

5 Batt. CFA

Description of Arthur H. Marks on Enlistment.

Apparent Age 20 years 11 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. 2 ins.

Chest measurement: (Girth when fully expanded 36 1/2 ins. Range of expansion 1 1/2 ins.)

Complexion Medium

Eyes Blue

Hair Dark Brown

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

3 Wounds l. arm
2 " rt. arm
Circular scars beh. neck

[Handwritten signature]

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* fit for the Canadian Over-Seas Expeditionary Force.

Date 3rd Sept 1914.

Place Val Carber

[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.

Arthur Marks 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] (Signature of Officer)

Date Sept 26th 1914.

Triplicate

ATTESTATION PAPER.

No. C41094

C41094

Folio. 466

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Arthur Marks
2. In what Town, Township or Parish, and in what Country were you born?..... Liverpool England
3. What is the name of your next-of-kin?..... Sister Alice Marks
4. What is the address of your next-of-kin?..... 23 Mount Pleasant Liverpool
5. What is the date of your birth?..... Oct 18th 1894
6. What is your Trade or Calling?..... Plans Turner
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?..... No
10. Have you ever served in any Military Force?..... Yes 17th Hussars
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

Arthur Marks.....(Signature of Man).

[Signature].....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur Marks, 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.

Arthur Marks.....(Signature of Recruit)

Date Sept 26th 1914. [Signature].....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Marks, 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.

Arthur Marks.....(Signature of Recruit)

Date Sept 26th 1914. [Signature].....(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 Quebec this 26th day of September 1914.

[Signature].....(Signature of Justice)

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

[Signature].....(Approving Officer)

REGIMENTAL DOCUMENTS

010
195-19

NAME MARKS ARTHUR

REGT. NO. 41094

UNIT 45th Bty.

