



## REGIMENTAL DOCUMENTS

NAME

*Baker, Frank*

REGT. No.

*2779827*

UNIT

*Special*NON-EFFECTIVE BY *Remot* CATEGORY.....

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1-M. F. W. 192

1-C. A. D. C. 5009

1-C. A. D. C. 5009a

14-18

21-19

33-19

4

462241



Number

805498

Rank

Surname

BAKER

Christian Name

Frank

Units

84th Bn Can Inf

Theatre of War

France

Date of Service

15-11-16

Remarks

Latest Address

~~845 Carling Ave~~  
~~Ottawa, Ont~~

Roll No.

B Page 19802

388. CREIGHTON  
NE  
OTTAWA. ONT.

200m.-6-21.

4022710

DESP. FEB 16 1923

REGN. NO. GA 19176



DEPARTMENT OF VETERANS AFFAIRS  
WAR VETERANS ALLOWANCE DISTRICT AUTHORITY

Address \_\_\_\_\_

The Public Archives Records Centre,  
Tunney's Pasture,  
Ottawa 3, Ontario.

HAM.

MARK YOUR REPLY:

Attention: Reference Section.

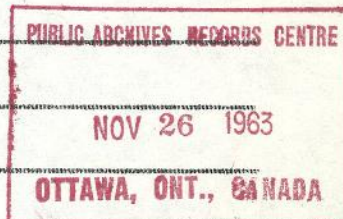
For attention of:

Re: BAKER FRANK Arthur Service No. 8 05498  
(Surname) (Christian Names)

Veteran is stated to have served during S. African War( ) World War I (X)

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars:

1. UNITS (including that of discharge) HIGHEST RANK IN UNIT:
- |                     |              |
|---------------------|--------------|
| (a) <u>136 BN.</u>  | <u>PTE</u>   |
| (b) <u>39 BN</u>    | <u>PTE</u>   |
| (c) <u>87 BN.</u>   | <u>PTE</u>   |
| (d) <u>C.M.P.C.</u> | <u>L/CPL</u> |
| (e) _____           | _____        |
| (f) _____           | _____        |
- (If other than CEF please so designate following applicable unit)



2. THEATRES OF SERVICE

(a) South African War

Date and port of embarkation \_\_\_\_\_

(b) World War I - (If Canada CANADA only, state if with territorial limitations) BRITAIN FRANCE

Date(s) embarked for U.K. \_\_\_\_\_

IF CANADA

AND

U.K. ONLY

Date(s) disembarked in Canada from U.K. \_\_\_\_\_

Period(s) of desertion in U.K. \_\_\_\_\_

3. Any other military service Served in C.M.P.C. from 30 Jan 1919 to 29 July 1919 regt # 805498, Canada only (P.F.)  
SERVED WITH C.M.P.C. 16 Sept 1919 - 6 May 1920  
L/CPL # 2779827. Canada only.

4. Date and place of all enlistments. 6 March 1916, OTTAWA ONT

5. Date of all discharges and reason. 14 Jan 1919, DEMOB.

6. Date and place of birth as per attestation paper. 14 April 1896, OTTAWA ONT.

7. Marital status; If married, name in full of wife. SINGLE.

8. Religion. LUTHERAN.

9. Decorations, if any. NIL

WVA 18.

Head, Reference Section.



# Proceedings on Discharge.

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

No. <b>805498</b>	
Rank <b>L/Cpl</b>	
Surname <b>BAKER</b>	
Christian name <b>Frank Arthur.</b>	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) <b>No. 3 Detd C.M.P.C.</b>	
Date of discharge <b>29-7-19</b>	
Place of discharge <b>Kingston Ont</b>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <b>22</b> years <b>11</b> months. Height <b>5</b> feet <b>8</b> inches. Complexion <b>Fair</b> Eyes <b>Brown</b> Hair <b>Fair</b> Trade <b>Plumber</b> Intended place of residence <b>845 Carling Ave Ottawa Ont</b> (To be given as fully as practicable.)	Descriptive marks      <b>Scar L. Knee</b>
2. The above-named man is discharged in consequence of <b>"General Demobilization"</b>	
Authority for discharge <b>R.O. 1894 D/15-4-19</b>	
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.)	

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

E.R.J.



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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding.....

#### 8. Certificate to be signed by the Soldier on Discharge

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

(Place).....**Kingston Ont**.....

(Signature of Soldier.)

(Date).....**29-7-19**.....

(Signature of Witness.)

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

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

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

(Signature of Soldier.)

#### 10. Statement of Service.

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

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

#### 11. Confirmation of Discharge.

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

(Place).....**Kingston Ont**.....

(Signature).....

(Date).....**29-7-19**.....



**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.)

## List of Discharge Documents



## List of Discharge Documents.

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

Documents not accompanying this form should be crossed out.

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

*Officer Commanding.*

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



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. **No 3 Detachment C.M.P.C.**

Regimental No. **805498** Rank **L/Cpl.** Name **Baker, Frank Arthur**  
C. E. F.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
30-1-19	Kingston Ont	T.O.S. on Re-enlistment  Part 11 Order No.30 D/ 30-1-19			
29-7-19	Kingston	S.O.S. on Discharge D.O.210 D/29-7-19			

*Graham Stars*  
Major  
Asstt Provost Marshal MD#3

*Graham Stars*  
Major,  
Asstt Provost Marshal MD#3

(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. [P.T.O.]



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



# ATTESTATION PAPER.

No. 805498

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Baker, F
- 1a. What are your Christian names? Frank Arthur
- 1b. What is your present address? 845 Carling Ave. Ottawa
2. In what Town, Township or Parish, and in what Country were you born? Ottawa, Canada
3. What is the name of your next-of kin? Adeline Baker (mother)
4. What is the address of your next-of-kin? 845 Carling Ave., Ottawa
- 4a. What is the relationship of your next-of-kin? Mother
5. What is the date of your birth? 14th August 1896
6. What is your Trade or Calling? Plumber
7. Are you married? No
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? 2 yrs 10 mos. 87th Battalion  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? No
14. If so, what was the nature of the disability?
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? No
16. If so, what was the reason?

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

I, Frank Arthur Baker, 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.

Date 30th Jan. 1919 191 . F. A. Baker (Signature of Recruit)

M. Holman Sgt. (Signature of Witness)

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

I, Frank Arthur Baker, 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.

Date 30th Jan. 1919 191 . F. A. Baker (Signature of Recruit)

M. Holman Sgt. (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 Kingston this 30 day of Jan. 1919 .

C. C. No. 3 Detachment, C.M.P.C. (Signature of Justice)



# Description of Baker, Frank Arthur on Enlistment.

Apparent Age 22 years 8 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 3/4 ins.

Chest measurement { Girth when fully expanded 36 3/4 ins.  
Range of expansion 2 3/4 ins.

Complexion Fair

Eyes Grey

Hair Lt. Brown

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

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).

Circular scar left knee cap (Shrapnel )

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye ; his heart and lungs are healthy ; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* fit for the Canadian Over-Seas Expeditionary Force.

Date 30th Jan. 1919.

Place Ottawa, Ont.

*Alfred Johnson Capt*

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.

Baker, Frank Arthur 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.

*W. H. Black*

Capt. (Signature of Officer)

O.C. No. 3 Detachment, C.M.P.C.

Date 30-1-19 1919.



## CANADIAN CONTINGENT EXPEDITIONARY FORCE.

## Last Pay Certificate.

This form to be used for all ranks (Vide Articles 122, 130, and 141, Financial Instructions, 25715c, C.E.F., 1916.)

Reg. No. **805498** Rank. **Pte.** Name. **Baker F**  
Corps. **#3 District Depot** Who was.

on **14-1-19** to **Discharged**  
The following is a statement of the account of the above named from  
**1-12-18** to **14-1-19** the inclusive date of transfer or discharge.

DEBIT.	\$	C.	CREDIT.	\$	C.
Bal.Dr. from Prev. Month..		<b>21.21</b>	Bal.Cr. from Prev. month.		
Advances No _____			Reg. Pay. <b>45</b> Dys. at <b>1.00</b>	<b>45.00</b>	
By _____			Fld.Alice. <b>45</b> Dys. at <b>.10</b>	<b>4.50</b>	
Cheque. No _____			Sep.Alice.(Monthly).....		
Assgd.P.& Sep. Alice.....			Other Allices. <b>Clothing</b>	<b>25.00</b>	
Other Charges.....		<b>1.29</b>	Other Org. <b>Xmas Sub</b>	<b>11.45</b>	
Pay on Trans. or Disch....		<b>369 143.45</b>	Bal.Dr. to be Deb. by New Un.	<b>70.00</b>	
TOTAL.....	\$	<b>165.95</b>	TOTAL.	\$	<b>165.95</b>

A monthly stoppage of \$ \_\_\_\_\_ has \_\_\_\_\_ been paid on account of  
Assgd. Pay for month of **20.00** **not** )  
and Sep.Alice, for Mo. of **Jan** ) to Assignee; **Mrs. A. Baker**  
**845 Carling Ave Ottawa Ont**  
Address.

## ON TRANSFER OF AN OFFICER.

Outfit Allowance of \$ \_\_\_\_\_ has been paid by P.M., M.D.

