om. Number 303 6263. Rank Gnc.
Surname BAGLEY.
Christian Name Charles
Units C. 7. Q. Theatre of War ENG
Date of Service 7. 7. 18.
Remarks Cordood
Latest Address. 1/2. Cordoras, St.
Concourer B.C.
Roll No. a Page 4208
200m6-21.4.

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REGT. NO. RANK	NAIVIE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
UNITAGE	SERIAL N	O. IN A. AND D.
TOTAL SERVICE WHERE AND HOW LONG		
DISEASE OR INJURY		
OPERATIONS		
RESULT OF OPERATIONS		
		- Tage
(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION		
(B) AS A TRANSFER (STATE WHERE FROM)		
(B) AS A TRANSFER (STATE WHERE FROM)		
DATE OF DISCHARGE TO UNIT		IN CA
DATE OF DISCHARGE AS AN INVALID		
DATE OF DEATH		
DATE OF TRANSFER (STATE WHERE TO)		
NAME OF HOSPITAL		
OTHER INDEPENDENT CONDITIONS DIAGNOSED		

Charles

No.

2. Rank.

4. Unit.

Name.

3036263

Driver

BAGLEY

SHORT FORM.

Dispersal Area I

Service Group..... 32

PROCEEDINGS ON DISCHARGE

(Demobilization.)

ecupational Group ....1.....

4 H. M. T.S. WINI REDVI EMEARKED 18-7-1

JUL 30 1919 5. Date of Discharge Place 6. Reason for Discharge ...

2nd Canadian Command Depot.

Authority No. 2, D. D., Part 11, D.O. No. 14

8. Proposed Residence after Discharge......118. Cordoras St.,

CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place ...... No. 2 Disposet Wester Toronto, 

Signature....

## LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	

Group Q'
Checked by No. 22

Date 17/7/1 9:00

# Separation and Assigned Pay Branch 208

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT 2000

RATE OF SEPARATION ALLOWANCE

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 3036263	Name Royal Bank of banada 10 * B998, Address King & Yorge Sto. Br. Joronto, Ont
Rank In't Promoted Reverted Discharge	Address King of Gorge Sto. Br. Joronto, Ont
Soldier's Name Charles Bagley	Change of Address
Battalion 70 Th Depot Battery 6.8.7. Draft-45	1 ROYAL BANK OF CANADA, # B.998,
Beneficiary	2 KING & YONGE STS.BRANCH, 2 TORONTO, ONT. 20 20.00
Relationship	3 % 3036263 GNR CHARLES BAGLEY TWENTY DOLLARS
Address	4

	Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS 722-6-12
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# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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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
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P 820 12474-375M-13-2-18. ASSIGNED SEPARATION ENGLAND OR CANADA. NAME: BAGLEY Chas PAY. ALLOWANCE. EFFECTIVE EFFECTIVE 3036263 DATE:-NUMBER :-DATE :-AMOUNT:- 20% PARTICULARS OF RANK OR APPOINTMENT AMOUNT :-NAME, ADDRESS. REMATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME "ONLY TO BE WRITTEN IN THIS SPACE. AUTHORITY: RANK OR APPOINTMENT Royal Bank of Canada P.C Can 1-7-18 Gnr the and yonge Sts Toronto, Ont. UNIT AND TRANSFERS Dep art Bde Deft 45 ORIGINAL UNIT :-DATE ACCOUNT FIRST OPENED :-DATE DATE LEDGER AUTHORITY UNIT TRANSFERRED TO · 11 as 6, Ra. EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK AMOUNT DATE OF NUMBER UNIT PAID BY UNIT PAID BY DAILY RATES OF PAY AND ALLOWANCES P.F.A. SUBSICE 3-7 2299 AUTHORITY 2920 10 PARTICULARS OF RENDERING NON-EFFECTIVE: 31.7.19 Disc to ba. auth 11571. Kipon mo. 2 les Bal 8,261 DR 2. DR. 3. DR. 4. BALANCE DEFERRED PARTICULARS DR. 1 PARTICULARS CR. 1 | CR. 2. 18 487 20 20. 41 34 20 32 43 2269 3410 lear 20 (Odl ar 5310 31 48. ar 6886 Sof 4 Cap 3993 le 68643 487 487 74 al 469

