

Folio.  
**CANADIAN OVER-SEAS EXPEDITIONARY FORCE.**

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**  
 (ANSWERS.)

- |  |                             |
|--|-----------------------------|
| 1. What is your surname?.....  | SMITH                       |
| 1a. What are your Christian names?.....  | FREDERICK GEORGE            |
| 1b. What is your present address?.....   | CALUMET AVE. VICTORIA. B.C. |
| 2. In what Town, Township or Parish, and in what Country were you born?.....                                       | LONDON. ENGLAND.            |
| 3. What is the name of your next-of-kin?.....  | ELENOR MAUD SMITH.          |
| 4. What is the address of your next-of-kin?.....   | CALUMET AVE. VICTORIA. B.C. |
| 4a. What is the relationship of your next-of-kin?.....   | WIFE                        |
| 5. What is the date of your birth?.....  | JULY 3rd. 1875              |
| 6. What is your Trade or Calling?.....   | MILLWRIGHT & CARPENTER.     |
| 7. Are you married?.....   | YES.                        |
| 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?.....<br><small>If so, state particulars of former Service.</small> | NO.                         |
| 11. Do you understand the nature and terms of your engagement?.....  | YES.                        |
| 12. Are you willing to be attested to serve in the }<br>CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }                  | YES.                        |

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

I, FREDERICK GEORGE SMITH, 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.

F. G. Smith (Signature of Recruit)

Date September 25th, 1916. Sergt P. E. Jyland (Signature of Witness)

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

I, FREDERICK GEORGE SMITH, 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.

F. G. Smith (Signature of Recruit)

Date SEPTEMBER 25th 1916. Sergt P. E. Jyland (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 Victoria, B.C. this 25th day of September 1916.  
[Signature] (Signature of Justice)



# Description of Frederick George Smith on Enlistment.

Apparent Age 41 years ..... 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. 4 ins.

Chest measurement { Girth when fully expanded ..... 38 ins.  
 Range of expansion ..... 3 ins.

Complexion ..... Fresh

Eyes ..... Gray

Hair ..... Dark Brown

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

## 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\* FU for the Canadian Over-Seas Expeditionary Force.

Date ..... Sept 25<sup>th</sup> 1916.

C. P. Higgins

Place ..... Victoria B.C.

C. P. Higgins

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.

Frederick George Smith 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]  
 (Signature of Officer)  
 242nd. Can. Forestry Battalion, C. E. F.

Date ..... 25. 9 1916.



SMITH

FRED'K GEO.

O. H. M. S.



REGIMENTAL DOCUMENTS

S

1049273

REGT. No.

UNIT

242nd Bn

NON-EFFECTIVE BY.....CATEGORY.....

CONTENTS

- 3 ATTESTATION PAPER (M. F. W. 23, 133 or 51)
- 2 CASUALTY FORM (M. F. W. 24 or A. F. B. 103)
- TRAINING HISTORY SHEET (M. F. W. 113)
- FIELD CONDUCT SHEET (M. F. B. 173 or A. F. B. 122)
- REGT. CONDUCT SHEET (M. F. B. 253 or A. F. B. 121)
- 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)
- PROPERTY INQUIRY (M. F. B. 303 OR A. F. A. 2)
- PROPERTY INQUIRY (M. F. B. 259 OR A. F. B. 115)
- PROPERTY INQUIRY (M. F. W. 44)
- PROPERTY CHARGE (M. F. W. 218 OR A. F. B. 268)
- PROPERTY CHARACTER (A. F. W. 313)
- PROPERTY DISCHARGE CERTIFICATE (M. F. W. 39A)
- PROPERTY CERTIFICATE ON DISCHARGE (C. A. D. C. 5009)
- UNIT INDEX CARD (M. F. W. 11 OR 192)

*Remob. 1-7-55*  
*Approved 1-7-55*

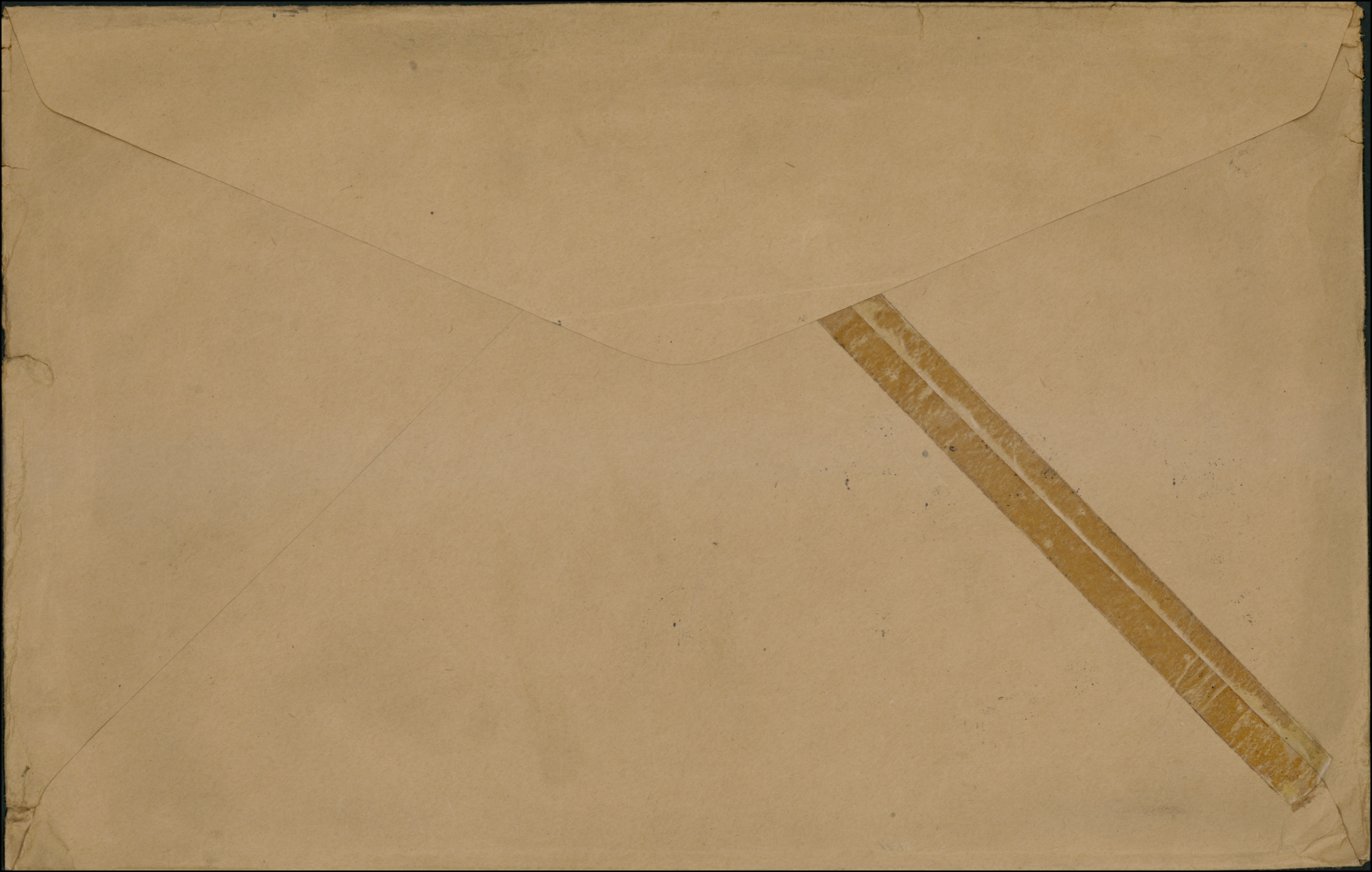


27313

M. F. B. 270.  
850M-5-18  
H. Q. 1772-39-67

1-7-55







SURNAME.

