

ATTESTATION PAPER.

ORIGINAL No. 349736

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?.....	Nesbitt	13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? <i>no</i> 14. If so, what was the nature of the disability? <i>no</i> 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? <i>no</i> 16. If so, what was the reason? <i>no</i>
1a. What are your Christian names?.....	Wilfred Robert	
1b. What is your present address?.....	Fergus, Ont.	
2. In what Town, Township or Parish, and in what Country were you born?.....	Fergus, Ont.	
3. What is the name of your next-of-kin?.....	Mrs. Joseph Nesbitt	
4. What is the address of your next-of-kin?.....	Fergus, Ont.	
4a. What is the relationship of your next-of-kin?.....	Mother	
5. What is the date of your birth?.....	Oct. 17th., 1897	
6. What is your Trade or Calling?.....	Bank Clerk	
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?.. If so, state particulars of former Service.	No	
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, Nesbitt, Wilfred Robert, 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.

Wilfred Robert Nesbitt (Signature of Recruit)

Date May 22nd., 1917 *Ernest J. Worthy Lt.* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wilfred Robert Nesbitt, 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.

Wilfred Robert Nesbitt (Signature of Recruit)

Date May 22nd., 1917 *Ernest J. Worthy Lt.* (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 Kingston, Ont. this 22nd. day of May 191 7.

Ernest J. Worthy Lt. Colonel, R.C.H.A. (Signature of Justice)
Officer Commanding, R.C.H.A., Depot

Description of Wilfred Robert Nesbitt on Enlistment.

Apparent Age.....19 years 7 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. 5 ins.

Chest measurement { Girth when fully expanded.....35 ins.
 Range of expansion.....3 ins.

Complexion.....Fair

Eyes.....Gray

Hair.....Brown

Yuesight
R-D20 L-D20

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

Hearing
Normal

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-Sea Expeditionary Force.

Date.....May 22.....1917.

Place.....Kingston, Ont

[Signature]
 Capt. [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.

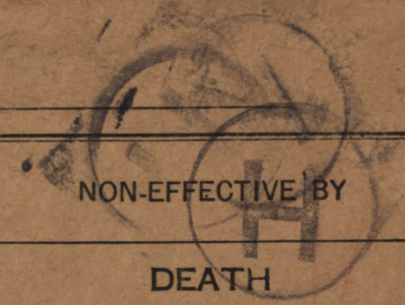
.....Wilfred Robert Nesbitt.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

.....[Signature].....Colonel R. [Signature] (Signature of Officer)
 Officer Commanding, R.C.H.A., Depot
 Date.....May 23rd.....1917.

REGIMENTAL DOCUMENTS

NAME *NESBITT, WILFRED ROBERT* REGT. NO. *349736* UNIT *CG R. D.* H. Q. FILE NO.

2-6-19
do



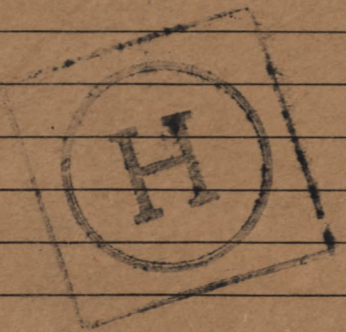
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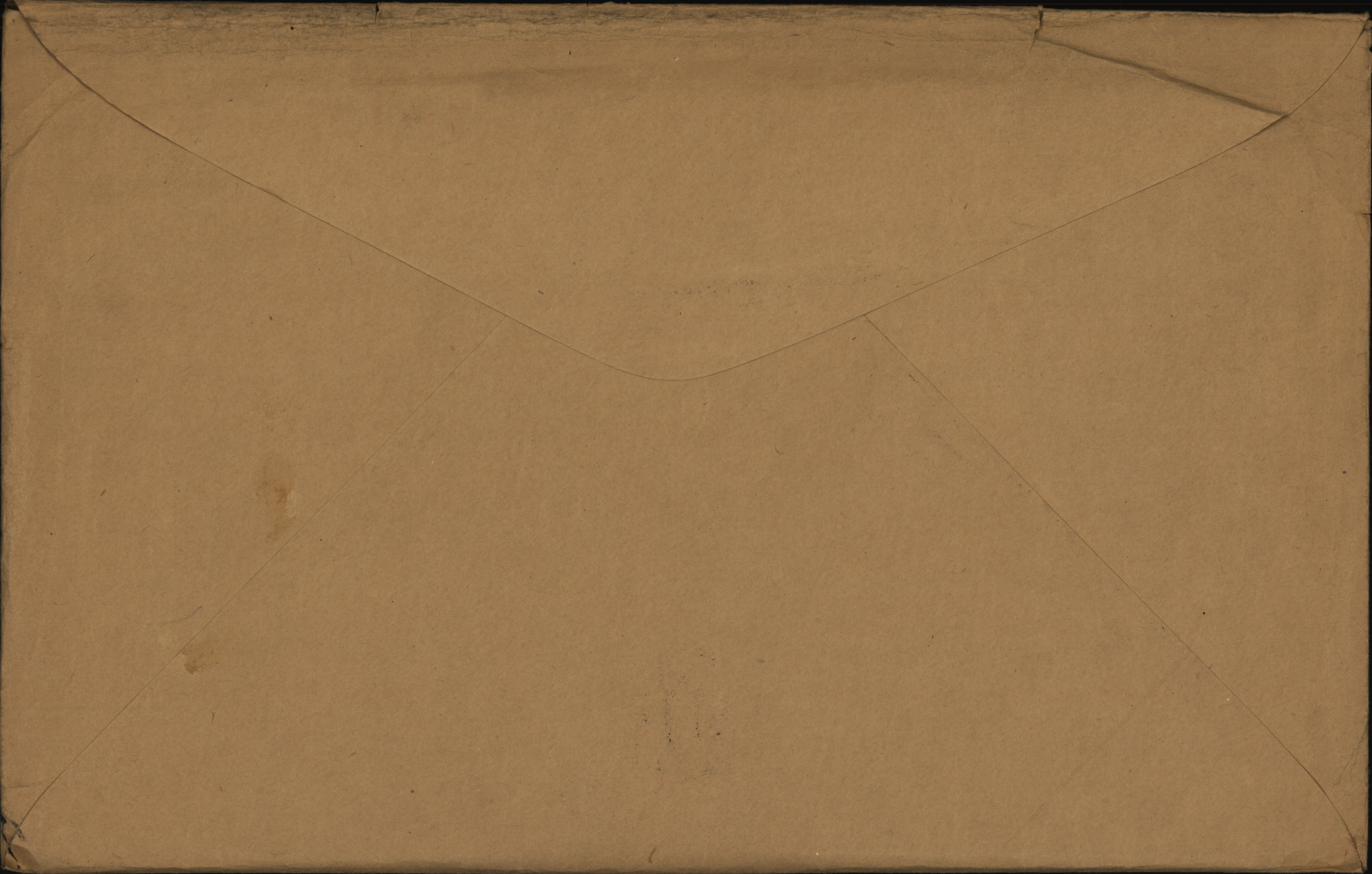
extra