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Charles RANK. Pte RECFILE. No. 3036263T O. S. May 6. 19/8 CORPS./3 Cen Out Neg H.Q. FILE. ENLISTMENT, PLACE. Doronta, Ont. DATE May 6th 1918

DISCHARGE, PLACE, Canada, Severn Bridget Ent. Alde 2nd 1895 REASON. · 214y 2 ADDRESS ON DISCHARGE DOCUMENTS. NEXT OF KIN Bagley Arthur Tather.

NEXT OF KIN Bagley Arthur Tather.

ADDRESS GO John Weir, RR 1 Washago, Ont

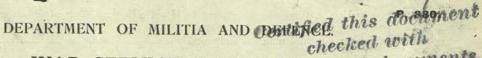
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175 Beatrice St, Joronov. auto: Lett. 9/4/8.

175 Beatrice St, Joronov. auto: Lett. 9/4/8. 0/5.20-6-18 1284 L. L. 20496-M. & D. 7908-100m.

CHARG	GED OUT		RETUR	NED	CHAR	GED OUT	RETURNED			
то	DATE.	BY	RECEIVED BY	DATE	то	DATE	BY	RECEIVED BY	DATE	
	A. Milan									
		ALL ST	1							





# WAR SERVICE GRATUITY mental documents.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1.	a summer of the
3.	Rank Drives 4. Original Unit CFA Res. 5. Reg. No. 3536263
6,	Address, in full, to which future payments of gratuity are to be forwarded
	Bayley Royal Bank of Samuela Bin
	and young It, Branch Journal On
7.	Date of enlistment in the C.E.F.
8.	Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, im-
	mediately prior to your discharge.
9.	Relationship of such dependent
0.	Address, in full, of such dependent
0.	
1.	Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account
	of another soldier?
2.	Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one
	such unit and dates of service overseas with such unit:
	NI I I I
3.	of the state of th
	time on duty outside of Canada or the United States?
4.	Were you on active service only in Canada or the United States? If so, give particulars of unit and
	dates of such service.
5.	Give total length of time which you served on active service, whether in Canada or Overseas, setting out
	particulars of units on whose strength you served.
	May 14 1918 to 1 July 1918. Canada
	July 1918 to 4 18 12 1919. EFA. Rivered
6.	Were you at the time of enlistment a civil employee of the Dominion Government? If so, state
	Department
	Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?
	5434. Wt. /P30. 250,000(8). 2/19. S.O.,F.Rd. 5421. Wt. /P51. 35,000(4). 5/19. S.O.,F.Rd.

