

Original  
540-307

*Ceyale*

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

- (ANSWERS)
1. What is your name?..... Gilbert R. Slack
  2. In what Town, Township or Parish, and in what Country were you born?..... Ottawa, Ont.
  3. What is the name of your next-of kin?..... Jennite Slack (Mother)
  4. What is the address of your next-of-kin?..... Riverside Park, Ottawa. *ban (complete address)*
  5. What is the date of your birth?..... Oct. 8th., 1895. *C.R.S.*
  6. What is your Trade or Calling?..... Civil servant.
  7. Are you married?..... No
  8. Are you willing to be vaccinated or re-vaccinated?..... Yes
  9. Do you now belong to the Active Militia?..... No
  10. Have you ever served in any Military Force?..... 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? }
- Gilbert R. Slack* (Signature of Man.)  
*A. H. Hoburn* (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Gilbert R. Slack, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

*Gilbert R. Slack* (Signature of Recruit)  
*A. H. Hoburn* (Signature of Witness.)

Date Ottawa, Aug. 28th. 191 5

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Gilbert R. Slack, 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.

*Gilbert R. Slack* (Signature of Recruit)  
*A. H. Hoburn* (Signature of Witness.)

Date Ottawa, Aug. 28th 191 5.

### 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 Ottawa this 28th. day of August 191 5.

*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)



*Rec. C.A.S.*

Description of GILBERT A. SLACK. on Enlistment.

Apparent Age.....20.....years.....10.....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.....4½.....ins.

Chest measurement. { Girth when fully expanded.....35½.....ins.  
 { Range of expansion.....3½.....ins.

Complexion.....Med......

Eyes.....Grey.....

Hair.....Brown.....

Religious denominations. { Church of England.....6 of 6.....  
 { Presbyterian.....  
 { Wesleyan.....  
 { Baptist or Congregationalist.....  
 { Other Protestants.....  
 (Denomination to be stated.)  
 { Roman Catholic.....  
 { Jewish.....

**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.....August 28th......191 5

Place.....Ottawa......

*[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.**

Gilbert R. Slack.....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.

G. B. Schwarz.....(Signature of Officer)

Date.....Aug 28.....191 5



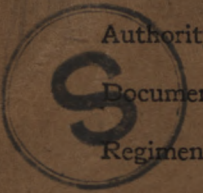


R. O. No. ....  
H. Q. No. ....

DISCHARGE DOCUMENTS

- 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 Black, Gilbert Ross  
 Regt. No. 540309 Rank Signaller  
 Corps 32nd Batty C & A form New cyclists  
Med unit

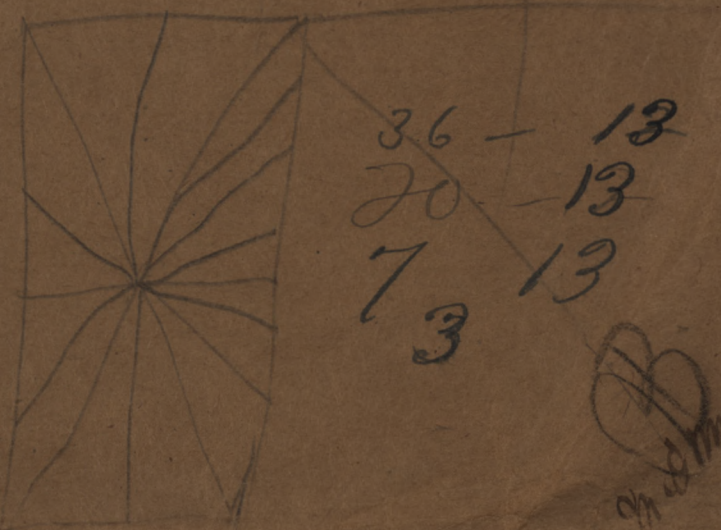


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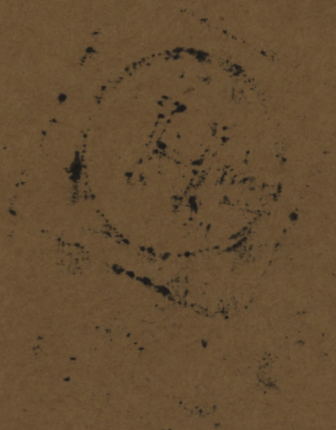


A. B. 119-1  
 A. B. 122-1  
 A. B. 241-1  
 M. W. 60-1  
 1122-1

R 149-1  
 1 pay card









Surname **Slack.** Christian Name or Names **G R** Reg. No. **540307.**

Rank **Sig.** Unit **9th Bde CFA** Co. **GA. 9B.** Troop  Batty.

Hospital **no 26 G. H. Etaples.** Date of Admission **29-3-17**

Transferred **Milit. Hosp. Fort Pitt. Chatham** Hosp. **6-4-17**

**Gayville Con Spes. Ramsgate** Hosp. **7-7-17**

**Whitecross Hill. Worthington** Hosp. **30-8-17**

Hosp.

Diagnosis **G.S.W. Back. Dang. ill.**

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Reptd from base dangerously wd. 26.3.17.

DISPOSITION

Date

28.3.17. A125.

REMARKS

C-2. 31-3-17 A126

Ser. ill. 6-4-17

11-4-17 B124 G. 66.

Dang. ill. 11-4-17

- 13-4-17 B125

Diso. 19-9-17

12-7-17 B109

Dis to Canada per HS "Llandoverly Castle" from Liverpool 19-9-17

6-9-17 B31 (3)

" 15-2-18 B1680

A.M.D. 2 Dept.  
Bch. of D.G.M.S. O.M.F.C. London

R.