## Remarks:-

- State. (1) Date of enlistment.  
(2) If married & if a Sep. Alice. card has been submitted. **No**  
(3) Cause of discharge. **Dischd** Auth. **P.O. 1343**  
(4) Auth. for transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the Unit.

Place, OTTAWA.

DATE. **14-1-19**

M.F.W.44.

Paymaster "C" Dispersal Area.



(To be attached to Case Sheet.)

2nd L.L.D.

No.

805498

Rank and Name

Pie Baker

Age

22

Military Hospital

Service

29.2

Disease

Sp. nk. aetle

Date of admission.

29-8-18

Date of discharge

### Result.

Dates of  
Observation

29	30	31	1	2	3	4	5	6	7	14.
----	----	----	---	---	---	---	---	---	---	-----

Days of Disease

Temperature  
Fahrenheit

[illegible]

107°

106°

105°

104°

103°

102°

101°

100°

99°

98°

97°

Pulse per Minute

Respirations per Minute

Motions per 24  
hours

Adw. Fed.

18	81	66
18	81	72
18	81	72
18	81	78
18	81	88
18	81	86
18	81	72
18	81	80
18	81	78
18	81	72
18	81	84

Signature.

Adm. Zulueta Cayo

In charge of case.



# 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 136th. O/S. Bn. C.E.F.

(2) Regimental Number 805498

(3) Full Name of Soldier Frank Baker

Ottawa Ont.

(4) Place of Birth Ottawa Ont.

(5) Are you married, or not? NO

(6) If married, state,  
(a) Full name of your wife - - - - -

(b) Present Postal Address - - - - -

(7) Are you a widower? - - - - -

(8) Have you any children? - - - - -

If so, give number of boys and girls - - - - -

Also their names and ages - - - - -



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

If so, state name and address Henry Baker 845 Carling Ave. Ottawa

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

If so, state name and address.....Mrs. Adeline Baker

.....845 Carling Ave. Ottawa. ont.

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

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.

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

If so, in what Company?.....Prudential Life Ins. Co.

Have you made arrangements for payment of your Insurance premium.....Yes

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date.....

**AUG 31 1916**

*C. W. Mark*  
Officer Commanding **1st Lt. Col.**  
Commanding 136th Overseas Battalion, C. E. F.



Surname Baker H. Q. ....  
Christian names J. M. D. No. 6 ....  
Regtl. No. 2779827 Rank Pte. T. O. S. Sept. 15 1919 ....  
Unit Mil. Pol. (Spec Guard) D. O. Pt. II 3 of 17-9-19 ....  
S. O. S. 6-5 1920 ....  
Reason Desert ....  
Auth. 0012786520  
comped 36

Next of kin..... Relationship.....

Address..... Also notify:.....  
.....  
.....  
.....

BORN—Place..... Date.....

ATTESTED—Place..... Date.....

O/S..... R/C.....



\*Name BAKER, Frank Rank Pte. Regtl. No. 805498  
 Fyle Depot 3-B-616  
 Original unit 13th B Present unit 23 Res. M. or S. Age 21 Religion Luthern Ref. H.Q.  
 Port, ship, and date of arrival Halifax, Regina, 20-12-18.  
 Next of kin mother Mrs Henry Baker,  
 Address on leave 845 Carling Ave., Ottawa.  
 Address on discharge  
 Transportation issued Yes Character on discharge  
 No Date  
 Previous occupation Plumber Date and place of 6-3-16, Ottawa.  
 enlistment  
 Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
	<u>T.O. S. 2-12-18</u>	<u>2</u>
	<u>Sub Depot # 3 RD Ottawa</u>	
<u>14/1/19</u>	<u>S.O.S. Discharged. (Dinner)</u>	<u>SD 15</u>



Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192  
150M-6-18.  
1772-39-1243.



136th OVERSEAS BATTALION, C. E. F.

MEDICAL

HISTORY SHEET.

806498

Surname Baker.

Christian Name Frank

Examined { on 6th day of March 1916  
at Ottawa Ont Canada

Approved by

A. P. Davies

Birthplace { City or Town Ottawa  
County Canada

Rank Capt M.O.

Apparent age 19

Trade or occupation Plumber

Height 5 Feet 8 Inches

Weight 158 Lbs.

Chest measurement { Minimum 34 inches.  
Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks No

Vaccination Marks { Arm Right Left X  
Number One

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease none.

(b) Slight defects but not sufficient to cause rejection none.

Enlisted on 6th day of March

1916 at Ottawa Ont Canada

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
136th OVERSEAS BATTALION, C. E. F.		806498	good.	March 6/16
Joined on enlistment				
Transferred to	39th Bn. C.E.F.			OCT 6 1916
	87th Bn			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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



Christian Name *Frank*

Surname *Baker*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Orwell Hall Fort Pitt Camp Linn MIL HOSP. CHATHAM.		23	2	18	15	6	18	Scabies Impetigo Boils.		Antiseptic treatment.	Rapin H. R.
MCX Eprom		17	6	18	17	JUL	1918	Impetigo	31	Skin lesions all cleared up. Has done light duty PT. 2.7.18 Discharged from PT fit for O'	W. W. W. C. V.
No 12 CAN. GENERAL HOSPITAL		29	8	18	20	9	18	Sprain St. Ankle	23	Swelling subsided, walks without limp. also injured to his Cast Di	Dr. F. J. F. J. C. V.



Surname **Baker** Christian Name or Names **F** Reg. No. **805498**  
 Rank **Pte** Unit **87<sup>th</sup> Bn.** Co. **1<sup>st</sup> Que.** Troop **(Depot)** Batty.  
 Hospital **3<sup>rd</sup> Can. Genl. Boulogne** Date of Admission **10-4-17**  
 Transferred **11<sup>th</sup> Can. F. Amb.** Hosp. **16-11-17**  
**51<sup>st</sup> Gen. Etaples** Hosp. **19-11-17**  
**20<sup>th</sup> Gen. Camiers** Hosp. **25-12-17**  
**6<sup>th</sup> Comal. Depot. Etaples** Hosp. **1-1-18**  
 Diagnosis **sw. L. leg. Contusion, Set. H&O**  
 (1) **V.D.S. Scarious**  
 Later Diagnosis (if changed) **Impetigo**  
 (2) **Impetigo**  
 (3) **Impetigo**  
 Additional Diagnosis: if more than one state present **Ph. an. Rec. R. 1/10**

DISPOSITION

**Ch. 17-4-17 # @ 183**  
**- 21-6-17 @ 238.**  
**24-11-17 @ 71-2.**  
**28-11-17 @ 74(4)**  
**31-12-17 @ 100(2)**  
**3-1-18 @ 103-2.**  
**10-1-18 @ 109-3**  
**16-1-18 @ 114-2.**  
**" 2-2-18 @ 1290**

**Disch 13-6-17** Date  
**To Duty 19-12-17**  
 REMARKS  
**Dis 17-7-18**  
**" 20-9-18**

**1-3-18 B 152**  
**20-6-18 B. 245②**  
**4-7-18 B 256-2 Re. B. 245 Com. Anag. is Impetigo**  
**22-7-18 B 241**  
**7-9-18 @ 311-1.**

A.M.D. 2 DEPT.



# EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	5 Cowal Bayeux	H. 1. 1. 8.
	2 Stab. Hosp. Abbeville.	23-1-18
2	Central Inf. Hosp. F.P. Pitt Chatham	24. 1. 18.
	Woodcote Park. Epsom.	18. 6. 18.
3.	12 C. G. Bramshott.	30-8-18
4.		
5.		
6.		
7.		

Ch. 21-9-186323



## CANADIAN ARMY DENTAL CORPS.

## DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet  
of each Other Rank being returned to Canada for disposal.

REGTL. No.	* NAME	RANK	UNIT
805498	BAKER, F	pte	Q.R.D
Date of Examination		28-11-18	
Present Dental Condition		Good	
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?		No	
Has he ever declined Dental Treatment?		No	
Recommendation		No service required.	

Date 28-11-18

Station

Signature of Examining Officer

*K. B. Brehm* Capt.  
C.A.D.C.

\* Name should be entered in block letters.



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

## DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

BAKER F.A.

REGIMENT

87 Battr.

RANK

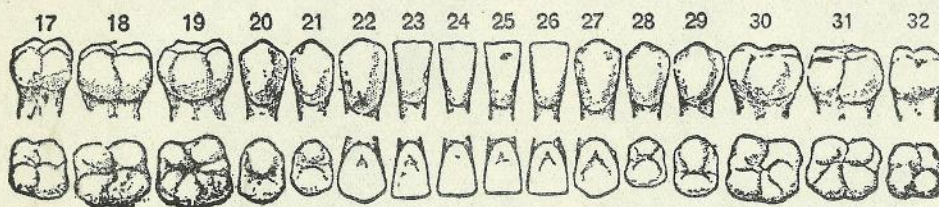
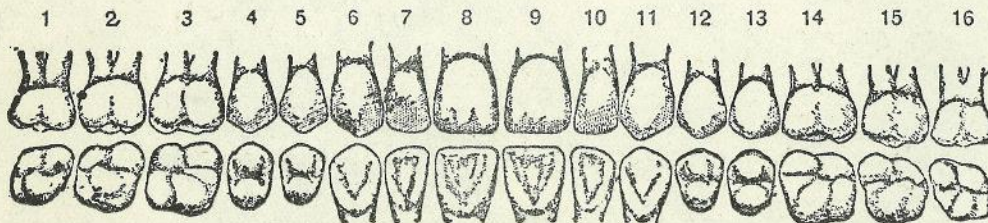
Pte

No.

