

ORIGINAL

**PARTICULARS OF RECRUIT**  
**DRAFTED UNDER MILITARY SERVICE ACT, 1917**

(Class 1)

1. Surname Slack, ✓  
 2. Christian name Francis David ✓  
 3. Present address 816A-4th St. Medicine Hat, Alberta. Canada SW ✓  
 4. Military Service Act letter and number x  
 5. Date of birth November 14, 1885 ✓  
 6. Place of birth Truro, Nova Scotia Canada SW ✓  
(town, township or county and country)  
 7. Married, widower or single single ✓  
 8. Religion Baptist ✓  
 9. Trade or calling Locomotive Fireman ✓  
 10. Name of next-of-kin Mr. Leonard Slack ✓  
 11. Relationship of next-of-kin father ✓  
 12. Address of next-of-kin East Volly Mountain, Col. Co., Nova Scotia. Canada SW ✓  
 13. Whether at present a member of the Active Militia no ✓  
 14. Particulars of previous military or naval service, if any no ✓  
 15. Medical Examination under Military Service Act:—  
 (a) Place Calgary, Alta (b) Date 11/5/18 (c) Category "A"2" ✓

**DECLARATION OF RECRUIT**

I, Francis David Slack, do solemnly declare that the above particulars refer to me, and are true.

Francis David Slack (Signature of Recruit)

**DESCRIPTION ON CALLING UP**

Apparent age 33. yrs. 5 mths. } Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
 Height 5 ft. 7 1/2 ins. }  
 Chest } fully expanded 36 1/2 ins. }  
 measurement } range of expansion 3.5 ins. }  
 Complexion Med. Gray } None.  
 Eyes Brown.  
 Hair

Parron Lt. Col.  
 Commanding 1st Depot Batt'n, Alta. Reg't  
 O. C. Depot Btl.  
 Regt.

Place Calgary Alberta Date 11/5/18

h



REGIMENTAL DOCUMENTS

NAME *SLACK, FRANCIS DAVID*

REGT. NO. *3209804*

UNIT *1st Depot Bn* FILE NO.

**I**

**S**

**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

**DEATH**

Category

**DISCHARGE**

Category

*Demob'n*

**DESERTION**

**M**

23393

**H**

*39-13*  
*17-13*  
*9-13*

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

*3. Misc Doc's*  
*1. copy*



LOCAL CARD

\*Name **SLACK, Francis D.** Rank **Spr.** Regtl. No. **3209804**  
 Original unit **4 CRT** Present unit **4 CRT.** M. or S. Age **33** Religion **Bapt.** Fyle Depot.....  
 Port, ship, and date of arrival **St. John, Cassandra, 6-3-19.** Ref. H.Q.....  
 Next of kin **L. Slack, father, East Folly Mt. Col. c/o N.S.**  
 Address on leave **Med. Hat.**  
 Address on discharge **816-A. 4th St Medicine Hat Alta**  
 Transportation issued  Yes  No Date..... Character on discharge.....  
 Previous occupation **Loco. Fireman.** Date and place of enlistment **4-5-18 Calgary.**  
 Diagnosis **Fit A 2** Date of Medical Boards **26-3-19**

Date.	Remarks	Pt. 2 Order No.
106 21-2-19	Posted to Cas Co Calgary 12-3-19	72
	Leave with sub to 26-3-19	72
29-3-19	Discharged from H.M. Service	88

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

Date.

Remarks.

Pt. 2 Order No.

Surname  
SLACK

Christian Name or Names  
F.D.

Reg. No.  
3209804

Rank  
Spr.

Unit  
CRT 4

Cas. List.

10 Gnl. Rouen 7-12-18.

18-12-18 A400-2 Bronchal Catahah. MM

21.12.18 Q403-2 74 G. Trouville 12.12.18.

28.12.18 Q407-3 13 P. W. " 20.12.18

3.1.19 Q411-3 10is - 23.12.18.

A.M.D. 2 Dept.

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

Cas. List.