Jan 22/9/1919 mb
Feb 23 '9



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
TESTATION PAPER (M.F.W. 23, 133, or 51)					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)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob.</i>
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
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DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)				C3068	
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)					
<i>2 misc</i>					<i>62 - 20</i>
<i>3 X SRB</i>					<i>22 - 21</i>
<i>2 Cas cards</i>					<i>10 - 21</i>
<i>1 P. 6. 1. 2</i>					<i>9.</i>





Gen

349736

~~P~~

Number

Rank

Gen

Surname

NESBITT

Christian Name

Milfred Robert

Units

C 7 d

Theatre of War

France

Date of Service

2-5-18

Remarks

St Andrews Street

Latest Address

Fergus PO

Ontario

Roll No

B Page 7945

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

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

DISP NOV 5 1921
REGN. NO. 2234045

SURNAME.

Nesbitt

649-M-4474

CARD NO. *H. 3.* ✓

CHRISTIAN NAMES

Wilfred Robert.

S.O.S. record.
225-19.

REGL. No.

349736.

RANK

Dr.

100.
146 of 26/5/19
no. 34 B. 19.

UNIT

"C." Bty. R. C. N. A. (17th Draft)

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Nesbitt, Mrs Joseph

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Fergus, Ont.

Box 149.

(L. 20 - 12 - 18)

COUNTRY OF BIRTH

Canada. Fergus Ont.

DATE

Oct. 17th. 1897

PLACE OF ATTESTATION

Kingston, Ont.

DATE

May 22nd. 1917.

Q/S 21-12-17 ¹⁰³⁸/₂

Env. A/c. 21-5-19.

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Bank Clerk

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

19

YEARS

7

MONTHS

HEIGHT

5

FEET

5

INCHES

CHEST MEASUREMENT

35

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair.

EYES

Gray.

HAIR

Brown.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Kingston, Ont.

DATE

May 22nd. 1917.

Present Address - Fergus, Ont.

No. 349736

RANK

pte

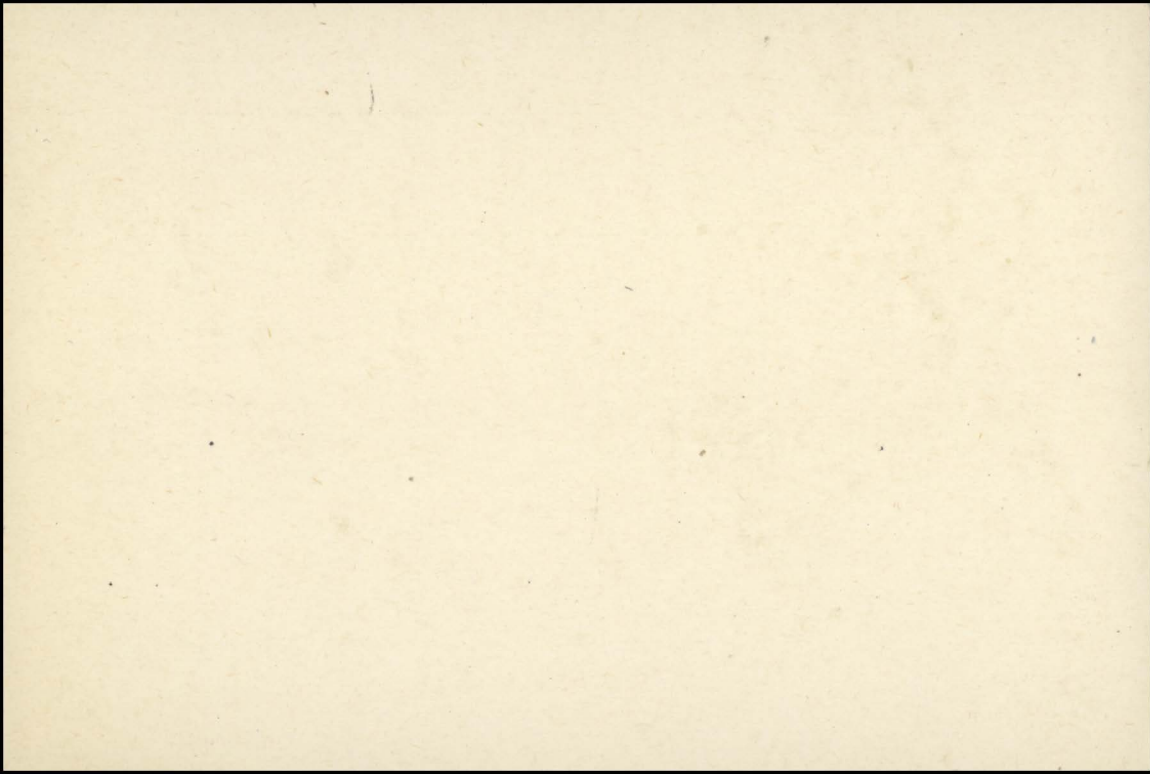
NAME

Nesbit W. R.
Nesbitt June P. L.