H. Q. FILE NO.

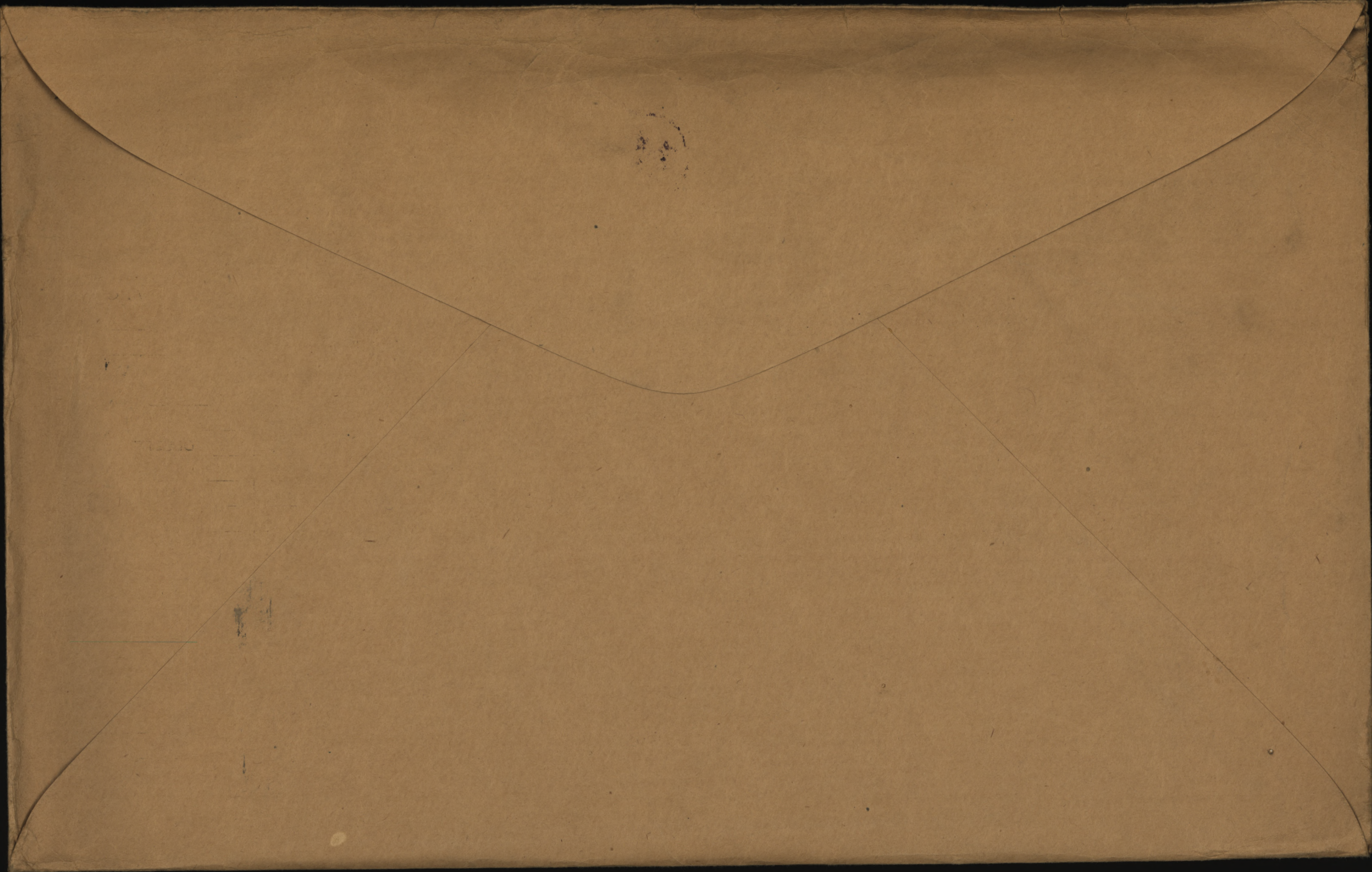
S

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)	17-12-1911	Medical Officer			DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
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)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				06601	DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category <u>Demob</u>
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1 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)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3225)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2 <u>Music</u>					
1 <u>CD 3</u>					44 - 30
1 <u>pass book</u>					27-30
1 <u>R-122</u>					2.30
1 <u>IP 149</u>					

H

M

H



922
W 1094
11-2-15
Number.. 4.10.94..... Rank.. *AW*

Surname.. *M.A.R.K.S.*

Christian Names.. *Arthur*

Unit.. *C.F.A.*..... Theatre of War.. *France*

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

Remarks.....

Latest Address.. *E. D. Regina Sack*

Roll No. *B. Page 1497*

~~1094~~
~~11-2-15~~
~~France~~

G. a 2 6 5 6 2 DEM 28 1921

B. W. M. }
+ V. } Petd 22/8/21

R

DESP. DEC 17 1921
REG. NO. 65929

NAME

Marks

A

REGT'L No 41094

RANK AND CORPS

Div.

2nd Bde C. P.A.

H. Q. FILE No. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 513	Rep from Base	1-3-17	Admits Hoop N.S. <i>Can't</i>
a 516.	No 2 Can. Field Amb	1-3-17	Cont. Back. Kichby
a 578.	Repaired Unit	7-3-17	Contusion Back <i>Lynde</i>
a 490 ⁽³⁾	14 Stat. Boulogne	23/2/19	influenza
a 497 ⁽³⁾	Discharged	5/3/19	"

SURNAME.

Marks

"MM"
auth. L.G. #31173
11-2-19

44

CARD NO.

CHRISTIAN NAMES

Arthur

S.O.S. Rec'd by 23-4-19
N.O. 127 of 7529. D.O.
FOLL. #4

REGL. No.

41094

RANK

Dr.

UNIT 2nd. C. F. A. Bde.

FORMER CORPS

17th. Huss.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Marks, Miss A.

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

23 Mt. Pleasant, Liverpool,
Eng.

COUNTRY OF BIRTH

England Liverpool

DATE

Oct. 18th. 1894

PLACE OF ATTESTATION

Valcartier, P.Q.

DATE

Sept. 22nd. 1914

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

M. F. W. 22. 100M. -11-16. H. Q. 17-2-39-339.

157-10-14 - 36/8

R/C. 21-4-19 309 Dvr
92

~~From Quebec, P. Q. d. d.~~ "Ivernia" 3-10-14

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Piano Tuner

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

20

YEARS

11

MONTHS

HEIGHT

5

FEET

2

INCHES

CHEST MEASUREMENT

36 ¹/₂

INCHES

EXPANSION

1 ¹/₂

INCHES

COMPLEXION

Med. ²

EYES

Blue

HAIR

It, Brown

DISTINGUISHING MARKS

3 Vacc. left arm. 2 Vacc. R. Arm. Circular scar rt. neck.

MEDICAL EXAMINATION.

PLACE

Valcartier, P. Q.

DATE

Sept, 3rd 1914

Present Address: - Not Stated.

Casualty Card

Name MARKS, Arthur Rank Driver. Reg. No. 41094.

Unit 2nd. Brigade, C.F.A.