NAME *Slack F.*

*D.*

REGT. No. *3209804*

RANK AND UNIT

*Pvt*

*San. Reg. Sigs* (4)

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

2400 (2)

10 Gen. Pouch

7-12-18

Bronchial

2403 (2)

74 Gen. Pouch

12-12-18

"Catarrh"

2407 (3)

13 Cons. Dep. "

20-12-18

Bronchial "

2411 (3)

" " Diarrhea "

23-12-18

"

"

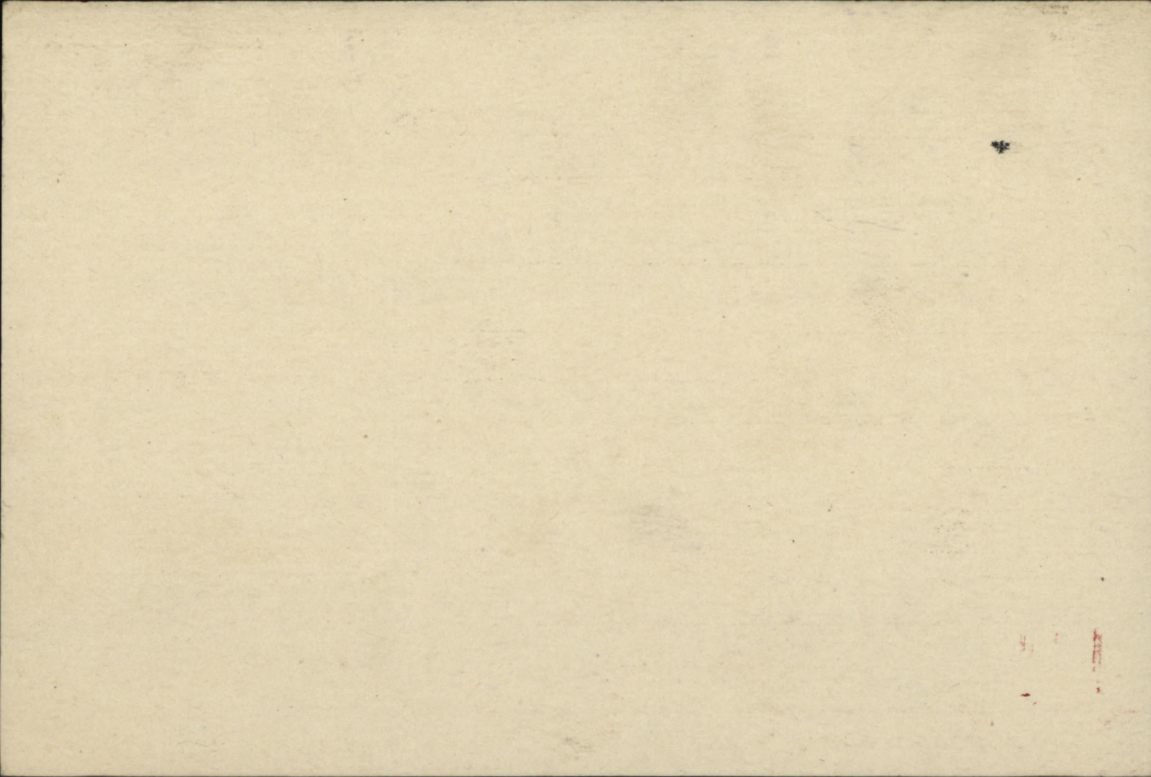




Surname Slack H. Q. 13 47  
PI 183-278  
 Christian names Francis David M. D. No. 13102 PI 163-12-078  
 Regtl. No. 3209804 Rank Pte. T. O. S. May 10 1918  
 Unit ~~Alta Regt 1st Dep Bn~~ D. O. Pt. II 135 of 15 1/5/18  
 Reason Demob S. O. S. 29.3. 1919  
 Auth. D 88 of 29.3.19.  
1388

Next of kin Slack Leonard Relationship Father  
 Address East Folly Mountain Also notify:  
ns.

BORN—Place Canada, Inverness Date Nov. 14th 1885.  
 ATTESTED—Place Calgary Alta Date May 11th 1918.  
 O/S 14-8-18. 1388  
3 R/C 6.3.19 275  
56 Apr.