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



Name SLACK G.R. Rank Sgnr. Regt. No. 540307 Unit C  
 Battn. 32 B'y Camp or O. S. 0 File M. H. C. C. H. Q. File 11183  
 Next of kin Mother--Riverside Park, Ottawa., Ont.  
 Discharged to Class 3 D. of D. 100% Conduct Very Good  
 Pension awarded \$600.00 1 Yr. Date of first payment 1-1-18  
 Address on discharge Riverside Park, Ottawa, Ont.  
 Diagnosis G.S.W. Spine Date boarded 23-11-17

DATE	CLASS	REMARKS	Part 2 Order
<u>4-10-17</u>	<u>2</u>	<u>C.C.P.G. From Fleming</u>	<u>#320</u>
<u>31-12-17</u>	<u>3</u>	<u>DISCHARGED Cancelled</u>	<u>#363 #66</u>
<u>1-2-18</u>	<u>2</u>	<u>Fleming, Re-admitted (Cancelled)</u>	<u>#43 #69</u>
<u>19-3-18</u>		<u>DIED G.S.W. spine with severence spinal cord</u>	<u>#80</u>







Number 540307

Rank

Govt.

Surname

SLACK

Christian Name

Gilbert Ross

Units

Can. Cyclists Bn. Theatre of War France

Date of Service

24-3-16

Remarks

Mr. John H. Slack

Latest Address

Riverside Park.  
Riverside Park Ottawa West.  
Ottawa West P.O. Ottawa West.  
Ottawa Ont. Ont.

Roll No

Ottawa Ont. Ont.

200m. - 2-21.M.

Page 12318

B  
✓



Port, ship, and date of arrival  
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 \_\_\_\_\_

DESP. APR 19 1922  
REGON NO. 2713

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



*Not Eligible for Star.*

SLACK, Sgnr. G.R., No.540307, 32nd Battery, 649 S 11185

MEDALS & DECORATIONS, Father, John H. Slack Esq.,  
*Riverside Park,* - Ottawa, West P.O.,  
Ottawa, Ont.

PLAQUE & SCROLL, Father, as above.

*See # 808522*

*70 Chas. C. Slack*

MEMORIAL CROSS, Mother, Mrs. Janet A. Slack,  
Address, as above.

*Mem. No.*

*By Receipt 5. 6. 20.*

MAY 9 - 1921

scroll Desp. \_\_\_\_\_ Reqn. No. 2-42124

FEB 9 - 1922

Plaque Desp. \_\_\_\_\_ Reqn. No. P 29005



52E

384



<sup>1/386</sup>  
REG. NO. 540307

NAME Slack Gilbert-R  
(SURNAME FIRST)

7722

RANK Signaler

CORPS 32<sup>nd</sup> Batty.

42

AGE 23.

SERVICE 24/12.

NAME OF HOSPITAL Prot. General

PLACE Ottawa, Ont

DATE OF ADMISSION 25-10-17

DISEASE G. & W. Spine with Severe Spinal Cord

DISCHARGE

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M-9-17-H.Q. 1211-8-30.

~~Died 19-3-18~~



REMARKS .....

Blank lined area for writing remarks.



Gilbert Rosw

Name SLACK.

Rank Sig.

Reg. No. 540307

Unit 9th. Brigade, C.F.A.

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
26-3.	Rept. from Base.	DANGEROUSLY WOUNDED		A.125.M.773.		
29-3.	Dangerously Ill. at.					
	No. 26. Gen. Hosp. Etaples.	GSW.	Back.	A.126.M.958.		
6-4.	SERIOUSLY ILL.	Mil. Hosp. Chatham.	do	B.124.M.1569.		
11-4.	C.C. Above reports	DANG. ILL.	DO	B.125.M.1679.		
7-7	Gran C.S.H. Ramsgate		do	B.159		
30-8.	Whitcross Bay, N. Y.	Warrington	do	B.31		1438
		Warrington	do	B.168.		4762
19-9.	Mis		do	WFK		







No. 540, 207

RANK

Plt

NAME

Shack L

R

T. O. S.

UNIT

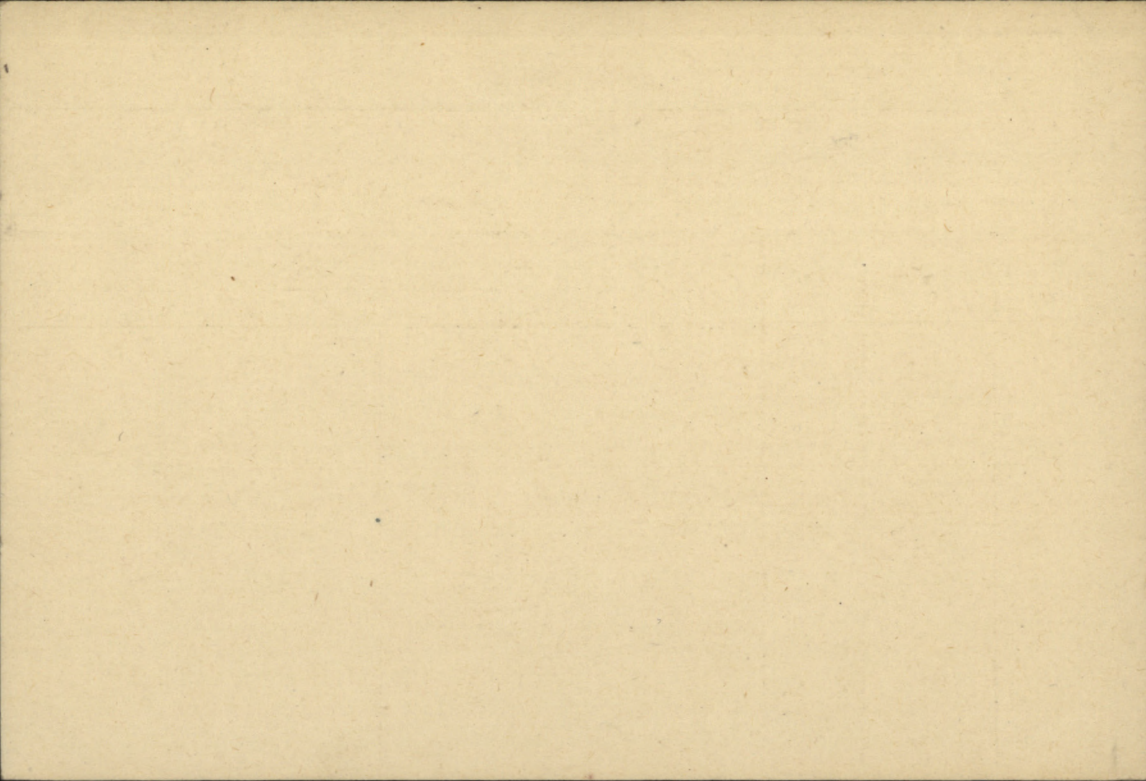
Div. Cyclist Depot.

