

American.

No. 2009068

Folio.

ATTESTATION PAPER.
Canadian Engineers.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

24/12/18

- 1. What is your surname?..... **MORRISON.**
- 1a. What are your Christian names?..... **Clarence Sheldon.**
- 1b. What is your present address?..... **General Delivery, Chicago Ill. USA.**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **Hansboro Miss. U.S.A.**
- 3. What is the name of your next-of-kin?..... **Ida Morrison.**
- 4. What is the address of your next-of-kin?..... **Bennettsville, % Bennettsville Brick Co. South Carolina U.S.A.**
- 4a. What is the relationship of your next-of-kin?..... **Mother.**
- 5. What is the date of your birth?..... **July 10th, 1888.**
- 6. What is your Trade or Calling?..... **Telegraph Operator.**
- 7. Are you married?..... **Single.**
- 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 } **Yes.**
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. **No.**
- 14. If so, what was the nature of the disability? ..
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? **No.**
- 16. If so, what was the reason?.....

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

Clarence Sheldon Morrison

I, **Clarence Sheldon Morrison**, 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.

CS Morrison (Signature of Recruit)

Date **May 9th 1918** 191 . (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

Clarence Sheldon Morrison

I, **Clarence Sheldon Morrison**, 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.

CS Morrison (Signature of Recruit)

Date **May 9th 1918** 191 . (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

Toronto, Canada **9th** **May 1918**

before me, at..... this..... day of..... 191 .

M. S. M. J. (Signature of Justice)

Description of Clarence Sheldon Morrison on Enlistment.

Apparent Age.....**29**.....years.....**9**.....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.....**6 1/2**.....ins.

Chest measurement { Girth when fully expanded.....**35**.....ins.
 Range of expansion.....ins.

Complexion.....**4 Medium**.....

Eyes.....**Brown**.....

Hair.....**Brown**.....

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....**Meth.**.....
 Baptist or Congregationalist.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
 (Denomination to be stated.)

Hearing O.K. Nose & throat O.K.
 R.D. 20-80 L.D. 20-50

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.....**May 9th 1918**.....191.....**Willoughby M.O.**

Place.....**Chicago Ill. U.S.A.**.....**Ghose M.O.**

.....**McIntyre M.O.**.....
 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:—

CHICAGO

CERTIFICATE OF OFFICER COMMANDING UNIT.

Clarence Sheldon Morrison.

.....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.

Clarence Sheldon Morrison
 Lt.-Col., C. E. (Signature of Officer)
 U. C., Engineer Depot

Date.....**May 9th**.....1918.

66M 28-11-18.

DISCHARGE DOCUMENTS

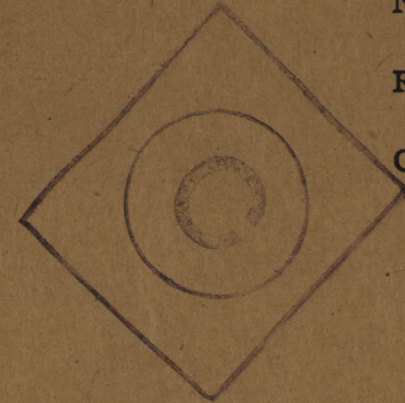
R. O. No.....

H. Q. No.....



- 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.....

Name MORRISON CLARENCE, S.
 Regt. No. 2009068 Rank Sp4
 Corps Engineer Training Depot.



SOS 19-8-18,

Deserted.

33895



MFB-259-1
 Dental history sheet-1
 AFB-12251

Telegrapher

NAME Morrison, Clarence Sheldon.

REGIMENTAL NO. 2009068

RANK

ENLISTED AT Toronto, Canada.

PROMOTIONS, &c.
AND DATE

DATE May 9th. 1918.

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE Single.

NEXT OF KIN Ida Morrison.

RELATIONSHIP Mother

ADDRESS OF Bennettsville, C/O Bennettsville Brick Co.,
South Carolina U.S.A.

ASSIGNMENT OF PAY \$ 20⁰⁰ C.

TO

ADDRESS

Same

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

H. Q. ✓

M. D. No. 2

Surname Morrison

T. O. S. 19

Christian names Clarence Sheldon

D. O. Pt. II of

Regtl. No. 2009068 Rank Sqr

S. O. S. Dis 19.8. 19 18.

Unit Can Eng Depo

Reason I. D.