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

## Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 3209804 Rank Spr Name Slack F. D.  
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<u>29. 3. 19</u>		DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13, PART 2 ORDER NO. <u>88</u> AUTHORITY: <u>R. O. 1420</u> <u>Dated Ottawa 12. 12. 18</u>			<u>Lummler Major</u> 11. 07. Col. Officer Commanding District Depot No. 13

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]





# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *10*

NAME OF SOLDIER

*Black F D*

REGIMENT

*Can.*

RANK

*Plt.*

No. *J. 209 f. 04*



## 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	Pyrrhosa	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
1918										3											
<i>Jan 25</i>										<i>13, 14</i>									<i>Dyckman 10</i>		<i>ear 4, 7, 10, 11, 15, 18, 19</i>
<i>35</i>										<i>5,</i>									<i>10</i>		<i>Ext 3, 12.</i>
										<i>2,</i>									<i>10</i>		<i>Ext Complete</i>
										<i>3, 12,</i>											

*31*

INSTRUCTIONS

1. On examination the position of patient's arms to be marked on form in red ink.
2. On first line of report record of same to be made in red ink.
3. Only such charts to be made as are indicated on will show.
4. Location on examination (in red).
5. Location on history Canada.
6. Condition of discharge.

19 20 21 22 23 24 25 26 27 28 29 30 31 32  
 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

DATE	OPERATOR	OPERATION	REMARKS	PHYSICIAN	REPORT	REMARKS	PHYSICIAN	REPORT	REMARKS	PHYSICIAN	REPORT	REMARKS	PHYSICIAN	REPORT	REMARKS	PHYSICIAN	REPORT

404 P. S. L. O. N.

13118  
 62  
 39  
 13118

*W. K. ...*  
*...*  
*...*

MADE IN CANADA

BRIEF REPORT

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

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

Rank *Sgt* Name *Francis D.* Surname *Slack*  
 Unit or Corps *C.R.I.* (If a soldier) Regtl. No. *3209804*  
 Born at *Cast Holly M. I.* on, date *Nov. 14, 1885*  
 Signature (for identification) *F. D. Slack*

The examination is to be made jointly by two Medical Officers.

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

Weight *156* lbs. *Poor Physique*  
 Height *5* ft. *8* ins.

2. **NUTRITION AND DIATHESIS?**

*mod*

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

3. **NERVOUS SYSTEM?**

*neg*

4. **RESPIRATORY SYSTEM.**

*neg*

5. **HEART?**

Abnormal Sounds? *no*

Abnormal Size? *no*

Pulse Rate? *100*

Intermittence or irregularity? *no*

6. **ARTERIES.**—Any hardening?

*no*

7. **DIGESTIVE SYSTEM?**

*neg*

8. **GENITO-URINARY SYSTEM?**

*neg*

Urinalysis—S.G.? *1020* Reaction? *acid.* Albumen? *neg* Sugar? *neg*

9. **SKIN, MIDDLE EAR, EYE**  
or any other part?

*neg*

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

*no*

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

*Good*

Examined at *Borden* Signed *Dr. Leon Maj* M.O.  
 Date *28/1/19* Signed *Dr. Hunt* M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Medical Examination upon leaving the service

and Officer fit for general service or a Soldier fit for duty

*Handwritten notes and signatures at the top of the page, including a name that appears to be "J. M. ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Vertical handwritten notes: "100", "100", "100"*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten note: "Poor ..."*

*Handwritten notes at the bottom right, including a signature and the word "Total"*

# 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. 3209804 Rank Spr Surname Slack  
 (Give name in full)  
 Unit or Corps Casualty Co Birthplace Canada

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

### 1. GENERAL DESCRIPTION:

Physique Good Weight 145 lbs. Height 5-7 1/2 ft. Colour of Eyes blue  
 Nutrition Good  
 Pulse 82  
 Condition of arteries normal  
 Vision Rt. 20/20 Left 20/20  
 Hearing (conversational voice) Rt. 16 ft. Left 16 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)  
none

Opinion as to general health and physical condition A II

### 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.

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

816 - A 4th St - Medicine Hat. Atlas [over]

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 SECTION FOR USE IN CANADA—

Examined at...**CALGARY**...(Canada)

Date .....**MAR 26 1919**..... Signed *H. Egbert* .....M.O.

CAPTAIN C. A. M. C.

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 *F. D. Slack* .....

(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.)

