Proceedings of Court of Inquiry or on men reported Missing on Active Service...... Atte tation Papers Declaration of change of name..... Authority for special enlistments..... ments 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.... 11. 12. 1772-39 - 935.

DISCHARGE DOCUMENTS

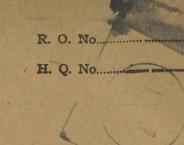
Name CAMERON. DONALD.

Regt. No3042163Rank 1tc.

02158

1 CO CO CO

Gen. Demol.





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. 3042162
Rank Private
Surname CAMERON,
Christian Name
Corps (Squadron, Battery or Company) 2nd BN. CANADIAN GARRISON REGIMENT
Date of Discharge December 26th, 1918
Place of Discharge in ground argued eventual its of all behappes ellectraque avaid I bits (tystable to
1. DESCRIPTION AT THE TIME OF DISCHARGE.
Age
Height 5 feet 9 inches. NIL. (918C)
Complexion Fair Eyes Blue self no retblo2 entry benggs ed or etcolitre 2
Hair Poir
Trade Grocero boson emisio ado lo se que visem ado o 1 161177
Intended place of 36 Swanwick dus
(To be given as fully as practicable.)
2. The above-named man is discharged in consequence of
"General Demobilization
Routine Order #1328" do 7711 3 beaution
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.
3. Conduct and character while in the service have been, according to the records, etc. N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the officer Commanding his Squadron, Battery or Company. 4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)
Statement of Services on the services of Services on the services of Services
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)
the and write and the same of
Che discharge of the above-mared man is hereby confirmed.

M. F. B. 218.

100м.—1-17, Н. Q. 1772–39-113.

(OVER)

5. He is in possession of the following number of	G. C. Badges:
a had a second	OG: LOS CONTRACTOR OF THE PARTY
attack of Dischar	When forwarded for confirmation these
s proceedings should be accompanied to fied on fourth page).	
No reference to G. C. Badges is to be made o	on either the discharge or character certificate.
	and, ment
	Committee B.
6. Medals and Decorations	by the
Manager of the Art of	To be copied by the Command- hig Officer on to the parchment
	To be Discharge and The Discha
	SI Idia vaces of existent to be a
or Battery), and I have impartially enquired int Regulations.	by the Officer Commanding his Company. (Squadron o all matters brought before me in accordance with
(Place) TORONTO	
Descriptive Marke	Age 20 years 5 months
(Date)	Commanding
8. Certificate to be signed by	by the Soldier on Discharge
out thick to be digited in	, Allowances and Clothing, and all just demands, up
to the present date, subject to the reservation	ons of the claims noted on the third page.
(Place) TORONTO Long	d Carners (Signature of Soldier.)
(Date) December 26th, 1918	1 Alles II (Signature of Witness.)
When a soldier is absent through illness or any	other cause and it is not desirable to forward these ot copy should be sent for the man to sign, and when
	· 3444003
	of a Soldier who takes his discharge vn request,
I hereby declare that I do of my own free will r	equest to be discharged from His Majesty's Service.
	(Signature of Soldier.)
the the Community Officer, in the presence of the redding and the	t of Service.
Service toward Engagement to(the date to which	th the Record of Service is completed)yearsdays.
	Totalyearsdays.
11. Confirmatio	n of Discharge.
The discharge of the above-named man is hereby	confirmed.
(Place) OPONTO	
(1100)	Signature)
(Date) December 26th, 1918	for O. U. 2nd Bn., Ganadian Garrison Regt.

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.)

Allegan wone * None * Redocid to tell

Unald Cameron

Attestation Paper, Militia Form B. 235

Frontedings on Discharge was all as against 18 19

In the case of recruits who are rejected on final

(b) Attestation, 14-4 digital

Medical History Sheer (in the even) of

eg. Conduct Sinet Militia form B. 26

Squadron | Conduct Sheet, " B: 26 Company

Copies of Convictions, by C. P. in MS

Med. Hist. Sheet, Militia Form B. 31

Medical Report for Invalid* " B. 22

Statement of Man's Account on Transfer and Last Payl Certificate,

Only if discharged "Medically unfit,"

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount

List of Discharge Documents.

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

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.