805498

Date of Examination in England

Date of Examination in France



## 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?

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

Kimmel Park, N. Wales

Signature of Dental Officer

A. R. Hurst

Capt Cade

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.



No. 12 Canadian General HOSPITAL.

A. & D.  
CARD

AT.....

A. & D. No. 6758 PL. OF ACTION.....

RANK Plt. REG. No. 805498 UNIT 2nd C.C.D. 'F' Coy. (87th Bn.) SICK OR WOUNDED

NAME Baker F.A. AGE 22 RELIGION C. of E.

PLACE IN HOSPITAL Wd. 10

DIAGNOSIS Sprain. rt. ankle.

ADMITTED 29-8-18 FROM.....

DISCHARGED SEP 20 1918 TO Lines

TRANSFERRED.....

SERVICE AT HOME 29/12/18 IN FIELD.....

RESULTS 1/2

(See Document Card for M.H. Sheet and other Documents.)



## REMARKS.



Name	BAKER.	Rank	Pte.
	Frank.		
Unit	87th Battn.		
Next of Kin	CANADA.		

Reg. No. 805498

[illegible]



[illegible]



Name BAKER

Rank

Reg. No. 805498

Unit

*Next of Kin*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
25-12	to 20. S. H. barriers	Scabies	103		14842	
1-1-	to 6. S. H. staples	do	109		18119	
4-	to 5. S. H. barriers	do	114		18226	
23-	to 2. S. H. Abbeville	do	126		18966	
24-	to 2. S. H. Abbeville	do	152		13522	
18	6 mil Cons 2p. W.P. Epson	do	13245		19906	
18	6 Diagnosis changed (Scabies to Impetigo)	do	13256		249.	
14.	4 Discharged	do	13271		6694	
30-8-18	San Hosp.	Bramstott	Sprain ankle	13311	25309	
20-9	Discharged	do	do	13323	8097	



[illegible]



NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L No

H. Q. FILE NO. 649-

FOLLOWS

NO.

FOLLOWS

M2036	17-4-17	Adm. to no. 3 Gen. Hosp. April 10th 1917 GSW left leg. Contusions sxt. ✓
M5543	16-6-17	Wound almost healed when



LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 183 <sup>"</sup>	#3 Can Gen Boulogne	10-4-17	Sw. L. Leg. Contusion Lt.
A 238.	4 <sup>"</sup> " " Disc. "	13-6-17	" " " "
A 71-2	#11 Can. 7 <sup>th</sup> Id. Amb.	16-11-17	V. D. G.
A 74-4	#57 Gen. Etaples	19-11-17	" " "
A 100	10 <sup>th</sup> is to duty	19-12-17	" " " "
A 103-2	#20 Gen. Camiers	25-12-17	Scabies (1 <sup>st</sup> Que Regt)
A 109-3	#6 Com. D. Elaples	1-1-18	" " "
A 114-2	#5 Can. Dep. Cayeux	4-1-18	" " "
A 129-1	#2 Str. Abbeville	23-1-18	" " " , 1 <sup>st</sup> Que Reg
B 152 <sup>"</sup>	Cent. Mil. Fort Pitt Chatham	24-2-18	Scabies (" 7)
B 245-2	1 <sup>st</sup> Mil. Com. Widete R. Epren	18-6-18	" " "
B 271.	Disc.	17-7-18	Impetigo asper H. L. B256
A 311.	12 Can Gen. Brans	30-8-18	Sprain ankle R
E 323.	" " " Disc	20-9-18	" "







# Proceedings on Discharge.

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

24/1/39

DEPT. MILITARY SERVICE  
FEB - 4 1919  
H.Q. CANADA

No. 805498

Rank Private

Surname BAKER

Christian Name Frank

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) #3 Dist. Depot.

Date of Discharge January 14th, 1919.

Place of Discharge Ottawa, Ontario.

## 1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 19 years months.  
Height 5 feet 8 inches.  
Complexion Fair  
Eyes Green  
Hair Light Brown  
Trade Plumber  
Intended place of residence 845 Carling Avenue  
(To be given as fully as practicable.) Ottawa, Ontario

Descriptive Marks  
Scars; -2 small Back of Neck Right  
Moles; - none  
Vace; - One Left (Childhood)

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

DEMOBILIZATION R.O. 1343, 3DD, 3-B-616

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.

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

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.)

12/1/19



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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place).....Ottawa, Ontario.....H. A. Becker.....(Signature of Soldier.)

(Date).....January 14th, 1919.....B. M. Angell.....(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).....Ottawa, Ontario.....

(Date).....January 14th, 1919.....

(Signature) .....

T. W. Macdonnell Major



# 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.)

NIL.



6/2/21/9  
A329/21/9

**List of Discharge Documents.**

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	
Med. Hist. Sheet, Militia Form B. 313	In the case of recruits who are rejected on final 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 Certificate, " D. 877.	(b) Attestation.
*Only if discharged "Medically unfit."	(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.*

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

I hereby declare that I do my own free will and am discharged from His Majesty's Service.

Statement of Service

Service from Engagement to (the date to which the Record of Service is complete)

Confirmation of Discharge

The discharge of the above named man is hereby confirmed.

Place, Ottawa, Ontario.



843 Carling Ave. Ottawa

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

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

No. 805498 Rank R/C Surname Baker  
(Give name in full)

7 rank Arthur  
Unit or Corps C.M.P.C. Birthplace Ottawa

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

### 1. GENERAL DESCRIPTION:

Physique good Weight 148 lbs. Height 5 ft. 8 in. Colour of Eyes Brown  
Nutrition good  
Pulse good 78  
Condition of arteries good  
Vision Rt. D. 20 Left D. 20  
Hearing (conversational voice) Rt. 25 ft.  
Left 25 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin.)

Tattoo (Heart & Sword)  
Right forearm

Opinion as to general health and physical condition good

### 2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no  
Special Senses no Integumentary System no Respiratory System no  
Disturbance of mentality no Muscular System no Digestive System no  
Osseous and Joint System no Any other general condition no

### 3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

no Complaints & it



# 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 Pte Name F Surname Baker  
 Unit or Corps M.D. 3 (If a soldier) Regtl. No. 805498  
 Born at Albany Ont on date Aug 14<sup>th</sup> 1896  
 Signature (for identification) F. A. Baker

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

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

Weight 169 lbs.  
 Height 5 ft. 8 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?**

Good

4. **RESPIRATORY SYSTEM.**

Good

5. **HEART?**

Abnormal Sounds?

Abnormal Size?

Pulse Rate?

Intermittence or irregularity?

None

6. **ARTERIES**.—Any hardening?

None

7. **DIGESTIVE SYSTEM?**

Good

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.?

1010

Reaction?

Acid

Albumen?

Nil

Sugar?

Nil

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

Good

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

None

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

Good

Examined at

Knock Park

Signed

W. R. Holmes Capt. M.O.

Date

17-12-18

Signed

W. R. Holmes 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.



Rank Pt. Name FRANK Surname BAKER.  
Unit or Corps 23 Rer (If a soldier) Regtl. No. 805498  
Born at Ottawa, Ont. on, date Aug 1896  
Signature (for identification) F R Baker

*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.*



## MILITARY SERVICE ACT, 1917.

## 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.

1. Surname Baker Christian name Frank Arthur

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....

3. Consecutive number on schedule of men reporting for service (if he appears on it).....

4. Address (including street and number, if any).....

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 30 day of Jan. 1918, by the undersigned medical board sitting at.....

5. Age as stated 22 Years 8 Months. 6. Apparent age 22 Years Months

7. Height 5 Feet 8  $\frac{3}{4}$  Inches. 8. Weight 160 Pounds.

9. Chest measurement { Minimum 34 Ins. Maximum 36  $\frac{3}{4}$  Ins. 10. Complexion Fair { Eyes gray Hair FB.

11. Physical development. good { Good Fair Poor 12. Smallpox marks.....

13. Number of vaccination marks { Right arm..... Left arm one 14. When vaccinated last 1916 (July)

15. Distinctive marks and marks indicating congenital peculiarities or previous disease curved scar

left knee cap (shrapnel)

16. Slight defects but not sufficient to cause rejection.....

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

A1

Geo. Johnson Capt. President.

Member.

W. S. L. L. L. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 30<sup>th</sup> day of Jan. 1919 at Kingston

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to.....				

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Kingston</u>	<u>29/7/19</u>	<u>nil</u>	<u>no change</u>

Signature of Man F. A. Baker

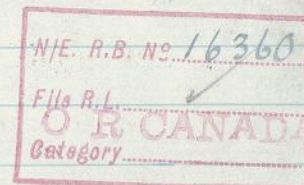


Surname.