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

18 OCT 1918  
18 OCT 1918

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 Slack Christian name Francis David  
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) 816a-4th. Street Medicine Hat, Alta.,

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11th day of May 1918 by the undersigned medical board sitting at Calgary, Alta.,

5. Age as stated 32 Years 8 Months. 6. Apparent age 33 Years - Months  
7. Height 5 Feet 7 1/2 Inches. 8. Weight 138 Pounds.

9. Chest measurement (Minimum 33 Ins. Maximum 36 1/2 Ins.) 10. Complexion Medium { Eyes Gray Hair Brown

11. Physical development Good { Good Fair Poor 12. Smallpox marks None

13. Number of vaccination marks { Right arm X Left arm 1 14. When vaccinated last Childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease None

16. Slight defects but not sufficient to cause rejection None

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

A2

20/20 Vision R.D. normal L.D. normal RT. normal LT. normal Hearing normal

R. Robinson President CAPTAIN C. A. M. G.  
W. W. Upton Member CAPTAIN C. A. M. G.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
3/7/18	+	Captain <u>W. W. Upton</u>	17/6/18	+	<u>W. W. Upton</u> M.O.
		M.O.	24/6/18	+	<u>W. W. Upton</u> M.O.
		M.O.	18/7/18	+	<u>W. W. Upton</u> M.O.

Joined 11th day of May 1918 at Calgary Alta

Corps	REG'TL NUMBER	HABITS	DATE
<u>1st DEPOT BATT. ALBERTA REG'T.</u>	<u>3209804</u>		<u>11-5-18</u>
Transferred to.....	<u>4 CRT</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Niagara Camp</u>	<u>22/7/18</u>		<u>A2</u>
<u>Perth Camp</u>	<u>29. 8. 18</u>		<u>A Blue mark Captain</u>

Signature of Man Francis David Slack





# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 3209804 (Rank) Private

Name (in full) Franwis David SLACK enlisted in  
the First Depot Battalion, Alta. Reg't.

CANADIAN EXPEDITIONARY FORCE at Calgary, Alta. on the Eleventh  
day of May 19 18

HE served in FRANCE

and is now discharged from the service by reason of Demobilization  
R.O. 1420, 12-12-18

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

Age 33 Years 4 Months

Height 5 Feet 7 Inches

Complexion Medium

Eyes Grey

Hair Brown

Marks or Scars

F. D. Slack  
Signature of Soldier

W. MacGowan  
Issuing Officer

Date of Discharge March 29th, 1919.

Officer i/c Discharge Section District Depot M. D. 13  
Rank  
Appointment

Signed at Calgary, Alta. this Twenty Ninth day of March 19 19  
in Military District No. 13

File Reference No. 13D-S-621

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

CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

No. .... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

Medals and Decorations .....

Remarks .....

Signed at ..... this ..... day of ..... 19.....

.....  
Name of Officer

.....  
Rank

.....  
Appointment

On demobilization the  
particulars called for on  
the back of this cer-  
tificate will not be com-  
pleted.

KR Rank

Name SLACK, Francis. David.

Reg'l No. 3209804.

Dftl 0812 C.R.T. to C.R.T.D If in perm. Corps, }  
What Unit? }

Married or Single Single.

Place and Date of Enlistment Calgary. 11th May 1913

Place of Birth Truro, Nova Scotia.  
Canada.

Name and Address, Next-of-Kin Mr. Leonard Slack.

East Volly Mountain, Col. Co. Nova Scotia.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

N/E. R.B. No. 6643  
File R.L.  
Category Can OR

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. V., Ld.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England		25-8-18	S/S KIA CRA.
26.8.18	CRT to C.R.T.D.	from Canada	St. Catharines	25.8.18	OS 236
9-10-18	Do	from St. Catharines	"	9-10-18	OS 280
22.1.19	C.R.T.	Sos from Sea Horse Depot France	Borden	7.1.19	— 22
30.1.19	C.R.T.	Trans. to Eng. Posted to C.R.T. Dep. for Demobilization.	Field.	3.1.19	— 4.
1-2-19	MDC Wing	T.o.S. from 4th C.R.T.	Phyl	31-1-19.	— 27.
22.2.19	MDC Wing	Sos on proceeding to Canada	"	21.2.19	— 45

17 OCT 1918  
 RECEIVED  
 THE AIR FORCE



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

M. F. W. 53. (A. F. B. 103.)

250M.—1-16.