Auth DO 164 of 2.10.18. Eng Depo

Next of kin Morrison Mrs Ida Relationship Mother

Address c/o Bennettsville

Also notify:

Brick Co, Bennettsville, S.C.

U.S.A.

BORN—Place U.S.A. Hansboro, Miss. Date July 10th 1888

ATTESTED—Place Toronto Ont. Date May 9th 1918

O/S R/C



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER

Macmillan, C.S.

REGIMENT

C.P.

RANK

Major

No.

2009018



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.

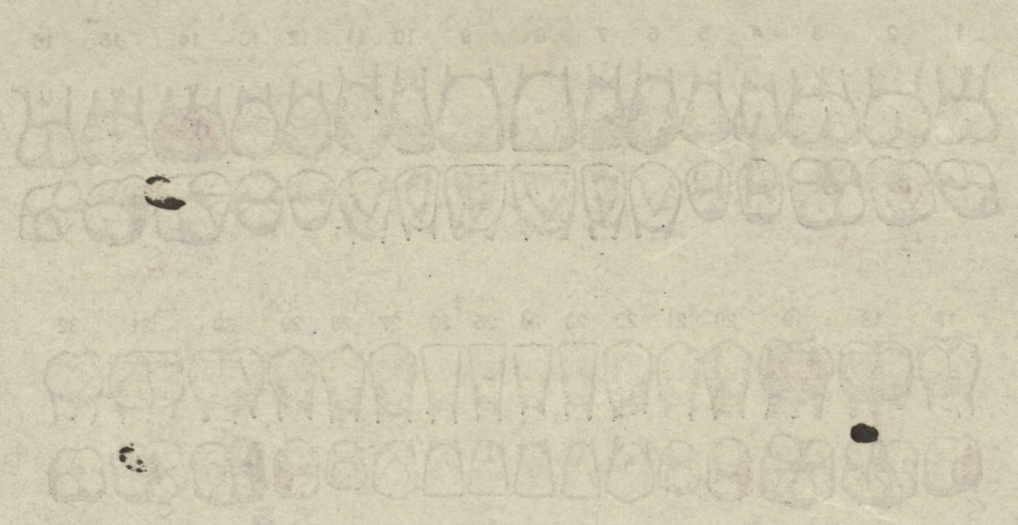
Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
												U	L	P			Gold	Porcelain				
	1918										2					2						
	7 22 / 8	8									2					14.19						C.P. 3. Incomplete.

BRITISH NORTH AMERICAN DEPARTMENT OF VETERINARY MEDICINE

Animal Name: _____ Date: _____



Number	Part of Animal	View	Remarks
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

INSTRUCTIONS

1. On examination the condition of patient should be noted on this form in red ink.

2. On first line of report record of name to be made in red ink.

3. Only such entries to be made on this sheet as will show condition of animal (e.g. fever, diarrhoea, etc.).

4. Condition of each animal.

5. Condition of district.

WATERBURY

BRITISH NORTH AMERICAN DEPARTMENT OF VETERINARY MEDICINE

2009068

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 Morrison Christian name Clarence S.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....

3. Consecutive number on schedule of men reporting for service (if he appears on it).....

4. Address (including street and number, if any)..... Bedford. Ind.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 9th day of July 1918 by the undersigned medical board sitting at Brockville Ont

5. Age as stated 30 Years — Months. 6. Apparent age 30 Years — Months

7. Height 5 Feet 7 Inches. 8. Weight 135 Pounds.

9. Chest measurement { Minimum 33 1/2 Ins. Maximum 35 Ins. 10. Complexion Medium { Eyes Brown Hair Dark

11. Physical development Fair { Good Fair Poor 12. Smallpox marks nil

13. Number of vaccination marks { Right arm Once Left arm nil 14. When vaccinated last Childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease nil

16. Slight defects but not sufficient to cause rejection nil

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 ATI

17. a) Vision R. 20 L. 60 (b) Hearing. R. n L. n

W.D. Johnson Captn. R.C.M.C. Elmer K. Russell Captn. R.C.M.C. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>17/7/18</u>		<u>R.M. Cairns</u> M.O.	<u>17/7/18</u>		<u>R.M. Cairns</u> M.O.
		M.O.	<u>25/7/18</u>		<u>R.M. Cairns</u> M.O.
		M.O.	<u>1/8/18</u>		<u>R.M. Cairns</u> M.O.

Joined day of 191 .. at ..