	H. Q
	M. D. No. 2
Surname Cameron	T. O. S. 200 / 19/8
Christian names Donald	D. O. Pt. 1130 H of 31-10-1
Regtl. No.3 0 42 162 Rank Ple.	S. O. S. Dis 26-12 1918
Unit of been out Regt, 1st Dos	In Reason "Demot"
	Auth. 100 177 of 24-12-18
Next of kin amerian, Ins Margaret	Relationship An Albert
Address 2 (p. S. M. M. M. C.R.) (less Ly	Also notify:
Jaronto, Ont	
BORN-Place Canada Toronto ant Da ATTESTED Place Losa to Clout Da	te aug 16 4 1888
ATTESTED Place Laranto Cent Da	te / 1918
O/S W. 22–100M.7-18, 1772-39-839.	R/C

H. Q. 1772-39-920.

Casualty Form—Active Service. 1st Depot Battalion, 1st Central Ontario Regiment

Unit, Regiment or Corps.

pres	ent rank	Date of appointment to lance rank	}		of N. C. Os.	
Extende	Report	Re-engaged Record of promotions, reductions, transfers,				
Date	From whom received	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. 38, or other official documents	
12/18	2nd Bn.					
	C.G.R.	discharge Gen em.		•		
V		R.O.#1328	+oronto	26/12/18	part 2 D.O.#177	
					U	
				in the state of th		

⁽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 re-				Remarks	
Date From whom received		From whom ported on Army Form B. 213, Army Form		Date	taken from Army Form B. 213, Army Form A. 36, or other official documents	
	, ,					
u'						

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3042162	(Rank) Private
Name (in full) CAMERON, Donald	enlisted in
the lst Depot Battalion 1st Cen	tral Ontario Regiment
CANADIAN EXPEDITIONARY FORCE at Toront	o, Ont. on the 1st.
day of November 19 18	
HE served in ***********************************	Canada
and is now discharged from the service by reason o	f
"General Demobil	ization"
THE DESCRIPTION OF THIS SOLDIER on the D	
Age 30 years 5 months	Marks or Scars
Height 5 feet 9 inches	Nil.
Complexion Fair	
Eyes Blue	
Hair Fair	
Unald lamoron	1 allen Link
Signature of Soldier	for 0. U. 2nd Bussing Officer Regterment
Date of Discharge December 26th 1918	Rank
Assertation and the second sec	Appointment
Signed at TORONTO this	26th day of December 19 18
in Military District No.	
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.

CANADIAN EXPEDITIONARY FORCE Discharge Certificate

No(Rank)		
Unit 2nd BN. CANADIAN GARRISON REGIME		
Address on Discharge	SELECTION OF STREET AND STREET AN	
Character and Conduct		
Former Occupation	ed Alamadad from algajadies	
Special Qualifications of Value in Civil Life		
Medals and Decorations		
Remarks		
Signed at TORONTO this		
	Name of Officer	
	Rank	
		Total Kartas
	Appointment	