T. O. S. 22-5-17. UNIT Royal Canadian Horse Artillery (C. Bty)
(D.O. 97 of 23-5-17)

M. D. 3

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1917	1917			
May 22	May 31	n		
June		n		
July		n		
Aug		n		
Sept		n		
Oct		n		
Nov		n		
Dec 1	Dec 15	n	17th O/S draft.	D.O. 61 of 15-12-17



Name NESBITT

WILFRED
ROBERT

Rank GNR.

Reg. No. 349736

Unit 2 Bde C.F.A.

Next of Kin CANADA

J.W.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
28.9.18	4 Gen Hosp	Camiers	P.S. & Farm	2363	1898	HA 4462/16
1.10	6 C. Dep	Staples	do	2368		4590/12
2.10	10 do	Beault	do	2368		4628/8
3.10	25 f. Hosp	Bardelot	do	2369		4635/10
26.10	1st B. Boulogne		do	2366		HA 5150-6
31.10	10 C. Dep	Beault	do	2396		5406/3
2.11	Disch'd to S.K.C. St. Martin		do	2405		5670/14
13.2.19	3 Can 9th amb		Detachment	2481		4234/2
17.2	33 Stry Strop	Numerous	do	2485		3712/10
23.2	1 Gen Gen	Cambridge	do	2491		7115
27.2	Milly (con)	Espern	do	2492		7872
19.3	Disch'd	do	do	2506		2642
R.L. 1939	Mtd proceed on 29/39 to arked, Millay. amb + Eps - N-794					

Date

Movement

Place

Casualty

List
No.

Notified
N/K O.

W.O. List



572

Reg. No. 349736 Name Gasbitt, Wilfred
Rank *Sn* Corps *R.L.H.A.* Age 19 Service?
Ledger No. 1005 Serial No.

HOSPITALS	DATE	DIAGNOSIS
<i>Anguwarada Jail Kingston</i> <i>Swi to duty</i>	<i>27-10-17</i> <i>9-11-17</i>	<i>Inspected Fuziger</i> <i>l</i>

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
50M-6-19.
1772-39-1332.

Surname
Nesbit

Christian Name or Names
W.R.

Reg. No.
349736

Rank

Unit

Gnr.

CA.2B.

Cas. List.

3-10-18.A563.3	4 Gen. Carriers.	28-9-18.
	GSW.F'arm.R. ✓	
9.10.18 A3684	6 CA Staples	1.10.18
9.10.18 A3685	10 CA Escault	2.10.18
10.10.18 A369-	3 25-lne Handlos	3.10.18
30-10-18 @ 386.3	1 Cowal. B'ogue	28-10-18
18.11.18 A398.3	10 Cow. A Escault	31-10-18.
21 11.18 A405	Droch ²	2.11.18
21-2-19 A481	2 b. 7 Ambr.	13-2-19
	Debility ✓	
26.2.19 A485 ³	32 Sta West Minereux	17.2.19
5.3.19 B491 ¹	1 Cas. P Cambridge	29-2-19
6.3.19 B492 ²	Woodcote Elm	27-2-19
22.3.19 B506 ³		19.3.19

A.N.D. & Dept.

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

Cas. List.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Class. *H*
 No. *279620* Issued

THIS IS TO CERTIFY that No. *349736* (Rank) *Gnr.*

Name (in full) *Nesbitt, Wilfred R.* enlisted in

the *R.C.A.F.*

CANADIAN EXPEDITIONARY FORCE at *Kingston* on the *22nd.*

day of *May* 19 *17*

HE served in *48th Bty., C.F.A., France*

and is now discharged from the service by reason of ~~Medical Unfitness.~~ Demobilization.

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

Age *21*

Height *5'5"*

Complexion *Medium*

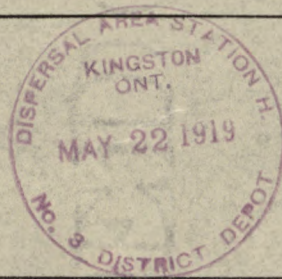
Eyes *Blue*

Hair *Dark*

W.A. Nesbitt
 Signature of Soldier

Marks or Scars

Date of Discharge



I.F. Healy Sr.
 for O. C. Dispersal & Registration H
 Issuing Officer

Rank

Date 19

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

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____

day of _____ in _____

HE served in _____

and is now discharged from the service by reason of _____

Medical Unfitness _____

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

Age _____	Height _____
Complexion _____	Eyes _____
Hair _____	Signature of Soldier _____
Date of Discharge _____	Date _____
Marka or Scars _____	Name _____

Issuing Officer _____

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

M.F. 20A
 10-17-20-202
 E.O. 1772-20-202

ORIGINAL

349736

73.

MEDICAL HISTORY SHEET

Surname

Nesbitt

Christian Name

W. Robert

Examined

on 22nd day of May 1917
at Kingston Ont.

Approved by

A. A. Bayne
Rank Capt. M.O.

Birthplace

City or Town Feigus
County Ont.

Apparent age

19 yrs 7 months

Trade or occupation

Bank Clerk

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT	
10-3-19	Fit	Bearded	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Height

5 feet 5 Inches

Weight

108 lbs.

Chest measurement

Minimum 32 inches
Maximum expansion 3 inches

Physical development

Good

Small-pox Marks

none

Vaccination Marks

Arm Right Left
Number Nil

Date	Result	VACCINATIONS	
19/3/18	Nil	8 steps	M.O.
			M.O.
			M.O.