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 108<sup>th</sup> Div. CRT & CRTD  
FIELD DEPOT BATTALION I.R.

Regimental No. 3209804 Rank Private Name Slack, Francis David

C. E. F.

Enlisted (a) 11/5/18 Terms of Service (a) duration of war Service reckons from (a) 11/5/18

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) Locomotive Fireman

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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**M.S.A.**

EMBARKED CANADA 10.8.18

DISEMBARKED ENGLAND 25.8.18

Embarked  
Disembarked

Sidney  
London

10-8-18  
25-8-18

Taken on strength on arrival from Canada.

Purfleet.

25-8-18

Part 2 D.O. 233

S.O.S. on proceeding overseas to the Battn. C.R.T.

Purfleet.

9-10-18

Part 2 D.O. 230

*H. W. Marshall*  
Lieut. for O.C.  
Canadian Railway Troops Depot. *86*

10-10-18	<i>C. G. B. S.</i>	T.O.S. CRT. on arrival in France from CRT Depot Purfleet.	France	10-10-18	NR. 788. Do 1092/22/10/18.
12-10-18	do	Left for Unit.		12-10-18	NR 1424
20-10-18	4 <sup>th</sup> CRT	Joined Unit.	FIELD	13-10-18	B213. D/20-10-18.
7.12.18	19 bles.	Bronchitis	Adm. 19 bles	6.12.18	7131
			10 A.T. 22		

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

CERTIFIED CORRECT  
 17 OCT 1918  
 CAN. RECORDS, 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				
7-12-18	10 Gen. H.	Bronchial catarrh Adm.	10 Gen. H.	7-12-18	R 131

7-12-18	4 H.R.D.	Bronchitis -	129 F.A.	6-12-18	B2 13
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3-1-19	B.S.B.D.	Trans. to England operated to CRD Witley		4-1-19	NR. 4 20. DO. 1 20/1919.
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22-1-19	B.P.L.D.	T.S.D. from B.S.B.D. Chaples	Bordon	7-1-19	B.D. Pt. 22.
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*Chas. B. Chapwell*  
Lieut. for Lt.-Col. A. A. G.  
Canadian Section, G. I. C. Ent. Detachment B. E. F.

31-1-19	S.S.S.D.	S.O.S. to H.D. No. 13 Kimmel Park, HSY1	Bordon	31-1-19	BO Pt. 11 No. 31
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**108 C.C.C. Kimmel Park for return to Canada. Part 11 Order No. 28**  
**108 C.C.C. Kimmel Park on embarkation to Canada, Part 11 Order No. 45**  
**Commanding B Wing, Kimmel Park Camp,**

Lieut. & Asst. Adjutant,  
for Lt.-Colonel, Commanding,  
Composite Brigade, C. E. A.

SS CASSANDRA  
 EMBARKED 22-2-19  
 P. F. Allen  
 C.O.C. NO 13 T.A.C.S.

*B.A. Saunders*  
 ..... LIEUT.  
 O. No RECORDS, M. D. 13.

26. 2. 19 | TAKEN ON STRENGTH OF DISTRICT DEPOT 13, PART 2 ORDER NO. 77  
 Officer Commanding, District Depot No. 13

# FORM OF WILL.

I, Francis David Slack (Name in full)

Regimental Number 3209804 serving in First Depot Batt. A.R.

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

I bequeath all my real estate unto

<u>Mrs. Annie Slack, (Mother)</u>	} Name and Address of person or persons to whom it is to go.
<u>East Volly Mountain, Col. Co.</u>	
<u>Nova Scotia</u>	

absolutely, and my personal estate I bequeath to

<u>Mrs. Annie Slack, (Mother)</u>	} Name and Address of person or persons to receive personal estate* (See note).
<u>East Volly Col. Co.,</u>	
<u>Novia Scotia.</u>	

**IMPORTANT NOTE**

This must be Signed and Dated by THE SOLDIER HIMSELF.

this 11 day of May A. D. 1918

Francis David Slack 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.