2



MEDICAL HISTORY SHEET

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

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2. Num	ber of re	port for	service or	claim for ex	xemption	according	to Postr	naster's}	330	201	
3. Cons	ecutive r	umber «	on schedule	of men r	eporting f	or service	e (if he	appears			
				Swanwi				Ont.,			
									as ascerta	ined by the	2 m
										917, by the	1 4
											12
										1 Months	
	ht <u>5</u>							145			J.
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9. Ches	t measur	ement }	Minimun_	ス74 ス74	10.	Complexion	Fair	1 (-6)	} Eyes	Blue Fair	de
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						The state of the s	ir 12. S	mallpox mar	ks ni	1	
13. Num	ber of va	ccination	marks SR	ight arm	nil		Whom	accimated law	t nil		1
											Маг
15. Disti	nctive ma	rks and	marks indica	ating conger		arities or	previous d	isease			jo
		- (***************************************			ure
16. Sligh	t defects	but not s	ufficient to	cause reject	ion1	11.1					lat
The man	denies ha		(Rheuma	itism				Rheumatism			
		lving nac	1 Tubercu	ilosis \	We find no	evidence	of past	Tuberculosis			100
			(Syphilis		We find no	evidence	of past {	Tuberculosis Syphilis			Signature of Man
(St	rike out	disease a	(Syphilis dmitted or s	suspected.)			of past { Eye	Tuberculosis Syphilis Sight I	ED 40 L		13.15
(St	trike out o	disease ac	(Syphilis dmitted or s ined the	suspected.) above nai	med ma	n	of past { Eye Hea	Tuberculosis Syphilis Sight F Bring R	RD 40 LI Normal	L Norma	ıl
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(St V in accor	trike out o We have rdance	disease ac e exami with th	(Syphilis dmitted or s ined the ne C. E. I	above nar F. Regula placed in	med man tions for Category	n r y	Eye Hea Nos Cla	Tuberculosis Syphilis Sight Faring R se Norma Lims at	Normal Normal Throitacks of the send nevertendan	L Norma at Norma f asthma er had	ıl
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(St V in accor	trike out o We have rdance	disease ac e exami with th	(Syphilis dmitted or s ined the and he is	above nar F. Regula placed in	med man tions for Category	n r y	Eye Hea Nos Cla	Tuberculosis Syphilis esight R ering R ee Norme tims at Signs a lical at President.	Normal Normal Throitacks of the send nevertendan	L Norma at Norma f asthma er had ce.	ıl
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in according medical	We have rdance examin	disease ac e exami with th	(Syphilis dmitted or s ined the and he is	above nar F. Regula placed in	med mantions for Category Manual Category Tember. M.O.	n r A s	Eye Hea	Tuberculosis Syphilis esight R ering R ee Norme tims at Signs a lical at President.	Normal Normal Thropada Thropada Normal Thropada November 1	L Norma at Norma frasthma er had ce. Member.	ıl
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in according medical Date Joined	Result	tment	Vacor day of day of Co	Nover	med manutions for Category M.O. M.O. M.O. MEG'T	Date Number	Eye Hea Nos Clarent Nos Claren	Tuberculosis Syphilis Syphilis Sight R aring R se Norma tims at Signs a lical a President. ANTI-TYPE TOTO	Normal A Thro backs of the dan	L Norma at Norma frasthma er had er h	ıl
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Joined	Result 1st	tment	Vacor day of Co NED O	Nover	med mantions for Category Management ember. M.O. M.O. M.O. REG'T	Date Number 162	Result A ME	Tuberculosis Syphilis Syphilis Sight Haring R Se Norma Lims at Signs S Lical at President. ANTI-TYPE HABITS	Normal Normal Thropad new tendan	L Norma at Norma frasthma er had er h	ıl
Joined	Result 1st on enliserred to	tment	Vacor day of Co NED O	Nover ORFS R DISC	med mantions for Category Management ember. M.O. M.O. M.O. REG'T	Date Number L Number	Result A ME	Tuberculosis Syphilis Syphilis Sight Haring R Se Norma Lims at Signs S Lical at President. ANTI-TYPE HABITS	Normal Normal Thropad new tendan Pendin Nocoula Nocoul	L Norma at Norma frasthma er had er h	ıl

NAME	Camera	Don	red.		
REGIMENTAL NO.	3042/62.		RANK L	?	
ENLISTED AT			PROMOTIONS AND DATE	s, &c.	
DATE					
IF SERVED PREVIO	USLY, STATE UNIT, &	3.			
MARRIED, WIDOWE	ER, OR SINGLE	S.			
NEXT OF KIN	Harganex (Pameron.	RELATIONSH	mo	Cher
ADDRESS OF 3	6 Sino	ninich	· ang	Lante	
ASSIGNMENT OF PA	AY 3 C.	то			
ADDRESS					

IN WHOSE FAVOUR

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

CASUALTIES, &c.

NATURE	PA	RT II. D. O.	REMARKS		
E.G. ABSENCE, PROMOTION, &c.	No. DATE		IF IN HOSPITAL, NOTE NAME, &c.		
J. 08	159	6-12-18	•		
Llice Slevole.	177	24-12-18			
4 .					