*Smith*

TP CARD NO. *X*

CHRISTIAN NAMES

*Frederick George*

*S-OS 29/10/19 Detmt*  
FOLL.

REGL. NO.

*1049273*

RANK

*Pte.*

*No. 303 of 30/19 200*

UNIT

*242nd*

*1100/19*

*Bn*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Smith, Mrs. Elenor Maud*

RELATIONSHIP TO SOLDIER

*Wife*

ADDRESS

*3502 Calumet Ave.,  
Victoria, B.C.*

*S.a.c.P. 20-3-18.*

COUNTRY OF BIRTH

*England, London*

DATE

*July 3rd 1875.*

PLACE OF ATTESTATION

*Victoria, B.C.*

DATE

*Sept 25th 1916.*

*7/16. 6-3-19. <sup>275</sup>/<sub>45</sub> pte.*



From Halifax per S.S. "Mauretania" 23/11/16

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Millwright & Carpenter

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

41 YEARS

— MONTHS

HEIGHT

5 FEET

4 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fresh

EYES

Grey

HAIR

(D.) Brown

DISTINGUISHING MARKS

not stated.

MEDICAL EXAMINATION.

PLACE

Victoria, B.C.

DATE

Sept 25<sup>th</sup> 1916.

Present address,

Galumet Ave., Victoria, B.C.



No. 1049273 RANK

Pte

NAME

Smith L. G.

T. O. S. 25-9-16

UNIT

242<sup>nd</sup> Battalion C. I. T.

20 1/2 17-10-16

M. D. 4

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

PAID FROM

PAID TO

SIG. OR REC'T

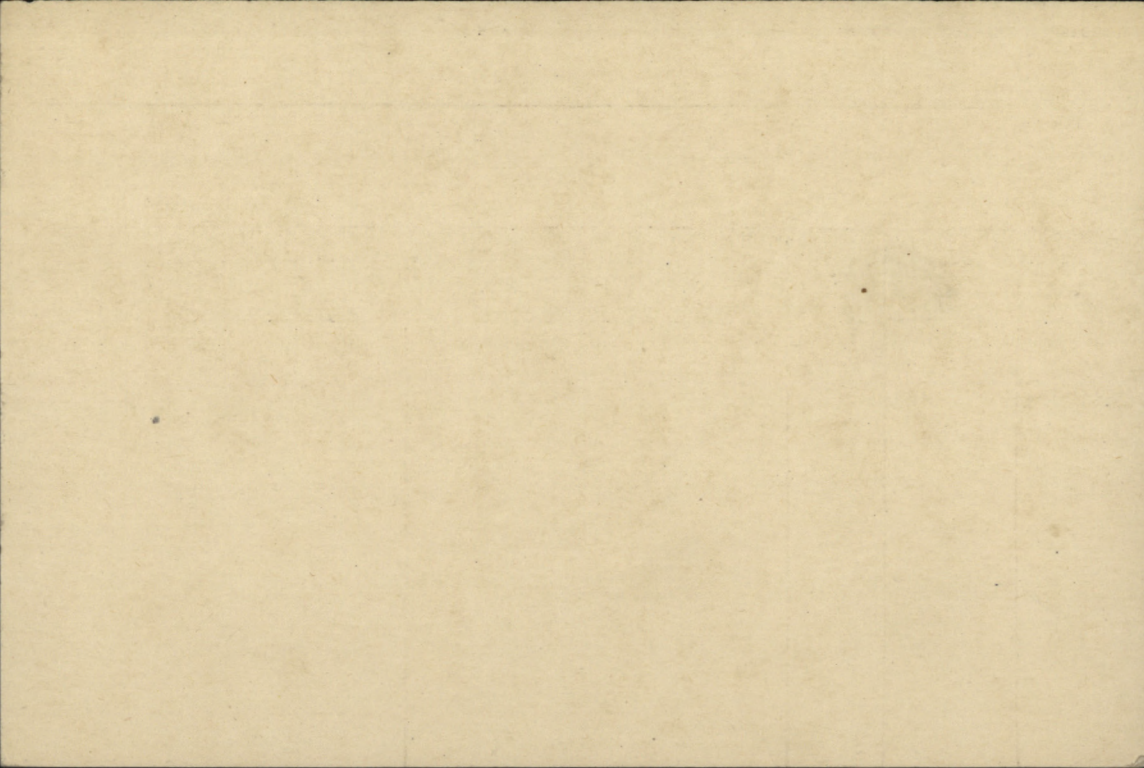
1916  
Sept 8  
1916  
Dec 31  
Nov

✓

✓

UNIT SERIALIZED  
NOV 23 1916







*me*  
Number 1049273

Rank *Pte*

Surname

*SMITH*

Christian Name

*Frederick George*

Units

*B F Co*

Theatre of War

*France*

Date of Service

*4/2/17*

Remarks

Latest Address

*1502 Colburn Ave  
Victoria*

Roll No.

*B. Page 13798*

*B Co.*

200-2-21.M.



DESP. JUN 24 1922

REGN. NO.

W 93507

FOR THE SERVICE



\*Name SMITH, Frederick, G. Rank Pte. Regtl. No. 1049273  
 Original unit C.F.C. Present unit C.F.C. M. or S. HH Age 19 Religion C of E Fyle Depot 10378  
 Ref. H.Q.

Port, ship, and date of arrival St. John, Cassandra, 3-3-19

Next of kin Wife Henry W Smith Calumet Victoria B6

Address on leave

Address on discharge

Transportation issued  Yes  No Date 30-10-19 Character on discharge

Previous occupation carpenter Date and place of enlistment 9596 Victoria

Diagnosis  Date of Medical Boards

*Handwritten notes in red ink:*  
 Discharged  
 O.S. 30-10-19  
 11/2/19

Date	Remarks	Pt. 2 Order No.
14-3-19	T.O.S. from O/sea	
23-2-19	Posted to <u>Sub. Depot</u> <u>Gas. Coy.</u>	
12-3-19	leave	26-3-19
		73-4a
23-3-19	S.O.S. Sub Depot on transfer to Cas Coy <u>DDXLSPD/10 209/541C</u>	
30/10/19	To Disch Sect at date. 29-10-19	303-2B.

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



Date.

Remarks.

Form 2 Order No.

150: due in for discharge letter on file

30-10-19 S.O.S Denrob. 29-10-19.

303/3 1919



# ORIGINAL MEDICAL HISTORY SHEET ORIGINAL

Surname SMITH. Christian Name FREDERICK GEORGE

Examined { on <u>25th</u> day of <u>September</u> 191 <u>6</u> at <u>Victoria, B.C.</u> Birthplace { City or Town <u>London.</u> County <u>England.</u> Apparent age <u>41</u> Trade or occupation <u>Millwright</u> Height <u>5</u> feet <u>4</u> Inches Weight <u>175</u> lbs. Chest measurement { Minimum <u>35</u> inches Maximum expansion <u>3</u> inches Physical development <u>good</u> Small-pox Marks <u>none</u> Vaccination Marks { Arm Right Left <u>4</u> Number <u>4</u> When Vaccinated last <u>Childhood</u> (a) Marks indicating congenital peculiarities or previous disease <u>none</u>	Approved by <u>C. P. Higgins</u> Rank <u>Capt</u> M.O. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Fit or Unfit</th> <th>EXAMINED FOR RE-ENGAGEMENT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT																														
Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT																																

Date	Result	VACCINATIONS
<u>11/16</u>		<u>G. Paine Capt</u> M.O.