Mrs. Alice Marks,

Next of Kin 23, Mount Pleasant, Liverpool, England.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
1-3	Admitted to Hospital.	N.S.	N.S.	A513.		
1-3	No. 2. Can. Field Ambulance.	Cont. Back.				
			Kick by horse.	A516.		
7-3	Rejoined Unit.		do	A517.		

No. *C 4194* RANK *Plt*

NAME *Mark A*

T. O. S.

UNIT # *5 Battery, 2nd Brigade, C. I. A. - C. C. I.*

M. D. *Val*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1914</i> <i>Aug 29</i>	<i>1914</i> <i>Sept 21</i>	<i>✓</i>		
<i>Sept 22</i>	<i>Oct 31</i>	<i>✓</i>		

UNIT SAILED
OCT 3 1914



Surname

Christian Name or Names

Reg. No.

Marks.

A.

41094.

Rank

Unit

Co.

Troop

Batty

Drv.

2. Brig. C. F.A.

Hospital

Date of Admission

Transferred

2. C. F. Amb.

Hosp.

1.3.17.

14. Stat. Boulogne

Hosp.

Hosp.

Hosp.

Diagnosis

N.S. Contus back (kick by horse)

(1) Later Diagnosis (if changed)

Influenza

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

62.16.3.17 A513

Reg unit 9.3.17

REMARKS

22.3.17. A516 R.F.B. to Hosp. 1-3-17.

27.9.17 A518

Dis 5.3.19

4.3.19 A490-3

12.3.19 A497³

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

42

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. **41094** (Rank) **Driver**

Name (in full) **MARKS, Arthur.** enlisted in

the **5th. Battery C.F.A.**

CANADIAN EXPEDITIONARY FORCE at **Quebec, Que.** on the **26th.**

day of **September** **14.**

HE served in **ENGLAND AND FRANCE**

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**

Height **5 feet 3 inches**

Complexion **Brown**

Eyes **Blue**

Hair **Light brown**

A Marks
Signature of Soldier

Marks or Scars

Scar back of neck.

J. Fisher
Issuing Officer
Officer in Charge Discharge Section, Dispersal Station
Rank

Date of Discharge **23rd April 1919**

Appointment

Signed at _____ this _____ day of _____ 19

in Military District No. _____

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

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				
5-1-18	Went	franked 1st days leave		4-1-18	B213 P 11 Ord 5.
26-1-18	"	Rejoined from leave		26-1-18	B213 P 4 Ord 12.
PROCEEDED TO ENGLAND					
23-2-19	14845/14th	Influenza (mild) adm	14845/14th	23-2-19	W. 3074/N 8536.
18-2-19	3 Cdn F.C.	do adm. 10-2-19 to	50 CCS.	18-2-19	A. 6335/N 8598.
22-2-19	50 CCS.	Influenza. adm 18-2-19 to	A.T. 15.	21-2-19	A. 6461/N 8683.
5-3-19	14845/14th.	Influenza to C.L. 15-19	Ambleton.	5-3-19	W/9936/N 9317.
22-3-19	Cze Lettaw.	Proceeded to England.		22-3-19	N.B. 47 D.F.O. 23 4/1919.
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><i>[Signature]</i> ADJUTANT H. OLYMPIC SOUTHAMPTON 15.4.19</p> </div> <div style="width: 45%; text-align: right;"> <p><i>[Signature]</i> Lieutenant for Lieut-Col M.A.P.</p> </div> </div>					
7-5-19	O/S	T.O.S. DD#4	Montreal	15-4-19	D.O. Pt. II-127
7-5-19		S.O.S. DD#4 Demob.	"	23-4-19	D.O. Pt. II-127 R.O.1420

[Signature]
Lieutenant,
Assistant Adjutant,
District Depot No. 4.

Certified Correct Records *Rh 2 291**R2a 1 5816*
Army Form B. 103.*Ref File Kly 102/290*

Casualty Form—Active Service.

Regiment or Corps *5th Battery*Regimental No. *C41094* Rank *Dr.* Name *Marks, Arthur.*Enlisted (a) *13 Aug 14* Terms of Service (a) *Duration of War* Service reckons from (a) *13 Aug 14*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) _____