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Brockville</u>	<u>9/7/18</u>	<u>nil</u>	<u>ATI</u> <u>W.D. Johnson</u> <u>Captn. R.C.M.C.</u> <u>Elmer K. Russell</u> <u>Captn. R.C.M.C.</u>

Signature of Man C. Morrison

CASE HISTORY SHEET.

#3.A.M.C. Field- Hospital. Barriefield Camp, Station.
No. 2009068 Rank. Spr. Name. Morrison, C.S. Age. 30
Unit. Can. Eng. Completed years of service ^{Where and how long} 3/12 Canada.
Date of admission. 6th. Aug. /18. Date of discharge. Deserted 18th. Aug. /18.
Diagnosis. Gonorrhoea. Place of origin. ?

CONDITION ON ADMISSION AND PROGRESS OF CASE When admitted to this Hospital from Brockville was suffering from Acute Gonorrhoea, profuse discharge of pus which was — cured when patient deserted. No complications.

FAMILY HISTORY Not applicable.
(Tuberculosis, mental or nervous diseases.)

TREATMENT Light Injection (2½ Gr. Zinc Sul. & Allum to oz)
(Especially any specific or special form.) Gonorrhoea Tablets. (No. 101).

CONDITION ON DISCHARGE Patient was dry when he deserted, and was pending discharge to Unit.
(and disposal made of case.)

Date 18th. Aug. /18.

Chas. R. Stewart
Medical Officer i/c case.

Lieut. A.M.C.

C
36592

#5. A.M.C. Field Hospital,
Barriefield Camp, Ont.

VENEREAL DISEASE CASE-SHEET

(Gonorrhoea)

Reg. N .2009068 Rank Spr. Name Morrison.C.S. Unit Can.Eng.

Diagnosis Gonorrhoea. Admitted 6th.Aug./18. Discharged Deserted 18th.
Aug./18.

Medical Officer i/c Case

John Stewart
Lieut.A.M.C.

H I S T O R Y .

No. of previous attacks ?

Where and when acquired ?

Date and character of symptoms When admitted to this Hospital from Brockville was suffering from Acute Gonorrhoea, profuse discharge of pus which was cured when patient deserted.

DATE -Day of disease-	Smear	Urine	Urinalysis	Other Lab. Tests	Complications	Medicine	Irrigation	Operations
?	-----	-----	-----	-----	None.	Light Injection. Gonorrhoea Tablets. (No.101).		

FORM OF WILL

I, Clarence Sheldon Morrison (Name in full)

Regimental Number 200 9068 serving in ENGINEER DEPOT
BROCKVILLE, ONT.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Nil

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Ida E. Morrison
Bennettsville, S.C. U.S.A.

Name and Address of person or persons to receive personal estate* (See note).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 29th day of July A.D. 1918
C. S. Morrison Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness..... B. Thompson

Address of Witness..... ENGINEER DEPOT
BROCKVILLE, ONT.

THE TWO WITNESSES

Occupation of Witness..... Soldier

MUST SIGN HERE

Signature of Second Witness..... J. Macdonald

Address of Witness..... ENGINEER DEPOT
BROCKVILLE, ONT.

Occupation of Witness..... Soldier

FORM OF WILL

I, *William J. Brown*, of the County of *Franklin*, State of *Ohio*, do hereby certify that the foregoing is a true and correct copy of the original of the within and last signed will of the said *William J. Brown*.

Witness my hand and seal of office this *10th* day of *April*, 19*18*.
Notary Public for Ohio

William J. Brown
Testator

NOTE

This form for the appointment of executor is necessary

IMPORTANT NOTE

This must be signed and dated by the testator

signed and acknowledged by the testator as and for his last will and testament in the presence of two or more competent witnesses, who in his presence and hearing have subscribed their names and places as witnesses to the said will.

Signature of Testator
Address of Testator
Signature of Witness
Address of Witness
Signature of Second Witness
Address of Second Witness

CASE HISTORY SHEET.

Base Brockville, Ont. Hospital. Station.
No. 2009068 Rank Spr Name Morrison, C. S. Age 29
Unit Engineers Completed years of service Canada 1/52. ^{Where and how long}
Date of admission 11.5.18 Date of discharge 6.7.18
Diagnosis Gonorrhoea Place of origin U. S. A.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Patient was admitted to hospital with urethral discharge microscopic examination of which showed it to contain Gonococci. It was of a creamy purulent nature more marked in the morning. This discharge was claimed to be continuous for several years.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Negative

TREATMENT

(Especially any specific or special form)

Medical and local irrigations.

