Veuillez noter:

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REGIMENTAL DOCUMENTS

NAME MOORE, Albert Robert REGT. NO. 25 2246 0 UNIT 1st C.H.B. H. Q. FILE NO. 1

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				28955	
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Disp. Certif					
1	A. C. R. Form 132					
1	M. F. W. 67					
1	Disp Slip					
	RTV					

W 2589
100M-11-18
4772 89-1877

Cat A
Sig 31
O'g 1

7/4/19

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

F

1. No. 2522460
2. Rank. Gnr.
3. Name. MOORE, Albert R
4. Unit. 1st CHB.
5. Date of Discharge 12-5-19 Place Montreal.
6. Reason for Discharge Demob.

WAR SERVICE BADGE. CLASS "A" No. 242801

7. Authority. R.O. 1420 D.D.#4 D.O.Pt. II-136
8. Proposed Residence after Discharge Ormstown, PQ.

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. ? B39

Montreal

May 12-19

A R Moore

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date May 12-19

H.M.T.Mauretania
Sailing No 53
Embarked at [illegible] on 3/5/19
Dis[illegible] at Halifax 9/5/19

Signature [signature]

(O. C. Discharging Unit.) Lieutenant
Officer i/c Discharge Section, Dispersal Station

M.F.B. 218a—300M.-11-18—1772-39-113.

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 unobt: inable	
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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate ([illegible]).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (A.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (F. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group a

Checked by No. 22

[illegible signature]

Date 23/4/19

79TH BATTERY, C. E. F. ORIGINAL

..... M. D. ..... Depot Battalion ..... Regiment

Regtl. No. 252246

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class A2)

1. Surname: Moore
2. Christian name: Albert Robert
3. Present address: Ormstowne, Que.
4. Military Service Act letter and number: 4985DR.
5. Date of birth: Sept,5th.1896.
6. Place of birth (town, township or county and country): Ormstowne, Que.
7. Married, widower or single: Single
8. Religion: Methodist
9. Trade or calling: Farmer
10. Name of next-of-kin: Mrs.M.Moore.
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: Ormstowne, Que. SUFFICIENT ADDRESS
13. Whether at present a member of the Active Militia: No.
14. Particulars of previous military or naval service, if any: Nil.
15. Medical Examination under Military Service Act:—

(a) Place Montreal, Que. (b) Date Nov. 27th,1917 (c) Category A2

A2

MOBILIZATION CENTRE M. D. No. 4 NOV 27 1917 MONTREAL, P. Q.

DECLARATION OF RECRUIT

I, Albert Robert Moore, do solemnly declare that the above particulars refer to me, and are true.

Albert R. Moore (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	21 yrs.	2	mths.
Height	5 ft.	8	ins.
Chest measurement — fully expanded	38		ins.
Chest measurement — range of expansion	4		ins.
Complexion	Dark		
Eyes	Brown		
Hair	Dark		

Distinctive marks, and marks indicating congential peculiarities or previous disease.

R. D. =	20
L. D. =	20
R. EAR	0K
L. EAR	0K

O. C. 79th Depot Battery C. E. F. Depot Btln.

Regt.

Place Montreal, Que. Date 25/Jul/17

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

To be made out in duplicate. H.Q. 54-21-23-53

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 .....

(2) Regimental Number 252460

(3) Full Name of Soldier Moore, Albert Robert

(4) Place of Birth Ormstown, Que.

(5) Are you married, or not? Single

(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 .....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address J. M. Moore, Ormstown, Que.

(10) Is your Mother alive? Yes.

If so, state name and address Mrs. J. M. Moore.
Ormstown, Que

(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? Sun Life Insurance Co

Have you made arrangements for payment of your Insurance premium ✓

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

W. Lee-Conbey Major
79th Depot Battalion
Officer Commanding.

Date 28-11-17

Form R 122.
2353—100M—9-12-16.

G.C. Rank Name MOORE. Albert Robert. Reg'l No. 2522460.

Unit 10th Dft 79th Baty If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Montreal. 28th. Nov. 1917. Place of Birth Ormstowne. P.Q.

Name and Address, Next-of-Kin Mrs M. Moore,

Ormstowne. P.Q., Canada. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—9546-16.

Report. Date.	Report. 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.
		Arrived in England		4-3-18	S/S SAXONIA
6.3.18	Res Bty C.G.A.	T.O.S. on Ave. from Canada	Witley Camp	4.3.18	Pte 065
23.5.18	"	S.O.S. to Comp. Rec. Bde C.R.A.	" "	23.5.18	Pte II-143 4 Comp Bde CRA Pte 1 23/5/18
27.6.18	Comp Bde C.R.A.	S.O.S. from O/Seas.	" "	26.6.18	Pte II-36 4 Arty Pool Pte 0 28 d 3/7/18
4-10-18	2 Bde C.G.A.	T.O.S. on Posting From C.A. Pool.	Field	Jns. 25-9-18	077 774 C.A. Pool 077 136D 8-10-18.
6-4-19	Do	Proceeded to England	— " —	30-3-19	— 36
		To Canada 53-1-56		3.5.19	
3.5.19	1 B & B	D.O.D. to Canada	Khyber	3.5.19	— 8

JUL 1918

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 10th Dft. 79th Battery   Regimental Number 2522460

Rank Gnr.   Surname Moore   Christian Name Albert Robert

Religion ____   Age on Enlistment ____ years ____ months.

