

DISCHARGED JAN 9 1919
DEMobilIZATION OFF R.O. 1826

John G. Gimmie
first

Coy 2

M. D. *first* Depot Battalion *1st Depot Battn. Sask. Regt.* Regiment *1st Depot Battn. Sask. Regt.*
Regtl. No. *3352073*

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917 ORIGINAL

(Class *1*)

1. Surname *Johnston*
2. Christian name *Almer Line*
3. Present address *Box 113 - Asquith*
4. Military Service Act letter and number *LC 424231*
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth *May 4 - 1897*
6. Place of birth *Fergus Falls P.C. - Ottertail County Minnesota*
(town, township or county and country)
7. Married, widower or single *Single* *USG*
8. Religion *Lutheran*
9. Trade or calling *farmer*
10. Name of next-of-kin *Andrew C Johnson*
11. Relationship of next-of-kin *father*
12. Address of next-of-kin *Box 113 Asquith Sask*
13. Whether at present a member of the Active Militia *No*
14. Particulars of previous military or naval service, if any *None*
15. Medical Examination under Military Service Act :—
(a) Place *Saskatoon* (b) Date *Oct 24 - 17* (c) Category *A II*

DECLARATION OF RECRUIT

I, *Almer Line Johnson*, do solemnly declare that the above particulars refer to me, and are true.

Almer Line Johnson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age *21* yrs. *1* mths.
Height *5* ft. *8 1/2* ins.
Chest *35* ins.
measurement *2 1/2* ins.
range of expansion
Complexion *fair*
Eyes *Grey*
Hair *Light*

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

E. J. Barclay
O. C. *1st Depot Battn. Sask. Regt.* Depot Btin. *Regt.*

Place *Regina Sask* Date *June 13 - 1918*

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname
 2. Christian name
 3. Present address
 4. Military service number
 5. Date of birth
 6. Place of birth
 7. Married, widowed or single
 8. Religion
 9. Trade or calling
 10. Name of next of kin
 11. Relationship to next of kin
 12. Address of next of kin
 13. Whether or not a member of the Armed Forces
 14. Particulars of previous military or naval service, if any
 15. Medical examination under Military Service Act
 (a) Date (b) Place (c) Category

DECLARATION OF RECRUIT

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

Signature of Recruit

DESCRIPTION ON CALLING UP

Height	Weight	Build	Complexion	Stature	Other
inches	lbs	inches	inches	inches	inches
inches	lbs	inches	inches	inches	inches
inches	lbs	inches	inches	inches	inches
inches	lbs	inches	inches	inches	inches

Distinctive marks and marks indicating congenital peculiarities or previous injuries

100
29-1-19
Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms...../.....

Proceedings on discharge...../.....

Corps History Sheet.....

Date and No. of Deposit Receipt for
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet...../.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate...../.....

DISCHARGE DOCUMENTS

Name JOHNSON ALMER LINE

Regt. No. 3352073 Rank PTE

Corps 1st DEPOT BATT. SASK.

R. O. No.

H. Q. No.

06485

DEMOB'N



MTW. 71-1
MTW. 39a-1
MTW. 129-1
MTW. 178-1
MTW. 113-1
MTW. 465-1

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 Johnson Christian name Almer Line
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 26424231
3. Consecutive number on schedule of men reporting for service (if he appears on it) Con 12, 2
4. Address (including street and number, if any) 113 Asquith St Sask

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the OCT 24 1917 day of 1917, by the undersigned medical board sitting at SASKATOON, SASK.

5. Age as stated 20 Years 5 Months. 6. Apparent age 20 Years Months
7. Height 5' Feet 8 1/2 Inches. 8. Weight 140 Pounds.
9. Chest measurement { Minimum 32 1/2 Ins. Maximum 35 Ins. 10. Complexion fair { Eyes grey Hair light
11. Physical development. fair { Good Fair Poor 12. Smallpox marks. 0
13. Number of vaccination marks { Right arm 0 Left arm 0 14. When vaccinated last never
15. Distinctive marks and marks indicating congenital peculiarities or previous disease no

16. Slight defects but not sufficient to cause rejection no

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 A

Hadden Lorb President.

Demack Member.

Arthur Wilson Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
14/6/18	-	M.O.	14/6/18	x	M.O.
10/7/18	x	M.O.	10/7/18	x	M.O.
		M.O.	10/7/18	x	M.O.

