Dec 1918.
11 ¹² / ₁₈	NSRD	Transferred to Reg Depot to N.S. Reg Depot	Bramshott	14 ¹² / ₁₈	NR344
			b.a. Hewitt Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, I.E.S.		
17.12.18	NSRD	T.O.S and att'd 2nd b.b.D for Quarries & Nations	Bramshott	14.12.18	D.O. 305
	NSRD	ON COMMAND TO ADD Kimmel Pk Rhye	BRAMSHOTT		PART II D.O. NSRD 313 27 ¹² / ₁₈
28/12/18	NSRD	T.O.S m.s.1 Conc. Camp.	Rhye		b.a. Wright LIEUT. OFFICER IN CHARGE, NOVA SCOTIA REGTL. DEPOT.
		Embarked for Canada			P.I.O. - A.B. Coery L.V.A. for O.C. m.s.1 wing

J.P. Rank

Name

HARAEI, George

Reg'l No.

931748.

Unit No2. Const Bn.

If in perm. Corps
What Unit?

Married or Single

Single.

Place and Date of Enlistment

Windsor, Ont 18th Jan .1917.

Place of Birth Treton, Kentucky.

Name and Address, Next-of-Kin

Lizzie Richardson.

U.S.A.

Paducah, Ky. U.S.A.

Relationship

Sister.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No.	5008
File R.L.	
Category	OR CAN

Discharge, Date and Place

Reason

Character

H. W. V., Ld.-9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England ss 'Southland'		7-4-17	Arrived
14:6:17	2 nd Gen Bn	Arrived in France	Field	14:5:17	PT2DO 158.
16-12-18	NSRD	T.O.S from 2 nd ccay	Pk Bshott	14-12-18	205 + 71 d / 19-12-18 2 nd ccay
27-12-18	NSRD	% to 600 Rlyl		27-12-18	00 313
19 JAN 1919	NSRD	SOS to CEF in CANADA	Pk Bshott	9 JAN 1919	PT2DO 16

A.F.B. 203 CHECKED
29 MAY 1917

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... *No. 2 CONSTRUCTION, B'n. C.E.F.*

(2) Regimental Number..... *931748*

(3) Full Name of Soldier..... *George Israel*

(4) Place of Birth..... *Kentucky, U.S.A.*

(5) Are you married, or not?..... *Single*

(6) If married, state,
(a) Full name of your wife..... *X*

(b) Present Postal Address..... *X*

(7) Are you a widower?..... *No*

(8) Have you any children?..... *X*

If so, give number of boys and girls..... *X*

Also their names and ages..... *X*

(9) Is your Father alive? *No*

If so, state name and address

(10) Is your Mother alive? *No*

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

X

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Sister
Mrs. Elizabeth Richardson, Paducah,
Kentucky

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

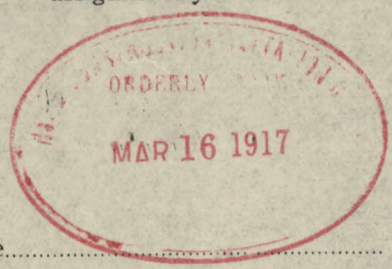
X

(15) Are you insured? *No*

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.



H. Marie Carr
Lieut-Col
No. 2 Construction Batt'n. C. E. S.
Officer Commanding.

Date.....

10 Sta 133 10010H LAST PAY CERTIFICATE Sta 13 Jan
 Regt. No. 931748 Rank *Otc* 355 Name *Stanley George*
 Corps *N&R* who was *Discharged*
 on *24-1-19* to

The following is a statement of the account of the above named
 from *1-1-19* to *24-1-19*

Bal Dr from mon. of from L.P.C. ASSIGNED PAY;		Bal Cr from mon. of from L.P.C. Regt Pay 24 days at \$1 F'ld All 24 days at \$.10	325 97 24 240
SEPARATION ALLOWANCE:		SEPARATION ALLOWANCE:	
OTHER CHARGES:		OTHER CREDITS: Clothing Allowance Subsistence,	35 00
PAYMENTS: <i>9849 ✓</i>	<i>387 37</i>		
Bal Cr (to be paid) <i>PDP</i>	<i>387 37</i>	Bal Dr (to be deducted) { from soldier \$ " Dependant \$ }	<i>387 37</i>