Date	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.	<i>Embarked Canada 29-9-14</i>		Remarks taken from Army Form B, 213, Army Form A, 36, or other official documents.
	Date	From whom received		Place	Date	
			<i>Embarked</i>	<i>Avonmouth</i>	<i>11.2.15</i>	
<i>28/11/15</i>	<i>O.P. Unit</i>		<i>Proceeded on leave to</i>	<i>England.</i>	<i>29/11/15</i>	<i>B213. P.2.C.42. 11-12-15.</i>
<i>12/12/15</i>	<i>"</i>		<i>Returned from " "</i>	<i>" "</i>	<i>4/12/15</i>	<i>B213. P.2.C.43. 18/12/15.</i>
<i>7-1-17</i>	<i>"</i>		<i>Granted leave of absence</i>	<i>"</i>	<i>5-1-17</i>	<i>B213 Pt II Ord no 9.</i>
<i>3.2.17</i>	<i>"</i>		<i>Rejoined from leave</i>	<i>"</i>	<i>19.1.17</i>	<i>B213 P II Ord 22d 13.2.17</i>
<i>10.2.17</i>	<i>"</i>		<i>Awarded Good Conduct Badge</i>	<i>"</i>	<i>22.9.16</i>	<i>B213 P II Ord 29d 23.2.17</i>
<i>3.3.17</i>	<i>"</i>		<i>To hospital</i>	<i>not stated</i>	<i>1.3.17</i>	<i>B213 Des 4 20 d 12.3.17</i>
<i>4.3.17</i>	<i>26th Amb Unit</i>		<i>Contus back (kicked by horse)</i>	<i>adm</i>	<i>1.3.17</i>	<i>A36 E 2893 Des 4 21 d 19.3.17</i>
<i>10.3.17</i>	<i>Unit</i>		<i>Rejoined from hospital</i>	<i>Field</i>	<i>7.3.17</i>	<i>B213 Des 4 22 d 19.3.17.</i>
<i>11.3.17</i>	<i>26th Amb Unit</i>		<i>Contus Back (kicked by horse)</i>	<i>to duty</i>	<i>7.3.17</i>	<i>A36 Des 4 23 d 24.3.17</i>
<i>1-9-17</i>	<i>Unit</i>		<i>Proceeded to 1st Army Rest Camp.</i>		<i>28.8.17</i>	<i>B213. Des 4 95.</i>
<i>15.9.17</i>	<i>Unit</i>		<i>Rejoined from 1st Army Rest Camp</i>		<i>9.9.17</i>	<i>B213 Des 4 97</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.

E-26075

Rank and Name MARKS, Arthur,
 Regimental No. C-41094
 Unit 2nd Bgde
 Date of enlistment Sept 26th., 1914.
 Place of birth England
 Married (Yes or No) No
 If in Permanent Force

Name and Address of Next-of-kin
 Alice Marks (sister)
 23, Mount Pleasant, Liverpool,
 England.

Date and place of discharge
 Reason for discharge
 Character on discharge

N.I.E. R. S. NS. 7360
 File R. 1
 Category 1
Law

Promotions or appointments

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				
1-8-15	2 ^d Bde	On Nom Roll	France	1-8-15	Nom Roll
11-12-15	Proceeded to Eng on leave	..	27-11-15	Part II O 4E.
18-12-15	Returned from leave	..	7-12-15 43.
25.8.17	" "	Awarded Good Conduct Badge		27/9/16	" " 29.
16.3.17	" "	Admt. to Hospital	Field	1/3/17	Ch A 513 ?
24.3.17	" "	No r E F Amb	"	1/3/17	" A 516 Conduct Back Risk by Horse
27.3.17	" "	Rejoined Unit (M. M.)	"	7/3/17	" A 518 "
25-3-19	89	Proceeded to England	89	22-3-19	— 23
31-3-19	AWing CCC	705 pending R.T.C	Dvr B-shott	20-3-19	— 13
		To Canada	49-F-101	14-4-19	
15-4-19	AWing CCC	Sos. on Proc. to Can.	B'shott-	" " "	PI O 18. ✓

Date

Place

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

From whom received

Report

Date

REMARKS
Taken from Official Documents

Handwritten notes in red ink:
1/10/1918
Went to
France

Handwritten mark in red ink:
2

REMARKS
Taken from Official Documents

Faint, mostly illegible handwritten text in blue ink, likely bleed-through from the reverse side of the page.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block letters) MARKS, A
 REGIMENT 48 How. Bty RANK Sgt No. 41094
 Date of Examination in England 11-4-19 Date of Examination in France _____

1. This form will be made out for each individual at the time of demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



6-F

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2, 4, 5, 6, 10, 21, 30, 31
2. EXTRACTIONS 3
3. CROWNS 11
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England
- (c) In France yes

R. Simpson Capt
 A. D. D. S. M. 2. No. 4

BRAMSHOTT CAMP
 HANTS

Signature of Dental Officer J. H. Heederser Capt

PRINTED IN
WEST VIRGINIA

1. CANADIAN ARMY DENTAL OFFICERS
DENTAL CERTIFICATE FOR MOBILIZATION

THE DENTAL OFFICER
OF THE CANADIAN ARMY
IS AUTHORIZED TO
ISSUE THIS CERTIFICATE
TO DENTAL OFFICERS
WHO ARE BEING
MOBILIZED FOR
SERVICE IN THE
CANADIAN ARMY.