Trans. from: Cyclist Platoon.  
7/9/15 D.O. 12 of 7/9/15

M. D. 21

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Sept. 7	1915 Sept. 20	✓		
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
1916 Jan. 1	1916 Jan. 18	✓	Overseas. Jan. 18/16	D.O. 16 of 20-1-16 UNIT SAILED JAN 18 1915







Granville Can. Spr. Hospital,

Ramsgate.

HOSPITAL.

A. & D.  
CARD

AT 17-7-17  
 A. & D. No. T 6974 PL. OF ACTION 540307  
 RANK Sig. UNIT C.F.A SICK OR WOUNDED  
 NAME Black. G R AGE 22. RELIGION R/C  
 PLACE IN HOSPITAL ~~54-277~~ 10. I.  
 DIAGNOSIS gsw Back.  
 ADMITTED 6 - JUL 1917 FROM 56 days 30/8/17  
 DISCHARGED \_\_\_\_\_ TO \_\_\_\_\_  
 TRANSFERRED L D War Hosp Warrington  
 SERVICE AT HOME 23/12 IN FIELD 13/12  
 RESULTS \_\_\_\_\_



REMARKS.

*[Faint, illegible handwritten marks]*



649.8-1183

NAME *Slack, Gilbert, R.* *SOS file 31-12-17.3*

RANK & NO. *Pte.* *540307*

CORPS *3<sup>rd</sup> Div. Cyclists.*

ENLISTMENT, PLACE *Ottawa* DATE *Aug. 28, 1915.* **S**

FORMER CORPS *Nil.*

COUNTRY OF BIRTH *Canada, Ottawa, Ont.*

NEXT OF KIN *Slack, Jennet (mother)*

ADDRESS OF NEXT OF KIN *Riverside Park, Ottawa, Ont.*

DISCHARGE, PLACE

DATE *R/6-30-9-17.*

L. L. 85779—M. & D.—6011. *00.22.1-16.319/8*

M. F. W. 22. 100 m.—9-15.

H. Q. 1772-39 839. *JMJ*

REMARKS:

Sailed for Canada per Hosp. Ship. Slandovry <sup>Castle</sup>  
19-9-17. (Auth. 352.)



LEDGER No. \_\_\_\_\_

SERIAL No. \_\_\_\_\_

REG. No. 340307NAME Slack. G. R.RANK PteCORPS 32.AGE 22

SERVICE \_\_\_\_\_

HOSPITALS

DATE OF ADMISSION

1

C. C. G. P. Ottawa4-10-17

2

3

DIAGNOSIS

St. W. Spine Complete Division Spinal Cord.

TRANSFERRED TO

New York City for treatment - 18-10-17.C. C. G. P. Ottawa~~79-3-18~~25-11-17.

DISPOSITION

— Died 19-3-18. —

CATEGORY \_\_\_\_\_

M.F.W. 2553.

1126-D.P.-50M-12-18.

1772-39-1332.

P.T.O.





# CASE HISTORY SHEET.

No. 540307 Rank Signaller Name Gilbert R Slack Age 23  
Unit 32<sup>nd</sup> Bty Completed years of service 2 yrs <sup>Where and how long</sup> Canada England France  
Date of admission Oct 28<sup>th</sup> 17 Date of discharge March 19<sup>th</sup> 18 - Died.  
Diagnosis 1038 G.S.W. Spine with neuraxial spinal Cord Place of origin Vimy

## CONDITION ON ADMISSION AND PROGRESS OF CASE.

Poorly nourished young man  
Paralyzed below 9<sup>th</sup> dorsal spine due  
to Gun shot wound completely severing  
spinal cord. Intelligence good, intellect  
clear. All sensation and all power  
involuntary motion below seat of injury lost.  
Alternating incontinence and retention  
of urine and feces. Cystitis with  
large amount of pus in urine.  
Trophic ulcers back, knees and great  
toes. Ulcer over sacrum size of  
palm of hand.  
Oct 18<sup>th</sup> Went to New York to consult Dr  
Elsberg with view to operation relieving condition.  
Decided no operation could avail.  
Condition gradually became worse  
with frequent chills and rises of temp  
to 70.4° to 70.5°  
March 19<sup>th</sup> Died.

## FAMILY HISTORY.

(Tuberculosis, mental or nervous diseases.)

No Tuberculosis  
No Mental or Nervous Diseases

## TREATMENT.

(Especially any specific or special form.)

General Care  
Irrigation Bladder etc.

## CONDITION ON DISCHARGE.

(and disposal made of case.)

Died March 19<sup>th</sup> 18.

Date March 19<sup>th</sup> 18.

T. H. Leggett Major  
Medical Officer i/c case.



CASE HISTORY SHEET.

1

Medical Record



CPB: 100123 F.P.D.

7. C.T. 7 Original  
7. C.T. 708.

**ORIGINAL MEDICAL HISTORY SHEET.**

Surname Slack Christian Name Herbert Ross

Examined { on 28 day of Aug. 1915  
at Ottawa  
Birthplace { City or Town Ottawa  
County Canada

Approved by [Signature]  
Rank [Signature] M.O.  
APR 10 1920  
TO CANADA

Apparent age 20 - 10  
Trade or occupation \_\_\_\_\_  
Height 5 Feet 4 1/2 Inches.  
Weight 145 Lbs.  
Chest measurement { Minimum 31 inches.  
Maximum expansion 35 1/2 inches.  
Physical development good  
Small-Pox Marks \_\_\_\_\_

Date \_\_\_\_\_ Fit or Unfit \_\_\_\_\_  
EXAMINED FOR RE-ENGAGEMENT,  
12 APR 1917  
M.O.  
M.O.  
M.O.  
M.O.  
M.O.  
M.O.

Vaccination Marks { Arm Right Left  
Number \_\_\_\_\_

Date Result VACCINATIONS.  
1915  
Oct 18 PPW Canada 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.  
1915  
Oct 12 PPW Canada M.O.  
" 14 PPW Canada M.O.  
" 19 PPW Canada M.O.