SEPARATION ALLOWANCE ----- at \$ <i>ML</i> per month has been <i>ML</i> to	ASSIGNED PAY ----- at \$ <i>ML</i> per month has been <i>ML</i> to	VICTORY BOND ----- Subscribed \$ Paid by Other Units \$ Paid by this Unit \$ <i>ML</i>
-------------------------------------------------------------------------------------	-----------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------

Dependant or Beneficiary;
Address;

REMARKS; *Disch on Lemob 24-1-19*
10032
Date of Enlistment *18-1-17*
If married and if Separation Allowance card submitted *NO*

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

date; *London, Ont.*
W. J. McEwen Captain,
 Paymaster, District Depot No. 1

The following is a statement of the account of the above named

24-1-1911

1. Balance forward
2. To Cash
3. To Bank
4. To ...

1. To Cash
2. To Bank
3. To ...

5. To ...
6. To ...

4. To ...

Total

Total

24-1-1911

W. J. ...

ASSISTANT PAY

ASSISTANT PAY

Subscribed by
Paid by
or
for
the

of ...
to ...

of ...
to ...

...

...

...

...

...

...

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

COPY ONLY

This is to Certify that No. 931748 (Rank) PRIVATE

Name (in full) HARREL, George enlisted in

the NO. 2 CONSTRUCTION BATTALION C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at WINDSOR ONTARIO on the EIGHTEENTH

day of JANUARY 1917.

HE served in FRANCE (WITH NO. 2 CONSTRUCTION BATTALION)

and is now discharged from the service by reason of ON DEMOBILIZATION

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

Age 36 Years

Height 5' 9"

Complexion COLORED

Eyes BROWN

Hair BLACK

Marks or Scars

NIL

Signature of Soldier

DISCHARGE SECTION
JAN 24 1919
No. 1 District Depot

Date of Discharge

LONDON, ONT.

Issuing Officer

J. C. Discharge Section, No. 1 D. D. Major

Rank

Appointment

Signed at LONDON, ONT. this Twenty-fourth day of January 1919.

in Military District No. (One)

File Reference No. 1.DD. 10-H-355.

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

Cancelled in the
back of this cer-
tificate will not be com-
pleted.

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. 931748 Rank Pte. Surname Harael
(Given name in full)

George

Unit or Corps 1. D. D. Birthplace Trenton, Kentucky, U.S.A.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 151 lbs. Height 5 ft. 8 1/4 in. Colour of Eyes Brown

Nutrition Good

Pulse 76

Condition of arteries Normal

Vision Rt. 20x20 Left 20x20

Hearing (conversational voice) Rt. 21x21 ft.

Left 21x21 ft.

Left ft.

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

Opinion as to general health and physical condition Fit for Category A2

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 Yes Cardio-Vascular System No

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.

Left Chancre - 27/1/17 - 13/2/17 - cured. No disability from service.

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

[OVER]

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...London, Ont..(Canada)

Date ...Jan. 21/19..... Signed *W. M. Kelly, Cpt.*...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 *R. J. Hall*.....

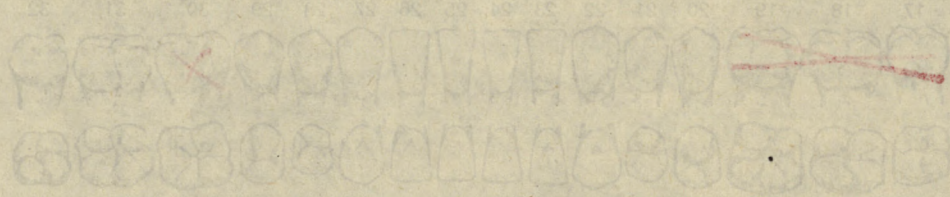
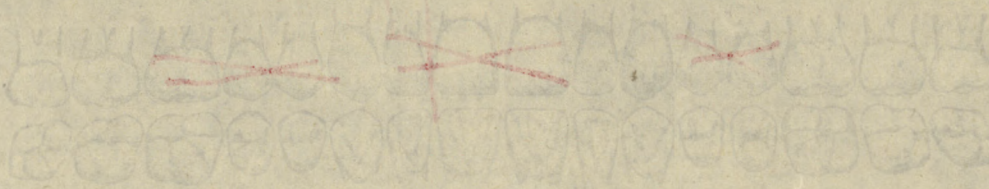
(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

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

[OVER]

INSTRUCTIONS

1. On examining the condition of patient's mouth to be marked as absent in red ink.
2. On any line or space or space to be made in red ink.
3. Only initials to be made on this sheet as will show.
4. Continue on continuation of roll.
5. Conduct on taking Cases.
6. Condition on discharge.