[illegible]



A.G.R. Rank PC Name BAKER, Frank Reg'l No. 805498  
 Unit 136th Bn. If in perm. Corps, }  
 What Unit? } Married or Single Single.  
 Place and Date of Enlistment Ottawa, Ont., 6th March, 1916. Place of Birth Ottawa, Ontario, Canada.  
 Name and Address, Next-of-Kin Mrs. Henry Baker,  
345 Carling Ave., Ottawa. Relationship Mother.  
 Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship



H. W. &amp; V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents,
Date.	From whom received.				
Arrived in England S.S. Corsican 6-10-16					
13-10-16	136 <sup>th</sup> Bn. S.C.S. to 39 <sup>th</sup> Bn	W. Sandling	6-10-16	Pt. II D.O. 217.	
7-10-16	OC. 39 <sup>th</sup>	Taken on Strength	W. Sandling	6.10.16.	Pt. 2 DO239
14. 11. '16	OC. 39 <sup>th</sup> Bn.	S.O.S. overseas to 87 <sup>th</sup> Bn	W. Sandling	14. 11. '16	Pt II D.O. 271
18-11-16	87 <sup>th</sup> Bn	T.O.S from Res Battr	In the Field	15-11-16	PT II DO. 282
17-4-17	- do -	No 3 Can General Hosp	Banlogne -	10-4-17	C.h. 2 183 S.W. Lt Leg Contusion Sgt
21.6.17	---	Discharged ---	---	13.6.17	LLA 238. ---
11.8.17	---	Att to 4 bar Ent Bn. for Duty with Can Corps Tramways	Field	24.6.17	PT II DO 97. + 4 bar Ent Bn. HEC 20 d/27.8.17
24.11.17	1 <sup>st</sup> Que R	Adm. 11 bar Field Amb.	---	16.11.17	LLA 71 VO 3

A.F. 5003 CHECKED  
20 NOV 1916  
jgs.

A.F. 6103 CHECKED  
20 NOV 1916



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.				
28.11.17	1 <sup>st</sup> Lieut R. Trans 51 General Hosp.	No	Etaples	19.11.17	65474. V.D.G.
	C. . . . .	Disced to Duty sick		19.12.17	100
H. 3. 18	1 <sup>st</sup> Q.R.V. On admittance to Hpl. 4 <sup>th</sup> O.S. from 87 <sup>th</sup> .		B'shoth	24.2.18	DO #132/4.3.18 87 Bn DO #55 DO #71 d/22-7-18-RECD.
20-7-18	Q.R.V. On Comm 2nd C.E.D.			17.7.18	DO 176
28.10.18	Q.R.V. Comm on Comm 2nd C.E.D. to 23 Res			26.10.18	DO #299 d/26-10-18 261 23 Res
23.12.18	3 <sup>rd</sup> M.D. Attached		Kinnel P <sup>th</sup>	2.12.18	13
6.1.19	23 Res Comm to be Att Kinnel P <sup>th</sup> & S.O.S. to C.E.F. Canada.		B'shoth	12.12.18	6



## ATTESTATION PAPER.

No. 805498

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Baker
- 1a. What are your Christian names?..... Frank
- 1b. What is your present address?..... 336 Gladstone Ave. Ottawa Ont.
2. In what Town, Township or Parish, and in what Country were you born?..... Ottawa Ontario Canada.
3. What is the name of your next-of-kin?..... Mrs Henry Baker
4. What is the address of your next-of-kin?..... 345 Carling Ave. Ottawa.
- 4a. What is the relationship of your next-of-kin?..... Mother
5. What is the date of your birth?..... Aug. 14th 1896.
6. What is your Trade or Calling?..... Plumber
7. Are you married?..... No
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?..... No  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... Yes
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank Baker, 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.

Date March 6th 1916 Frank Baker (Signature of Recruit)  
John L. Hickey (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Baker, 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.

Date March 6th 1916 Frank Baker (Signature of Recruit)  
John L. Hickey (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 Ottawa Ont this 6th day of March 1916.

Justice (Signature of Justice)



# Description of Frank Baker on Enlistment.

Apparent Age 19 years 6 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 8 ins.

Chest measurement { Girth when fully expanded 37 ins.  
Range of expansion 3 ins.

Complexion Fair

Eyes Green

Hair Light Brown

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

Scars; - 2 Small Back Of Neck.  
(Right)

Moles. - None.

Vace; - One Left (Childhood)

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* Fit for the Canadian Over-Seas Expeditionary Force.

Date March 6th 191 6

Place Ottawa Ont Canada

\*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:—

A. P. Davis

lps

Medical Officer.

## CERTIFICATE OF OFFICER COMMANDING UNIT.

Frank Baker 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.

Date March 8th 191 6 O. C. 136th Overseas Battalion, C. E. F. Lt. Colonel (Signature of Officer)



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 805495 (Rank) Private

Name (in full) BAKER, Frank enlisted in

the 136th Overseas Battalion, C.E.F.

CANADIAN EXPEDITIONARY FORCE at Ottawa, Ontario on the 6th

day of March 1916.

HE served in Canada, England and France

and is now discharged from the service by reason of Demobilization, R.O. 1343

Authority 3DD. 3-B-616

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

Age 19 Years

Height 5 Ft., 8 Inches

Complexion Fair

Eyes Green

Hair Light Brown

*F. A. Baker*

Signature of Soldier

Marks or Scars

Scars; 2 small Back of Neck Right

Moles; none

Vacc; One Left (Childhood)

*T. W. Macdonell*

Issuing Officer

Rank

Major.

Date of Discharge January 14th, 1919

C.C. Sub-Depot, #3 Dist. Depot.

Appointment

Signed at Ottawa, Ontario this 14th day of January 1919.

in Military District No. 3

File Reference No. 3DD. 3-B-616

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



CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

3rd, 3-B-616.

Ottawa, Ontario

January 14th, 1919

Major.

O.C. Sub-Depot, 43 Dist. Depot.

19.

---January---

14th-----

3-----

Green-----  
Light Brown-----  
this  
One Left (Childhood)  
None-----

On mobilization the  
holders called for on  
back of this cer-  
tificate will not be con-



No. 805498 RANK Pte.

NAME Baker J.

T. O. S. 7-3-16. UNIT 136th Battalion C. E. F.  
(D.O. no 588/10-3-16)

M. D. 7

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Mar 7	1916 Mar 31	✓		
Apr		✓		
May		✓		
June		✓		
July		✓		
Aug		✓		
Sept.		✓	a.w. L from 139-16 to 199-16.	Sept. payroll.
			UNIT SAILED SEP 25 1916	



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

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

# Casualty Form—Active Service.

260M.—1-16.  
H. Q. 1772-30-920.

Unit, Regiment or Corps 136th OVERSEAS BATTALION, C. E. F.

Regimental No. 805498 Rank Pte Name Baker Frank  
C. E. F.

Enlisted (a) Mar 6-16 Terms of Service (a) Mar 6-16 Service reckons from (a) Mar 6-16

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) Mil.

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				

Halifax 25-9-16  
Liverpool 6-10-16

W. Sandling 6-10-16  
9-10-16 Part II 217

W. Sandling Captain  
Adjutant  
136th OVERSEAS BATTALION, C. E. F.

West Sandling 6-10-16 Pt. II L.C. 239  
14-11-16 Pt. II 0.241.

W. Sandling CAPT. & ADJ.  
39TH BN. C.E.F.

DC. 136th Trans. to 39th Bn

O.C. 39th Bn. Taken on strength 39th Bn.

39th Bn Drafted to 84th Bn

CERTIFIED CORRECT.  
10-16  
16  
21 NOV 1916  
7-10-16  
14-11-16  
CAN. RECORDS, LONDON.

(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				
15-11-16	C.B.D.	Taken on Strength of 87th.Bn.		15-11-16	D.O.Pt.II No.252 d./18-11-16
19-11-16	C.B.D.	Proceeded to join	Unit	19-11-16	N.R.
25-11-16	O.C.Unit	Joined Unit		22-11-16	B.213 D.C.S.63
16-12-16	as	To Wiring Course	Begun	13-12-16	B.213 8477
10.4.17	Platoon	to Cont. L. Regt	Adm.	10.4.17	B.213 84
14.4.17	O.C. Unit	Leaves to be on Wiring Course		9.4.17	B.213 84
16.6.17	H.213	L.O.S.	A.	16.6.17	N.R.
22.6.17	C.B.D.	To Unit		22.6.17	N.R.
24.6.17	H.213	Joined	H.213	24.6.17	"
10.7.17	for C.B.	2nd H.213 to go duty with C.C. Transm. Regt		24.6.17	D. 1st 97 a/11-8-17
23.8.17	H.213	To Unit		23.8.17	N.R.
20.8.17	O.C. Unit	Joined Unit		19.8.17	B.213
10.11.17	"	Granted 10 days leave France		5.11.17	B.213 D.O. 128 9/20.11.17
17.11.17	"	Rejoined from leave		16.11.17	"
"	11. Can. V.L.	N. D. G. - adm. & to C.C.S.		16.11.17	B. 5535
"	for Unit	Evac. Sign.		16.11.17	B.213
19.11.17	51. Genl.	V. D. G.	adm.	19.11.17	Co. B. 7250
19.11.17	16 Gen.	do adm. 18.11.17 to wife		19.11.17	" 7912
17.11.17	10 Gen.	do " 16.11.17 to 24 A.T.		17.11.17	" 9106
30.11.17	16 Gen.	Hospital 2 days 18.11.17 to 1		19.11.17	ATO 1643-7096 D.O. 128 9/22.12.17
19.12.17	16 Gen.	as 30 days 20.11.17 to		19.12.17	" 8703
20.12.17	H.213	L.O.S.	A.	20.12.17	N.R. 178
21.12.17	"	to 20 Gen.		21.12.17	" 183
23.12.17	20 Gen.	Scabies	Adm.	23.12.17	B. 4203
1.1.18	as	do to 6 Gen. Dep.		1.1.18	" 1886
1.1.18	6 Gen. Dep.	do	Adm.	1.1.18	" 6062
4.1.18	as	do to 6 Gen. Dep.		4.1.18	" 6601
4.1.18	"	do	Adm.	4.1.18	" 7018
18.1.18	"	do	Adm.	18.1.18	" 7018



## Casualty Form—Active Service.

Pte      Regiment or Corps      Baker, Frank  
 Rank ..... Surname ..... Christian Name .....  
 Religion ..... Age on Enlistment ..... years ..... months .....  
 Enlisted (a) 6-3-16 Terms of Service (a) 5 yfwr Service reckons from (a) 6-3-16  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and rate .....  
 Occupation ..... Signature of Officer .....