Joined 13 day of June 1918 at Pegum

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>MT Depot</u>	<u>3352073</u>		<u>13/6/18</u>
Transferred to.....	<u>Bath</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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

Christian Name,

Johnson

[illegible]

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3352073 (Rank) Private

Name (in full) Johnson Almy Lorne enlisted in
the 1st Depot Bde, Sask Regt.

CANADIAN EXPEDITIONARY FORCE at Regina on the 13th
day of June 19 19

HE served in Canada

and is now discharged from the service by reason of Demobilization
C.E.F. R.O. 1328

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

Age 21 yrs 1 mth

Height 5 ft 8 1/2 in

Complexion Fair

Eyes Grey

Hair Light

Marks or Scars Nil

A L Johnson
Signature of Soldier

H J Brimie
Issuing Officer

Date of Discharge 9-1-19

V. C. Johnston Rank 1st Lt
Appointment 1st Lt

Signed at Saskatoon this 9th day of January 19 19

in Military District No. 12

File Reference No. _____

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer

Rank

Appointment

On demobilization particulars of this certificate will not be completed.

Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.

 Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank..... Name Almer Pine Surname Johnson
 Unit of Corps I.O.B.S.R. (If a soldier) Regt. No. 3352073
 Born at Copin Cr. Minn. on, (date) May 4 1897
 Signature (for identification) A. L. Johnson

The examination is to be made by one Medical Officer.

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

Weight

140

lbs.

Colour of eyes

Grey

Height

5 ft. 8½

in.

Identification Marks, Scars, etc.

2. NUTRITION AND DIATHESIS?

Good

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

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

No

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

No

5. HEART?

Abnormal Sounds? *Nil*Abnormal Size? *Nil*Pulse Rate? *74*Intermittence or irregularity? *No*Muscular Tone? *Good*

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

(b) Blood Pressure. *120*

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

Good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? *1020*Reaction? *Acid*Albumen? *Nil*Sugar? *Nil*9. SKIN, MIDDLE EAR, EYE
or any other part?

Vision:

Rt. Eye *20/30*L. Eye *20/30*

Hearing:

Rt. Ear *Normal*L. Ear *do*10. Is there any evidence of impairment of health or physical condition not mentioned above?
If so, describe. *No*

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

Examined at *Dockatoon Wash.*Signed *A. L. Johnson* M. O.Date *Jan. 9/19.*

Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report must be sent at once to the O. C. concerned and the Officer or Soldier brought before a Medical Board.

NAME OF SOLDIER.....Johnson A. L.

REGIMENT.....1.D.B.S.R.

RANK P.TE.

No. 3352073.

Condition on first Examination	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoza	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
	U	L											P	Gold	Porcelain								
	1918																						
Condition on first Examination	July 16	2 4.12										1.7.1913. 14.16.17 30.32						1 20			Capt. R. Ross	12	Car 1/19 Box 1/3
Treated from	~ 16											1 3								Capt. R. Ross	12		

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.

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

350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1st Depot Batta. Sask. Regt.

Regimental No. 233 20/3 Rank Private Name Johnson Almer Line

Enlisted (a) 10-6-18 Terms of Service (a) 6870 Service reckons from (a) June 13-1918

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). *Military Nil = 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				

BU 10 7

DISCHARGED JAN 9 1919

DEMORILIZATION C.E.F. R.O. 1328

H. J. D. Smith

(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.

[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				

NAME

Johnson Almer Line.

REGIMENTAL NO.

3352073

RANK

Pte

ENLISTED AT

Regina Sask
Jun 13/18

PROMOTIONS, &c.
AND DATE

DATE

IF SERVED PREVIOUSLY, STATE UNIT, &c.

Nil

MARRIED, WIDOWER, OR SINGLE

Single

NEXT OF KIN

Johnson Andrew

RELATIONSHIP

father

ADDRESS OF

Box 113 Asquith Sask

ASSIGNMENT OF PAY \$

C.

TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

No

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &C.

NATURE E.G. ABSENCE, PROMOTION, &C.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &C.
	NO.	DATE	
<i>W.A. 3m. 3/7/18 8m 8/7/18 184</i>			<i>3/7/18</i>
<i>M. Dwoop Rev. 16/8/18 528 16/8/18</i>			<i>16/8/18</i>
<i>E.H.K. 27/9/18 to 31/10/18 331 28/9/18</i>			<i>28/9/18</i>
<i>" " to 15/11/18 499 26/10/18</i>			<i>26/10/18</i>
<i>Rula B.L. 8-1-18 8 8-1-18</i>	<i>8</i>	<i>8-1-18</i>	

DISCHARGED JAN 9 1919
DEMOBILIZATION C.E.F. R.O. 1323

K. J. D. Prime
MAJOR
C.C. SASKATOON DETACHMENT, 1ST DEPOT BATT'N SASK. REGT.

Bo

1477

Surname

Christian names

Regtl. No.