16. Have you had more than one enlistment? If	so, give particulars of discharges and re-enlistments.
	THE STATE OF THE S
and under what regimental numbers and units,	N.O.
19. Have you already received any payment of I	Post Discharge Pay or War Service Gratuity? If so,
	1/
state amount you and your dependents have al	lready received and by whom paid
The last of the second of the last of the	and enterestable an initial set of adequate at the following
20. Have you been issued with a War Service Badge?	If so what class?
21. Have you, during the present war, served in the Ir	mperial Forces?
A comment of the comm	and built to be a series about 4004 st
	ed any gratuity in the nature of Post Discharge Pay
from the Imperial Forces? If so, state amount rec	ceived, or to which you are entitled
23. (a) Did you revert Overseas to a rank lower t	than the substantive rank held by you on your arrival
in England?	and the second that Petr in the residence and the
	nisconduct or inefficiency?
24. Are you now serving in the OTOF.?	If not, give:—(a) Date of discharge
JUL 56	b) Reason for discharge DEMOBILIZATIO
***************************************	The state of the s
25. Are you at present a member of and in receipt	of pay and allowances from any Canadian naval or land
	a actual theatre of war? If so, give particulars of one
unit in which you served at the front, and dates	of such service with that unit
27. (a) Are you receiving treatment from the Depa	rtment of Soldiers' Civil Re-establishment?
(b) If so are you in receipt of full pay and alle	owances from that Department?
And I make this solemn declaration, conscientious same force and effect as if made under oath and in virt	sly believing it to be true, and knowing that it is of the
same force and elect as it made that Gath and in vity	2 And of the contract of the c
Signature of Applicant: The Signature	agleg /
Place of Residence://2 Corodas &	D. 25 00 12, 13, 14 00 0
Declared before me at:	Varteouver 1 24
Do the Do.	10 10
This day of Auguston of the	19/ What I WAY
Signature of Barrister of the Supreme Court Stipendiary Magis-	I W P
trate, Notary Public, Justice of the Peace, or Commissioner for the	
Administration of Oaths under	The second of th
P.C. 2767, dated 11th Nov., 1918.	V
DOCT DISCHARGE DAY	THE REPORT OF SECTION SECTION SECTION SECTION SERVICES.
POST DISCHARGE PAY.	w a
Date paid. Paid Paid	War Service Net amount Gratuity due
Soldier Dependent	aug
· · · · · · · · · · · · · · · · · · ·	
G. Fe J G	
Certified Correct.	District Paymaster.

CR. Rank

Name .

BAGLEY, Charles.

Reg'l No.

45th Dft Toronto Arty Bgdf in perm. Corps, }

Married or Single

Single.

3036,263.

Place and Date of Enlistment

Toronto, May 6th. 1918.

Place of Birth Severn Bridge Ont.

Name and Address, Next-of-Kin

Arthur Bagley,

Clo John Weir, R.R.No.1. Washago, Ont., Relationship Canada.

Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Disc	charge, Date	and Place	Reason		Character
Repo	ort.	Record of promotions, reductions, transfers,			REMARKS
Date.	From whom received.	casualties, etc., during active service.  The authority to be quoted in each case.	Place.	Date.	Taken from Official Documents
		Arrived in En	gland	7-7-18	S/S WAIMANA
13.7.18	Comp. Sde	Taken on strength Canada			
31-1-19.	VV	S.O.S. to Res. Bde & J.Q.	Bordon	31-1-19	PT 52 PT II. 31 + Res Del \$1736d 2/19.
22-3-19	CARA	TOS from Res C.+A.	" Willey	19.3-19	81. + Mex CHA. 18-19.3-19.
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Rep	oort.	Record of promotions, reductions, transfers,				************	MADINE SE
Date.	From whom received.	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.	
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THE REPORT OF THE PERSON NAMED IN COLUMN TWO							
State of the same of					No Calebra		

# 70th OVERSEAS BATTERY

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

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

500м.—9-16 Н. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. Regimental No. 3036263 Rank Gunner Name C. E. F. BAGLEY, Charles Enlisted (a) 6-5-18 Terms of Service (a) C.E.I. Service reckons from (a) Date of appointment) Date of promotion to Numerical position on) roll of N. C. Os. present rank to lance rank Civil - Clerk Qualification (b). Wilitary - Nil Extended. ..... Re-engaged. .... Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as retaken from Army Form B. 213, ported on Army Form B. 213, Army Form Place Date From whom Army Form A. 36, or other Date A. 36, or in other official documents. The received official documents authority to be quoted in each case 7-7-18 . H.M.T. Waimana. 13-71-8 O. C. Comp. T.O. S. on arrival from Bde. C. R. A. Canada, and will be shewn Witley B.O. Pt2. 52 7-7-18 as on command to Frensham Pond 2-9-18 B.O.PZ 1100

<sup>(</sup>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.