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	
14-1-17		W. Rogers	M.O.
2-1-18		8 steps	M.O.
3-4-18		apt. 64	M.O.
7-3-19	50B		M.O.

Enlisted on

22nd day of May 1917 at Kingston, Ont.

Joined on enlistment

C. Battery
R.C.H.A.

Transferred to

R.B.L.F.A.

349736

22/5/17

- 1 JAN 1918
9 APR 1918

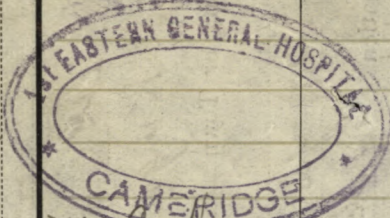
EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

CANADIAN

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 *Nesbitt* Christian Name *W. R.*



*M. C. Hoop
Epsom*

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				
		23	2	19	26	2	19	<i>Debility</i>	<i>4</i>	<i>Trans woodcock Rk Epsom M. C. Hoop Capt for Col. Cdg. 1st Eastern General Hospital Cambridge.</i>	
		26	2	19	19	MAR	1919	<i>Debility Conv.</i>	<i>23</i>	<i>Out Admission Moderate physique. weight 135 lbs looks well. 10-3-19 Gb Good Cat. A. Boarded Chamberlain CAPT O.A.F. DIVISION</i>	

To be made out in duplicate.

H.Q. 54-21-23-54

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 "C" BATTERY, R. C. H. A.

(2) Regimental Number 349736

(3) Full Name of Soldier Nesbitt, Wilfred Robert

(4) Place of Birth Fergus, Ont.

(5) Are you married, or not? Single

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

(b) Present Postal Address.

(7) Are you a widower?

(8) Have you any children?

If so, give number of boys and girls.

Also their names and ages.

(9) Is your Father alive?..... **No**
If so, state name and address

(10) Is your Mother alive?..... **Yes**
If so, state name and address..... **Mrs. Joseph Nesbitt,**
..... **Fergus, Ont.**

(11) If your Mother is a widow..... **No**
Are you her sole support, or not?..... **No**

(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.
..... **Nil**

(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.
..... **Nil**

(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.
..... **Nil**

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.

Date..... **May 22nd., 1917.**

Ganclott
.....
Officer Commanding C.H.A.
Officer Commanding "C" Bty., R.C.H.A.

Orrina

Forms
I. 1237
14

H. D. W.
Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year.	Unit.		Age.	Service.
	349736	Sgt.	Hesbitt	H. R.
Station and Date.	Disease <i>Debility</i>			
	<i>Moderate physical weight 135.</i>			
	<i>looks well. P.T.</i>			
Convallescent Hospital, No. 27 FEB 1919 Date Woodcote Park, Epsom.	<i>R. Maubens Capt Camb</i>			
3 MAR 1919	<i>Co</i>			
10 MAR 1919	<i>Cat. A. (slight red.) R. Maubens Capt</i>			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

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. 349736 Rank Capt Surname Mesbitt
(Given name in full)
Wilfred Robert
 Unit or Corps C.S.A. Birthplace Leopold, Ont.

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

1. GENERAL DESCRIPTION: Attentive

Physique Moderate Weight 130 lbs. Height 5 ft. 5 in. Colour of Eyes Blue

Nutrition Good

Pulse 75 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.)

Small scar Rt. forearm
27-9-18.

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 Sytem No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System Yes Digestive System No

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.

mtd, 23-2-19, Debility, 10-3-19 Recovered.
states right wound left forearm -
27-9-18. Recovered - no disability

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at M. C. H. Epson (Overseas)

Date 10 / 3 / 19

Signed [Signature] 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 [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed 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

(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]

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. 349736 Rank Gunner Surname NESBITT
(Given name in full)
Wilfrid Robert
 Unit or Corps C. A. R. D. Birthplace Fergus Ont.

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

1. GENERAL DESCRIPTION:

Physique Plump Weight 135 lbs. Height 56 ft. in. Colour of Eyes Blue
 Nutrition Good
 Pulse 72
 Condition of arteries Good
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

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

Scar on Right forearm Strapped
27/9/18

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 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.

27/9/18 Strapped flesh wound
lower 3rd Right forearm
to braces
No usability

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 29/1/19

Signed H. Coull 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 [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed 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

(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]

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT..... 3

NAME OF SOLDIER.....

Neobitt W. R.

REGIMENT.....

P. C. H. A.

RANK.....

gnr

No. *849736*



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.

	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				
Condition on first Examination	<i>1917</i>			<i>1/5</i>											<i>2/89</i>	<i>1/4</i>						<i>3 Cavities #12-13-31</i>
	<i>June 22</i>	<i>June 13</i>		<i>1/5</i>																<i>S.S. white</i>	<i>3</i>	<i>incomplete</i>
	<i>June 28</i>	<i>June 14</i>		<i>1/5</i>																<i>S.S. white</i>	<i>3</i>	
	<i>July 5th</i>	<i>July 31</i>		<i>1/3</i>																<i>S.S. white</i>	<i>3</i>	
	<i>July 18th</i>	<i>July 5</i>		<i>1/3</i>																<i>S.S. white</i>	<i>3</i>	<i>Complete</i>

TESTE SIGNATA

On examination the contents of certain goods to be sold
in public sale
to the effect that they are of good quality
and such as to be sold at the price of

Condition of sale

THE BANK OF ENGLAND

4432
27

[Faint handwritten notes]

[Faint mirrored text from reverse side]

[Faint mirrored text from reverse side]

THE BANK OF ENGLAND
LONDON
No. 1, Threadneedle Street
LONDON
E.C. 2

3.

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

DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block letters) NESBITT W. R.