DEPT. OF DENTISTRY
 UNIVERSITY OF CALIFORNIA
 DENTAL CLINIC

1914

[Faint, mostly illegible text and markings, possibly bleed-through from the reverse side of the page.]

ORIGINAL MEDICAL HISTORY SHEET

931748

Surname Harael Christian Name George

Examined { on 18th day of January 1917
 at Windsor Ont.

Approved by Dauk Murray
 Rank Capt. U.S.A.

Birthplace { City or Town Treton, Ky. USA
 County _____

Apparent age 35 yrs. 6 mo.

Trade or occupation Laborer

Height 5 feet 9 Inches

Weight 148 lbs.

Chest measurement { Minimum 35 inches
 Maximum expansion 37 inches

Physical development _____

Small-pox Marks _____

Vaccination Marks { Arm Right Left
 Number _____

When Vaccinated last _____

(a) Marks indicating congenital peculiarities or previous disease _____

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

Both Eyes 20/20

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS
<u>12/2/17</u>		<u>Dauk Murray</u> M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>17/2/17</u>	<u>SS</u>	<u>Shapley</u> M.O.
<u>25/1/17</u>	<u>SS</u>	M.O.
<u>18/3/17</u>	<u>SS</u>	<u>Dauk Murray</u> M.O.

Enlisted on 18th day of January 1917 at Windsor Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>#2 Const Bn</u>	<u>931748</u>		<u>18/1/17</u>
Transferred to	<u>667</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u>	<u>JAN 18 1917</u>	<u>on enlistment</u>	<u>Fit</u>
<u>W. M. C.</u> Major, A. M. C.		<u>W. M. C.</u> Capt. A. M. C.	<u>Dauk Murray</u> Capt. U.S.A.

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 *Harrel* Christian Name *George*

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				
<i>London</i>		<i>27</i>	<i>1</i>	<i>17</i>	<i>13</i>	<i>2</i>	<i>17</i>	<i>Soft Chanc</i>	<i>18</i>	<i>med. Cured</i>	<i>Net Ballantyne Capt.</i>

Duplicate Medical History Sheet
posted to here: *12m*

P. 550
MARRIED OR SINGLE *S*

PLACE OF BIRTH *Linton Ky. W.S.A.*

NAME AND ADDRESS OF NEXT OF KIN *Lizzie Richardson*

Paducah Ky. W.S.A.

RELATIONSHIP OF NEXT OF KIN *Sister*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS					
	No. OF DAYS	RATE	AMOUNT \$ c.	No. OF DAYS	RATE	AMOUNT \$ c.				No.	DATE	No.	DATE	No.	DATE
									28 68	28 68					
<i>Apr 30</i>	<i>30</i>	<i>1.10</i>	<i>33 00</i>						<i>33 00</i>						
<i>MAY 1-31</i>	<i>31</i>	<i>-</i>	<i>34 10</i>						<i>34 10</i>	<i>46 45</i>	<i>19 19/4</i>				
<i>June 1-30</i>	<i>30</i>	<i>-</i>	<i>33 00</i>						<i>33 00</i>	<i>74 14/5</i>					
<i>July 1-31</i>	<i>31</i>	<i>-</i>	<i>34 10</i>						<i>34 10</i>						
<i>Aug</i>	<i>-</i>	<i>-</i>	<i>34 10</i>						<i>34 10</i>						
<i>Sep 1-30</i>	<i>30</i>	<i>-</i>	<i>33 -</i>						<i>33 -</i>						
			<i>201 30</i>						<i>28 68</i>	<i>229 98</i>					