(b) Slight defects but not sufficient to cause rejection  
Dental work requires 20/16  
25/16  
1/12

Enlisted on 25<sup>th</sup> day of Sept 1916 at Victoria B.C.

CORPS	REG'TL NUMBER	HABITS	DATE
<u>242nd Battalion</u>	<u>1049273</u>		
<b>242nd. BATTALION C. E. F.</b>			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<b>MONTREAL</b>	<u>2/10/16</u>		<u>fit</u> <u>A. J. Kebede</u>

Capt., C. A. M. C.  
M. O. 242nd BTTN.

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.







**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 OK Name FREDERICK G. Surname SMITH  
 Unit or Corps B.F.C. (If a soldier) Regtl. No. 1049273  
 Born at LONDON, ENR. on, date 3rd July 1873  
 Signature (for identification) F. Smith

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

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

Weight 176 lbs. est.  
 Height 5 ft. 4 1/2 ins.

2. **NUTRITION AND DIATHESIS?**

Good

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?**

Normal

4. **RESPIRATORY SYSTEM.**

Normal

5. **HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 70

Intermittence, or irregularity? no

6. **ARTERIES.**—Any hardening?

no

7. **DIGESTIVE SYSTEM?**

Normal

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1020

Reaction? AMPH

Albumen? Reg

Sugar? Reg

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

Normal - eyes as on external view

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 Seaford

Signed C. W. Machel Capt M.O.

Date 30-1-19

Signed J. W. Machel Capt 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 of an Officer fit for general service or a Soldier fit for duty

The Officer 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 recorded on this form.

Rank ..... Name ..... Surname .....

Unit or Corps ..... (If a soldier) Regt. No. ....

Form at ..... on date .....

Signature (for identification) .....

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

1. PHYSICAL - Any lameness, maiming or lameness? If so, describe.

Weight ..... lbs.

Height ..... ins.

2. NUTRITION AND METABOLISM?

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

3. NERVOUS SYSTEM?

4. RESPIRATORY SYSTEM?

5. HEART?

Abnormal sounds?

Abnormal size?

Intermittence or irregularity?

Pulse rate?

6. ARTERIES - Any hardening?

7. URINARY SYSTEM?

8. GENITO-URINARY SYSTEM?

Urinalysis - see p. 1 ..... Reaction? ..... Albumen? ..... Sugar? .....

9. SKIN, NOSE, EAR, EYE or any other part?

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

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

Examined at ..... Signed ..... M.O. ....

Date ..... Signed ..... 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.



DUPLICATE

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 242<sup>nd</sup> Batta Foresters.  
C.E.F.

(2) Regimental Number 1049273

(3) Full Name of Soldier Frederick George Smith

(4) Place of Birth London England

(5) Are you married, or not? Yes

(6) If married, state,  
(a) Full name of your wife Eleanor Maud Smith

(b) Present Postal Address Calumet Ave.  
Victoria B.C.

(7) Are you a widower? No

(8) Have you any children? Yes

If so, give number of boys and girls 4 Girls & 1 Boy

Also their names and ages Myrtle - 8 yrs

Mabel - 7 yrs Hilda 6 yrs

Phyllis 4 1/2 yrs Frederick 3 1/2 yrs



(9) Is your Father alive?.....

*go*

If so, state name and address.....

(10) Is your Mother alive?.....

*go*

If so, state name and address.....

(11) If your Mother is a widow.....

*go*

Are you her sole support, or not?.....

(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.

*—*  
*—*

(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.

*—*  
*—*  
*—*

(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.

*yes*  
*go*

(15) Are you insured?.....

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.

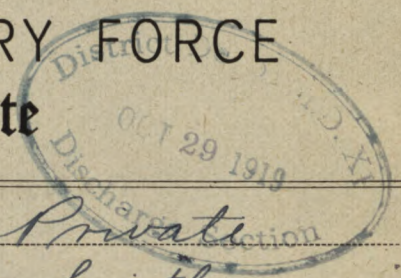
*J. W. Curry Major*  
..... Lt. Col.  
242nd. Can. Forestry Battalion, C. E. F.  
Officer Commanding.

Date *Oct 18 1916*



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate



This is to Certify that No. 1049273 (Rank) Private  
Name (in full) Frederick George Smith enlisted in  
the 242<sup>nd</sup> Battalion  
CANADIAN EXPEDITIONARY FORCE at Victoria, B.C. on the 25<sup>th</sup>  
day of September 1916  
HE served in Canada, England & France  
and is now discharged from the service by reason of **DEMOBILIZATION**

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

Age 45 years  
Height 5' 4 1/2"  
Complexion Ruddy  
Eyes Blue  
Hair Black

Marks or Scars  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Soldier

F. G. Smith

Issuing Officer

M. Beck

Date of Discharge

October 29<sup>th</sup> 1919

Rank

Captain

Appointment

for O.C. District Depot XI

Signed at

Victoria, B.C. this

29<sup>th</sup> day of

day of

October 1919

in Military District No.

Eleven

File Reference No.

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

WAR SERVICE BADGE CLASS A



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



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

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

350M.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 242<sup>nd</sup> Bn  
 Regimental No. 1049273 Rank Pte Name Smith Frederick George  
C. E. F.  
 Enlisted (a) 25.9.16 Terms of Service (a) D of W Service reckons from (a) 25.9.16  
 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) Millwright

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				
14.3.19	Overseas.	T.O.S. DISTRICT DEPOT XI	HASTINGS PARK VANCOUVER, B. C.	23.2.19	D. O. Pr. II 73/ 1919.
30.10.19	DISCHARGED Discharged	Demobilization	Victoria	29.10.19	D.O. Pr. II 303/ 1919
					M. Beck Capt. For O.C. District Depot XI

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







22

W.S.B. CLASS A

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

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

350M.—5-16

H. Q. 1772-39-9-20.

# Casualty Form—Active Service.

Unit, Regiment or Corps

242nd. BATTALION C. E. F. Frederick

Regimental No.

1049273

Rank

Pte

Name

C. E. F.

Smith

George

Enlisted (a)

25.9.16

Terms of Service (a)

10 Yrs

Service reckons from (a)

25.9.16

Date of promotion to present rank

Date of appointment to lance rank

Numerical position on roll of N. C. Os.

Mellwright

Extended

Re-engaged

Qualification (b)

Report

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

CERTIFIED CORRECT. 13 FEB. 1917 CAN. RECORDS, ON CAN. 31 1917

EMBARKED AT

DISMARKED AT

Halifax N.S.

Liverpool

Mauritania

~~29-11-16~~ NOV 30 1916

23-11-16

242nd

Transferred to Canadian Infantry Corps. France.

Witley

JAN 31 1917

Pat. II Order No 31

Fredmore

Disembarked

Home

4/2/17

Adjutant 242nd. Battalion C. E. F.