REGIMENT B. C. R. D. RANK SM No. 249736

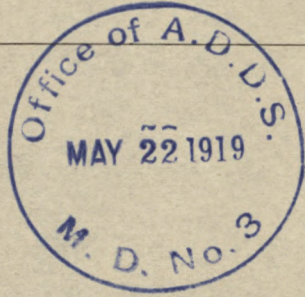
Date of Examination in England 26/4/19 Date of Examination in France _____



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.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 6.7.19.20
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____



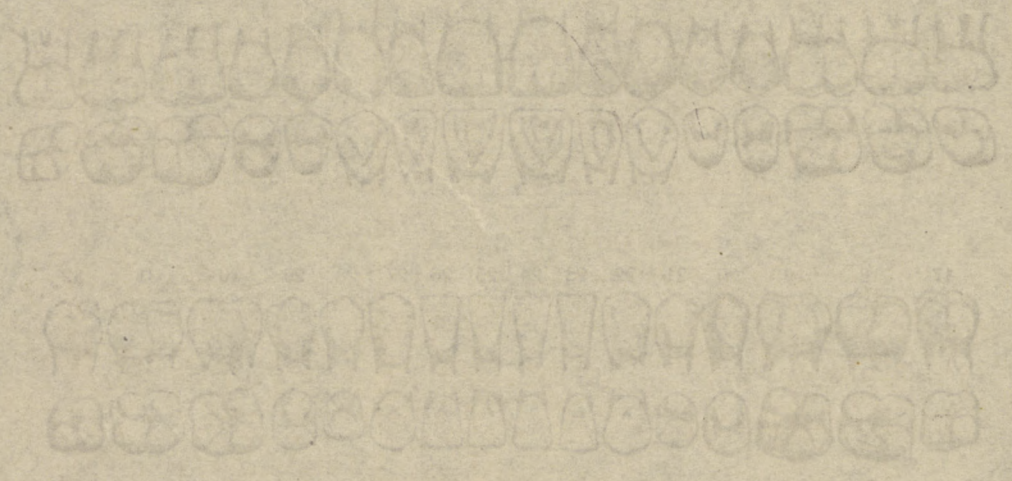
HAS HE EVER REFUSED DENTAL TREATMENT? NO

- HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)
- (a) In Canada yes
 - (b) In England _____
 - (c) In France _____

Signature of Dental Officer J. E. Thompson, Capt.

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

1. The name of the
individual is
2. The rank of the
individual is
3. The number of the
individual is
4. The date of the
examination is
5. The name of the
dental officer is
6. The name of the
dental clinic is
7. The name of the
hospital is
8. The name of the
branch is
9. The name of the
regiment is
10. The name of the
division is
11. The name of the
corps is
12. The name of the
army is



13. The name of the
dental officer is
14. The name of the
dental clinic is
15. The name of the
hospital is
16. The name of the
branch is
17. The name of the
regiment is
18. The name of the
division is
19. The name of the
corps is
20. The name of the
army is

CASUALTY FORM ACTIVE SERVICE.

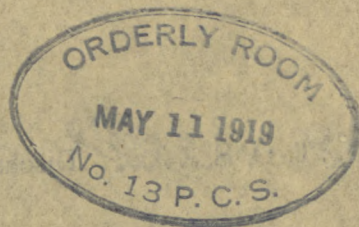
A.F.B. 103.

NUMBER *349736* RANK *Sgt* NAME *Nesbitt M.*

6/5/19 T.O.S. WING 3, KIMMEL PARK PART 2, DO *108-7/5/19*

11/5/19 S.O.S. ON TRANSFER TO C.I.F. ON PROCEEDING TO
CANADA. PART 2, D.O. *114-14/5/19*

Embarked S S Saturnia
Glasgow May 11 /19



K. Stewart
OFFICER I/O RECORDS, M.D.C. Wing 3.

ATLANTA

POSTAL SERVICE

DEPARTMENT OF POSTS AND TELECOMMUNICATIONS

POSTAGE WILL BE PAID BY ADDRESSEE
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

T.O.S.
T.O.S.

11-5-19 T. O. S. 3000 Discharged. 27-5-19 Kingston, Pt. 2 Order. 146
L. T. Henry
Maj. 146
for O. C. Dispersal Area Station

UNITED STATES POSTAL SERVICE

LTR

copy

Rank _____ Name **NESBITT, Wilfred Robert** Reg'l No. **349736**
 Unit **17th O/S Dft C. Bty R C H A. to Res Arty** If in perm. Corps, }
 What Unit? }
 Married or Single **Single.**
 Place and Date of Enlistment **Kingston, May 22nd, 1917.** Place of Birth **Fergus, Ontario.**
 Name and Address, Next-of-Kin **Mrs Joseph Nesbitt.**
Fergus, Ontario. Relationship **Mother.**

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____

Separation Allowance \$ _____ Payable to _____ Relationship _____

Discharge, Date and Place _____ Reason _____ Character _____

N/E. M.B. NS. **1502**
 File No. **1502**
 Category **1502**

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.				
<u>C.</u>		Arrived in England		31-12-17	S/S Grampian
6-1-18	Res Bde	T.O.S. " " " "	Witley	1-1-18	Pt-6
10-4-18	✓	S.O.S. of sea	"	9-4-18	-100 VCAP-49 16/4/18
16-5-18	2 Bde	T.O.S. from Pool	"	Field 2/6/18	Pt-53 VCAP-64 15/6/18
3-10-18	cs do es	Wounded.	gms cases	28-9-18	CLa. 363.
25-3-19	do	Inc to Eng & posted to C.A.R.D. Witley.	"	23-2-19	Pt 23. & C.A.R.D. 934/349
7-5-19	3rd Bde	T.O.S. from C.A.R.D.	Phyl.	5-5-19	-108 & C.A.R.D. 126A 6-5-19
12-5-19	do	S.O.S. to Canada	"	11-5-19	-112
		" "		65-H-32	11-5-19

A.F.B. 103 CHECKED

APR 1918

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME:- NESBITT - Wilfred R.