*60 30/5
123 24
196 25/2
271 27
294 28*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SEP. ALLGE. ENG.
<i>Sep</i>	<i>Bal</i>	<i>187 17</i>							<i>187 17</i>		
<i>Oct</i>	<i>P.P.</i>	<i>34 10</i>		<i>AR 573, 27 8/17. 2 months pay at CFC</i>	<i>3 57</i>						
				<i>462 13 8/17</i>	<i>3 57</i>						
				<i>622 11 9/17</i>	<i>3 57</i>				<i>210 56</i>		
		<i>34 10</i>			<i>10 71</i>						

EFFECTIVE DATE
 AUTHORITY
 IF IN PERMT. CORPS }
 WHAT UNIT
 PERMANENT FORCE ALLOWANCES
 PLACE OF ATTESTATION
 DATE OF ATTESTATION
 ASSIGNED PAY MONTHLY \$
 DATE EFFECTIVE
 PAYABLE TO
 RELATIONSHIP

REG'L No. 931748 RANK NAME *Harold George*
 UNIT *2 bow Bw* TRANSFERRED TO DATE AUTHORITY
 TRANSFERRED TO DATE AUTHORITY
 PLACE OF ATTESTATION *Windsor Ont.* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *18 Jan 1917* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP

NAME OF HOSPITAL
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)
 DISCHARGE DATE AND PLACE
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACQUITTANCE ROLLS

2		3		4	
No.	DATE	No.	DATE	No.	DATE
60	20/8				
123	21/8				
196	25/12				
271	2/17				
294	2/17				

DEFER. SEP.
 LANCE RED. ALLGE
 PAY ENG.

CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4				CREDIT	DEBIT			
							28 68				<i>bal from Canada</i>
							61 68		15 -	46 68	
9 73							14 59	81 19	30 -	51 19	
4 86							4 87	109 32	45 -	64 32	
4 87					5 50	5 50	137 92	60 -	77 92		<i>for 5 ds. pay 21-5-17. D.O. 119. 25-7-17.</i>
		3 57				3 57	168 45	75 -	93 45		
		3 57				14 28	187 17				
		3 57				42 81	187 17				
19 46		17 86			5 50	42 81	187 17				

CANADIAN *ml*
 ASSIGNED PAY AUDITED
Newhollows
 AUDIT CLERK
 DATE *20/4/19*

* Strike out whichever inapplicable.

ASSIGNED PAY:	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.
EFFECTIVE DATE:-		EFFECTIVE DATE:-
AMOUNT:-		AMOUNT:-
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME WORD "SAME" ONLY TO BE WR

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, BY INSERTION OF DATE CHARGED		
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY
9/12	6581	Field	466	26/11	10	3 days RRW J.P.
18/12	3569	B. Kelly	473			
			1739			Newcast

PARTICULARS OF RENDERING NON-EFFECTIVE:- His. to Can

1918 MONTH	PARTICULARS	CR. 1	CR. 2
MAR	Bal. Ford		
Apr	P. Pay	33	AR
May	P. P.	33	AR. 10
June	P.P.	34 10	AR 12
July	PP	33	AR 15
Aug	PP	34 10	AR
Sep	PP	34 10	AR
		33	AR 2
Oct		34 10	AR 3
Nov	O.P. M.A.	6710	AR 3
	Inter or Deferred Pay.	1312	AR 3
		5122	

CANADIAN
 ASSIGNED PAY AUDITED
Newell
 AUDIT CLERK
 DATE 20/6/19

ID OR A. SEPARATION ALLOWANCE. ENGLAND OR CANADA.
 EFFECTIVE DATE: -
 AMOUNT: -

NAME: - *HARVEY George*
 NUMBER: - *931748*
 PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Plc</i>

UNIT AND TRANSFERS

ORIGINAL UNIT: - *2 Construction Bn*

DATE ACCOUNT FIRST OPENED: - *1 APR 1917 76*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SFD	UNIT TRANSFERRED TO
			<i>Canada</i>

Y-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>466</i>	<i>26/11</i>	<i>3 days RW</i>	<i>10/18 502</i>	4430
<i>943</i>				
<i>1439</i>			<i>New as PB issued CF 61. 56135. 10/8/18</i>	