Unit

Rank

H. Q.

M. D. No.

T. O. S.

D. O. Pt. II

S. O. S.

Reason

Auth.

Next of kin

Address

Relationship

Also notify:

BORN—Place

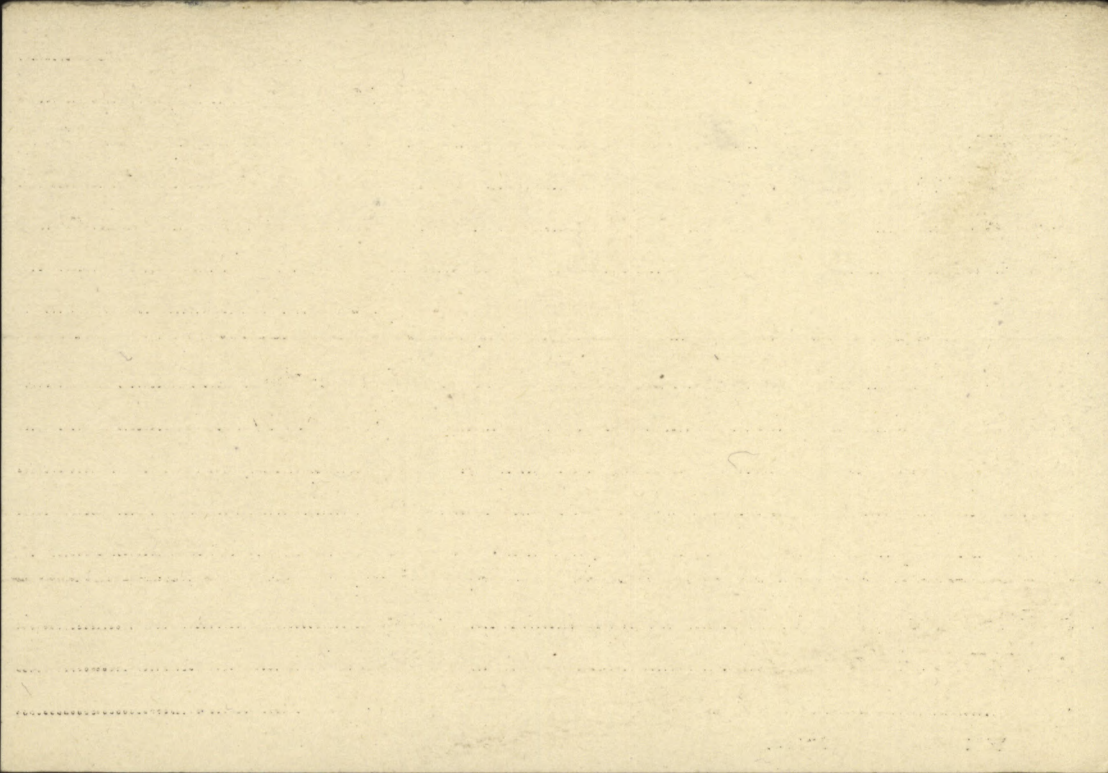
ATTESTED—Place

O/S

Date

Date

R/C



28-8-196
Military District No. 12
JAN 24
LP

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. 3352073	
2 Rank. Private	
3. Name. Johnson Almer Line	
4. Unit. 1st Depot Bn, Sask Regt	
5 Date of Discharge JAN 9 1919	Place Saskatoon Sask.
6 Reason for Discharge Demobilization	
7. Authority. C. S. F. R. O. 1328 Ba 10 79	
8. Proposed Residence after Discharge Asquith Sask Bn	
9. CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. 29 Almer Line Johnson Signature of Soldier.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. Place Saskatoon Sask Date January 9th 1919 R- Signature T. J. Dimie Major O.C. Saskatoon Detachment, 1st Depot Bn (O. C. Discharging Unit.)	