CONDITION ON DISCHARGE

(and disposal made of case.)

Cured Returned to duty.

Date 6.7.18

A. M. Morris
Medical Officer i/c case.

35872

* N. B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * COURT OF INQUIRY

assembled at Engineers' Training Depot -- Brockville, Ont.

on the 2nd day of October, 1918, *NOV 24 1918*

by order of the O.C., *H.C. CANADA* Engineers' Training Depot Brockville, Ont.

for the purpose of inquiring into and reporting upon the il-legal absence and deficiency of kit of 2009068 Sapper Clarence Sheldon Morrison, Engineers' Training Depot, Brockville, Ont.

PRESIDENT.

Capt. J.A. Stephen, M.C., M.M.
Engineers' Training Depot -- Brockville, Ont.

MEMBERS.

Lieut. Wm. Cooke, C.E.
Engineers' Training Depot -- Brockville, Ont.

~~Lieut. P. McCaughrin, C.E.~~
Lieut. J.W. Anderson, B.C.
Engineers' Training Depot -- Brockville, Ont.

The Court having assembled pursuant to order, proceed to

take evidence and examine documents relating to the case received from Capt. J.V. Williams, M.C., O.C. #3 A.M.C. Training Depot, which are shown on these proceedings:-

C-O-P-Y

Barriefield Camp, 20-8-18.

To The O.C. Engineer Depot,
Brockville, Ont.

bsentee - #2009068 Spr. C.S. Morrison This is to advise you that the m/n soldier has been an absentee from the V.D. Hospital since 19th August, 1918. He evidently went away between tattoo 18-8-18 and reveille roll call 19-8-18. The matter was reported immediately to the Provost Marshall.

Sgd. J.V. Williams, Capt. A.M.C.
O.C. #3 Training Depot, AMC CEF

#270 Sgt. C. Stenner states that on the 19th Sept. 1918, he called the roll at 6.30 A.M. and Pte. Morrison did not answer his name, the matter was reported to the Sergeant-Major.

Sgd. C. Stenner, Sgt.

#2698835 R.S.M. Simm, W states that on the morning of the 19th September, 1918, Sgt. Stenner came to me at 8 AM and reported that Pte. Morrison did not answer his name at roll call; a thorough search was made for him, and he could not be found, nor has he been seen since that date, and I have no knowledge of his whereabouts.

Sgd. W. Simm, R.S.M.
#3 Training Depot, A.M.C.

List of shortages of 2009068 Spr. C.S. Morrison, deserter from Field Hospital Barriefield Camp, Ont:-

1 Jacket, hospital blue	\$8.15	
1 Trousers, "	4.60	
1 Knife, table	.10	
1 Fork, table	.08	
1 Spoon, table	.12	---\$13.05
1 Soap, camel	.13	
1 Soap, camel		

Sgd. R.P. Tett, Capt., A.M.C.
Quartermaster #3 A.M.C. Training Depot.

FIRST WITNESS

2043501 Depot Q.M. Sgt. N. Nairn, Engineer Training Depot, being duly sworn, gives evidence as follows:-

On the 20th day of August 1918, I was notified that 2009068 Spr. C.S. Morrison had illegally absented himself from the Field Hospital Barriefield Camp, Ont. On taking an inventory of his kit, I found the following articles, (which had been issued to him) missing. None of these articles have since been recovered:-

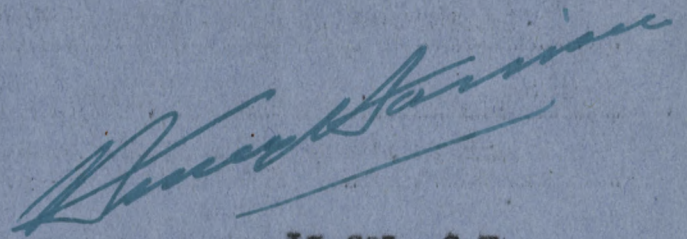
<u>Articles.</u>	<u>Value.</u>
Shoes, canvas	2.55
Boots, ankle	5.15
Trousers, drab, cloth	4.79
Caps, forage	1.18
Greatcoats, D.S.	11.10
Jackets, serge, drab	5.46
Jackets, sweater	2.53
Trousers, service	1.55
Puttees, drab, prs.	1.52
Shirts, service	1.27
Bags, kit (2)	2.70
Bootlaces prs.	.03
Braces, prs.	.33
Brushes, cloth 2	.18
Brushes, hair	.27
Brushes, shaving	.12
Brushes, tooth	.33
Caps, sleeping	.33
Combs,	.06
Drawers, Winter, prs.	2.36
Dubbin, 2oz. tin	.03
Forks, table	.08
Holdalls,	.17
Housewives,	.50
Knives, clasp with L.	.65
Knives, table	.10
Razors with case	.72
Shirts, flannel 2.	4.50
Shirts, Winter 2.	2.36
Socks, prs. 4.	1.44
Spoons, table	.12
Towels, hand	.78
Badges, cap M.L.	.03
Badges, collar prs.	.03
Shoulder, Canada prs.	.05