23/8/17

22 Coy.

Sentenced to 5 days F.P. refusing to obey an order

# 2, 20/8/17 Fined

for 20/8/17

B2069

Pt 15 O. # 29 d/ 5/9/17

2-2-18

"

Granted 14 days Leave

27-1-18

B213. Pt 15 O. # 6 d/ 13-2-18

23-2-18

"

Rejoined from Leave

14-2-18

"

(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				

7-1-19

O'Le Records P.O.S. on transfer to G.F.B. Base  
 Havre Depot. Seaford Eng.

Base 7-1-19

~~nr 30-1  
 Lt 40 2 /1919~~

by Havett for  
 Lieut major  
 Daas.

10/1/19

B. H. H. for reporting from France  
 Posted to G.F.B. Coy Seaford

8/1/19

Pt II Bn 0-9

6/2/19

" " Station transfer to Kimmel  
 Park for return to Canada Seaford  
 M.D. II

6/2/19

" " " " 32

Philip LT. For ADJT.  
 REG. BTN. (MAN.)

2/2/19.

Attached C.O.C. Kimmel Park for  
 return to Canada. Part II Orders  
 No. \_\_\_\_\_ Copies to be enclosed  
 C.O.C. Kimmel Park on embark-  
 ing for Canada, part II Order  
 No. 45.

Commanding \_\_\_\_\_ Wing,  
 Kimmel Park Camp.

FMBARKED FEB 22 19  
 S.S. CASSANDRA

J. F. F. Allen Capt  
 per O.C. No 13 Fac.S.



J.P. Rank Name SMITH, Frederick George ✓ Reg'l No. 1049273. ✓  
 Unit 242nd Bn. If in perm. Corps, } Married or Single Married. ✓  
 What Unit? }  
 Place and Date of Enlistment Victoria, B.C. 25th Sept. 1916. ✓ Place of Birth London, England ✓  
 Name and Address, Next-of-Kin Elenor Maud Smith. ✓  
 Calumet Ave. Victoria, B.C. ✓ Relationship Wife. ✓  
 Assigned Pay Monthly \$ Payable to  
 Separation Allowance \$ Payable to Relationship  
 Discharge, Date and Place Reason Character

N/E. R.B. No. 8810  
 File R.L.  
 Category Can OTR  
 MD 11

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	30*11*16	S. S. Mauretania NW
31-1-17	242nd Bn	S.O.S. to CFC France	Witley	31-1-17	O+D 31
26-2-17	226th	T.O.S. from 242nd Bn	Field	4-2-17	" 2.
		SOS to CFC Depot Seaford	CFC Seaford	8 1 19	
		**22 Joy, CFC-Pt II O:2 d:10-1-19	**11 Res Bn-Pt II O:9 d:10-1-19		
14-2-19	11 M.D.C.W. Sec 16. B.C.	S.O.S to Can. Sailing No 12	Rhyl	22-2-19	- 47







# DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) SMITH. F.G.  
 REGIMENT 11 Res. RANK Pte No. 1049273  
 Date of Examination in England 28-1-19 Date of Examination in France \_\_\_\_\_



**DIRECTIONS TO DENTAL OFFICERS**

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
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
- (b) In England
- (c) In France Yes

Signature of Dental Officer *J.W. Brown capt*



UNITED STATES DEPARTMENT OF THE ARMY  
OFFICE OF THE CHIEF OF CHIEFS OF STAFF

STANDARD FORM NO. 64

FORM NO. 1

1963 EDITION

1. This form is to be used for the preparation of a report on the results of a study or investigation. It is to be filled out by the person who conducted the study or investigation, or by a person who has had access to the information and is familiar with the facts.

2. The report should be prepared in a clear, concise, and factual manner. It should be based on the facts and figures available to the person preparing the report, and should not be influenced by personal opinions or biases.

3. The report should be organized in a logical and systematic manner. It should include a statement of the problem, a description of the methods used, a presentation of the results, and a discussion of the conclusions.

4. The report should be written in a professional and businesslike manner. It should be free of errors and omissions, and should be easy to read and understand.

5. The report should be prepared on this form, and should be submitted to the appropriate authority for review and approval.

PREPARED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

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

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_



## SEPARATION ALLOWANCE

Name *Eleanor Maud Smith*Name of Soldier *Smith Fred'k G.*Address ~~*Calumet Ave*~~

Regtl. No.

*Bethune Ave. Maywood, P.C. Victoria B.C.*Rank *Pvt*Corps *242<sup>nd</sup> Batta*Relation to Soldier } *wife*