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
25.1.18	R. St. Hosp.	Scabies	admiral	23.1.18	Exp Dg 12
26.2.18	"	" To England		22.2.18	K.I. 17.447
22.2.18	"	Impetigo To 36. A.T. for Hosp. Ship		22.2.18	Exp D#466
23.2.18	H.M.A.T. Cambria	Unvalued Sick & posted to 1st Q.R.D. Braunschweig.		23.2.18	A.P.W. 3083/4840 DO #13 d/4-2-18
			Jm Anderson		Lieut
					for Lieut Col adq.
					Canadian Section
					3rd Echelon U.S.G.

(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) Signaller, Shoeing-Smith, &c.



12.12.18 Called from

ADJUTANT H.Q.

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 of Casualty

Date of Casualty

Remarks  
Taken from Army Form B.213, Army Form A.36, or other official documents.

Date From whom received

4.3.18

G. R. O.

Y.O.

Bishott

24.2.18

DO 455

Handy

for Colonel i/c Records, Lieut. Comd.

22.7.18

2nd C.C.D.

attached to 2nd C.C.D.

Bramshott

17.7.18

Pt. II No. 171

26 OCT 1918

OC. 2nd C.C.D.

Ceases to be attached to

2nd C.C.D.

on return to.....Res. Bn.

25 OCT 1918

Pt. 2 D.O. No. 254

for OC. 2nd C.C.D.

26/10/18

23rd. CAN.

TAKEN ON STRENGTH

Bishott

25/10/18

D.P. II. O. No. 299

RES. BN.

do

S.O.S. of O.M.F. of 6 on transfer to C.E.F.

do

Reapath

2-12-18.

23rd Can On Command to Reg-  
Res Bn. Camp Rhyl.

Bramshott, 2-12-18. D.P. II. O. No. 356.

do

On Command to Reg-  
Camp Rhyl ceases.

Rhyl

do

S.O.S. on transfer from  
O.M.F. of C. to the  
C.D.F. Canada.

Rhyl

23rd. Canadian Reserve Battalion

W. H. H. & A. Adjutant  
Barkshire Capt.  
occy wing



PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 80549

M. OR S.

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE  
DATE

AUTHORITY

ORIGINAL UNIT  
C.E.F.

PLACE OF  
ATTESTATION

DATE OF  
ATTESTATION

ASSIGNED PAY, \$

PAYABLE TO

ADDRESS

STOP PAYMENT FORM  
ASSIGNED PAY  
RENDERED, DATE

DISCHARGED

ADDRESS

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

TO WHOM PAID

RELATIONSHIP

ADDRESS

pte Frank Baker,  
846 Carling Ave.,  
Ottawa  
Ont.

20

Mrs.

845

Ott

MONTH

PAY AND F.A.

OTHER  
CREDITS

TOTAL  
CREDITS

ACQUITTANCE ROLLS

CASH PAYMENTS

ASSIGNED  
PAY

REGI-  
MENTAL  
CHARGES

NO.  
OF  
DAYS

RATE

AMOUNT

\$ C.

\$ C.

\$ C.

\$ C.

COL. NO. 1

COL. NO. 2

COL. NO. 3

COL. NO. 1

COL. NO. 2

COL. NO. 3

\$ C.

\$ C.

Balance from  
previous  
account

War Service Gratuity

Other  
Charges

153 days @ minimum 350 -

350 -

325 -



PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCES

AUDITOR *JPM* PAYMASTER *FPJ*

REGT. No. *80549<sup>5</sup>* RANK *pte.* NAME (IN FULL) *Baker F.*

ORIGINAL UNIT C.E.F. *87th Bn.* IF IN P.F. WHAT UNIT? (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY, \$ *20.00* DATE EFFECTIVE *3 B 275*

PAYABLE TO *Mrs. A. Baker* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS *845 Carling Ave.,  
Ottawa, Ont.*

STOP PAYMENT FORM  
ASSIGNED PAY  
RENDERED, DATE

EFFECTIVE

DISCHARGED *Ottawa Jan. 14/19* PLACE DATE REASON AUTHORITY *P.O. 1843* IF ENTITLED TO POST DISCHARGE PAY *2H*

ACQUITTANCE ROLLS

CASH PAYMENTS

ASSIGNED  
PAY

REGI-  
MENTAL  
CHARGES

OTHER  
CHARGES

TOTAL  
DEBITS

BALANCE

DEBIT CREDIT

PARTICULARS OR REMARKS

*War Service Gratuity*

*Other charges M.S.G. S.A.*

*Soldier Dependent*

*40*

*40*

*280*

*40*

*140*

*210*

*325*

*66 75*

*210*

*140*

*70*

*280*

*70*

*70*

*350*

*M 7W 2595 Rec*

*pay. #3 D. D. Ottawa*

*#3692 2/12/19*

*2 M. Sloes M 7L 617 3.10.19*

*#236658 Mch 12/19*

*#317539 Apr 4/19*

*13/5/19 3279 47N*

*OK JPM*



[illegible]



[illegible]



M. OR S.

Single.

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCES

REGT. No.

8054

NEXT OF KIN

ADDRESS

IS SEPARATION ALLOWANCE PAID?

TO WHOM PAID

ADDRESS

RELATIONSHIP

DATE EFFECTIVE

RELATIONSHIP

PARTICULARS

EFFECTIVE  
DATE

AUTHORITY

ORIGINAL UNIT  
C. E. F.PLACE OF  
ATTESTATIONDATE OF  
ATTESTATION

ASSIGNED PAY, \$

PAYABLE TO

ADDRESS

STOP PAYMENT FORM  
ASSIGNED PAY  
RENDERED, DATE

DISCHARGED

MONTH	PAY AND F. A.			OTHER			TOTAL			ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED		REGI- MENTAL	
	NO. OF DAYS	RATE	AMOUNT		CREDITS		CREDITS		COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3		PAY		CHARGES		
			\$	C.	\$	C.	\$	C.	\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	
March 1919	31	1 <sup>15</sup>	35	65	24	80	91	45	CK32	1944	40	00	51	45											
April	30	1 <sup>15</sup>	34	50	24	00	88	50	42	55	43	65	70	40	00	48	50								
May	31	1 <sup>15</sup>	35	65	24	80	91	45	43	82	52	64	96	40	00	51	45								
June	30	1 <sup>15</sup>	34	50	24	00	88	50	52	63	52	69	08	40	00	48	50								
July	29	1 <sup>15</sup>	33	35	23	20	120	55	54	30	54	31	01	40	00	80	55								

A. O. S.

on Demobilization 29-7-19



AUDITOR

PAYMASTER

A. J.

M. J.

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCES

REGT. NO.

805498

RANK

1st Lt. Cpl.

NAME (IN FULL)

Barber, Frank Arthur

PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C. E. F.	IF IN P. F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
1.15 ✓ E.D. pay 1st p.d. Subs. 80 ✓		J. L. & A.			
			PLACE OF ATTESTATION	TRANSFERRED TO	DATE
			DATE OF ATTESTATION	TRANSFERRED TO	DATE
			ASSIGNED PAY, \$	DATE EFFECTIVE	
			PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
			ADDRESS		
			STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
			DISCHARGED	PLACE DATE	REASON AUTHORITY
			Yes Kingston	29-7-19	Demob R.O. 1894

SUBS.

IF ENTITLED TO  
POST  
DISCHARGE  
PAY

ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY	REGI- MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE				PARTICULARS OR REMARKS
COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	DEBIT	CREDIT	
NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
15	CK321	1944				40	00	5145								9145				
50	42155	3657				40	00	4850								8850				
45	3822	5264960				40	00	5145								9145				
50	5267316	5269808				40	00	4850								8850				
55	5430180	5431101				40		8055								120 55				Debit note for this amount passed to U.S. f. Dept. 29-7-19
on Demobilization 29-7-19																OK				



[illegible]



[illegible]



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—6-16.  
 H. Q. 1772-39-S19.

To Whom

Address

*Mrs Adeline Baker*  
*845 Carling Ave*  
*Ottawa Ont*

By Whom Assigned

Regtl. No.

Rank

Corps

*Baker Frank*  
*805498*  
*Pte*  
*136th Bn.*

Rate

*20<sup>00</sup> Dec 1st '16*

*2 M 10<sup>11</sup>/<sub>16</sub> APR 19<sup>12</sup>/<sub>16</sub>* 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

M. F. W. 12a.

50m.-6-16.

1772-39-819.

## ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

PAYMENTS.