\$55.16

N. Nairn Depot. Q.M. Sgt.

Lieut. Col. Henry Harrison, C.E. Officer Commanding Engineer Depot C.E.F. being duly sworn, gives evidence as follows:-

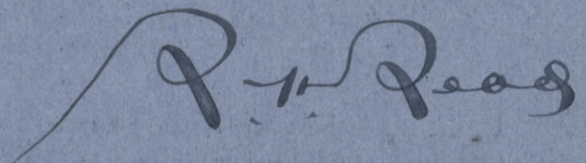
"#2009068, Sapper Clarence Sheldon Morrison, was a member of my Depot, having been duly attested at Toronto Ont. on the 9th., day of May, 1918. He was admitted to the Field Hospital, Barrielfield Camp on the 6th., of August, 1918, suffering from Venereal Disease. On the 21st. day of August 1918, I received the communications which have already been submitted to the Court regarding this man.



LT. COL. C.E.
O.C. ENGINEER DEPOT, C.E.F.

Capt. R.H. Read, Paymaster Engineer Depot, C.E.F. having been duly sworn, gives evidence as follows:-

"On the 18th. day of August, 1918, the pay account of #2009068 Sapper C.S. Morrison, stood as follows:- *Sal. br. 28⁴⁵*



Capt.
Paymaster, Engineer Depot, C.E.F.

Washington, D.C.

April 19, 1947

Dear Mr. [Name]:

Reference is made to your letter of April 17, 1947.

Enclosed are two copies of the report of the [Name] dated April 15, 1947.

Very truly yours,

[Signature]

2500

2500

Very truly yours,
[Signature]

[Name]

- Mr. Tolson 100
- Mr. E. A. Tamm 100
- Mr. Clegg 100
- Mr. Glavin 100
- Mr. Ladd 100
- Mr. Nichols 100
- Mr. Rosen 100
- Mr. Tracy 100
- Mr. Carson 100
- Mr. Egan 100
- Mr. Gurnea 100
- Mr. Hendon 100
- Mr. Pennington 100
- Mr. Quinn 100
- Mr. Nease 100
- Miss Gandy 100

Very truly yours,

[Signature]

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

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

500M.—9-16

H. Q. 1772-99-90.

Casualty Form—Active Service.

ENGINEER DEPOT

Unit, Regiment or Corps BROCKVILLE, ONT.

Regimental No. 2009008 Rank Sapper Name Marrison, Clarence Sheldon

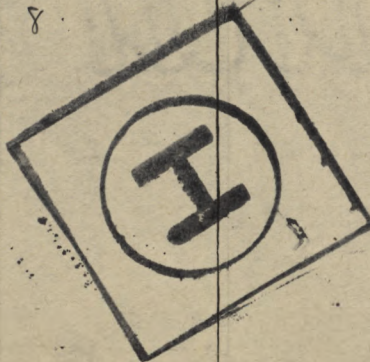
Enlisted (a) 9-5-18 Terms of Service (a) 665 Service reckons from (a) 9-5-18

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. Military

Extended Re-engaged Qualification (b) Civilian Telegraph Operator

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				

<u>Transf to</u>		<u>ENGINEER DEPOT BROCKVILLE, ONT.</u>	<u>14-5-18</u>	<u>DD-18</u>	
<u>7-10-18</u>	<u>E. T. O.</u>	<u>Qual. 19-8-18. Sgt. Deserter by b. of. I. held 2-10-18.</u>	<u>Brockville Ont.</u>	<u>19 8 18</u>	<u>pt. II 0. 164</u>



[Handwritten signature]

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