Enlisted on 28 day of Aug. 1915 at Ottawa

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Div. Cyclists</u>	<u>540-307</u>		<u>Aug. 28, 1915</u>
Transferred to.. ..	<u>93rd C.F.A.</u>			

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD.**

STATION.	DATE.	DISEASE.	RESULT.

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

88-2-176

CANADIAN



Surname... *S. D. S.* Christian Name... *W. B. S.*

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				
<i>Niagara Falls Ontario</i>	<i>1915</i>						<i>Conjunctivitis</i>			<i>R. W. Phillips</i> <i>R. W. Phillips</i>	
	<i>Sept 7</i>	<i>12</i>	<i>Sep</i>	<i>1915</i>	<i>4</i>	<i>Oct</i>	<i>1915</i>	<i>23</i>			
	<i>Nov 8</i>	<i>5</i>	<i>Dec</i>	<i>"</i>	<i>20</i>	<i>Dec</i>	<i>"</i>	<i>16</i>	<i>Influenza</i>		
<i>Fort Pitt, Chattan</i>		<i>6</i>	<i>4</i>	<i>17</i>			<i>9th Back Paraplegia</i>		<i>wounded 25.3.17 On arrival dirty perforating wound mid dorsal region Paraplegia complete loss of sensation below navel. Incontinence of urine &amp; faeces. Cystitis severe. Haematuria Operation 11.4.17. X ray shows large FB partly embedded in intervertebral disc of 9th dorsal vert<sup>ae</sup>. Laminectomy done. &amp; removed 1 1/2 inches of cord pulped in a fluid condition. Dura appr. well. Shred of muscle, pus, washed out. Wound closed with drain through muscles. Wound healed per. primam except track of drain. This is now healed. His general health is excellent. But he has a chronic Cystitis &amp; though bladder empty itself partly completely he requires a catheter &amp; regular bladder lavage. No improvement in the paraplegia which is permanent. The cord having been completely divided</i>	<i>Duplicate Medical History Sheet posted to here. Medical Registrar Record Office.</i>	

*Woodford Capt. Rouse*



W.B. Rank Pte. Name SLACK, Gilbert Ross.

Reg'l No. 540307

Unit Dft Div. Cyclists. If in perm. Corps, What Unit?

Married or Single Single

Place and Date of Enlistment Ottawa, Aug. 28th 1915.

Place of Birth Ottawa, Ont.

Name and Address, Next-of-Kin Jennite Slack, Riverside Park, Ottawa, Canada

Relationship Mother.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.B. No. 4134  
File R.L.  
Category M U B

Discharge, Date and Place

Reason

Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	Character	REMARKS Taken from Official Documents
Date	From whom received					
		Arrived in England	31 JAN 1916			A.F.B. 103 CHECKED (W.R.) 90000.150
24-2-16	Com. Res. Coy.	S.O.S. on train to 3 <sup>rd</sup> Div. Coy. Chisleton		24-2-16		PT II D.O. #18
25-2-16	3 <sup>rd</sup> Div. Coy.	Taken on Strength.				#47 27B 103 C.K.
24-3-16	3 <sup>rd</sup> Div. Coy.	Embarked for France		24 MAR 1916		NK
31-5-16	3 <sup>rd</sup> Div. Coy.	This unit will form part of the Can. Corps. Cyclist Bn In the field				PT. 2. 0.31
3-9-16	Can. Corp. Cyclist Bn.	Attached A.P.M. 4 <sup>th</sup> Div.		22-8-16		" #15
26-10-16	"	ceases to be attached A.P.M. 4 <sup>th</sup> Div on transfer to 9 <sup>th</sup> Bde		8-10-16		PT. II D.O. 45. 4 <sup>th</sup> Div. 2017. d/4 27/19/16
8-10-16	"	Trans to 9 <sup>th</sup> Bde Can. Field Art.		8-10-16		Part II No 32
8-10-16	9 <sup>th</sup> Bde	London transfer from CEEB.		9-10-16		200
28-3-17	"	Reported from France. Delays only. Wounded		26-3-17		C.F. A. 125
31-3-17	"	O.C. Youths Reports Dying in Etaples		29-3-17		C.F. A. 126. ESTN Bnd

9/3 b...  
W.R.  
NW



540304 Slack. G.R.

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 Document

Date

From whom received

11.4.17	9 <sup>th</sup> Bde CFA	Milit Wap Fort Pitt. "Seriously Ill"	Chatham	6.4.17	<sup>alt CL B 125</sup> CL B 124	GSW Back
13.4.17	" " "	Dr Milit Wap Fort Pitt reports now "Dangerously Ill"	"	11.4.17	CL B 125	" AR Depot
12.4.17	" " "	SDS to Regt Depot "wounded"	Field	8.4.17	PT II	72 P <sup>100</sup> 35d 13/4/17
12.7.17	" " "	trans Gran. Can Spec Hoysl	Ramsgate	7.7.17	CL B 159	GSW Back
5.9.17	" " "	to Whites Cross Mill Hosp.	Sig. Warrington	30.8.17	CL B 31	GSW Back.
24.2.18	Cur.D.	S.O.S to Canada.	Witley	19.8.17	Doss.	
<p>Shipped from Liverpool for "S.S. Sandover Castle" 19/9/17 Ref Mr. R. Kirk 20. S.P.D.</p>						



*Certified* PL 2-26-91  
R2S. 24117. H.T. 101/601  
 Fill in Only.—Unit, Number, Rank and Name.

CERTIFIED  
 Canadian Record  
 Minister Ho  
 M. F. 1.  
 150M. 10-15.  
 H.Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 3 Can Dir Coy. Log

Regimental No. 540207 Rank Pte Name Slack Gilbert Ross  
 C. E. F.