Le Amil	From whom	1	casualtic	s, etc., n Arm	during active y Form B. 213	service, as re 3, Army Form	n ·		Place	Date	W.	taken fr	Remarks om Army F orm A. 36,	orm B. 21	3, er
Date	received	-			her official doc o be quoted in		0	oche)	12000	Service !	A Million		icial do <u>c</u> um		2.761
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2-13	Re	E	Bd∈.		T.O.S.	Comp.	Bde	. (	R.A.	Witley	<b>f</b>	31-1.	C. Com	P. Bo	
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entral Ontario Regiment Regtl. No. 3036263

**PARTICULARS** 

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One. BAGLEY, Charles 2. Christian name..... 3. Present address 175 Beatrice St., Toronto, Ont. 4. Military Service Act letter and number 825407 December 2,1895 5. Date of birth..... Severn Bridge, Ontario, Canada 6. Place of birth.....(town, township or county and country) Single 7. Married, widower or single..... 8. Religion Baptist Clerk 9. Trade or calling. Arthur Bagley 10. Name of next-of-kin.... Father 11. Relationship of next-of-kin ...... Washago, Ont., C/o John Weir. 12. Address of next-of-kin..... 13. Whether at present a member of the Active Militia. NO 14. Particulars of previous military or naval service, if anynil 15. Medical Examination under Military Service Act:-(a) Place Toronto, Ont. (b) Date October 1,1917 (c) Category A.2 DECLARATION OF RECRUIT I, Charles Bagley , do solemnly declare that the above particulars refer to me, and are true. DESCRIPTION ON CALLING UP 23 vrs. b mths. Distinctive marks, and Apparent age..... marks indicating con-gential peculiarities or previous disease. 5 ft. 6 ins. Height..... fully expanded. 36 ins. Scar on left leg. measurement \ range of expansion 4 ins. Mole behind right ear. Complexion Dark Blue Black

Toronto, Ont. Date May 6,1918 Place.....

M. F. W. 133. 500 M.—8-17. 1772—39—1158.

1st Central Ontario

# 70th OVERSEAS BATTSERWCE ACT, 1917. IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for exemption or a report for service, or, although having made case schedule of men reporting for exemption.

medical history sheet on application to any master to a Registra	c (which will be handed to Postmaster in Canada, or or Deputy Registrar und	igh having made one, he doe him) must be attached by him t be sent by him after he has r er the Military Service Act	s not kno n to a repo noted upor In any ev	reporting for service, or if he has not now the number, he will be instructed to the fort for service or claim for exemption we it the number on the receipt he obtainent the duplicate medical history sheet iven by the latter to forward it directives the service of the service	hat the copy of this which he may make ined from the Post- t will be sent by the
1. Surname	Bagley	Christian	name	Charles.	

Deputy Re	egistrar		meer commanding dis	iess mstruction	is have been	given by t	ne tatter to it	nward it direct	to a Registrar o	Ţ
1. Surn	ame	Bagle	у	Christ	tian name	Char	les.			
2. Num	ber of repeipt or so	port for hedule	service or claim for	r exemption	according	to Postn	naster's}	825407		
3. Cons	ecutive n	umber o	n schedule of mer	reporting	for service	e (if he	ppears			
4. Addr	ess (includ d number,	ling street, if any)	), 175 Be	atrice	St.	oro nt	o. Ont	•		Can
The fol	lowing a	are acci	irate particulars	with rega	ard to the	above i	named man	n as ascerta	ined by the	3 4
m	edical ex	aminat	ion on the 18	at	day of	Oot.		1	917, by the	· 1
un	dersigne	ed medi	cal board sitting	atTo	ronto	Ont.	r ,			- X 19,
5. Age a	as stated	22	Years 10	.Months.	6. Ap	parent ag	e 22	Years 1	0 Months	(1)
			eet 6							
		(1	Minimum_32	Ins.		Dos	17-	(Eyes	Blue	1 13
9. Chesi	t measure	ement { N	Minimum 32 Maximum 36	10. Ins.	Complexio	on Deal	25.0	Hair	Black.	18
11. Physi	ical develo	opment.	Good.							
			• 3	Nil		or 12. St	папрох шаг			· M
13. Num	ber of vac	cination	marks		14	. When va	accinated las	t Nil		nn.
15. Distin	nctive mar	rks and n	narks indicating con		iarities or 1	orevious di	sease	Nil		Me
										Signature of Man
				199				70 20 T		nr.
16. Slight	t defects b	ut not su	fficient to cause rejo	ection Hes	aring	U. D.	Rheumaticm	y 0 200 a		ıat
The man	denies hav	ving had	Tuberculosis Syphilis	We find no	evidence o	of past	Tuberculosis			181
(St	rike out d	isease ad	mitted or suspected.	.)			Syphilis			02
in accor	Ve have dance v	examination examination	e C. E. F. Regi	named ma	n or a co					
medical	examina	itions, a	nd he is placed	in Categor	у ДЖ					
	1 × .			Ranau	Kish C	coff	President.			
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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. DATES OF Signature of Number of Date of Arrival Admission into Hospital Discharge from Hospital. Medical DISEASE. days in STATION. at the Officer. Hospital. Station. Month Year Day Name Christian Surname