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>-</i>	<i>-</i>	<i>10</i>

EFFECTIVE: - *His. to Can 11/19 Ledger for 39453*

CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
							<i>316 33 177</i>		
<i>33</i>		<i>AR 120 6/4 CFC 201</i>	<i>3 57</i>						
<i>33</i>		<i>302 20/4 - 1 - 1</i>	<i>3 57</i>				<i>342 19 192</i>		
<i>34 10</i>		<i>AR 497 7/5 CFC 1</i>	<i>2 68</i>						
<i>34 10</i>		<i>AR 725 20/5 5</i>	<i>4 46</i>				<i>369 15 207</i>		
<i>33 2</i>		<i>AR 912 7/6 CFC 1</i>	<i>3 57</i>					<i>222</i>	
<i>33</i>		<i>1108 22/6</i>	<i>3 57</i>				<i>395 01</i>		
<i>34 10</i>		<i>AR 1298 6/7 CFC 1</i>	<i>3 57</i>						
<i>34 10</i>		<i>AR 1507 22/7</i>	<i>3 57</i>				<i>421 97 231</i>		
<i>34 10</i>		<i>AR 1702 6/8 CFC 1</i>	<i>3 57</i>						
<i>34 10</i>		<i>AR 1450 22/8</i>	<i>3 57</i>				<i>448 93 242</i>		
<i>33</i>		<i>AR 2077 3/9 CFC 1</i>	<i>3 57</i>						
<i>33</i>		<i>AR 3731 2/9 CFC 1</i>	<i>97 33</i>						
<i>33</i>		<i>CP 32199 10/9 London</i>	<i>73 00</i>						
<i>33</i>		<i>AR 2445 23/9 CFC 1</i>	<i>3 57</i>				<i>304 46 267</i>		<i>at agree</i>
<i>34 10</i>		<i>AR 2683 7/10 CFC 1</i>	<i>3 73</i>						
<i>34 10</i>		<i>AR 2935 23/10</i>	<i>3 73</i>				<i>331 10 285</i>		
<i>6 7 10</i>		<i>AR 3569</i>						<i>300</i>	
<i>Pay 1312</i>		<i>AR 3102 8/11 CFC 1</i>	<i>3 73</i>					<i>315</i>	
		<i>3309 25/11</i>	<i>13 06</i>				<i>39453 300</i>		<i>30/1/14</i>
		<i>6581 10/12 CFC 1 BLD</i>	<i>466</i>						
<i>8122</i>		<i>3569 18/12</i>	<i>97 33</i>						

NUMBER 931748 RANK

Ole

NAME HARAIEL, GEO.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.
	<i>Foid</i>	<i>8022</i>			<i>3118</i>			
				<i>MR 3102 8/11 6.561</i>	<i>3118</i>			
				<i>3309 25/11</i>	<i>3118</i>			
				<i>Sentenced to 10 days J.P. 27/11/18</i>				
				<i>at 1300 26.11.18 to 730</i>				
				<i>29/11/18 forfeits 3 days by rev.</i>				
				<i>NO. 69. 2nd Cons Co 10/12/18</i>		<i>1430</i>		
		<i>8022</i>			<i>3118</i>	<i>1430</i>		
				<i>2 O.S. to Can 9/1/19</i>			<i>1430</i>	<i>NO</i>

ARAIEL, GEO.

DETAILS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
	3118				33110	315	
8/11 G.T. 61	3118						
25/11	3118						
10 days J.P. 707 1300 26.11.18 to 730							
23 days by Rev. to 10/12/18		1430			36584		
	3118	1430					
to Can 9/1/19 MARKED 10010 19/1/19							

49

10-Ha-133

1 D.D. 10. A. 355. Ha. 13. Jan.

AUDITOR PAYMASTER

1079

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. *S.* REGT. No. *93748* RANK *Pte.* NAME (IN FULL) *HARIEL George*