Enlisted (a) 25-7-15 Terms of Service (a) 10 years Service reckons from (a) 25-8-15

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) \_\_\_\_\_

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 FOR FRANCE.	26 3 16	121 Overseas 1322 802.
2 5/16	G.H.Q.	This unit will in future form part of C. C. Coy C Batt	Field.	31/5/16	Pt II O. 11071 dt 31/5/16
25 8/16	C Corps	Attached H Div A.P.M	"	22/8/16	101/316 15 3/9/16
6/10/16	Gen Sec 3 Ech. C.F.A.	Transf to 9 Bde. C.F.A. & cease to be attached H Div A.P.M	"	8/10/16	K9 294/1685 " 32" 8/10/16
8/10/16	Can Sec 3rd Ech	Joined on strength of Bde. as Gunner on trans from C. C. Coy Bn	"	9 10/16	K9 294/1685 Pt II O. 200 dt 8 10/16
20 12/16	unit	attached to 2nd course Inst. Visual Signalling Gen Corps School	"	27 12/16	B-213 Pt II O. 4 dt 5 1/17
27 1/17	unit	Returned from Sig. School	"	27 1/17	Pt II O. 34 dt 9-2-17 B-213 Pt II O. 32 7 1/17
3 3/17	unit	Returned from School	"	24 7/17	B-213 Pt II O. 55 10 3/17
28 3/17	Gen	56th Back Det. adms	"	28 3/17	K9 3034 (466)

(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.]



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				
31 <sup>3</sup> / <sub>17</sub>	unit	Wounded.	To sharp no	25 <sup>3</sup> / <sub>17</sub>	B 213 AB 2 164 7 <sup>4</sup> / <sub>17</sub>
8 <sup>4</sup> / <sub>17</sub>	No Serial	Invalided (wd) and posted to 6th Artillery Regt Depot, Atholcliffe		8 <sup>4</sup> / <sub>17</sub>	H/S Newhaven at No 3083 (934) of 8 <sup>4</sup> / <sub>17</sub> Part II O. 72 12 <sup>4</sup> / <sub>17</sub>
31 <sup>3</sup> / <sub>17</sub>	1767A	2. W. Back adm trans	6 lb. B. }	25 <sup>3</sup> / <sub>17</sub>	A 36 AB 2 165 12 <sup>4</sup> / <sub>17</sub>
31 <sup>3</sup> / <sub>17</sub>	6 lb. B.	8 W. Spine adm trans	18 trans	27 <sup>3</sup> / <sub>17</sub>	A 36 AB 2 165 12 <sup>4</sup> / <sub>17</sub>

*R. W. Haultain*

LIEUT.  
OFFICER i/c RECORDS  
CANADIAN SECTION C.I.C.O.  
3<sup>RD</sup> ECHELON

13.4.17

*Acty Regt Dep*

*J. OS (Wounded) from 4 B Co*

*S'Cliffe*

8.4.17

*A 110 35*

*J. J. Bat*  
for *Qualif* i/c Records, C.I.C.O.

INVALIDATED TO CANADA FOR FURTHER MEDICAL TREATMENT

*J. Edgar*  
HOSPITAL REPRESENTATIVE,  
GRANVILLE CANADIAN SPECIAL HOSPITAL, RAMSGATE



Pfc Name Black G. R.

M. F. W. 41  
1 0M-7-19  
1772-39 889  
L. P. No. 2396

Regimental No. S 40 307  
Unit Ofc Cyclists  
Date of enlistment 128-5-15  
Place of " Ottawa  
Married (yes or no) no.  
Amount of pay assigned monthly \$ nil  
To whom payable

Unit.  
Name and address of next of kin Riverside Park  
Ottawa Ont.  
MB-23-11-17 completely disabled  
Date and place discharged  
Reason for discharge  
Character on discharge  
Class II H.O.

L. Black 30-9-17.

b 5351-M. & D. 6880.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
31 <sup>7</sup> 17	30 <sup>11</sup> 17	93	1-	93	10	930	37731 ✓							Eng L.P.
												156		Hajir of Charkam
												199 ✓		" "
												101 ✓		" "
												109 ✓		" "
												28 ✓		" "
												100 -		C. D. Staljar
												10593		
												37368		
												47961		L.P. paid on 13 17
														Showing up Aug 31 17
														refd to C. Unit.

br Raf.

Enga P6 hd. Nil.

NOV 12 1917

Wad







Rank **Pte.** Name **SLACK, Gilbert Ross.** Reg'l No. **540307**  
 Unit **Dft Div. Cyclists.** If in perm. Corps, }  
 What Unit? } Married or Single **Single**  
 Place and Date of Enlistment **Ottawa, Aug. 28th 1915.** Place of Birth **Ottawa, Ont.**  
 Name and Address, Next-of-Kin **Jennite Slack, Riverside Park, Ottawa, Canada**  
 Relationship **Mother.**

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance Payable to Relationship

Discharge, Date and Place Reason Character

*3rd Cyclist NOV 27 1915*

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							
19-1-16	31	13	1.00	13	13	.10	1.30	10	24.30						24.30			
1-2-16	29-2-16	29	-	29	29	-	2.90		31.90			9.74			9.74	46.46		
1-3-16	31-3-16	31	-	31	31	-	3.10		34.10			26.77			26.77	53.79		Jan 3rd 2058 64c 9.3-16
				73.00				7.30	10.60	90.30			36.51		36.51			

BALANCE TRANSFERRED TO NEW LEDGER.

Checked *C. K. Roberts*







MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

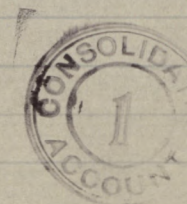
M. F. W. 12.  
 25m-4-17.  
 H. Q. 1772-39-819.