NAME OF DENTAL OFFICER
RANK AND BRANCH
REGIMENT OR UNIT
DATE OF EXAMINATION
PLACE OF EXAMINATION

EXAMINED BY
SIGNATURE OF DENTAL OFFICER
OFFICE OF THE DENTAL OFFICER
ADDRESS

1. Name of Dental Officer
2. Rank and Branch
3. Regiment or Unit
4. Date of Examination
5. Place of Examination

This certificate is valid for the purpose of mobilization for service in the Canadian Army.

MEDICAL HISTORY SHEET.

41094
466

Surname Marks Christian Name Arthur

Examined	on <u>3</u> day of <u>Sept</u> 191 <u>4</u>	Approved by	
	at <u>Valcarlos</u>		
Birthplace	City or Town <u>Liverpool</u>	Rank	M.O.
	County <u>England</u>		
Apparent age	<u>26 yrs 11 mo</u>	Date	EXAMINED FOR RE-ENGAGEMENT,
Trade or occupation	<u>Piano Tuner</u>	Fit or Unfit	M.O.
Height	<u>5</u> Feet <u>2</u> Inches.		M.O.
Weight	<u>Complex. Brown</u> <u>Eye Blue</u> <u>Hair D. Brown</u> <u>115</u> lbs.		M.O.
Chest measurement	Minimum <u>35</u> inches.		M.O.
	Maximum expansion <u>1 1/2</u> inches.		M.O.
Physical development			M.O.
Small-Pox Marks			M.O.
Vaccination Marks	Arm Right Left	Date	VACCINATIONS.
	Number <u>2</u> <u>3</u>		
When Vaccinated last			M.O.
(a) Marks indicating congenital peculiarities or previous disease	<u>Circular scar behind neck</u>		M.O.
(b) Slight defects but not sufficient to cause rejection		Date	ANTI-TYPHOID INOCULATIONS, ETC.
		Result	M.O.
			M.O.
			M.O.

Enlisted on 26 day of Sept 1914 at Quebec

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>5th Bn</u> <u>2nd Brigade</u>	<u>41094</u>		<u>26-9-14</u>
Transferred to.. ..	<u>2nd Bn</u> <u>1st Regt</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.

M. F. B. 313.
60M-8-14.
H. Q. 1772-89-439.

Entries in Red Ink made from Attestation Sheets.
JUL 24 1915
W. R. WARD,
Colonel in Charge of Records,
Canadian Contingents, London.
for D. D. M. S.

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

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. 41094 Rank Driver Surname Markes
(Given name in full)
Arthur
 Unit or Corps H.B. Bty Birthplace Liverpool Eng.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 130 lbs. Height 5 ft. 2 in. Colour of Eyes Blue
 Nutrition Good
 Pulse 76 Regular
 Condition of arteries soft
 Vision Rt. 6/12 Left 6/12
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
3 vaccination scars
1st and 2nd vaccinated
scars rh arm
Boil scar back of
neck 1912

Opinion as to general health and physical condition Good

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 no Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of mentality no Muscular System no Digestive System yes
 Osseous and Joint System no Any other general condition yes

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.

(X) Influenza 23/2/19 Good recovery
Typhoid Fever 1913 Good recovery

[Handwritten signature]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramshott (Overseas)

Date 9/2/19

Signed D. G. Jameson M.O.
Capt. Caine

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 Dur. A. Marks

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

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

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

[OVER]

NAME MARKS Arthur *Dr*

Regimental No. *94*

039
C 41094

Name and address of next-of-kin

Unit 2nd Brigade

Alice Marks (Sister)