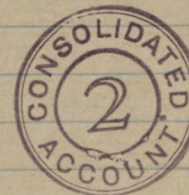
To what Corps belonging }

wife, child or mother }

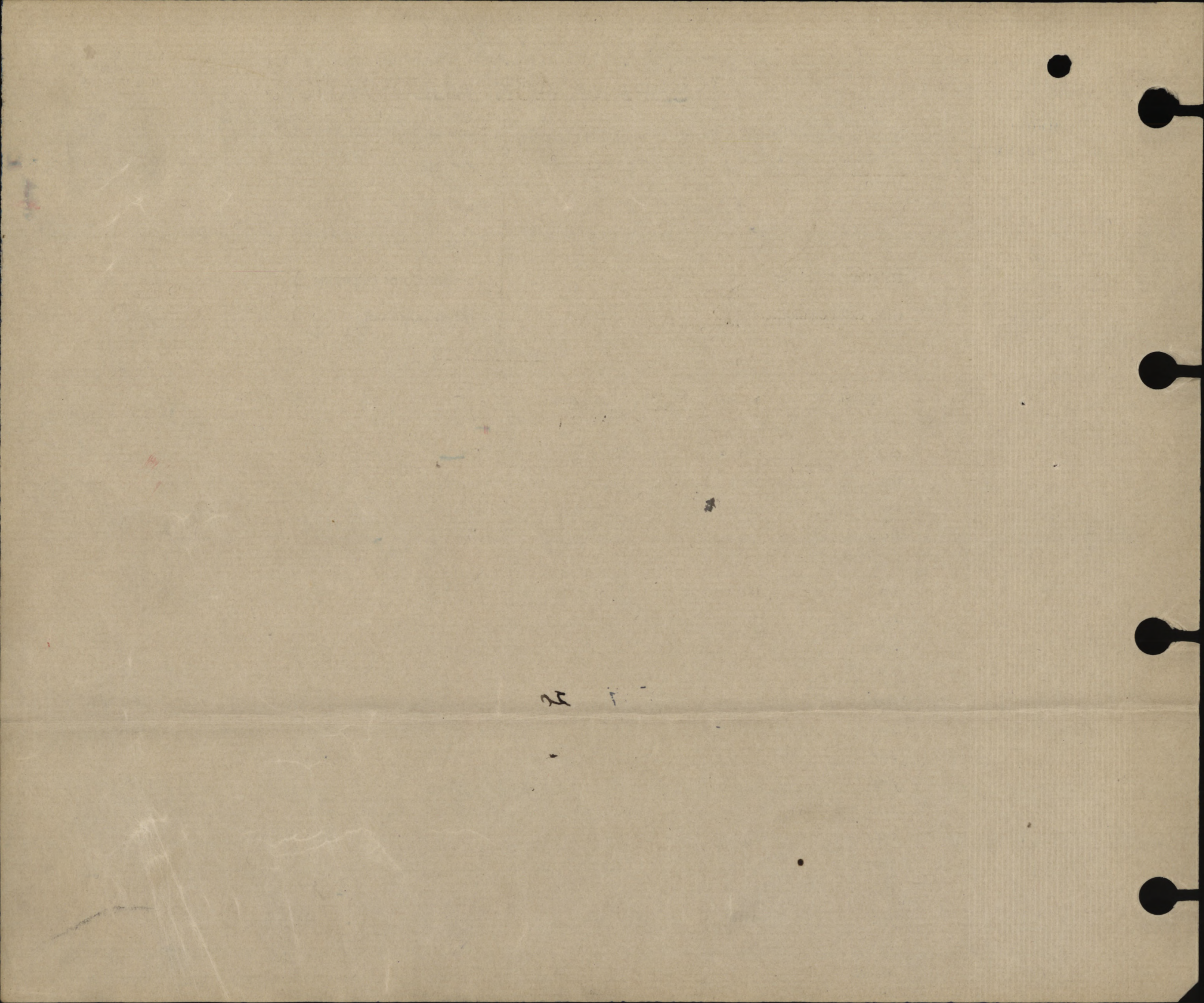
when called out ✓

## PAYMENTS

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









## SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

*E. M. Smith**wife*  
PAYMENTS.

Name of Soldier

*Smith F. S.*  
*Ph*

L. L. Job 4503.-Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		<i>23674</i>	<i>44</i>	<i>44</i>
Dec.		<i>627662</i>	<i>20</i>	<i>20</i>
Jan.	1917	<i>430629</i>	<i>20</i>	<i>20</i>
Feb.		<i>X33687</i>	<i>20</i>	<i>20</i>
March		<i>236163</i>	<i>20</i>	<i>20</i>
April		<i>V2401</i>	<i>20</i>	<i>20</i>
May		<i>y6030</i>	<i>20</i>	<i>20</i>
June		<i>y9028</i>	<i>20</i>	<i>20</i>
July	<i>24</i>	<i>M.P. 718372</i>	<i>20</i>	<i>20 Bethune Ave. Maywood P.O.</i>
Aug.		<i>X15950</i>	<i>20</i>	<i>20 Victoria B.C.</i>
Sept		<i>818539</i>	<i>20</i>	<i>20</i>
Oct.		<i>Z21051</i>	<i>20</i>	<i>20</i>
Nov.		<i>H25326</i>	<i>20</i>	<i>20</i>
Dec.		<i>y27642</i>	<i>20</i>	<i>F 304 no P.O.</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				



MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

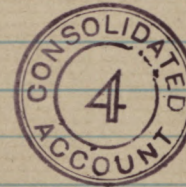
M. F. W. 12  
 50m.—7-16  
 H. Q. 1772-39-316

To Whom *Wife* Mrs. Eleanor M. Smith By Whom Assigned *Smith Fred. G.*  
 Address *Bethune Ave.* Regtl. No. *1049273*  
*Maywood P.O.* Rank *Pte.*  
*Victoria, B.C.* Corps *242 Bm.*  
 Rate *15.00*

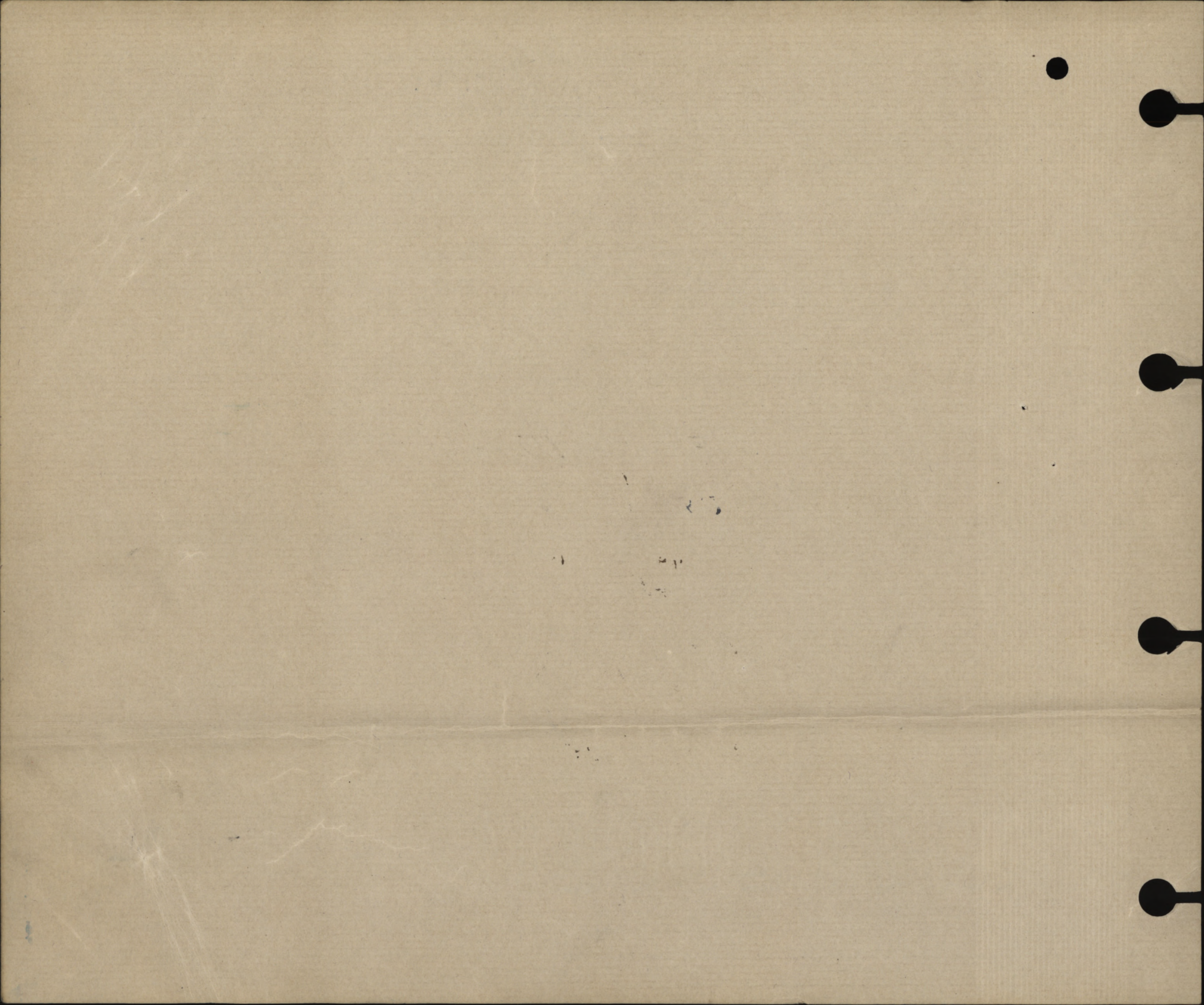
DEC 1 1916

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				









MILITIA AND DEFENCE  
**ASSIGNED PAY**

M. F. W. 12a.  
 50m.-6-16.  
 1772-39-819.

OVERSEAS CONTINGENTS

Sheet No. 2.

*Mrs. Eleanor M. Smith* *Wife*

Name of Soldier

*Smith Fred G.*

L. L. Job 4503. -Req. 6832.

PAYMENTS.