To Whom *Mrs Jennette Slack* By Whom Assigned *Slack G. R.*  
 Address *Riverside Park.* Regtl. No. *540309*  
*Ottawa West.* Rank *Sglt.*  
*Ont* Corps *9 Bde C.F.A*  
 Rate *\$ 100.00*

SPECIAL REMITTANCE

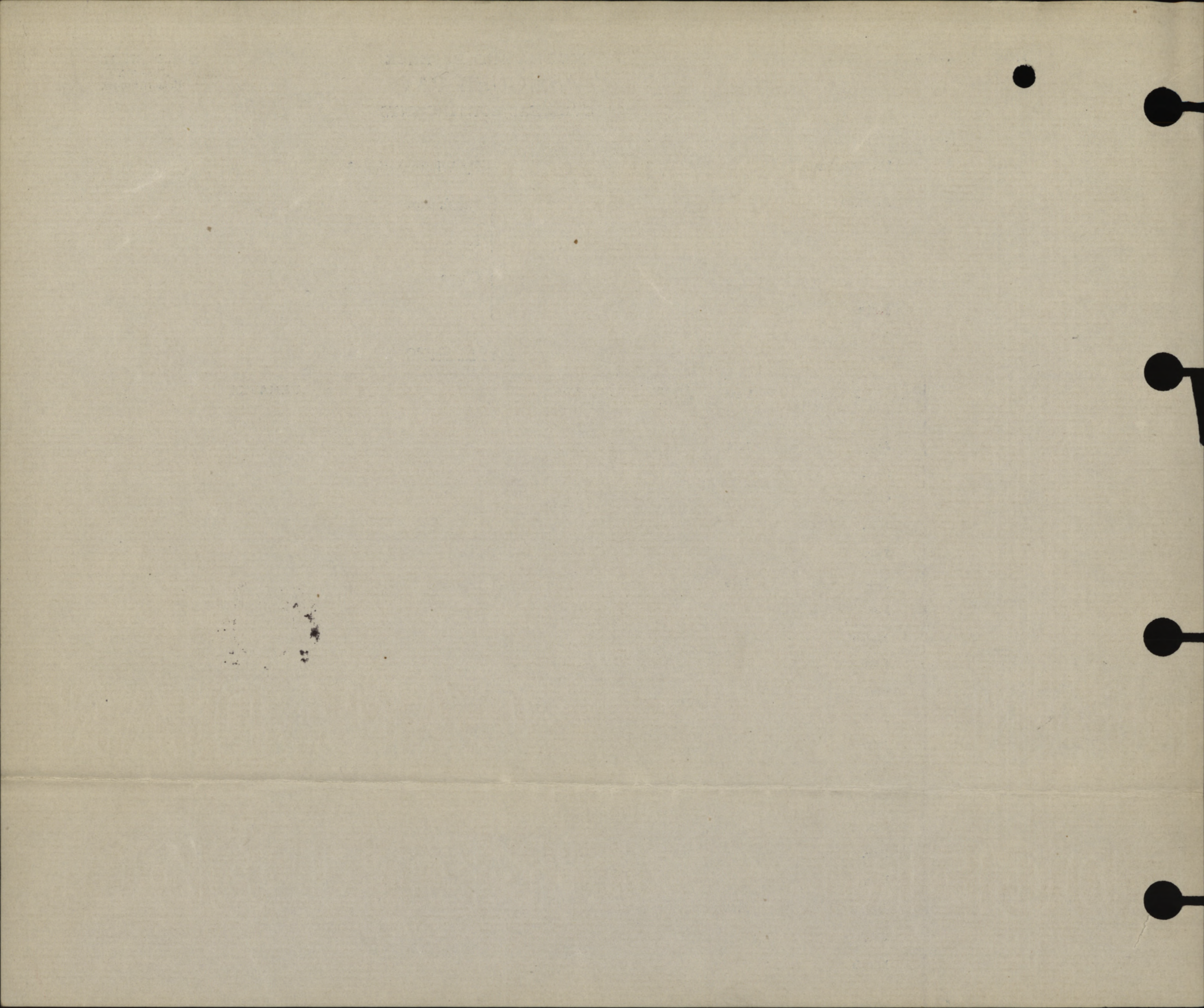
Sched 406 30.7.17 PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



*A 18592 100 -*



















*Temporary*

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.  
Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and  
Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname *Black*

Christian Name *G. C.*

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 .  
at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet, \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest { Girth when fully Expanded. \_\_\_\_\_ inches.

Measurement { Range of Expansion \_\_\_\_\_ inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right Left  
Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Joined on Enlistment	Corps.	Regtl. No.
...	<i>Co. G. A.</i>	<i>540307</i>
Transferred to	...	...



Became non-effective by \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_



Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Re
	Day	Month	Year	Day	Month	Year			
<i>Grawdon Spec N<sup>o</sup> Bausgate Kent</i>	<i>6.</i>	<i>7.</i>	<i>17.</i>	<i>30</i>	<i>8</i>	<i>17</i>	<i>Red Back.</i>	<i>56</i>	<i>cm</i> <i>dr</i> <i>m</i> <i>h</i> <i>L</i> <i>up</i> <i>T</i>
	<i>30</i>	<i>8</i>	<i>17</i>	<i>16</i>	<i>9</i>	<i>17</i>	<i>G.S.W. Back. Fract. spine</i>	<i>18</i>	
	<i>19</i>	<i>9</i>	<i>17</i>				<i>do</i>		



List in the case of Warrant Officers treated in quarters.

marks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer.

white transverse lesion of the spinal cord at the 10<sup>th</sup> dorsal segment. He has no sensation, no reflexes, no movement below the umbilicus. His bowels and bladder are no control whatever. He came to this hospital from Pitt Head, Chatham, where he states he was operated on - x-ray now shows he has a laminectomy of the 9<sup>th</sup>, 10<sup>th</sup> & 11<sup>th</sup> dorsal vertebrae. He has cystitis.

In statu quo.

Geo H Boyer Capt CMR

N. Moore Lieut.  
R.A.M.C.

Stuart Oliver







Reserved for M.H.C.

Regt. No. **540307** Rank **Sig.** Surname **Sleek.** Christian Name **Gilbert. R.**  
 Unit or Corps—(a) Overseas from United Kingdom **32nd. Bty. CFA.** (b) In United Kingdom **3rd. Div. Coy.**  
 Born at—Town **Ottawa.** County or Province **Ontario.** Country **Canada.**  
 Date of Birth—Day **8** Month **Oct.** Year **1894** Age **22** yrs. **9** months.  
 Joined at **Ottawa. Ontario.** Date **28th. Aug. 1915.**  
 Former Trade or Occupation **Civil servant.**  
 Permanent marks or peculiarities that will serve for future identification:—

**None.**

Height—feet **5** inch **6** Colour of eyes **Brown.**  
 Signature of Soldier (for identification purposes) *G. R. Sleek*

**Medical Report.**

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.