**THE TWO WITNESSES MUST SIGN HERE**

Signature of First Witness J. Mickleburgh Pte  
 Address of Witness Victoria Park Barracks, Calgary  
 Occupation of Witness Soldier

Signature of Second Witness J. McLeventy Pte  
 Address of Witness Victoria Park Barracks Calgary  
 Occupation of Witness Soldier

FORM OF WILL

Name of Testator

Residential Address

of the County of \_\_\_\_\_ State of \_\_\_\_\_

do hereby declare this to be my last will

I bequeath all my real estate and

Name and Address

of person or

persons to whom

it is to go

absolutely, and my personal estate I bequeath to

Name and Address

of person or

persons to receive

personal estate

Witness

Signature of Testator

Signature of Witness

I, \_\_\_\_\_ of the County of \_\_\_\_\_ State of \_\_\_\_\_ do hereby certify that the above is a true and correct copy of the original of the will of \_\_\_\_\_ as the same appears from the records of the County of \_\_\_\_\_ State of \_\_\_\_\_

NOTARY PUBLIC

My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_

Signature of Notary Public

Address of Notary Public

Occupation of Notary Public

Signature of Notary Public

Address of Notary Public

Occupation of Notary Public



FORM OF WILL

S-621

I, Francis David Slack (Name in full)

Regimental Number 3209804 serving in Can Rly Troops

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

816.9-4 St  
Medicine Hat

I devise all my real estate unto

~~.....  
.....  
.....~~

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

absolutely, and my personal estate I bequeath to

Mrs Annie Slack  
East: Tolley Mt.  
Colchester County  
Nova Scotia Canada

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 14<sup>th</sup> day of July A.D. 1918

This must be signed and Dated by THE SOLDIER HIMSELF.

Francis David Slack 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 [Signature]

Address of Witness Magnum Camp

THE TWO WITNESSES

Occupation of Witness Lieut in C.E.F.

MUST SIGN HERE

Signature of Second Witness Douglas J. Jennings

Address of Witness Magnum Camp

Occupation of Witness Lieut. C.E.F.

FORM OF WILL



[Faint, mostly illegible text throughout the page, likely bleed-through from the reverse side]

Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	EFFECTIVE DATE:-		
AMOUNT:-	AMOUNT:-		

NAME:- **SLACK Francis David**

NUMBER:- **3209804**

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
R.P.C. Can.	1-8-18	Spr.

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.

UNIT AND TRANSFERS

ORIGINAL UNIT:- **108 Wft. C.R.T.D.**

DATE ACCOUNT FIRST OPENED:- **1-8-18**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			B.R.T.D.

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
<del>24/12</del>	<del>6833</del>	<del>25 Dec</del>	<del>4 66</del>				
<del>30/12</del>	<del>9676</del>	<del>28 "</del>	<del>4 66</del>				
10/1/19	2545	CRA	2 973				
14/1/19		Ldn	2 2920				
18/1/19		London Defs Pay	14 60				
26/1/19	3539	CRA	2 1947				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918											
July 31	Bal. from Canada								32 60		
Aug	PP	34 10							66 70 15		
Sept	PP	33		24005 T143 29/8 CRTD 2	37				99 70		
				2026 10/9 CR TW 1	48 67						
				2339 28/9 " 10	49 04				4093 30		
					58 77						
Oct	PP	34 10							75 03		
				24005 P47 K54 29/10 CRTD 46	41				94 62 45		
					41						
Nov.	PP	33							107 62 60		
				1496 15/11/18 4ERT 5	373				103 89		
				1405 1/11 " 11	746				96 43		
									130 53		
Dec		34 10							117 47		
				1594 1/12 4ERT 43	13 06						
1919											
Jan		34 10							151 57		
									101 20		
									24 75		
	Int on Defs Pay 31/1/19		1 18						152 75		
				6P 4143 11/1 Ldn (7)	29 20						
				9676 30/12 CRA (14)	4 66						
				6833 24/12 C. Del. (20)	4 66						
				2545 10/1 CRA (23)	9 73						
				CP 9513 18/1 London (30)	14 60						
				3539 25/1 CRA 38	19 47				70 43		
					82 37						

*Dis No Jan 31/1/19 NR 2361 Gordon 27/1/19 Gordon 13*  
*Enc on 2/1/19 3.0.0 14.60 18/1/19 Bully baggy stayed*  
*Defd \$70.43 Ledger Bal \$152.75*

*M. McKeon*  
 CHECKED BY *[Signature]*

*Lwd*

NUMBER

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
	<i>Food</i>	<i>1 18</i>			<i>82 32</i>				<i>70 43</i>		
				<i>187 10/2 K Park (Fund) 691</i>	<i>9 73</i>				<i>60 70</i>		
		<i>1 18</i>			<i>92 05</i>						
				<i>P.O.P. to Canada 22<sup>nd</sup> 19 1-12 1918</i>							

C. X

This space to be for numbers.