Name of Soldier

L. L. Job 4503. - Req. 6332.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		035918	20	
Jan.	1917	u 36306	20	
Feb.		V 38069	20	20 (Jul)
March		W. 44879	20	20 L
April		K 369	20	20.00
May		u 6249	20	
June		V 13135	20	20.00
July		V 19900	20	S
Aug.		W 28907	20	20
Sept.		V 32964	20	20
Oct.		F 46849	20	200.00 - WAC
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Baker Frank*  
*Rte 136th Bu*  
*2000*  
*Dec 1st 16.*

CANADIAN

ASSIGNED PAY AUDITED

AUDIT CLERK

DATE



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

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

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

## Separation and Assigned Pay Branch

B

730

Dec. 1st. 1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20.			
-----	--	--	--

## PARTICULARS OF SEPARATION ALLOWANCE

No. *805498*  
 Rank *Pte.* Promoted Reverted Discharge  
 Soldier's Name *Frank Baker,*  
 Battalion *136<sup>th</sup> Batt.*  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name *Mrs. Adeline Baker,*  
 Address *845 Carling Ave,*  
 Change of Address *Ottawa Ont.*  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	✓	REMARKS
<i>1917</i>						<i>0454-7-9</i>
<i>Sept</i>			<i>200</i>	<i>200</i>		<i>M.R.C. = 06481 = 24 <sup>13</sup>/<sub>18</sub></i>
<i>Oct</i>	<i>F 46849</i>		<i>20</i>	<i>20</i>		
<i>Nov</i>	<i>C 52760</i>		<i>20</i>	<i>20</i>		
<i>Dec</i>	<i>D 57269</i>		<i>20</i>	<i>20</i>	<i>m</i>	
<i>Jan</i>	<i>A 55844</i>		<i>20</i>	<i>20</i>	<i>m</i>	
<i>Feb</i>	<i>B 91689</i>		<i>20</i>	<i>20</i>		
<i>Mar</i>	<i>A 92026</i>		<i>20</i>	<i>20</i>	<i>✓</i>	
<i>Apr</i>	<i>A 8728</i>		<i>20</i>	<i>20</i>	<i>✓</i>	
<i>May</i>	<i>E 10163</i>		<i>20</i>	<i>20</i>	<i>✓</i>	
<i>June</i>	<i>B 18510</i>		<i>20</i>	<i>20</i>	<i>✓</i>	
<i>July</i>	<i>Y 31543</i>		<i>20</i>	<i>20</i>	<i>✓</i>	
<i>Aug</i>	<i>A 34144</i>		<i>20</i>	<i>20</i>	<i>✓</i>	
<i>SEP</i>	<i>A 41029</i>		<i>20</i>	<i>20</i>	<i>9</i>	
<i>OCT</i>	<i>A 44650</i>		<i>20</i>	<i>20</i>		
<i>NOV</i>	<i>A 55434</i>		<i>20</i>	<i>20</i>		
<i>DEC</i>	<i>B 66314</i>		<i>20</i>	<i>20</i>		
<i>JAN</i>						

M. F. W. 128  
 400M-617-1772-38-1141  
 L. L. 22520-M. & D. 7383.

31/12/18 A/c Closed

Ret'd per. *Regina*Date *30/12/18* P.A. *24/12/18*Clerk *J. H. Brown*CANADIAN  
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE *15-5-19*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

## Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. \_\_\_\_\_  
Rank \_\_\_\_\_ Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_  
Soldier's Name \_\_\_\_\_  
Battalion \_\_\_\_\_  
Beneficiary \_\_\_\_\_  
Relationship \_\_\_\_\_  
Address \_\_\_\_\_

PARTICULARS OF ASSIGNMENT

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Change of Address \_\_\_\_\_  
1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_

Date

Cheque  
No.Amount  
S/AAmount  
A/P

Total

REMARKS



\* Strike out whichever inapplicable.

ASSIGNED PAY EFFECTIVE DATE: <i>1/12/16</i> <i>1/12/18</i>		ENGLAND or CANADA. SEPARATION ALLOWANCE EFFECTIVE DATE:		ENGLAND or CANADA. NAME: <i>BAKER, Frank</i> NUMBER: <i>805498</i>							
AMOUNT: <i>20<sup>00</sup> Stop</i>		AMOUNT:		PARTICULARS OF RANK OR APPOINTMENT							
NAME, ADDRESS, RELATIONSHIP & AUTHORITY <i>Mr Adeline Baker, (Mother)</i> <i>845 Carling Ave, Ottawa, Ont.</i>				WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.							
				AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT <i>Pte</i>							
				UNIT AND TRANSFERS							
				ORIGINAL UNIT: <i>136<sup>th</sup> Bn.</i>							
				DATE ACCOUNT FIRST OPENED: <i>1/10/16</i>							
				AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S'D UNIT TRANSFERRED TO <i>87<sup>th</sup> Bn.</i> <i>R.O. 55-4/3/18 24/2/18 1-4-18 1st B. R.D.</i> <i>Mich 19 Canada Sec</i>							
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.						
<i>12/1/18 1928</i>		<i>23<sup>rd</sup> Res.</i>	<i>4 87</i>								
<i>27/1/18 2100</i>			<i>14 60</i>								
			<i>19 47</i>								
<i>Dr Balper L.P. 6<sup>th</sup> 38 66 30/1/8</i>											
PARTICULARS OF RENDERING NON-EFFECTIVE: <i>Dis to Can 1/2/18 Disposal Auth RND N.R. 27/1/18</i>											
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>31 March</i>	<i>Bal Fwd</i>								<i>70 66</i>	<i>30</i>	
	<i>R.P.</i>	<i>33</i>		<i>Can. A.P.</i>				<i>20</i>	<i>50 66</i>		
		<i>33</i>		<i>Hosp Adv. Fort Pitt Feb-Mar '18</i>	<i>3 40</i>				<i>80 26</i>		
		<i>34 10</i>		<i>ap.</i>	<i>3 40</i>		<i>20</i>				
<i>May</i>	<i>pp.</i>	<i>34 10</i>		<i>ap. 4 May</i>	<i>4 25</i>			<i>20</i>	<i>94 36</i>		
		<i>34 10</i>			<i>4 25</i>			<i>20</i>	<i>90 11 30</i>		
<i>JUN</i>	<i>pp.</i>	<i>33</i>		<i>ap.</i>				<i>20</i>			
				<i>Hosp Adv. Fort Pitt May '18</i>	<i>3 40</i>				<i>99 71</i>		
		<i>33</i>		<i>AR 5658 CCH Eps 28.6.18</i>	<i>9 73</i>			<i>20</i>	<i>89 98 30</i>		
		<i>34 10</i>		<i>ap.</i>	<i>13 13</i>						
<i>Jul</i>	<i>pp.</i>	<i>34 10</i>		<i>ap.</i>				<i>20</i>	<i>104 08</i>		
	<i>S.F. 17/7/18-29/7/18-12 dys. B.D. 171-29/7/18-2 CCD</i>	<i>8 76</i>		<i>AR 1225- Epsom 17.7.18</i>	<i>48 67</i>			<i>20</i>	<i>64 17 30</i>		
		<i>42 86</i>			<i>48 67</i>						
<i>Aug</i>	<i>pp.</i>	<i>34 10</i>		<i>ap.</i>				<i>20</i>			
				<i>Hosp Adv. Chatham June '18</i>	<i>2 55</i>				<i>75 72</i>		
				<i>AR 4005/37 2 CCD 31.7.18</i>	<i>1 17</i>				<i>74 55</i>		
				<i>AR 3227 " 12.8.18</i>	<i>14 60</i>			<i>20</i>	<i>59 95 30</i>		
		<i>34 10</i>			<i>18 32</i>						



ORIGINAL UNIT:- 136<sup>th</sup> Bn.

DATE ACCOUNT FIRST OPENED:- 1/10/16

AUTHORITY

DATE  
EFFECTIVEDATE LEDGER  
SHEET T'S F'D

UNIT TRANSFERRED TO

87<sup>th</sup> Bn.A.O. 55-4/3/18 24/2/18 1-4-18 1<sup>st</sup> B. A.D.