*1049273*

*Pte.*

*242 Bn.*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15.00</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>F35474</i>	<i>15</i>	
Jan.	1917	<i>C42763</i>	<i>15</i>	
Feb.		<i>B47257</i>	<i>15</i>	
March		<i>N 53184</i>	<i>15</i>	<i>15.8</i>
April		<i>L4917</i>	<i>15</i>	<i>15.00</i>
May		<i>L11686</i>	<i>15</i>	
June		<i>K18306</i>	<i>15</i>	<i>15.8</i>
July		<i>N 25421</i>	<i>15</i>	<i>e</i>
Aug.		<i>D 32727</i>	<i>15</i>	
Sept.		<i>B9878</i>	<i>15</i>	
Oct.		<i>S45971</i>	<i>15</i>	
Nov.		<i>S 53531</i>	<i>15</i>	
Dec.		<i>S63059</i>	<i>15</i>	<i>195.00</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*DEC 1 1916*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-	1/12/16.	EFFECTIVE DATE:-	
AMOUNT:-	15%	AMOUNT:-	

NAME:- SMITH, Judenck, George. H

NUMBER:- 1049273. 54

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.

No. E. W. Smith  
Bethune Avenue.  
Maywood P.O.  
(Wife) B. C.  
*Stopped 1-2-19*

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

UNIT AND TRANSFERS

ORIGINAL UNIT:- 242<sup>nd</sup> Batt.

DATE ACCOUNT FIRST OPENED:- 1/12/16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			C. J. C. France

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
31/12/16	?	Willey	\$5.00				
16/1/17	?	Willey	\$1.00				
		1 days of 1/18 (Records)	\$5.50				
11.1.19		Reston	97.33				
17.1.19		Don.	48.67				

*868 cont 13/19*  
*NR2434. CTC. 29-1-19 mdt*

DAILY RATES OF PAY AND ALLOWANCES

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

*CR Bal 121.07 (5.50 unpaid chgd Sept 1917) at 1/2*  
*Ledger Balce. 296.27*  
*L.P.C. Balce. 115.57*

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Transferred to Canada 31.11.19*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Balance Inward.								150 00		
April	Pte Pay <i>Sp: note 1846. Error in Oct. Balance shown as \$159.80. should be \$159.86. ask: min P.2.H. May 2 1918</i>	33 00		Can a P.				15	168 06		
		33 00	06					15			
May	Pte Pay	34 10		Can a P.				15	187 16	NIL	
		34 10						15			
June	Pte Pay	33 00		Can a P.				15			
				AR 817. 25/6/18. 1/2 5 Dist:	13 57				201 59		
		33			3 57			15			
July	Pte Pay	34 10		Can a P.				15			
				AR 111. 15/1/17. 242 <sup>nd</sup> Batt:	19 73				306 09	NIL	
				46 pp. 5. 1/1/17 242 <sup>nd</sup> Batt	4 87						
		34 10			14 60			15			
Aug	Pte Pay	34 10		Can a P.				15	225 19	NIL	
		34 10						15			
Sep	"	33		Can a P.				15			
				AR 1948. 75-9-18. 5 Dist	3 57				209 62		
		33			3 57			15			
Oct	"	34 10		Can a P.				15			
				AR 1137. 12/10/18	2 73				761 76		
				" 1118. 16/10/18	3 73						
		34 10			7 46			15			
Nov	P P	33		Can a P.				15			
				AR 2615. 11/1/18 5 Dist	3 73						
Dec	P P	34 10		Can a P.				15			
				AR 3048 18/12/18	7 46						
	Furd	67 10		Furd	11 19			30			

COMPILED BY *[Signature]*  
CHECKED BY *[Signature]*



NUMBER

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									251 26		
Nov/Dec	Fwd.	67 10		Fwd.	11 19			30 -			
Jan	P P	34 10		sent P				15 -	296 27		
		101 20			11 19			45 -			
				MC 5555 11-1-19 11 Rs	97 33						
				CP 11993 21 1 19 Adm	48 67						
				End on R.P.C.							
				AR. 350 10-2-19 Kin PK.	9 73				140 51		
					155 73						
	R.P.C. br. Balce	115.57		? 16-17 Willey	487						
	Amended ✓	105 64		21-12-16	24 33				111 34		
	✓	111 34			29 20						
July				10/10-10/11/19 SKIV	11/10- 7/10/11						



P. 559  
MARRIED OR SINGLE

M.

PLACE OF BIRTH

Lansdon, Eng

NAME AND ADDRESS OF NEXT OF KIN

Mrs. E. W. Smith

Bethune Ave. Maywood P.O. Bk

RELATIONSHIP OF NEXT OF KIN

Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. 1049273 RANK Private NAME Smith, Frederick George 233

IF IN PERM. CORPS) UNIT 242nd Bn TRANSFERRED TO 64th Bn DATE 21.6.17 AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Vancouver B.C. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 25/1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE Dec 1/1916

PAYABLE TO Mrs. E. W. Smith, Bethune, Ave. Maywood P.O. Bk. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS									
	NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT							
		\$	c.	\$	c.		\$	c.	\$	c.		NO.				DATE	NO.																	DATE	NO.	DATE	NO.	DATE		
Dec 16															18.00																									
1916	31	31	1.00	31.00	31	10			3.10						34.10	41	15									15.00		39.33	12.77									bal. from Jan 1st		
Jan 1917	21	21	1.10	34.10											34.10											15		15		31.84										
Feb 28		28		30.80											30.80											15.00		15.00		47.67										
Feb				34.10											34.10	169	22 1/2				6.98					15		25.47		56.30										
Apr 30		31		33											33											15		15		74.30										
May 31		31		34.10											34.10	65	14-4				3.49					15		15.49		89.91										
June 1-20		20		22											22											15		15		96.91										
June 21-30		10		11											11															107.91										
July 31		31		34.10											34.10											15		15		127.01										
Aug 31		31		34.10											34.10	59	25 2/3				3.57					15		35.71		135.40										
Sept 30		30		33											33											15	5.50	80.50		147.90										5 days pay r. DD 29. 48. 17 5-9-17







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.	1049273.
Rank	Private
Name	Smith, Frederick George
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	242 <sup>nd</sup> Battalion
Date of Discharge	29 <sup>th</sup> October 1919.
Place of Discharge	Victoria, B.C.

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

Age.....	years.....	months.	Descriptive Marks	
45			Nil.	
Height.....	5	feet..... 4 1/2		inches.
Complexion	Ruddy			
Eyes	Blue			
Hair	Black			
Trade	Carpenter			
Intended place of residence	Galumet 1502 Galumet Ave Victoria, B.C.			
(To be given as fully as practicable.)				

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

**DEMOBILIZATION**

R.O. 1420 (c) of 12.12.18.

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.

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 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.)

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

MEDICAL DOCUMENTS  
FORWARDED TO  
S. G. R. OR B. P. C.  
ON 7/4/19.

M. F. B. 218.

100m.—6-16.  
H. Q. 1772-39-113

WAR SERVICE BADGE CLASS "A"  
No. 176228 ISSUED

(OVER)

E.R.L.



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.....

Three horizontal lines for listing 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.

(Place)..... F. G. Smith ..... (Signature of Soldier.)

(Date)..... A. Gyles ..... (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)..... OCT 29 1919 .....

(Date).....

(Signature) ..... J. Beck Capt. For O. C. District Depot XL

(To be s



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.)

*J. G. Smith*

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

Squadron  
ence with

ands, up

Soldier.)

Witness.)

ard these  
nd when

ge

Service.