EFFECTIVE DATE:- 1/10/17 EFFECTIVE DATE:-

NUMBER:- 349736

AMOUNT:- 2000 AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		sgt.

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mrs Sarah Nesbitt
Fergus
RR#1
Mother.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 17th Coy R.C.H.A.

DATE ACCOUNT FIRST OPENED:- 10/10/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SFD	UNIT TRANSFERRED TO
53	2/5/18	June	C.R.A. 2 Bde C.A.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
3-4-19	46	15 Res Psn	48.67				
3-4-19	46	15 Res Psn	48.67				
22-4-19	2222	Repon	9.73				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

Dr Bal # 8.79

PARTICULARS OF RENDERING NON-EFFECTIVE

March to Canada 30/4/19 R 7519 Repon to Repon 25/4/19 M D 3

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31-3-18	Balance Fwd								19.85		
Apr	G.P.	33		a.p.				20			
				AR 184 cla 9-4	4.87						
				AR 85. 1 Dec. 22-4.	3.57				24.41		
		33			8.44			20			
May	G.P.	34.10		a.p.				20			
				AR 145 5/5 1 Dec.	4.46						
				- 195 16/5 2 Dec	3.57				30.48		
		34.10			8.03			20			
June	G.P.	33		a.p.				20	43.48		
				AR 77 1/6/18 2 Bde	4.46						
				✓ 317 20/6/18	3.57				35.45		
		33			8.03			20			
July	G.P.	34.10		a.p.				20			
				✓ 357 3/7/18 1 Bde	4.46						
				✓ 371 13/7/18 2 Bde	3.57				41.52		
		34.10			8.03			20			
Aug	G.P.	34.10		a.p.				20	55.62		
				479 26/8 21/8/18	3.57						
				482 ✓ 21/8/18	3.57				48.48		
		34.10			7.14			20			
Sept	G.P.	33		a.p.				20	54.34		
				619 2 C.F.A 18.9	3.57						
				542 ✓ 11.9	3.57						
				a.p.				20			
		33			7.14			20			
Oct		34.10		a.p.				20	68.44		
				158 7/10 2 C.F.A	4.66				63.78		
		34.10			4.66			20			

NUMBER

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									6378		
Nov	Gris Pay	33		AP				20			
				1985 10/11 CERO	746						
Dec		6820		AP				40			
				1673 1/12 2629	1679				10498		
		10120			2425			60	8073		
Feb		3080		AP				20			
Mar		3210		988 23/4 18AC	389						
				1273 4/1 267A	377						
				1363 24/1 "	373						
				1487 8/1 "	373						
				1580 11/1 "	280						
				1700 27/1 Epson	973						
				AP				20			
				1934 19/3 "	4867				2931		
		6490			7632			40	4030		
	S.F 19-3-19 29-3-19								6961		
	CC H Eps 19-3-19 20 99										
	9-4-19 CARD 10 dys	730									
April	Gris Pay	33		AP				20			
				at. 46 7/1	4867						
				at. 222 22/1	973						
				at. 3107 End 7/5	487				1366		
		4030			6327			20			

29 31
33
7 30
69.61

78 40
69 61
8.79

83.27
69.61
13.66

Solomon 11/5/19 Sh 6.5

H
3

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

War Service Badge Class. **A.**
No. **279625** Issued

M

H

1. No. **349736**
2. Rank. **Inv.**
3. Name. **NESBITT** *Wilfred*
4. Unit. **CAPO**

5. Date of Discharge **22-5-19** Place **Thurston Ont**

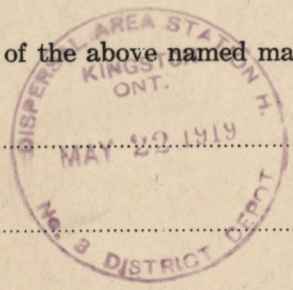
6. Reason for Discharge **Demob.**
EMBARKED 11 5 19 48 Bty
SATURNIA GLASGOW @ HQ
W.S.P. CLASS "A" #11

7. Authority. **PO 1420**

8. Proposed Residence after Discharge.....
Mather
Presby.
PO. Ferguson Ont.

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. **339**
W. R. Nesbitt
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.
Place.....
Date.....
M. H. Hickey
Signature.....
for O. C. Discharge Unit.
(O. C. Discharging Unit.)



SHORT FORM
PROCEEDINGS ON DISCHARGE
(Demobilization)

1. No.

2. Rank

3. Name

4. Unit

5. Date of Discharge

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. J. W.

Signature of Soldier

CONTINUATION

The history of the above named man is hereby continued.

Place

Date

(G. C. District Judge)