Mch 19 Canada Sec

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
12/1/18 1928		23 <sup>rd</sup> Res.	4 87				
25/1/18	2100	"	14 60				
			19 47				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBS'CE  
ALL'CE

1 00

10

Gr Bal per L.P. 6<sup>th</sup> 38 66 3<sup>rd</sup>/18

PARTICULARS OF RENDERING NON-EFFECTIVE:-

Dis to ban 1/2/18 Disposal Auth ARD N.R. 27/11/18

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
31 March	Bal Fwd								70 66	30	
	P.P.	33		ban. A.P.				20	50 66		
				Hosp Adv. Fort Pitt Feb-Mar '18	3 40				80 26		
		33			3 40			20			
May	P.P.	34 10		ap.				20	94 36		
				ap 4 May	4 25				90 11 30		
		34 10			4 25			20			
JUN	P.P.	33		ap.				20			
				Hosp Adv. Fort Pitt May '18	3 40				99 71		
		33		AR 5658 CCH Eps 28.6.18	9 73			20	89 98 30		
					13 13						
Jul	P.P.	34 10		ap.				20	104 08		
	S.J. 17/7/18-29/7/18-12 days. B.D. 171-29/7/18-2 CCD.	8 76		AR 1225- Epsom 17.7.18	4 86			20	64 17 30		
		42 86			4 86						
Aug	P.P.	34 10		ap.				20			
				Hosp Adv. Chatham June '18	2 55				75 72		
				Q4005/37 2 CCD. 31.7.18	1 17				74 55		
				AR 3227 " 12.8.18	14 60			20	59 95 30		
		34 10			18 32						
Sep	P.P.	33		ap.				20	72 95		
				AR 3202 #129H. 4.9.18	4 87				68 08		
				" 4606 2 CCD. 26.9.18	9 97				58 11 30		
		33			14 84			20			
Oct	P.P.	34 10		ap.				20	72 21		
				2 days FP #2. 24-10-18			2 20		70 01		
				PO 252. 2 CCD. 24-10-18							
				29 AR 5206 2 CCD. 21-10-18	4 87				65 14		
				32/54015 AR. " 24-10-18	24 54				40 54		
		34 10			29 44	2 20		20			

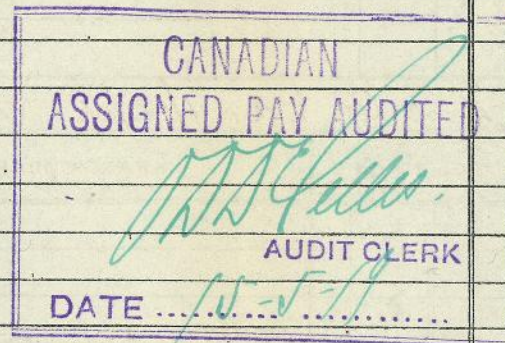


1918 NUMBER 805498 RANK *Lie*

NAME *BAKER F.*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	<i>Beit Fund</i>								<i>40 57 30</i>		
<i>Nov</i>	<i>RP</i>	<i>33</i>		<i>ap</i>				<i>20</i>	<i>53 57</i>		
	<i>Int on Def Pay to 31/10/18</i>	<i>4 56</i>							<i>58 13</i>		
				<i>12/10/18 25 Rs</i>	<i>15-11-18</i>	<i>4 87</i>			<i>53 26</i>		
				<i>29 " 2100 "</i>	<i>30-11-18</i>	<i>14 60</i>			<i>38 66</i>		
		<i>37 56</i>			<i>19 47</i>			<i>20</i>			

*L P Co.*





L P Co.

CANADIAN ASSIGNED PAY AUDITED <i>[Signature]</i> AUDIT CLERK DATE <i>10-5-11</i>
--



Single

PLACE OF BIRTH *Ottawa Ont Canada*

NAME AND ADDRESS OF NEXT OF KIN Mrs Henry Baker.  
345 Barling Ave Ottawa. Ont Canada

RELATIONSHIP OF NEXT OF KIN *Mother*

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

## ADMISSIONS TO HOSPITAL, &amp;c.

DATE  
ADMITTED

DATE  
DISCHARGED

V.  
OR  
A.

NAME OF HOSPITAL \_\_\_\_\_

18/11/17

19/11/17

✓

16. Gen Hosp

Checked *J.P. / Mrs.*

[illegible]







Mr Baker. Frank.

[illegible]



PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
0 23 62		160	3 98	232 82	114 43		30	84 43	
4 46		20		24 46	124 07				
4 46									
2 68		20		29 81	127 26		30 -	97 26	
37 89		200	3 98	287 09					
CR. 1	CR. 2	PARTICULARS			DR. 1	DR. 2	DR. 3	DR. 4	BALANCE

DEFER- SEP.  
RED. ALLGE.  
PAY ENG.



PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 277985

M. OR S.

NAME OF KIN <i>Mrs. A. Baker</i>	RELATIONSHIP <i>Mother.</i>	PARTICULARS <i>Appt. 2. Cpl. 6 Aug.</i>	EFFECTIVE DATE <i>15-9-19</i>	AUTHORITY <i>D.O. 3</i>	ORIGINAL UNIT C.E.F.
ADDRESS <i>845 Carling Ave. Ottawa Ont.</i>					PLACE OF ATTESTATION
					DATE OF ATTESTATION
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$
TO WHOM PAID	RELATIONSHIP				PAYABLE TO
ADDRESS					ADDRESS
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE
					DISCHARGED <i>Halifax</i>

MONTH	PAY AND F.A.			OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES					
	NO. OF DAYS	RATE	AMOUNT		CREDITS		CREDITS		COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3		PAY		CHARGES				
			\$	C.	\$	C.	\$	C.	\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
1919.																											
BALANCE FROM PREVIOUS ACCOUNT																											
15-30. <sup>9</sup> / <sub>19</sub>	16	110	17	60	16	-		33	60	1	<sup>20</sup> / <sub>19</sub>					10	-										
Oct.	31	110	34	10	31	-		88	70	13	<sup>14</sup> / <sub>10</sub>	20	<sup>23</sup> / <sub>10</sub>	25	<sup>28</sup> / <sub>10</sub>	40	-	10	-	28	70						
Nov.	30	110	33	-	30	-		76	85	55	<sup>1</sup> / <sub>12</sub>			54	<sup>1</sup> / <sub>12</sub>	10	-			56	-						
Dec.	31	115	35	65	31	-		77	50	60	<sup>9</sup> / <sub>12</sub>					15	-										
Jan.	31	115	35	65	31	-		129	15	75	<sup>2</sup> / <sub>1</sub>	74	<sup>2</sup> / <sub>1</sub>	82	<sup>12</sup> / <sub>1</sub>	10	-	42	-	20	-						
Feb.	29	115	33	35	29	-	25	119	75	101	<sup>5</sup> / <sub>2</sub>	102	<sup>5</sup> / <sub>2</sub>			10	-	35	-								
Mar.	31	115	35	65	31	-				135	<sup>15</sup> / <sub>3</sub>	137	<sup>18</sup> / <sub>3</sub>	141	<sup>28</sup> / <sub>3</sub>	50	-	25	-	40	-						
					31	-		141	40																		
Apr.	30	115	34	50	30	-		90	90																		
1-6 <sup>5</sup> / <sub>20</sub>	6	115	6	90	6	-		102	65	8	<sup>20</sup> / <sub>4</sub>					102	65										



PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCESREGT. No 2779827 RANK Cpl. NAME (IN FULL)Baker F. A.

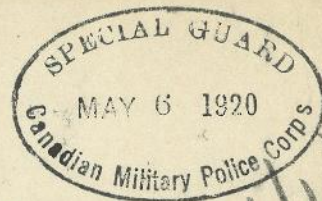
PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
<u>Appt. to Cpl. 15-9-19</u>	<u>15-9-19</u>	<u>D.O. 3</u>			
<u>6th Pay</u>					
PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY		
	<u>Special Guard from M.D. 3.</u>	<u>15-9-19</u>	<u>D.O. 3</u>		
DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY		
ASSIGNED PAY \$	DATE EFFECTIVE				
PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS			
ADDRESS					
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE				
DISCHARGED	PLACE	DATE	REASON	AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY
<u>Halifax, N.S.</u>	<u>6-5-20</u>	<u>Seneca</u>		<u>D.O. 127</u>	

ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY	REGI- MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE				PARTICULARS OR REMARKS
COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3						DEBIT		CREDIT		
NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.					\$	C.	\$	C.	
0	1. $\frac{20}{19}$					10	-								10 -		23 60	T.O. 15- $\frac{9}{9}$ D.O. 3. Train duty 22- $\frac{9}{9}$ D.O. 9.		
0	13 $\frac{14}{10}$	20 $\frac{23}{10}$	25 $\frac{28}{10}$	40	-	10	-	28	70						78 70		10 -			
5	55 $\frac{1}{12}$		54 $\frac{1}{12}$	10	-			56	-						66 -		10 85			
0	60 $\frac{9}{12}$					15	-								15 -		62 50			
5	75 $\frac{2}{1}$	74 $\frac{2}{1}$	82 $\frac{12}{1}$	10	-	42	-	20	-						72 -		57 15			
5	101 $\frac{5}{2}$	102 $\frac{5}{2}$		10	-	35	-								45 -		74 75			
	135 $\frac{15}{3}$	137 $\frac{18}{3}$	141 $\frac{28}{3}$	50	-	25	-	40	-											
0															115 -		26 40			
0													115		115		89 75	C.A.T.		
5	8 $\frac{20}{4}$					102	65								102 65					
0						247	65	112	-	144	70				115		505 50	355 -		
<div>True Copy B.S. report 17-12-20</div>																				

True Copy  
Baker F. A.  
17-12-20



SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization)



1. No. 2779827		
2. Rank Lance/Corporal		
3. Name BAKER, Frank		
4. Unit Special Guard, C.M.P.C.		
5. Date of Discharge	May 6th, 1920.	Place Halifax, N.S.
6. Reason for Discharge Demobilization.		
7. Authority R.O. #1328, Para. 7 (e), dated 18-11-18.		
8. Proposed Residence after Discharge		
845 Carling Ave.,		
Ottawa, Ont.		
9. CERTIFICATE TO BE SIGNED BY SOLDIER.		
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate		
M. F. W. ? 39		
F. A. Baker		
Signature of Soldier.		
10. CONFIRMATION.		
The discharge of the above named man is hereby confirmed.		
Place Halifax, N.S.		
Date May 6th, 1920.		
Signature		
LIEUT./COL.		
(O. C. Discharging Unit.)		
O.C. SPECIAL GUARD? C.M.P.C.		