1. **DISABILITY** (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted).  
 (Follow the official nomenclature as far as possible.)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a). **TRANSVERSE LESION OF THE SPINAL CORD.**  
 Disabilities Group (b). **Not applicable.**  
 Disabilities Group (c). **-----**

2. **CAUSE OF DISABILITY.** (Follow the official nomenclature in stating the disease or injury.)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i.) As to Group (a) above.	<b>Shell wound.</b>	<b>Vimy.</b>	<b>25th March. 1917.</b>
(ii.) As to Group (b) above.	<b>-----</b>	<b>-----</b>	<b>-----</b>
(iii.) As to Group (c) above.	<b>-----</b>	<b>-----</b>	<b>-----</b>

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?  
 (i.) As to Group (a) above? **No.** If yes, has Active Service aggravated it? **No.**  
 (ii.) As to Group (b) above? **Not app.** If yes, has Active Service aggravated it? **Not applicable.**  
 (iii.) As to Group (c) above? **do** If yes, has Active Service aggravated it? **do do.**

4. Is the disability due to disease contracted or injuries received while on Active Service—  
 (i.) As to Group (a) above? **Yes.**  
 (ii.) As to Group (b) above? **Not applicable.**  
 (iii.) As to Group (c) above? **do do.**



## Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)?

If not, indicate it.

Yes.

12. Is the cause of the disability, fully indicated in Part I. (2)?

If not, indicate it.

Yes.

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier

Caused?

No.

Aggravated?

No.

(b) Misconduct of the Soldier

Caused?

No.

Aggravated?

No.

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?

(Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.)

One hundred per cent.

15. THE PENSIONABLE DISABILITY—(see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).

What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none,  $\frac{1}{3}$ ,  $\frac{2}{3}$ ,  $\frac{3}{4}$ , or all.)

All.

16. Permanency of the Pensionable Disability estimated next above in (15).

(i.) Is it permanent?

Yes.

(ii.) If not permanent, what is its probable minimum duration (in months)? ~~Not applicable.~~

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

Not applicable.

18. Remarks.

19. Recommendation:—(a) Fit for duty?

No.

(b) Fit for base duty?

No.

(c) Invalid to Canada?

Yes.

(d) Discharge from service as permanently unfit?

No.

Classification for the Military Hospitals Commission.

G.

Date of Board 17th. July. 1917.

President.

Signatures  
of  
the Board

W.G.Turner. Major. CAMC.

Station Granville Can. Spec. Hosp. Ramsgate.

J.A.McCollum. Capt. CAMC.

B.

Approved

*Wesley Davis Jeff*  
FOR A.D.M.S. CANADIANS, SHORNCLIFFE

A.D.M.S.

Dated at

SHORNCLIFFE—

Station

23 JUL 1917

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5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? **Yes.** (ii.) While off duty? **No.**  
 (iii.) Was a Court of Inquiry held? **No.** (iv.) Where? **Not app.** (v.) When? **Not app.**  
 (vi.) Opinion of the Court? **Not applicable.**

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.)

He states— He was 12 months on service in France. Shrapnel broke right behind him and he completely lost power in his legs and since then he has never had any feeling or power below the waist or had control of bowels or bladder. On April 6th he was brought to England. On April 11th he was operated on at Fort Pitt Hospital and laminectomy done in lower dorsal region. M.H.S. not available.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

He is a well nourished & intelligent man lying in bed without bladder or rectal control. He is completely paralysed in all muscles below the 10th dorsal segment and has no signs of any returning functions below that level of the cord. He has complete sensory loss to epicritic, protopathic & deep senses. All deep & superficial reflexes are lost below the 10th. dorsal segment even the bulbo-cavernous and the anal. He runs a little temperature each evening on account of cystitis. He has a large operative scar over the spines of the lower dorsal vertebrae. X-ray shows the absence of the spinous processes of the 9th & 10th & 11th. dorsal vertebrae. Other systems normal. Large bed-sore over sacrum.

8. OPERATION. (i.) Was one performed?

**Yes.**

(ii.) If so, state what.

**Laminectomy.**

(iii.) Was one advised and declined?

**Not applicable.**

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? **No.**

(ii.) If so, describe.

**Not applicable.**

10. DO YOU RECOMMEND:—

(a) Fit for duty?

**No.**

(b) Fit for base duty?

**No.**

(c) Invalid to Canada?

**Yes.**

(d) Discharge from the Service as permanently unfit?

**No.**

Date of Report.....191

Signed.....*W. S. Cooper*

Station.....

Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein except

*Nelson W. Cooper, Capt. Registrar* { Officer i/c Hospital } Strike out one  
 { S.M.O. Brigade } of these.

Dated at..... Station, on.....191

\* Delete if inapplicable.



Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the \_\_\_\_\_ day of \_\_\_\_\_ 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 191

Signatures of  
the Board

\_\_\_\_\_  
President.



Spur  
package

score

back - spur -

o - word by card

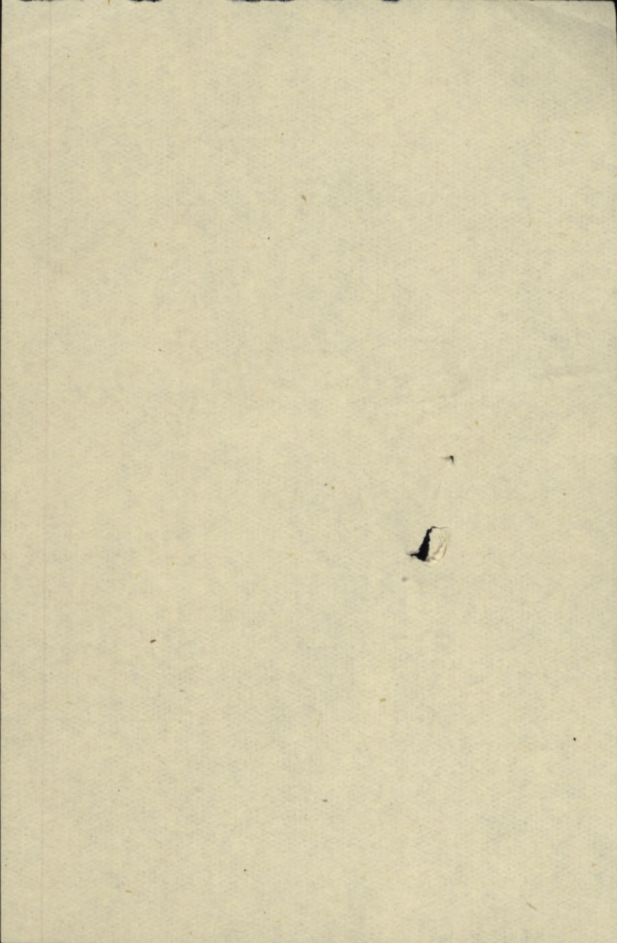
complicated

Paraplegia

---

sheet







*Flaming*

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.	546307.
Rank	Signaler.
Name	Black, Gilbert Ross.
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	32nd. Batty. C. F. C.
Date of Discharge	Dec 31 <sup>st</sup> 1964
Place of Discharge	Kingston. Ont.