Soldier.)

s.....days.

s.....days.

*pat.*

Depot XL



## List of Discharge Documents.

(When

Reg. Conduct Sheet, Militia form B. 263.  Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Attestation Paper, Militia Form B. 235.  Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.  Med. Hist. Sheet, Militia Form B. 313  Medical Report for Invalid* " B. 227.  Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.  *Only if discharged "Medically unfit."	In the case of recruits who are rejected on final approval, the discharge documents will consist of  (a) Proceedings on Discharge.  (b) Attestation.  (c) Medical History Sheet (in the event of such having been prepared.)

*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.*

No.
Rank
Name <small>Note—The</small>
Corps (S
Date of
Place of
1.
Age.....
Height..
Complex
Eyes
Hair
Trade
Intende resi
(To be giv prac
2. The
N.I certificate.
To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.



f r a  
S. 2072

THIS FORM WILL BE USED FOR ALL RANKS  
**MEDICAL HISTORY OF AN INVALID**

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialed by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Esquimalt, BC DATE October 10th, 19

1. 1 (a) Unit CFC. & DD. XI. (b) Regimental No. 1049273 (c) Rank Pte

(d) Surname SMITH (e) Christian name Fred George

(f) Home address 1502 Calumet Avenue, Victoria, BC

(g) Next of Kin Mrs F.G. Smith (h) Relationship Wife

(i) Address of Next of Kin 1502 Calumet Avenue, Victoria, BC

2. Age last birthday 45 Date of birth July 3rd, 1874

3. Enlistment, or Appointment (if an Officer) (a) Place Victoria, BC (b) Date Sep 25th, 16

4. Personal description:

(a) Height 5 ft 4 1/2" (b) Weight 170 lbs (c) Complexion Ruddy  
(stripped)

(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

Nil on enlistment

5. Former trade or occupation Carpenter

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

Years	Days
Three	A.D.M.S., M.D. XI. 16
OCT 14 1919 PERIODS	
From	VICTORIA, B. C.

**Soldiers Statement**

Canada 25-9-1916 to 30-11-1916 16-3-1919 To date

England 30-11-1916 to 20-1-1917 20-2-1919 16-3-1919

France or other theatres of War 20-1-1917 20-2-1919

7. Original disease, or injury HYPERMETROPIA BOTH EYES

(a) Date of origin 1917 (b) Place of origin France

(c) Cause CONDITIONS OF ACTIVE SERVICE



8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(HYPER METROPIA BOTH EYES/Partial loss of function both eyes

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

OBJECTIVE Specialist's Report 6-10-1919  
Hyper Metropia both eyes.R.V. 6/60-4 Hm-6/6  
L.V. 6/60-4 Hm-6/6  
Disability permanent-states not due to service and not aggravated.Further treatment of no benefit.Glasses ordered.

SUBJECTIVE Complains that eyesight both eyes is defective.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?  
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System..... No Cardio-Vascular System..... No Genito-Urinary System..... No  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)  
Special Senses..... No Respiratory System..... No Integumentary System..... NO  
Disturbances of Mentality..... No Digestive System..... No Muscular System..... NO  
Osseous and Joint Systems..... No Any other general condition..... No

10. (a) History (of the condition referred to in Section 9 (a).)

States that at time of enlistment eyesight was good-could see well both eyes-had no difficulty in passing all tests.In France 1917 first noticed eyesight was becoming defective-eyes became weak-condition has been progressive.Glasses have been fitted in France and Canada.

10 (b) (Here give a de to or sine

Civil-

(c) (Here give a de

11.—(a) Did t on enlist (b) If so, conation

12. Was the d

refusal The regin (If the answer this ques

13. What is th

than one

14. Treatment

15. Is further

16. Can the f

17. Recommen

(Sections 7, 8,

I, the und present condit

I complain in



10. (b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Civil- None. Military-Influenza 1918, good recovery

(c) (Here give a description of wounds, scars, and deformities.)

NO

11. (a) Did the disabling condition have its origin before enlistment? YES. Man states vision good on enlistment. No mention made on MHS. Specialist's states not due to ser-

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? N.A. Specialist states "NO" not aggravated by service

The regimental documents will be referred to. (If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Glasses ordered

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

NO

16. Can the former trade or occupation be resumed? YES (If not, briefly state why)

17. Recommendations

Discharge to duty

D. W. McKay Capt. Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, Fred G. Smith, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Signature of invalid examined: Fred G. Smith Rank.

D. W. McKay



OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

YES. Concur

19. Is the invalid fit for

- (a) General service, (Category A) (Yes or No.)
- (b) Service abroad, not general service, ( " B) (Yes or No.)
- (c) Home service (Canada only), ( " C) (Yes or No.)
- (d) Temporarily unfit. ( " D) (Yes or No.)
- (e) Unfit for service in Categories A, B and C ( " E) (Yes or No.)

20. It is certified that the invalid

(a) ~~Does not require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) ~~Should pass under his own control~~  
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

Discharge to duty

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE Esquimalt, BC

DATE October 10th, 1919

*D. W. M. Kay Capt* President.

*D. H. Hastings Maj* Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....  
Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE..... President.

DATE..... Members

APPROVED BY *A. M. C.* APPROVED BY *M. D. 11*  
For Assistant Director of Medical Services. Director-General of Medical Services.

DATE ~~SEP 14 1919~~ OCT 14 1919

DATE.....

1. In using this Form issued by the
2. The Medical Officer and will obtain the Medical Officer's Medical Certificate from the Medical Officer
3. In answering this Form his condition state the age whether such Regimental
4. Special care is required
5. If space provide Medical Board
6. A note will be made
7. Under no circumstances invalid, direct
8. The nomenclature order in which Messrs. H.A.

1. 1 (a) Unit.....
- (d) Surname.....
- (f) Home address.....
- (g) Next of Kin.....
- (i) Address of next of Kin.....
2. Age last birthday.....
3. Enlistment, or.....
4. Personal description.....
  - (a) Height.....
  - (d) Colour of eyes.....
5. Former trade or occupation.....
6. Service (The invalid documents, but statement may effect. Period elsewhere should be stated.....)

Sold

Canada ....25-9-

England...30-11-

France or other than.....

7. Original disease.....

(a) Date of discharge.....

(c) Cause.....

M. F. B. 227.

300M.-8-18.  
1772-89-117.



Name

Smith

25-9-16

Date of Embarkation for England

30-11-16

Proceeded to France.

2-2-17

Returned to England.

7-1-19 Smith

Date returned to Canada.

22-2-19

P.R.2855.