Date of enlistment Sept. 26th, 1914

23, Mount Pleasant, Liverpool

Place of birth England

England

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$ *NIL*

Reason for discharge

To whom payable

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
22.9.14	31.10.14	40	1.00	40-	40	.10	4-		44-			40-					
1.11.14	30.11.14	30	"	30-	30	"	2-	4-	37-			25-					
1.12.14	31.12.14	31	"	31-	31	"	3 10	12-	46 10			30-					
1.1.15	31.1.15	"	"	31-	"	"	3 10	16 10	50 20			25-			25.20		
1.2.15	28.2.15	28	"	28-	28	"	2 80	25 20	30 80						56.00		
	March	31	"	31	31	"	3 10		34 10			9			9 -	89 10	
	April	30	"	30	30	"	3		33 -			3			3	111 10	
	May	31	"	31	31	"	3 10		34 10			3			3	142 20.	
	June	30	"	30	30	"	3		33 -			9			9	166 20.	
	July	31	"	31	31	"	3 10		34 10			<i>100</i> 3			103	97 30	Ward Loan.
								6 57								6 57	Diff. in L.
																103 87	
	Aug	31	1.00	31	31	.10	3 10	6 57	40 67			5 66			5 66	132 31	
	Sep.	30	"	30	30	"	3		33			5 42			5 42	159 89	
	Oct.	31	"	31	31	"	3 10		34 10			5 29			5 29	188 70	
	Nov.	30	"	30	30	"	3		33			102 61			102 61	19 09	X Error 10000
	Dec	31	"	31	31	"	3 10		34 10			2 61			2 61	50 58	
	Jan	31	"	31	31	"	3 10		34 10			7 84			7 84	76 84	
																376 43	76 84

039
41094

Mark Arthur

Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate			Amount	No.					
				497.			49 40	657 553 27			376 43			376 43 7684	
Feb.		29	1.00	29 -	29	10	2 90	31 90			5 23			5 23 103 51	
May		31	.	31 .	31	.	3 10	34 10			7 86			7 86 129 75	
							92 92								
				557				5570	657 619 27		389 52			389 52 129 75	

100% Error in Balance
Dec 1915. Adjusted
nearobreq. Nov. 1916.

11094 G. Marks. a.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS						
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT									
			\$	C.			\$	C.			\$	C.																									
			98010												659	98667							3567	2076	5913.	46252	57808	40859.									
Mar 31	31	1/10	3410												3410	7134	2214	76.3					533.	262.			1046	43273	275.								
Apr 30	30		33.												33.		179	769	73					261.			261	46262	240.								
May 31	31		3410												3410	122	244						261.			261	494	11	253.	239.	11						
June 30	30		33.												33.	231	220						268			536	521	45	240.								
July 31	31		3410												610	3410	286	76					268				561	95	285.								
Aug 31	31		3410												3410	348	246	464	64				268	264			8.03	588.02	300								
Sep 30	30		33.												33.	586	508						268				16.07	604.95	315.								
			1215.50													1264	1228.	14						268				623.22	604.95								

Two No. 9. 2nd side 4th Sep 1916
AR 1578. 6th 6th in error

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	AL	ENG.
Oct 1	Bal Total								604.95	315.		
Oct 1/31	Guard	34.10		AR 3944. 9/9/14 2 nd side	4.14							
				AR 438 8/9/14	2.68							
				AR 498 24/9/14	2.68				626.53	330		
		34.10			12.50							
Nov 1/30	Guard	33.		AR 861 5.10.14	3.57							
				AR 934 20.10.14	4.46							
		34.10		991 1.11.14	4.46				681.16	360		
		64.10			12.49				34.10			
				AR 1102 8/12/14 2 nd side	8.92				415.26			
				" 1045 19-11-14	3.57				4039			
				AR 60886 5-1-18	24.33				674.87	375		
		34.10		Final 580 30-7-17	3.57				674.87	375		
		34.10			40.39							
				AR 716 4/11/18	97.33							
				" 1173 15/11/18	4.46							
				" 1152 23/12/17	8.92							
				" 1320 4.2.18	4.46							
		3080			115.17				590.50			
		3080			115.17							

MONTH Particulars Cr.1 Cr.2 Particulars Dr.1 Dr.2 Dr.3 Dr.4 Balance Def. Pay all

613.00/405.

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME:- MARKS Arthur				
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER:- 41094				
AMOUNT:-		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT				
NAME, ADDRESS, RELATIONSHIP & 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>Gnr</i>		
				UNIT AND TRANSFERS				
				ORIGINAL UNIT:- <i>2 Bde CFA</i>				
				DATE ACCOUNT FIRST OPENED:-				
				AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D		
						<i>2 Bde CFA</i>		
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK								
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	
<i>27/3 8035</i>		<i>A. King</i>	<i>13 00</i>					
				DAILY RATES OF PAY AND ALLOWANCES				
				AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
				<i>Gnr</i>	<i>1</i>	<i>-</i>	<i>-</i>	<i>10</i>