### 1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....23.....years.....2.....months.  
 Height.....5.....feet.....6.....inches.  
 Complexion Warm.  
 Eyes Brown.  
 Hair Black.  
 Trade Civil servant.  
 Intended place of residence } Riverdale Park  
 (To be given as fully as practicable.) } Ottawa West

Descriptive Marks  
 Scar 2 inches long in centre of Back.

2. The above-named man is discharged in consequence of Being medically unfit for further service  
 J. J. W. Canada  
 19-3-18

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.

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

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

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

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



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) Kingston

A. Bidsall

O. C. "C" Unit, M. H. O. O.

(Date) 26-12-17

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.

(Place) Ottawa G. F. Black (Signature of Soldier.)

(Date) 1-12-17 J. H. Gibson, Sgt (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) 2 years 126 days.

Total 2 years 126 days.

11. Confirmation of Discharge.

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

(Place) Kingston

A. Bidsall

(Signature) .....

(Date) 26-12-17

O. C. "C" Unit, M. H. O. O.



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.)

Had Credit Balance of \$377.31. on  
30.7.17 and have ~~only~~ drawn  
\$100.00 since.

as Taken from Pay Book.

30.7.17 Credit Balance. \$377.31. Def Pay 279.50.

12.16.17 Discharge Depot Halifax. \$100.00.

G. R. Black



## List of Discharge Documents.

---

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a.          Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on          Transfer and Last Pay Cer-          tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</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="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
---	--

*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.*



DESCRIPTIVE RETURN of a Soldier at present stationed at In the Field  
 who is desirous of being\* <sup>(transferred)</sup> <sub>(posted attached)</sub> from the Canadian Corps Cyclist Bn. Regiment  
 at In the Field to the 32nd Battery C.F.A Regiment 9th Brigade, 3rd Canadian Div. Artillery.  
 or Corps at In the field for the purpose of being with  
elder brother

Regiment and Battalion 3rd Canadian Div. Cyclists.  
 No. 640307 Rank and Name Pte. Gilbert Ross Shack.  
 Service towards engagement years \_\_\_\_\_ months \_\_\_\_\_

Date of Attestation Aug. 28th. 1916.

Period for which attested Duration Colours \_\_\_\_\_ Reserve \_\_\_\_\_

Age 21 years 274 days. Height 5 feet 6 inches

Chest Measurement { Girth when fully expanded 38 inches.  
 Range of expansion 3 inches

Trade or Calling Civil Servant.

Where born Ottawa County Carleton.

Married or single, if married, } single.  
 state if with leave

Certificate of Education Commercial School of Ottawa Graduate.

Character \_\_\_\_\_

Good conduct badges \_\_\_\_\_

Musketry qualification and score marksman - (136)

Schools or Courses of Instruction at which the soldier has attended and qualified. Nature of certificates obtained to be stated



To be signed by a Soldier applying to be transferred.

I request to be transferred as above, and I understand that, if transferred, my conditions of service will be modified (if necessary) so as to correspond with the general conditions of service in the corps to which I am transferred, in accordance with Section 83 (3) of the Army Act.

Signature of Soldier Gilbert Ross Shack.  
Pte. Can Corps Cyclist Bn

To be signed by a Soldier applying to be posted or attached.

I request to be † \_\_\_\_\_ as above.

Signature of Soldier \_\_\_\_\_

I have examined the above man and find him medically fit for the branch of the service to which it is proposed

to\* <sup>(transfer)</sup> <sub>(post attach)</sub> him.

Signature of Medical Officer A. H. Wallace  
Capt. Can Corps

I have no objection to this man being † transferred as above.

Signature of applicant's present Commanding Officer W. H. Miller Major  
 (Station) Field (Date) 20/9/16 Can Corps Cyclist Bn.

I have no objection to this man being † transferred as above.

Signature of Officer Commanding applicant's proposed Regiment, Corps or Battalion H. B. Gallen Lt Col  
 (Station) Field (Date) 16 Sept 16 9th Brigade C.F.A.

Signature of competent authority for transfer James Lt Col

\* See King's Regulations. The words which do not apply to be erased, and in the case of the R.A.M.C., it should also be stated whether suited for the duties of the Corps.

† Insert "transferred," "posted," or "attached," as the case may be.



CERTIFICATE to be rendered in the case of a Non-Commissioned Officer who  
 is to be { posted  
 transferred } to the Regular Establishment of any arm of the  
 attached  
 Special Reserve or to the Permanent Staff of the Territorial Force, &c.

I certify that \_\_\_\_\_

\_\_\_\_\_

is in every respect competent to undertake and suitable for the duties he will  
 be required to perform as an Instructor in the arm of the Special Reserve or the  
 Territorial Force to which I recommend he should be { posted  
 transferred }  
 attached

\_\_\_\_\_ Officer Commanding,

Place \_\_\_\_\_

Date \_\_\_\_\_

DOCUMENTS TO ACCOMPANY THIS FORM.

In all cases .. .. .	Copies of Regimental and Company Conduct Sheets.
In cases of tradesmen .. .. .	Certificate of Proficiency on Army Form B. 195 or 195A, as the case may be.
In case of Clerks (or of any trade if for Royal Army Medical Corps) }	Specimen of handwriting and ciphering.
In case of Candidates for Military Police	Specimen of handwriting.
In case of Candidates for the Military Provost Staff Corps .. .. . }	Copy of Record of Service on Army Form B. 200.