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Army Form B.	Nothing	(6 28 19) W10416	(17) Next of Ki (18) Demobilizer (19) Pivotal-man (20) Qualificatio (22) Extended	r (f) n (f) ns (g)	WINIFREDI RKED 18-7-1		ps trade and rate (23) Re	e-engaged	Viet Acres		Signature of Posting Officer

(24) Miscellaneous entries :-

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (vide A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent." &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.

	130	agtey.	C. 3036263.				
Date	From mom received	Authority of art II, of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	Date of promotion, reduction, reversion,	(F)  Remarks, and initials and rank of an officer	
	4	isd in	Eugeand SS. Wair	aud'	7-7-18		
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Casualty Form-Active Service.

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	Report	Record of promotions, casualties, etc., during	reductions, transfers,					Remarks	
Date	From whom received	ported on Army Form A 36, or in other offici authority to be que	B. 213, Army Form	Control of the contro	Place	Date	Army	from Army For Form A. 36, official documen	or other
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Regional No MED	ICAL	HISTOI	RY OF-	- A.1	F. B.178.
Regimental No.3036263.				Region	
Surname Bagery.		Christian Nat	mes. Cha	ress.	
TABLE I.—General Table.		TABLE III Vaccination	n. Inoculation	s, etc.; Exa	minations
Birthplace { Parish Season Bracks, County MacCarrio, Cause	AUTON - SE	engagemen Issue or S	r Foreign Sert, or Prolo urgical Appliatment, etc.	ngation of	Service,
Examined { onday of	191	Date.		etails and Signat	
Declared Age. 23years	days.				
Trade or Occupation C. P. C. R.					
Height					
Colour of Hair. B.C.A.C.A Complexion. D.M.			The state of the s		
,, Eyes 18844.					
Chest   Girth when fully   36   Measurement   Range of expansion   4	inches.				
Physical development					
Vaccination Marks Arm, RIGHT. Number	LEFT.				
When Vaccinated	Water the Co				
Vision $\begin{cases} R, E, -V = \dots & With \\ L, E, -V = \dots & Glasses \end{cases} \begin{cases} R. \\ L. \end{cases}$					
Identification Marks, such as Tattoo, Moles, Scars	s, etc.:—				
Sean on Cast Sig.  Mote Six of Cork! fan			,		
Defects or Ailments :					
12					
Examined and found—					***************************************
Fit for Grade III. Category.		Special Remark	s: state if a dis	charged Soldi	er
(Iv. a. 2.					
(Strike out those which do not apply.)	Cada				
Signature W. M. A. A. A. A. C. Chairman of Medical Board.	V.Y.L.	TA	BLE IV.—S	ervice Tab	le.
		Station or	Troopship.	Date of arrival or embarkation.	Date of Departure or disembarkation
Re-examined for posting at					
Onday of	Port of the				
Enlisted {at	M 1 3 1 1 1 3				
Particular de la constantina della constantina d	gtl. No.				
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te			re)		
7523 WF 12046/4/7 600,000 7.18 CLdP 334.		(Rai	ık)		

# TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

Name of	A	dmitted Hospital	to	Disc	charged t	from	Disease.	Number of days in	Remarks 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 will 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
+ Hospital.	Day	Month	Year	Day	Month	Year		Hospital.	particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Medical Officer.
			EV. (15)							
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### OVERSEAS MILITARY FORCES OF CANADA

RECORD OFFICE

### CHARGE SHEET FOR MEDICAL HISTORY SHEETS

	Regiment	tal No303	6263 Name BAGLEY.	harles.	Unit_			
	DATE				DATE	FILED	Section 1	ENTERED
SENT	REQUEST	CASUALTY	SENT TO	WANTED BY	DATE RECEIVED	FILED BY	NOTES	ENTERED BY

### CANADIAN ARMY DENTAL CORPS, O.M.F.C.

# -DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

Canadian Frinting and Stationery Dervices, London	
REGIMENT 2 C. C. D RANK D. No. 3036263  Date of Examination in England Date of Examination in France  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16  DOCO DOCO DOCO DOCO DOCO DOCO DOCO DOC	I. 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 teetic concerned.  3. In reference to Partial Dentures the numbers of teeth thereon will be stated.
PRESENT DENTAL REQUIREMENTS	
2 22	
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?	
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 Jes	
(c) In France	A SHOOL SHOL SH
Signature of Dental Officer Like Bl	ane Cips.

# 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.

Un	Rank TE Surname BAGLEY  (Given name in full)  CHARLES  att or Corps & C.C.D. Birthplace GEVERN BRIDGE ONT.
	(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)
2.	GENERAL DESCRIPTION:  Physique 2 Lugh. Weight 130 and lbs Height 5. ft. 6. in. Colour of Eyes Mullel
	Nutrition  Pulse  Condition of arteries  Vision Rt.  Left  L
Opi	nion as to general health and physical condition
2.	Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems?  (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)  Nervous System
	Disturbance of Mentality M. Muscular 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.

2

faa/gl

# EXAMINATIONS

Examined at Signed Sign	HIS SEC	TION FOR USE OV	ERSEAS—
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	12.	Mylus Englov	198/11/leale
(If not satisfied, M.F.B. 227 will be completed by Medical Board.)  HIS SECTION FOR USE IN CANADA—  Examined at	condition; th	at I find it correctly stated; and	that I have not withheld any information concerned, either prior to or during service.
HIS SECTION FOR USE IN CANADA—  Examined at(Canada)		(If not satisfied MER 227 x	
	The state of the	ION FOR USE IN	CANADA—
	Examined at	'ION FOR USE IN(C	CANADA— Canada) 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.	Examined at  Date  I hereby condition; the	CONTROP USE IN(Control of the control of the	CANADA— Canada) Signed
condition; that I find it correctly stated; and that I have not withheld any information concern-	Examined at  Date	certify that I have read, or have at I find it correctly stated; and affections from which I suffered	CANADA— Canada) Signed  heard read, the above description of my present that I have not withheld any information concernly, either prior to or during service.  Signature

[OVER]

### CANADIAN EXPEDITIONARY FORCE

# DISCHARGE CERTIFICATE VAR SERVICE BADGE.

CLASS NUMBER

THIS IS TO CERTIFY that No. 303 6263 (Rank) Privis Name (in full) A safes & harden enlisted in FORCE at Vivinto on the Saxe CANADIAN EXPEDITIONARY day of 10/8 Demobilization. and is now discharged from the service by reason of - Medical Unfitness THE DESCRIPTION OF THIS SOLDIER on the Date below is as follows: Marks or Scars Height 0 Complexion..... Signature of Soldier, Issuing Officer. Date of Discharge istrict beaut O.C. No. 2 District Depot. Toronto, Ont. JUL 30 1919 Rank

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.

M.F.B. 39A.