LIST OF DISCHARGE DOCUMENTS

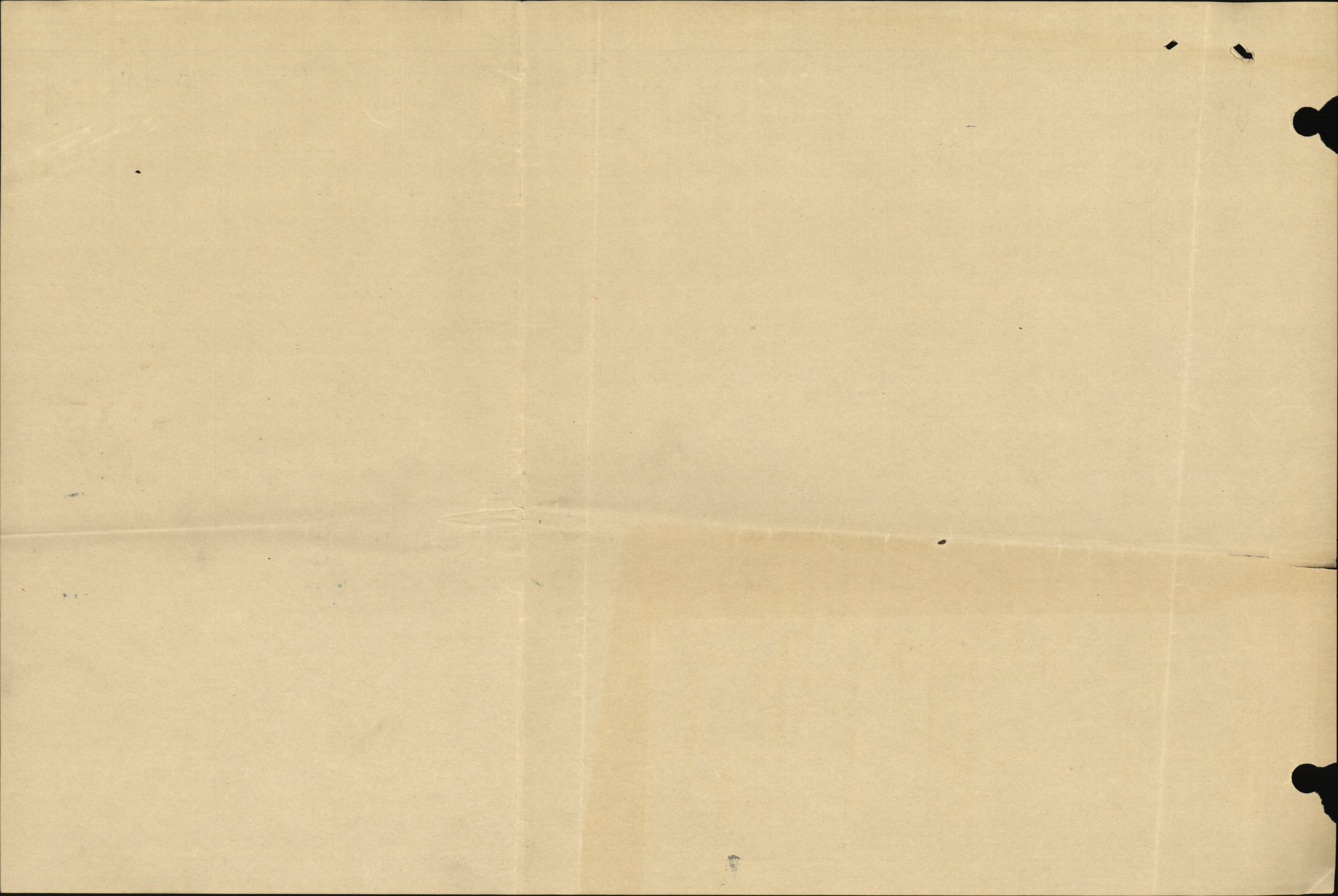
Medical Form W-21	Attestation Paper, Physician
Medical Form W-22	or Particulars of Receipt
Medical Form W-23	Field Contact Sheet
Medical Form W-24	Causality Form
Medical Form W-25	Lost Pay Certificate
	Certificate that missing documents are unobtainable
Medical Form B-1	Medical History Sheet
Medical Form B-2	Proceedings of Medical Board
Medical Form B-3	Medical History Sheet
Medical Form B-4	Medical Report
Medical Form B-5	Regimental Contact Sheet
Medical Form B-6	Company Contact Sheet

[Faint handwritten signature and illegible text]

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

Group..... A
 Checked by No. 21
Om
 Date..... 10-5-19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

N

802

Jan. 1-18

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 349736
 Rank Gnr. Promoted _____ Reverted _____ Discharge _____
 Soldier's Name W. P. Heslett
 Battalion "C" Batty P. C. H. A. 17 Rgt.
 Beneficiary _____
 Relationship _____
 Address _____

PARTICULARS OF ASSIGNMENT

Name Mrs. Sarah Heslett
 Address Fergus Ont. P. R. #1
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					
Jan	U 66819		20	20	R Mailed 3/1/18
Feb	U 25308		20	20	✓
Mar	N 96549		20	20	✓
Apr	O 10391		20	20	✓
May	R 20921		20	20	✓
June	N 25082		20	20	✓
July	Q 27973		20	20	✓
Aug	R 36365		20	20	✓
Sept	U 46356		20	20	✓
Oct	Y 47199		20	20	✓
Nov	U 60792		20	20	✓
Dec	X 70073		20	20	✓
Jan-19	U 75795		20	20	✓
Feb	W 79860		20	20	✓
Mar	M 88918		20	20	✓
April	R 1124		20	20	✓
May	15942		20	20	✓
			340	340	

M. F. W. 128
 400M-6-17-1772-39-1141
 L. L. 22320-M. & D. 7983.

At/c Closed Saturday
 Ret'd per W. P. Heslett
 Date 22.5.19 M.F.W. 187
 Clerk W. P. Heslett

Heslett LP 805/0 22.5.19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128
 400M-517-1772-39-1141
 L. L. 2320-NL & D. 7983

REG'T L. No. 349736
 H. Q. FILE NO. 649

NAME

Nesbitt Skiffred Robert

RANK AND CORPS

Gnr. 2nd Bde C.S.A.

FOLLOWS
 No. 17th
 FOLLOWS

CABLE

NO. DATE

NATURE OF CASUALTY

N.K.

Nesbitt Mrs Joseph (mother)
 Burgess, Ont.

Q 598. 4-10-18.
 6-6.

Adm #4 Gen 3rd Dannes. Camiers
 Sept 28th 1918, 1st Div R Arm.

wsm 259 5-1-19

Died from hosp. Nov 2nd 1918.

wsm 259² 13-1-19

Ref to (259) ^{according to records...}
 correct. enquiries will be made

Eng wsm 200. Mr Guthrie Q 4179 Canada Ottawa

S 1689 10-1-19. E S Houston Esq Manager Imp. Bank of

Eng Miss Laura Jean Nesbitt Box 169. Burgess Ont

L. L. 31493. M. & D. 8476.

M. F. W. 42-100M.-28-11-17.
 H. Q. 1772-39-893.

6508 31-12-18.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Q363 4 Gen Camiers 28-9-18 GSW 3' arm R

Q368. 6 Com Dep Etaples 1-10-18 GSW. 3' arm. R

Q368 10 Com Dep Ecourt. 2-10-18 GSW 3' Arm. R.