NEXT OF KIN _____ ADDRESS _____

RELATIONSHIP _____

PARTICULARS _____ EFFECTIVE DATE _____ AUTHORITY _____

ORIGINAL UNIT C.E.F. *N.R.* IF IN P.F. WHAT UNIT? _____

PLACE OF ATTESTATION _____ TRANSFERRED TO *287* DATE *20/9/19* AUTHORITY *20/21*

DATE OF ATTESTATION *18-1-17* TRANSFERRED TO _____ DATE EFFECTIVE _____

ASSIGNED PAY, \$ *Nil* DATE EFFECTIVE _____

PAYABLE TO *Nil* RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS _____

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

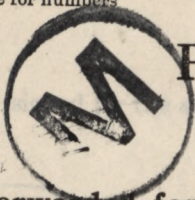
DISCHARGED *London, Ont* PLACE _____ DATE *24-1-19* REASON *on Demob.* AUTHORITY *2022* IF ENTITLED TO POST DISCHARGE PAY *yes.*

MONTH	NO. OF DAYS	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
		AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
		\$	C.			NO.	NO.	NO.	\$	C.	\$					C.	\$	
<i>2 H.P.B.</i>	<i>31-12-18</i>	<i>1.00</i>	<i>104</i>		<i>365 84</i>									<i>30</i>				<i>On boat</i>
<i>Jan 1/24</i>	<i>24</i>	<i>1.00</i>	<i>26 40 35</i>	<i>325 97</i>	<i>387 37</i>			<i>9849</i>	<i>22 1 19</i>			<i>387 37</i>					<i>325 97</i>	<i>nil</i>
<i>24/1/19</i>	<i>70</i>				<i>70 -</i>			<i>5145</i>	<i>24/1/19</i>			<i>70 -</i>					<i>70</i>	<i>War service gratuity 2 years at 350</i>
																		<i>W.M. Mortimer's Army</i>
		<i>224</i>																<i>Plat Des</i>
<i>24/2/19</i>	<i>280</i>				<i>280</i>							<i>70</i>			<i>70</i>			<i>5375</i>
<i>24/3/19</i>	<i>210</i>				<i>210</i>							<i>70</i>			<i>70</i>			<i>358/17</i>
<i>4</i>	<i>140</i>				<i>140</i>							<i>70</i>			<i>70</i>			<i>73177</i>
<i>24/5/19</i>	<i>70</i>				<i>70</i>							<i>70</i>			<i>70</i>			<i>83510</i>
					<i>350</i>										<i>350 -</i>			<i>D. J. J. Officer Capt</i>

WAR SERVICE GRATUITY

12-8-35

This space to be for numbers



Proceedings on Discharge.

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

No.	931748
Rank	PRIVATE
Surname	HARAEI
Christian Name	GEORGE
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	NO. 2 CONSTRUCTION BATTALION
Date of Discharge	JAN 24 1919 20.0 #22 d/ 22.1.19
Place of Discharge	LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Age	Height	Complexion	Eyes	Hair	Trade	Intended place of residence	Descriptive Marks
	36 years	5 feet 9 inches	COLORED	BROWN	BLACK	LABORER	411 South 12th Street Paduach City, Kentucky.	NIL

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

ON DEMOBILIZATION

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.

M. F. B. 218.

100M.-1-17.
H. Q. 1772-39-113.

(OVER)

*Noted. Melby
20-3-14-1919*

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.

(Place) **LONDON, ONT.** *J. W. Paul* (Signature of Soldier.)

(Date) **JAN 24 1919** *J. Reddon* (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) **LONDON, ONT.**

(Date) **JAN 24 1919**

(Signature) *J. Millard*

Major

To O. C. Discharge Section, No. 1 D. D.

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

W. H. G.

Militia Form B. 235 Attestation Paper	Reg. Conduct Sheet Militia form B. 203
" " B. 218 Proceedings on Discharge	" " B. 203 Conduct Sheet Squadron Battery Company
In the case of recruits who are rejected on final approval, the discharge documents will consist of	Copies of Convictions, by C.P. in MS. Med. Hist. Sheet Militia Form B. 313
(a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared).	Medical Report for Invalid* " " B. 237 Statement of Man's Account on Transfer and Last Pay Certificate " " D. 877 *Only if discharged "Medically unfit."

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

List of Discharge Documents.

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

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

Statement of Service.

Service was first engaged on _____ The date to which the Record of Service is completed _____

Total _____

Confirmation of Discharge.

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

LONDON, ONT.
JAN 2 1880

Signature of _____
Militia Secretary