PARTICULARS OF RENDERING NON-EFFECTIVE: *Disb Cdn 27/3/19 CR 204 A. Bala 27/3 Bala Rdy Bal L PC CR 893 63*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>											
<i>Mar</i>	<i>B.F.</i>								<i>613</i>	<i>-</i>	<i>405</i>
<i>Apr</i>	<i>G.P.</i>	<i>33</i>		<i>AR 33 11/4/18 2 Bde</i>	<i>4 46</i>						
				<i>✓ 93 21/4/18</i>	<i>3 57</i>				<i>637 97</i>	<i>420</i>	<i>-</i>
		<i>33</i>			<i>8 03</i>						
<i>May</i>	<i>--</i>	<i>34 10</i>		<i>✓ 136 8/5/18 --</i>	<i>4 46</i>						
				<i>✓ 194 16/5/18 --</i>	<i>3 57</i>				<i>664 04</i>	<i>435</i>	
		<i>34 10</i>			<i>8 03</i>						
<i>June</i>	<i>GP</i>	<i>33</i>		<i>AR 50 1/6/18 --</i>	<i>4 46</i>						
				<i>✓ 316 20/6/18 --</i>	<i>3 57</i>				<i>689 01</i>	<i>450</i>	
		<i>33</i>			<i>8 03</i>						
<i>July</i>	<i>GP</i>	<i>34 10</i>		<i>✓ 355 3/7/18 1 Bde</i>	<i>4 46</i>						
				<i>✓ 369 13/7/18 1 Bde</i>	<i>3 57</i>				<i>715 08</i>		
		<i>34 10</i>			<i>8 03</i>						
<i>Aug</i>	<i>GP</i>	<i>34 10</i>		<i>AR 7 26/8/18</i>	<i>3 57</i>				<i>749 18</i>		
				<i>✓ 481 24/8/18</i>	<i>3 57</i>				<i>742 04</i>		
		<i>34 10</i>			<i>7 14</i>						
<i>Sept</i>	<i>B. Pay</i>	<i>33</i>		<i>147 2 C.F.A 18.9</i>	<i>3 57</i>						
	<i>CM. 9203 - charged in front</i>		<i>2 62</i>	<i>540</i>	<i>3 57</i>						
	<i>Ab. 1 2 C.F.A. mar/16</i>		<i>2 62</i>						<i>770 52</i>	<i>not paid</i>	
		<i>33</i>	<i>2 62</i>		<i>7 14</i>						
<i>Oct</i>	<i>Gnr</i>	<i>34 10</i>		<i>AR 826 24/10 2 C.F.A.</i>	<i>7 46</i>				<i>997 16</i>	<i>510</i>	
		<i>34 10</i>			<i>7 46</i>						
<i>Nov</i>	<i>Gnr</i>	<i>33</i>		<i>AR 938 2/11 2 C.F.A.</i>	<i>3 73</i>						
				<i>" 100 14/11 "</i>	<i>3 73</i>						
				<i>" 110 4/12 "</i>	<i>16 79</i>						
<i>Dec</i>	<i>Gnr</i>	<i>68 20</i>							<i>874 11</i>	<i>555</i>	
		<i>101 20</i>			<i>24 25</i>						

NUMBER

41094

RANK

Gm

NAME

MARKS A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919				Blc forward	-	-			874 11	555	
				A.P. 1268, 4/1/19 2 C.F.A.	3 77						
				1358 4/1	3 73						
				A.P. 1575. 11/2	6 53						
Feb	Gm	64 90		" 11116 7/3 Bontyne.	4 66				966 63		
	Int Defa Pay.	46 31			18 89						
				AR 9836 25/3 Bnt	73 00				893 63		
		111 21			91 69						
				AR 1122 8/4 Bnt Enigma	9 73				883 90		
					9 73						
				S.O.S. S.L. 49 14/4/19							

10-5-45
D.A. FH
Occupational Group No. 13
P
I

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. H1094

2. Rank. Drvr

3. Name. Marks Arthur

4. Unit. 48th Bty

5. Date of Discharge 23-4-19 Place Montreal

6. Reason for Discharge Demob

7. Authority. R.O. 1420 DD#4 D.O. Pt. II-127.

8. Proposed Residence after Discharge Regina Sask

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. B39 Montreal

April 23 1919

a Marks
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date April 23 1919

Signature J. Fisher
Lieutenant
Order to Discharge (O. C. Discharging Unit.)