Q369. 25 Gen. Haidelot 3-10-18 GSW 3' Arm R.

Q386 1 Com Dep Boulogne 26-10-18. GSW 3' Arm R.

Q398 10 Com Dep Ecourt. 31-10-18 GSW R 3' Arm.

Q405. Disch 2-11-18 GSW R 3' Arm

Q481. #3 Com Fed. 13/2/19 Debility

Arm.

Q485¹⁴ 32 Stat. Wimereux 17/2/19 "

B492 (3) ex. 1st. East. Gen. Cambridge
Mil. Com. Wdate. Ph. Epsons. 7/2/19 "

B506. Disch 19/3/19 Debility

NAME

Nesbitt Kilfred Robert

REGT. NO.

349736

RANK AND UNIT

Enr.

2nd Bde C. I. A.

NEXT OF KIN

CABLE

NATURE OF CASUALTY

NO.

DATE

C 45.

3

30 1-19

2

No reply yet received from base, will be communicated (to) as soon as received.

²⁻⁴
W.S.M.C. 128

6-2-19

Officer commanding reports with unit in the field, no truth in report W. in A.

S. 175

Eng. (Miss Laura Nesbitt)
4-2-19
Fergusson

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B 491-1

St. East Gen. Cambridge 23-2-19

Debility

W. S. B. CLASS "A"

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

Casualty Form - Active Service.

349736

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

350M.-5-16

H. Q. 1772-39-920.

Unit, Regiment or Corps. "C" BATTERY, R. C. H. A. to Res Duty

Regimental No. 349736 Rank Private Name Nesbitt, Wilfred Robert
C. E. F.

Enlisted (a) 22-5-17 Terms of Service (a) Can Army Reserves Service reckons from (a) 22-5-17

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) Private Bank Clerk

W. S. B. Class A.

CERTIFIED CORRECT.
6 APR 1918
3 APR 1918
CAN. RECORD LONDON.

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				
	///	Embarked	St. John	17-12-17	
		Disembarked	Glasgow	31-12-17	
	Res. Bde. C.F.A.	T.O.S. from Canada	Witley	1/1/18	B.O.P. 116
	Res Bde C.F.A.	PROCEEDED O/SEAS TO C.F.A.	Witley	9 APR 1918	B.O.P. 100 Adj. Lt. & Asst. Adjutant. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.
11/4/18	C.F.A.	Arr'd Rein #105. Can Art'y Pool	Pool	11/4/18	R.R. 637 P.I. 49 a/b/4/18
12/4/18	do	Left for CERC	Field	12/4/18	R.R. 113
14/4/18	CERC	Arrived CERC	"	14/4/18	" 427
10-4-18	F.F.A.	Posted to 2nd Bde. C.F.A.	Field	2-5-18	c.c.h. n.b. 4/25/18 (618) K.R. 210 P.O. 164 of 15/18.
do	do	T.O.S. do do	do	do	do do do P.O. 53.
4-5-18	2nd Bde. C.F.A.	Joined Unit.	do	do	Bx 3.
27-9-18	to C.F.A.	Sw. Am R. 28/18 to	F.F.T.	28-9-18	F. 26/9949.

(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.

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				
28-9-18	4 Gen Dept	250. J. Am. R.	4 Gen Dept	28-9-18	W 3034/5896.
27-9-18	1/2 New York. 2nd	do do	ccs.	27-9-18	A 36/28.
3-10-18	25 Gen Dept	do do	25 Gen Dept	3-10-18	W 3034/6808.
2-10-18	6 Gen Dept	do do	10 Gen Dept	2-10-18	do/6952.
do	10 do	do do	25 Gen Dept	3-10-18	do/6952.
5-10-18	2nd Base CFA	Do Hope Wounded	N.S.	27-9-18.	B 213.
1-10-18	4 Gen Dept	250. J. Am. R.	6 Gen Dept	1-10-18	W 3034/6597.
26-10-18.	1 Gen Dept	Wounded.	Adm. 1 Gen Dept.	26-10-18	M. 341
26-10-18	25 Gen Dept	GSW VIII	do	26-10-18	M 401
30-10-18.	1 Gen Dept	do do	10 Gen Dept.	30-10-18	M. 2276
5-11-18.	6 Gen Dept	Taken in class. '17' at	6 Gen Dept	12-11-18	NR 165)
31-10-18.	10 Gen Dept.	GSW. VIII (1).	Adm 10 Gen Dept.	31-10-18.	M. 4008.
12-11-18	C. G. B. D.	Rep. for C. G. B. C.	Field	12-11-18	Nk. D 11664.
2-11-18.	10 Gen Dept	wounded	C. G. B. D.	2-11-18	W 3034/2069.
13-11-18	6 Gen Dept	Rep. Amv. c. c. c.	Field	13-11-18	Nk. A. 1802.
28-11-18	2nd Base CFA	Injured unit	do	22-11-18	B 213. c. c. c. Nk. Rk. 2216
		PROCEEDED TO ENGLAND			
14-2-19	3rd Gen Dept	Debility	To 50 ccs.	13-2-19	A-36. N. 8224.
23-2-19	329th Hq. Bn.	do	To England.	23-2-19	W. 3034/N 8535.
15-2-19	50 ccs.	do	To A.T. 12.	14-2-19	A. 6320/N 8586
17-2-19	329th Hq. Bn.	do	Adm 329th Hq. Bn.	17-2-19	W 9287/N 8586

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Nothing to be written in this margin.