27-8-190

SHORT FORM

PROCEEDINGS ON DISCHARGE

(Demobilization)

1. No. 257553	
2. Rank Private	
3. Name William James	
4. Unit 1st Battalion	
5. Date of Discharge 10th Dec 1918	
6. Reason for Discharge	
7. Authority	
8. Proposed Residence after Discharge	
CERTIFICATE TO BE SIGNED BY SOLDIER	
I hereby acknowledge that at the underlined place and date I received my discharge Certificate	
M. S. W. 1918	
Signature of Soldier	
CONFIRMATION	
The discharge of the above named man is hereby confirmed	
Place	
Date	
Signature	
(G. C. Discharge Unit)	

LIST OF DISCHARGE DOCUMENTS

1	Discharge certificate	DD Form 1300
2	Casualty certificate	DD Form 1300
3	Form of bill receipt	DD Form 1300
4	Final discharge report	DD Form 1300
5	Regimental discharge report	DD Form 1300
6	Medical report	DD Form 1300
7	Dental history sheet	DD Form 1300
8	Prescriptions of medical history	DD Form 1300
9	Medical history sheet	DD Form 1300
10	Outstanding items requiring documents are indicated	DD Form 1300
11	Last pay certificate	DD Form 1300
12	Casualty form	DD Form 1300
13	Final discharge sheet	DD Form 1300
14	or Particulars of Discharge	DD Form 1300
15	Attestation Paper, Diplomas	DD Form 1300

LIST OF DISCHARGE DOCUMENTS.

~~Attestation Paper, Triplicate~~	Militia Form W. 23
3 or Particulars of Recruit.....	Militia Form W. 133
1 Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
1 Casualty Form.....	Militia Form W. 54 or A.F.B. 103
1 Last Pay Certificate.....	Militia Form W. 44
~~Certificate that missing documents are unobtainable~~	
1 Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
~~Proceedings of Medical Board~~	M.F.B. 227, A.F.B. 179 or A.F.A. 45
1 Dental History Sheet.....	Militia Form B. 465
1 Medical Report.....	M. F. W. 129 or D. M. S. 1375
~~Regimental Conduct Sheet~~	Militia Form B. 263
~~Company Conduct Sheet~~	Militia Form B. 263a
1 Discharge certificate	M.F.W. 39a
2 Casualty cards	M.F.W. 71
1 Form of will receipt	M.F.W. 82
1 Training history sheet	M.F.W. 113
1 Proceedings on discharge	M.F.B. 218a

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 3352073 Rank Pte. Name Johnson A.L.
Corps I.D.B.S.R. who was* Discharged
On 9-1-19 191... to 8-1-19 191...
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 8-1-19 191...
to 9-1-19 191... the inclusive date of transfer or discharge. R.H.I. 8-1-19

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Balance Cr. from prev. month.....	12	80
Advances } No.			Reg'tl. Pay..... 2 days at \$. 1 c.....	2	
Cheques } No.			Field Allow..... 2 days at \$. 10 c.....	20	
Assigned Pay and Sep'n Allee. No.....			Separation Allowance* (Monthly).....		
Other charges.....			Other Allowances*... <u>Clothing</u>	35	00
Payment on transfer or discharge No. <u>192-286</u>	57	00	Other Credits*.....		
Bal. Cr. (to be paid by the new unit).....			Bal. Dr. (to be deducted by new unit).....		
Total.....	57	00	Total.....	57	00

*Give particulars.

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

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment..... 13-6-18
(2) if married and if a Separation Allowance Card has been submitted.....
(3) cause of discharge..... Demob/ authority..... D.O.#9
(4) authority for transfer.....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date 9-1-19

Place Saskatoon Sask.

SASKATOON DETACHMENT, Lt. & Paymaster
1st Depot Battalion Sask. Regiment,
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster, triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

1917-1918

1. The following is a list of the names of the members of the Canadian Contingent Expeditionary Force, 1917-1918.

2. The names are arranged in alphabetical order.

3. The names are arranged in alphabetical order.

4. The names are arranged in alphabetical order.

5. The names are arranged in alphabetical order.

6. The names are arranged in alphabetical order.

7. The names are arranged in alphabetical order.

8. The names are arranged in alphabetical order.

1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10

9. The names are arranged in alphabetical order.

10. The names are arranged in alphabetical order.

11. The names are arranged in alphabetical order.

12. The names are arranged in alphabetical order.

13. The names are arranged in alphabetical order.

14. The names are arranged in alphabetical order.

15. The names are arranged in alphabetical order.

16. The names are arranged in alphabetical order.

17. The names are arranged in alphabetical order.

18. The names are arranged in alphabetical order.

19. The names are arranged in alphabetical order.

20. The names are arranged in alphabetical order.

Date JAN 9 1919

To:-

O.C. Saskatoon Detachment
Saskatoon Sask.,

I acknowledge having received my will M.P.W. 82

A L Johnson
Signature of soldier