SHORT FORM
 PROCEEDINGS ON DISCHARGE
 (Demobilization)

1. No.	H1044
2. Rank	Private
3. Name	James H. [unclear]
4. Unit	4th [unclear]
Date of Discharge	March 1946
Place	London
Reason for Discharge	General
Proposed Residence after Discharge	London
Authority	Regimental [unclear]
CERTIFICATE TO BE SIGNED BY SOLDIER I hereby acknowledge that at the indicated place and date I received my Discharge Certificate	
Signature of Soldier	[Signature]
CONFIRMATION The discharge of the above named man is hereby confirmed.	
Place	[Signature]
Date	[Signature]
Signature	[Signature]
(O. C. Discharging Unit)	

LIST OF DISCHARGE DOCUMENTS

Medical Form W. 12	Attestation Paper, Triplicate
Medical Form W. 12	or Particulars of Incident
Medical Form W. 12 or A.F. B. 12	Field Conduct Sheet
Medical Form W. 51 or A.F. B. 100	Company Form
Medical Form W. 44	Last Day Certificate
	<i>Verify that missing documents are undeniably</i>
Medical Form B. 212 or A.F. B. 110	Medical History Sheet
M.R.B. 201, A.F. B. 110 or A.F. B. 60	Proceedings of Medical Board
Medical Form B. 400	Dental History Sheet
M. F. W. 129 or M. F. 200	Medical Report
Medical Form B. 200	Regimental Conduct Sheet
Medical Form B. 200	Company Conduct Sheet

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 179).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in a special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (S.D.S).
11. Equipment Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. ~~...~~ (Form M.F.W. 2595).

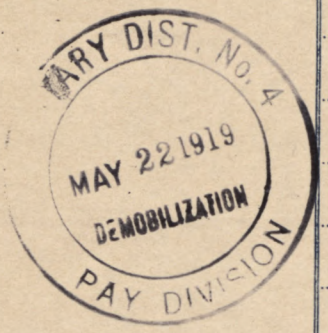
Group B
 Checked by No. 11
 Date 11 APR 1919

M1173
2-12

AUDITOR [Signature] PAYMASTER [Signature]

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

M. OR S.				REGT. NO.	41094	RANK	Em	NAME (IN FULL)	MARKS, A.
NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
ADDRESS		<i>Lot</i>	<i>18-4-19</i>	<i>20127 Supp 2 P. 10 73</i>	<i>Art F</i>				
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE	RELATIONSHIP			DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY	
<i>Nil</i>					<i>26-9-14</i>				
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE			
ADDRESS					<i>Nil</i>				
					PAYABLE TO				
					ADDRESS				
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE			
					DISCHARGED	PLACE	DATE	REASON	AUTHORITY
					<i>Montreal</i>		<i>23-4-19</i>	<i>Demol</i>	<i>80127 Supp 2 P. 10 73</i>



*U.S.G. Royal Bank
Empire Bank
Regina Sask*

MONTH	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		
	NO. OF DAYS	RATE		\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	NO.				DATE	\$	C.	\$		C.	\$
				<i>893.13</i>		<i>893.13</i>												<i>893.13</i>		<i>Cat Bal 2/9/19 PC 29/63</i>	
<i>1-4-19</i>			<i>70.00</i>															<i>893.13</i>		<i>Procl 2/9/19 6354</i>	
<i>29-4-19</i>	<i>29</i>	<i>110</i>	<i>3190</i>	<i>3500</i>		<i>13670</i>			<i>2391</i>		<i>487</i>	<i>500</i>	<i>1093</i>		<i>660</i>	<i>973</i>	<i>1037.13</i>	<i>660</i>	<i>289</i>	<i>28-4-19 as found</i>	
				<i>1030.53</i>														<i>973 as found</i>		<i>on by H.P.C</i>	
			<i>Other Credits</i>	<i>W.S.C.S.A.</i>	<i>Total</i>	<i>War Service Gratuity</i>					<i>Other</i>		<i>W.S.G. S.A.</i>	<i>Total</i>			<i>Soldier Dependant</i>				
			<i>420</i>		<i>420</i>						<i>70</i>		<i>70</i>	<i>70</i>	<i>350</i>					<i>812513</i>	
<i>7-5-19</i>											<i>660</i>	<i>6340</i>		<i>70</i>	<i>70</i>	<i>210</i>				<i>917071</i>	
<i>23-6-19</i>											<i>70</i>			<i>70</i>	<i>140</i>					<i>1078274</i>	
<i>23-7-19</i>											<i>70</i>			<i>70</i>	<i>70</i>					<i>1237492</i>	
<i>23-8-19</i>											<i>70</i>			<i>70</i>	<i>70</i>					<i>1537234</i>	
<i>23-9-19</i>											<i>420</i>			<i>420</i>							<i>ROW</i>

T