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE



	o and 141, Financial Instructions, 25715c, C.E.F., 1916).
Regimental No 204216 2 Rank / 6	Name Cameront
Corps Q J D C C Dwho was	· Arse No 51
on ZIIQ DII., Unu II.	d" or "transferred."
	DEC 6 1018
The following is a statement of the account of the about to DEC 3 / 1918 191 , the inclusive date of trans	
Dr. \$ c.	Cr. \$ c.
Bal. Dr. from prev. month	Balance Cr. from prev. month
Advances No. 26 43 8 20	Regt'l Paydays at \$c
by Cheques \ No	Field Allow. days at \$c'v > 60
Assigned Pay and Sep'n Allce. No.	Separation Allowances* (Monthly)
Other charges Vuo Anne 25	Other Allowances* Sucas Dunes 55
Payment on transfer or discharge No. 9363 46 90	Other Credits* bloshung 35
Balance Cr. (to be paid by the new unit)	Bal. Dr. (to be deducted by new unit)
1713	1715
Total	Total
*Give p	articulars.
A monthly stoppage of \$(†) ha	as(‡) been paid on account of Assigned
Pay for the month of191	(to) Assignee
and Sep'n Allce. for month of 191 191	(to) Assignee
(Address)	
(†) Insert amount to be assigne (‡) Insert "not" if amount has	ed, whether it has been paid or not. not been paid for period of account.
On Transfer	of an Officer.
	y Paymaster, Military District No
REMARKS:—	
State (1) date of enlistment	
(2) if married and if a Separation Allowance C	ard has been submitted
(3) cause of discharge Demobiley	authority
(4) authority for transfer	
NOTE.—Separation Allowance and Assigned Pay Card and In Certificate on transfer.	ndex Card (M.F.W. 71) are to accompany the original Last Pay
I have carefully examined this statement of account and	find it to be a correct extract from the Pay List of the Unit.
Date	log n
Place TORONTO, ONT.	10 hall bast
	Paymaster.
duplicate to District Paymaster; triplicate to accompany the	out in quadruplicate. Original copy to paymaster of new unit, e pay list at the end of the month, and quadruplicate for retention
accompany pay list at the end of the month, and triplicate for	licate. Original copy to accompany discharge papers; duplicate to retention as a record.
If a man on discharge is entitled to three months' Po	ost Discharge Pay, Last Pay certificate will be made out in quad- ded with other documents to Paymaster Post Discharge Pay and

M. F. W. 44. H.Q. 1772-39-903. 20M-11-18. D.P. 874.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.	
No. 3.042167 Rank Private Surname CAMERON A Onald Unit or Corps 2nd C.S.R Birthplace East Yoronk Out O	er-
(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).	
1. GENERAL DESCRIPTION:	
Physique	
Nutrition well runnished	
Pulse	
Condition of arteries . find	
Vision Rt. 030, Left, 40	
Hearing (conversational voice) Rt.??ft.	
Left 90ft.	
Opinion as to general health and physical condition. Junal Eurdeting fund	
(Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.) Nervous System	
3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition. One hence, no hacusellands no varicoexect no varicoexect no varicoexect. Murauafin. ! no all no super More the emplanes of slight attacks of testhing which is publish empressed. Approve	
(If space is insufficient, continue on back of form.) $\frac{2}{1/2}$	

EXAMINATIONS

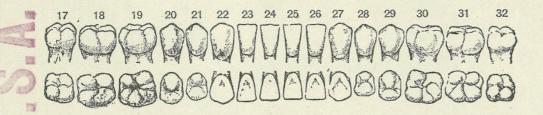
THIS SECTION FOR USE OVERSEAS-Examined at(Overseas) Signed .. I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service. Signature (If not satisfied, M.F.B. 227 will be completed by Medical Board.) THIS SECTION FOR USE IN CANADA nhelitin Signed I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service. Signature ... A. (If not satisfied, M.F.B. 227 will be completed by a Medical Board). (This space to be used, if necessary, in connection with Section 3, overleaf, only.)

CORPS ARMY DENTAL

Depot Battaloh, FR Central Ontario Regiment

CAMERON,

3042162



INSTRUCTIONS

- 1. On examination the condition of patient's mouth to be marked on diagram in red ink.
- 2. On first line of report record of same to be made in red ink.

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

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

		Date	Amalgami	emporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	t Filling	р Сар	Devitalization	Pyrrhœa	Synthetic Porcelair	racting	DE	NTUI	RES	d Clasp	d Filling	CRO	owns	dge Work	OPERATOR	itary District	REMARKS
KANK			Ame	Tem (a (b	Cem	Treg Pt	Root	Pulp	Dev	Pyr	Syn	Extr	U	L	P	Gold	Gold	Gold	Porcelain	177		Millin	
7	Condition on first Examination																						
	DISCHAR	GE EXA	M.	1						1													
	Ex6	auce	P		CEF	RTIF	ICA	TEI	ssui	ED	FOR												
	DATE DEC	2n tals	3)	1197-711		1	4	Le	u	tu	the	d	1	ti	le	eal	me	rul				
																					Gloveys	luc	
						+															1x	•	
																				2			
TATA																							
NEGIMEN																							