# Proceedings on Discharge.



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

No.	3209804
Rank	Private
Surname	SLACK
Christian name	Francis David.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	1st Depot Bn.
Date of discharge	March 29th, 1919.
Place of discharge	Calgary, Alta.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	33	years	4	months	Descriptive marks
Height	5	feet	7	inches	
Complexion	Medium				
Eyes	Grey				
Hair	Brown				
Trade	Locomotive Fireman				
Intended place of residence (To be given as fully as practicable.)	816- A- 4th St., Medicine Hat, Alta.				

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

**DEMOBILIZATION**

Authority for discharge R.O. 1420, 12-12-18  
13-DD--Part 11 D.O. 88 29-3-19

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

D.D.

(OVER)

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (Squadron or Battery, and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) *Francis David Slack* (Signature of Soldier.)

(Date) *24.3.19* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place).....*Calgary, Alta.*.....

(Signature).....*W. MacLennan*.....

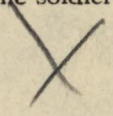
(Date).....*29-3-19*.....

Officer i/c Discharge Section District Depot M. D. 12

**Reservations referred to at Para. 8.**

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

*Y. D. Slack*



<p>Particulars of Account                  W. 115                  B. 215</p>	<p>Reg. Conduct Sheet                  Squadron                  Battery                  Company                  or                  Field Conduct Sheet                  W. 118</p>
<p>(a) Proceedings on Discharge                  (b) Attestation                  (c) Medical History Sheet</p>	<p>Copies of Certificates by G. P. in MS.                  Med. Hist. Sheet                  Casualty Form                  Medical Report for Invalids                  Dental History Sheet                  Last Pay Certificate                  Duplicate Discharge Certificate                  W. 302                  W. 44                  B. 403                  B. 332                  W. 54                  W. 313                  W. 304                  W. 31                  Plan of Will                  Only if discharged "Medically unfit"                  Only if man has not been overseas</p>
<p>Documents not accompanying this form should be crossed out.</p>	
<p>I hereby certify that the following documents are unobtainable:</p> <p>Other Commanding</p> <p>W.B. in the case of a man discharged by purchase the date and number of deposit receipt with amount of same is to be noted herein</p>	

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a          Company }                    or          Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged " Medically unfit."          ‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23                            or          Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

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



Cassandra 6/3/19

AUDITOR *[Signature]* PAYMASTER *[Signature]*

M. OR S. *S.* PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES REGT. No. *3209804* RANK *Spr.* NAME (IN FULL) *SLACK, J. D.*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$ <i>nil</i>	DATE EFFECTIVE	
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE DATE REASON AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY

*Certified opening entries on this Ledger Sheet have been audited by [Signature] Date 18/3/19*

*CALGARY, ALTA. MAR 29 1919*

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT		\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.		
			\$	C.																				\$
31/1/19.		1 <sup>10</sup>			70	43																	Bal Eng L.P.C.	
					70	43							9	73	4	87								
													5	00						69	60	69	60	83
1/2/19.				12	00																		72 Subsidy 15 days 12/2/19 to 26/2/19	
29-3-19	57	1/10	62	70	35	00																	Clothing Allowance \$ 35.00	
			68	70	47		70	43					14	73	4	87				69	60	180	13	DISCHARGED 29-3-19
<b>WAR SERVICE GRATUITY</b>																								
<i>Certified opening entries on this Ledger Sheet have been audited by [Signature] Date 11/6/19</i>																								
				210	00		210	00					70	00						170	00	140	00	Bk #9 142481/ 14-4-19
													70	-						70		70		14.8.19 CE * G 612103
													70	-						70		70		14.6.19 CE * G 850514
				210			210						210							210		210		All Payments Due on This Account have been completed.

*[Signature]* Major  
S.O. P. S. M. D. NO. 13