*checked 5-6-22.*



Name

Date of Embarkation for England

Proceeded to France

Returned to England

Date returned to Canada

P.R. 2833



*Cassandra 6.3.19*  
 PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
 DAILY RATE OF PAY AND ALLOWANCES

REGT. No. *1049273* RANK *Pte* NAME (IN FULL) *SMITH, F.G.*

M. & R. S. *SMITH, F.G.*

RELATIONSHIP: *Wife* DATE EFFECTIVE: *1.4.19* RELATIONSHIP: *Wife*

TO WHOM PAID: *Wife* ADDRESS: *3502 Calumet Ave Victoria B.C.*

IS SEPARATION ALLOWANCE PAID? *YES*

DATE EFFECTIVE: *1.4.19*

RELATIONSHIP: *Wife*

ADDRESS: *3502 Calumet Ave Victoria B.C.*

DISCHARGED: *Victoria* PLACE: *Victoria* DATE: *29-10-19* REASON: *Demob.* AUTHORITY: *D.O.303* IF ENTITLED TO POST DISCHARGE PAY: *YES*

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				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.			\$	C.	\$	C.		\$	C.
<i>31.1.19</i>	<i>10</i>				<i>115</i>	<i>57</i>														<i>115</i>	<i>57</i>		
<i>Feb 7</i>							<i>19/2/19</i>	<i>24/2/19</i>	<i>24/4/19</i>	<i>9</i>	<i>73</i>	<i>87</i>	<i>50</i>					<i>94</i>	<i>60</i>			<i>1597</i>	<i>WA</i>
<i>Mar</i>							<i>24/1/19</i>	<i>1800</i>										<i>99</i>	<i>60</i>				
<i>Apr 89</i>		<i>97</i>	<i>90</i>	<i>30</i>	<i>11</i>	<i>20</i>								<i>45</i>				<i>45</i>		<i>110</i>	<i>07</i>	<i>WA</i>	
<i>May 31</i>		<i>34</i>	<i>10</i>	<i>30</i>		<i>64</i>			<i>240</i>	<i>315</i>				<i>45</i>				<i>45</i>		<i>129</i>	<i>17</i>	<i>WA</i>	
<i>June 30</i>		<i>33</i>		<i>30</i>		<i>63</i>			<i>289</i>	<i>344</i>				<i>45</i>				<i>45</i>		<i>147</i>	<i>17</i>	<i>WA</i>	
<i>July 31</i>		<i>34</i>	<i>10</i>	<i>30</i>	<i>5</i>	<i>50</i>			<i>291</i>	<i>842</i>	<i>171</i>	<i>77</i>		<i>45</i>				<i>216</i>	<i>44</i>			<i>WA</i>	
<i>Aug 31</i>		<i>34</i>	<i>10</i>	<i>30</i>		<i>64</i>			<i>192</i>	<i>480</i>				<i>45</i>				<i>45</i>		<i>19</i>	<i>10</i>	<i>WA</i>	
<i>Sept 30</i>		<i>33</i>		<i>30</i>		<i>63</i>			<i>499</i>	<i>617</i>				<i>45</i>				<i>45</i>		<i>37</i>	<i>10</i>	<i>WA</i>	
<i>Oct 29</i>		<i>91</i>	<i>90</i>	<i>29</i>	<i>35</i>				<i>515</i>	<i>216</i>	<i>88</i>	<i>00</i>	<i>519</i>		<i>45</i>			<i>133</i>	<i>00</i>			<i>WA</i>	
<i>Nov 29</i>		<i>298</i>	<i>10</i>	<i>209</i>	<i>00</i>	<i>167</i>	<i>27</i>		<i>294</i>	<i>50</i>	<i>489</i>	<i>50</i>	<i>00</i>	<i>345</i>	<i>00</i>			<i>674</i>	<i>37</i>			<i>WA</i>	
<i>Dec 29</i>					<i>4</i>	<i>20</i>	<i>180</i>	<i>600</i>						<i>70</i>	<i>30</i>			<i>100</i>	<i>350</i>	<i>150</i>		<i>WA</i>	
<i>Jan 29</i>									<i>159</i>	<i>465</i>	<i>4</i>			<i>70</i>	<i>30</i>			<i>100</i>	<i>280</i>	<i>120</i>		<i>WA</i>	
<i>Feb 29</i>									<i>160</i>	<i>365</i>	<i>5</i>			<i>70</i>	<i>30</i>			<i>100</i>	<i>210</i>	<i>90</i>		<i>WA</i>	
<i>Mar 31</i>									<i>160</i>	<i>846</i>	<i>6</i>			<i>70</i>				<i>70</i>	<i>140</i>	<i>90</i>		<i>WA</i>	
<i>Apr 30</i>									<i>175</i>	<i>527</i>	<i>5</i>				<i>30</i>			<i>30</i>	<i>140</i>	<i>60</i>		<i>WA</i>	
<i>May 31</i>									<i>161</i>	<i>229</i>	<i>30</i>			<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>June 30</i>									<i>161</i>	<i>268</i>	<i>9</i>	<i>90</i>		<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>July 31</i>														<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>Aug 31</i>														<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>Sept 30</i>														<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>Oct 31</i>														<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>Nov 30</i>														<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	
<i>Dec 31</i>														<i>70</i>	<i>30</i>			<i>100</i>	<i>70</i>	<i>30</i>		<i>WA</i>	

BALANCE FROM PREVIOUS ACCOUNT *119*

*Supl. Demobilization Pay M.D. No. 11*

Certified that all payments have been made on this account for which covering authority has been received to date.

*Paymaster, Demobilization M.D. No. 11*

*183 days War Service Gratuity*

*5 years 3 months*

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.

*Officer in Charge War Service Gratuity M.D. No. 11*



WAR SERVICE GRATUITY  
NOV -7 1919  
C. E. F., M. D. XI



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

25-9-16

# Separation and Assigned Pay Branch

Dec 1/16

OVERSEAS CONTINGENTS

# S

15141

RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00	30
	1 12 17	1 9 18

15			
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P.C. 3257  
M.R. 31075

PARTICULARS OF SEPARATION ALLOWANCE

No. 1049273  
 Rank Pte. Promoted Reverted Discharge  
 Soldier's Name Fred. G. Smith  
 Battalion 242<sup>th</sup> Battr  
 Beneficiary Eleanor Maud Smith  
 Relationship wife M.F.W. 2554 Rd 30 7/8 RE<sup>1</sup> OK 25 18 21  
 Address

PARTICULARS OF ASSIGNMENT

(Wife)  
 Name Mrs Eleanor M. Smith  
 Address Bethune Ave, Maywood P.O.  
 3502 Calumet Ave. Change of Address Victoria, B.C.  
 1  
 2  
 3  
 4

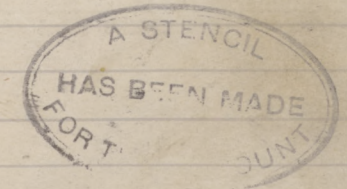
Date 1917	Cheque No.	Amount S/A	Amount A/P	Total
Dec 31	-	304	195	499
Jan 18	D 69356	30	15	45
Feb 18	B 73910	25	15	40
Mar -	Z 92187	25	15	40
Apr.	J 11350	25	15	40
7502 May	Y 13770	25	15	40
June	W 25770	25	15	40
July	6 23464	25	15	40
Aug	W 35199	25	15	40
Sept	W 48847	25	15	40
Oct	P 49141	25	15	40
Nov	Y 56221	25	15	40
Dec 1917	J 63224	45	15	60
Jan 1918	J 70311	30	15	45
Feb	L 80124	30	15	45
Mar	N 82686	30	15	45
		719	420	1139

16964-7-319

REMARKS

A/c Closed 31-3-19  
 Ret'd per Cassandra  
 Date 5 3/19 M.F.W. 187 11 3/19  
 Closed S.M. Evans  
 M.D. 11 M.R.O.L.P 60667. Destroy of U.S.

M. F. W. 128  
 400M-6-17-1772-39-1141  
 L. L. 22320-M. & D. 1488.





Date of Enlistment \_\_\_\_\_

MILITIA AND DEFENCE

Date of Assignment \_\_\_\_\_

### Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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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-6-17-1772-39-1141  
 L. L. 22220-M. & D. 1583.