### 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 .....	Militia Form B. 263a



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 2779827 (Rank) Lance/Corporal

Name (in full) BAKER, Frank. enlisted in  
the Special Guard, C.M.P.C.

CANADIAN EXPEDITIONARY FORCE at Ottawa, Ont. on the Sixteenth  
day of September 1919.

HE served in Canada.

and is now discharged from the service by reason of Demobilization.

Auth: R.O. #1328, Para. 7 (e), dated 18-11-18.

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

Age 23 years 9 months

Height 5 feet 8½ inches.

Complexion Medium

Eyes Brown

Hair Brown.

Marks or Scars

Tattoo "Girl's Head" and "Heart  
and Sword" on right forearm.

"Indian Girl and Clapsed Hands"  
on left forearm.

*F A Baker*

Signature of Soldier

*[Signature]*

Issuing Officer

O.C. SPECIAL GUARD, C.M.P.C.

Rank

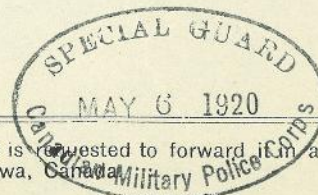
Date of Discharge May 6th, 1920.

Appointment

Signed at Halifax, N.S. this 6th day of May 19 20.

in Military District No. Six.

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) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.



*Original*

## PERMANENT FORCE OF CANADA

## ATTESTATION PAPER.

REGT. NO. P.F. 2749827

FORMER REGTL. No.

(1) PERMANENT FORCE

P.F. UNIT Special Guard, C.M.P.C.(2) C.E.F. 805998

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

[ANSWERS]

1. What is your surname? Baker.
2. What are your Christian names? Frank.
3. What is your present address? 845 Carling Ave.,
4. What are particulars of your birth? (a) 16-8-1896 (b) Ottawa. (c) Ont. (d) Canada.  
(a) date, (b) town, (c) township or parish, (d) country.
5. Are you a British subject? Yes.  
(If not, to what country do you owe allegiance.)
6. What languages, other than English, do you speak? Nil.
7. Are you single? Yes. Married? \_\_\_\_\_ or Widower \_\_\_\_\_
8. What is your trade or calling? Plumber  
(See Attestation Paper completion guide.)
9. What is your religious persuasion? C. of E.  
(See Attestation Paper completion guide.)
10. Are you willing to be vaccinated, or revaccinated and inoculated? Yes.
11. Have you ever served in any Military Forces? 136th Battn & 87th Battn., 3 yrs. 2 yrs. 8 mos. France.  
(If so, give particulars of former service.)
12. Are you willing to be attested in the Permanent Military Forces of Canada? Yes.
13. Have you ever been discharged from any branch of H.M. Forces as medically unfit? No.
14. If so, what was the nature of the disability? No.
15. Have you ever offered to serve in any branch of H.M. Forces and been rejected? No.
16. If so, what was the reason? No.

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank Baker., do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers to the foregoing questions made and signed by me are true; and that I am willing to be attested for the term of Eight Months., provided His Majesty should so long require my services, or until legally discharged, and do understand the nature and terms of this engagement.

F. A. Baker

Signature of man.

D. D. Benson

Signature of witness.

Dated this 16th day of September 19 19 at Ottawa.

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Baker., do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

F. A. Baker

Signature of Recruit.

## CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath.

before me, at Ottawa, Ont. this 16th day of September 1919.

(Sgd.) A.K. Hemming, Capt.Signature of Magistrate, Justice  
or Attesting Officer.Officer i-c Recruiting, P.F.Office or Rank and Unit  
or Appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.



DESCRIPTION OF Baker, Frank. ON ENLISTMENT AND CERTIFICATE OF MEDICAL EXAMINATION.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 16th day of September 1919, by the undersigned Medical Board sitting at Ottawa, Ont.

1. Age as stated 23 Years 1 Months 2. Apparent Age 23 Years Months  
3. Height 5 Feet 8 3/4 Inches 4. Weight 148 Pounds  
5. Chest Measurement { Minimum 34 Ins. Maximum 38 Ins. 6. Complexion Medium { Eyes Brown Hair Brown  
7. Physical development Good { Good Fair Poor 8. Smallpox marks Nil  
9. Number of Vaccination marks { Right arm Left arm 1 10. When vaccinated last 1916  
11. Distinctive marks and marks indicating congenital peculiarities or previous disease (Should the Medical Officers 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).

Tattooed "Girls Head" and "Heart and Sword" on right forearm. "Indian Girl and Clasped Hands" on left forearm

12. Slight defects, but not sufficient to cause rejection  
13. The man denies having had { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy, Syphilis, Asthma. 14. We find no evidence of past { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy, Syphilis, Asthma  
(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the Permanent Military Forces of Canada Regulations for medical examinations, and he is placed in Category

15. (a) Vision R 6/6 L 6/6 (b) Hearing R 25 Ft. L 25 Ft. President. Member.

(Any special remarks of Medical Officers may be added below.)

PARTICULARS OF NEXT-OF-KIN.

Name and Relationship.	Address.	Subsequent Changes.
Mrs. Adelaide Baker Mother.	845 Carling Ave., Ottawa, Ont.	

CERTIFICATE OF OFFICER COMMANDING UNIT.

Frank Baker. 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, and that his service reckons from the 16th day of September 1919.

Date 24th January 1920. (Signature of Officer) Lt. Colonel

NOTE.—Service reckons from date commenced to draw pay. A.A. (1914), Part II., S.S. 100, para. (2).







MILITARY AND FAMILY HISTORY SHEET.

1. Service at Home and Abroad (including former service of re-enlisted men, when allowed to reckon towards Increased Pay for Length of Service or Pension).

COUNTRY	FROM	TO	YEARS	DAYS	N.B.—The country only to be shown—it is not necessary to show separately the services in the different stations of the same country.

2. Passed classes of { Instruction ....	Initials of Officers.
3. Campaigns ....	
4. Wounded .....	
5. Effects of wounds.	
6. Special instances of gallant conduct .....	
7. Medals, Decorations and Annui- ties .....	

8. Particulars as to Marriage .....	(a) Christian and surname of woman to whom married and whether spinster or widow; (b) Place and date of marriage; (c) Name of officiating Minister or Registrar, and (d) Name of two witnesses.				Date of being placed on Married Roll.	Initials of Officers.
	(a)	(b)	(c)	(d)		

9. Particulars as to Children .....	Christian Name	Date and Place of Birth	Date and Place of Baptism, and Name of Officiating Minister

NOTE.—These entries are to be made from time to time as they occur, and initialled by the officer making the entry. Deaths at 8 and 9 to be indicated by deleting in Red Ink, giving date, etc., directly above.



NAME

Laker, Frank

REGIMENTAL NO.

2449824

RANK

ENLISTED AT

Ottawa Ont.

PROMOTIONS, &c.  
AND DATE

DATE

16.9.19

IF SERVED PREVIOUSLY, STATE UNIT, &c.

136th Bn. & 84th Bn. 3 yrs 8 mos

MARRIED, WIDOWER, OR SINGLE

S.

NEXT OF KIN

Mr. Adelaide Laker

RELATIONSHIP

Mother

ADDRESS OF

845 Darling Ave Ottawa

ASSIGNMENT OF PAY \$

C.

TO

ADDRESS

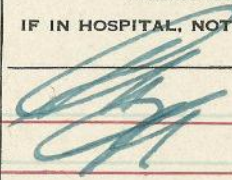

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR



# CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	No.	DATE	
J. O. S. 15.9.19	N. O. 3	14.9.19	
Web. L. C. with pay 15.9.19	"	"	
S.O.S. Sp. Guard. 6.9.19			
on demobilization, Authy			
P.O. N° 1328 para 7 (E) dt-			
18/11/18 Effect: 6.5.20	N° 127	6.5.20	



Regtl. No. P.F.....

P.F. Unit.....

Region.....

Frank.  
Christian Names.....

Surname..... Christian Names.....

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service: Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, etc.

[illegible]

Special remarks: state if a discharged soldier

Signature..... Samuel L. Carl President  
..... W. S. Tolson Member

On.....day of.....19.....

Enlisted { at.....  
on..... day of..... 19.....

Joined on enlistment	Corps	Regtl No.

Transferred to		

TABLE IV.—Service Table

[illegible]

Became non-effective by.....  
on.....day of.....19.....  
(Signature).....  
(Rank).....







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

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

No. 2779827 Rank L/C Surname Baker Frank  
 (Give name in full)  
 age 23 1/2 address 845 Carling Ave Ottawa  
 Unit or Corps Special Guard C.M.P.C Birthplace Ottawa Ont

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

## 1. GENERAL DESCRIPTION:

Physique good Weight 150 lbs.

Height 5 ft. 8 3/4 in.

Color of Eyes Brown

Nutrition good

Pulse 72 reg

Condition of arteries soft

Vision Rt. 6/9 Left 6/9

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)

Tattoo marks left arm

Opinion as to general health and physical condition good

## 2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

## 3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Had sore throat in Sept. 1919. Slight sore throat at present. no disability.



## EXAMINATIONS.

### THIS SECTION FOR USE OVERSEAS—

Examined at..... (Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signautre .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

### THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)