First



Depot Battalion 1st Central Ontario Regiment

Regtl. No. 3042162

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

1. Surname			CAMERON	
	ame			
	lress		76 Omorni	k Ave., Toronto, Ont.
				ith date of apprehension. or surrender)
5. Date of bir	th	,	Aug. 16,	L888
6. Place of bir	th(town, township or county and co		Swanwick	Ave., East Toronto, Or
7. Married, wi	dower or single		Single	
8. Religion			Presbyter	ian
9. Trade or ca	lling		Grocer	
10. Name of ne	xt-of-kin		Margaret (Cameron
11. Relationship	o of next-of-kin		Mother	
12. Address of	next-of-kin		36 Swanwi	ek Ave., Toronto, Ont.
13. Whether at	present a member of the	e Active Mili	tiaNo	
14. Particulars	of previous military or n	naval service,	if any. No	
		.(b) Date 0 .9	ot. 31, 1917. (c)	CategoryA2
(a) Place(DECL DECL	.(b) Date. 0.9 ARATION rue.	ot. 31, 1917. (c) OF RECRUIT	do solemnly declare that the
(a) Place(DECL DECL CAMERON rs refer to me, and are to	ARATION Tue.	ot. 31, 1917. (c) OF RECRUIT	
(a) Place(I, Dona)	DECL CAMERON rs refer to me, and are tr DESCR	ARATION rue. IPTION C	ot. 31, 1917. (c) OF RECRUIT Ald lamor	do solemnly declare that the(Signature of Recruit)
(a) Place I, Donal above particular Apparent age	DECL CAMERON rs refer to me, and are to DESCR 30	ARATION Tue. IPTION O Tyrs.	ot. 31, 1917. (c) OF RECRUIT ON CALLING UP 2 mths.	do solemnly declare that the Comparison of Recruit) Distinctive marks, and marks indicating con-
(a) Place I, Donal above particular Apparent age	DECL DECL CAMERON rs refer to me, and are to DESCR 30 5	ARATION Tue. IPTION O yrs. ft.	ot. 31, 1917. (c) OF RECRUIT ON CALLING UP 2 mths.) 9 ins.	do solemnly declare that the (Signature of Recruit)
(a) Place I, Donal above particular Apparent age Height	DECL d CAMERON rs refer to me, and are to DESCR 30 5 fully expanded	ARATION Tue. IPTION Co. yrs. ft. 37½	ot. 31, 1917. (c) OF RECRUIT ON CALLING UP 2 mths. 9 ins.	do solemnly declare that the (Signature of Recruit) Distinctive marks, and marks indicating congential peculiarities or
I, Donal above particular Apparent age Height	DECL DECL CAMERON rs refer to me, and are to DESCR 30 fully expanded range of expansion.	ARATION Tue. IPTION Co. yrs. ft. 37½ 3½	OF RECRUIT OF RECRUIT ON CALLING UP 2 mths. 9 ins. ins.	do solemnly declare that the (Signature of Recruit) Distinctive marks, and marks indicating congential peculiarities or
I, Donal Apparent age Height Chest measurement Complexion	DECL Ld CAMERON rs refer to me, and are to DESCR 30 5 fully expanded	ARATION Tue. IPTION Co. yrs. ft. 37½ 3½	OF RECRUIT OF RECRUIT ON CALLING UP 2 mths. 9 ins. ins.	do solemnly declare that the (Signature of Recruit) Distinctive marks, and marks indicating congential peculiarities or previous disease.
I, Donal Apparent age Chest measurement Complexion	DECL d CAMERON rs refer to me, and are tr DESCR 30 5 fully expanded range of expansion. Fair Blue	ARATION Tue. IPTION Co. yrs. ft. 37½ 3½	OF RECRUIT OF RECRUIT ON CALLING UP 2 mths. 9 ins. ins.	do solemnly declare that the (Signature of Recruit) Distinctive marks, and marks indicating congential peculiarities or previous disease.
I, Donal above particular Apparent age Chest measurement Complexion	DECL d CAMERON rs refer to me, and are to DESCR 30 5 fully expanded range of expansion. Fair Blue	ARATION Tue. IPTION Co. yrs. ft. 37½ 3½	OF RECRUIT OF RECRUIT ON CALLING UP 2 mths. 9 ins. ins.	Distinctive marks, and marks indicating congential peculiarities or previous disease.
I, Donal above particular Apparent age Chest measurement Complexion	DECL d CAMERON rs refer to me, and are tr DESCR 30 5 fully expanded range of expansion. Fair Blue	ARATION Tue. IPTION Co. yrs. ft. 37½ 3½	OF RECRUIT OF RECRUIT ON CALLING UP 2 mths. 9 ins. ins.	Distinctive marks, and marks indicating congential peculiarities or previous disease. None Major

M. F. W. 133. 500M.--5-18. 1772--39--1158.