Enlisted (a) 28.11.17   Terms of Service (a) Duration of War   Service reckons from (a) 28.11.17

Date of promotion to present rank ____   Date of appointment to lance rank ____

Extended ____   Re-engaged ____   Qualification (b) Gunner

or Corps Trade and Rate ____

Farmer

W S B CLASS A

____ Signature of Officer i/c Records.

Report: Date	Report: From whom received	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
		Embarked ...		18.2.18	
		Disembarked...	England	4.3.18	✓
6.3.18	O.C. Res. Batty. C.G.A.	T.O.S. as reinforcement from Canada	WITLEY	4.3.18	B.O. Part II. No. 65 ✓
23-5-18	O.C. Res. Batty. C.G.A.	S.O.S. to [illegible] Res. Bde. [illegible] Capt. H.M.T. Mauretania 053 31/1/19 Embarkation on [illegible] 1919 at Halifax [illegible]	WITLEY	23-5-18	B.O. Part II. No. 143 ✓
		[illegible] Capt. Major, O.C. Res. Batty. C.G.A.			
23 MAY 1918	O.C. Com. Res. Bde.	T.O.S. from Res. Bde. Batty. C.G.A.	WITLEY	23 MAY 1918	B.O. Part II. No. 1 ✓

(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.

[P.T.O.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

Report Date	From whom received	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
JUN 1918	O.C. Comp. Bde C.R.A.	PROCEEDED O/SEAS. TO Can. Heavy Artillery	Witley	26-6-18	B.O. Pt II 36
					W. G. Wright LIEUT. & ASST. ADJUTANT, COMPOSITE BRIGADE, CANADIAN RESERVE ARTILLERY.
28-6-18	C.G.B.D.	Arr'd Reinf. Tos Can Arty Pool		28-6-18	NR 97. P.20. 88 d/3.7.18
1-7-18	Do	Left for CCRC	Field	1-7-18	NR 1292
1-7-18	CCRC	Arrived at CCRC	..	1-7-18	" 1018.
22.9.18	do	Posted to 2nd Brigade CGA		24.9.18	B II 0136 d/1918
do	do	T.O.S of 2nd Bde CGA on posting from Can Arty Pool		25.9.18	NR OD492 (1706) RR 546 B II 099 d/ 4.10.18
28/9/18	2 Bde CGA	Joined Unit	Field	25/9/18	B213
	C.C.C.	Proceeded To England		30/3/19	NR
[illegible]		~~T.O.S. C.C.C. Kinmel Park for return to Canada~~			Lieut. for Lt. Col., A.A.G., Canadian Section
		~~Part II Order No.~~			
		~~S.O.S. C.C.C. Kinmel Park on Embarking for Canada Part II Order No.~~			
					No. 4 M.D. Concn. Officer
		S.O.S. M.C. Con proceeding to Canada for demobilization with effect 3-5-19			W. H. Drum Lieut for O.C. 1st C.H.B.

Sheet No.2.

79th By

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 79th By.

Regimental No. 2522460 Rank Gnr Name MOORE A.R.
C. E. F.

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

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

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
16-5-19	O/S	T.O.S. D.D.#4	Montreal.	3-5-19	D.O.Pt.II-136.
16-5-19		S.O.S. D.D.#4 Demob.	Montreal.	12-5-19	D.O.Pt.II-136. R.O.1420.

G.H. Fletcher Lieutenant,
a/ Assistant Adjutant,
District Depot No. 4.

(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.

79TH BATTERY, C.E.F. ORIGINAL
2822460

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

ORIGINAL

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 Moore Christian name Albert Robert

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 4985DR

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

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

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 27th, day of Nov. 1917, by the undersigned medical board sitting at Montreal, Que.

5. Age as stated 21 Years 2 Months. 6. Apparent age 21 Years 2 Months

7. Height 5' Feet 8 Inches. 8. Weight 135-4 Pounds.

9. Chest measurement { Minimum 34 Ins. / Maximum 38 Ins. } 10. Complexion { Eyes / Hair }

11. Physical development. Good { Good / Fair / Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm / Left arm 1 } 14. When vaccinated last Child

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

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 A2

R. D. =	20
L. D. =	20
R. EAR	0/6
L. EAR	0/6

D. Anderson Capt President.

William Empringham Member. [illegible] Member.

Signature of Man J. A. Moore.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
17/1/18		J. A. Jaine Capt M.O.	NOV 29 1917		Wathuter Lieut M.O. Canada
		M.O.	4/12/17		Wath M.O.
		M.O.	17/1/18		J. A. Jaine Capt M.O.
			20/6/18 2nd		Not Capt

Joined 27th, day of Nov. 191 at Montreal, Que.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment		2822460		
Transferred to	79th, Bty.	PROCEEDED O/SEAS. TO [illegible]	Good.	27-11-17. 26 JUN 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
MONTREAL: Rennad Pk.	FEB 11 1918 19.4.19.	Fit 'A' cat —	A2 J. A. Jaine Capt. R. [illegible] Capt

N. B.—This sheet is 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.

Surname Moore Christian Name Albert Robert

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				
Montreal	27-11-17										

CARD No. 3c 4

SURNAME. Moore.

CHRISTIAN NAMES Albert Robert.

REGL. No. 252246 0. RANK Gnr.

UNIT 79th Bty. C. F. A. (10th R.D.)

FORMER CORPS Nil.

So. S Dis 12-5-19

FOLL. do 136 of 16/5/19

Demob 4 DA

NEXT OF KIN.

NAMES IN FULL Moore, Mrs. M.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS Ormstown, P. Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Ormstown P. Q. DATE Sept. 5th 1896.

PLACE OF ATTESTATION Montreal, P. Q. DATE Nov. 28th 1917.

From Halifax per S.S. Saxonia 18/7/18

R/C. 9-5-19 378/69 Gnr.

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-30-379.

MARRIED SINGLE yes. WIDOWER

TRADE OR CALLING Farmer. RELIGION Methodist.

DESCRIPTION.

APPARENT AGE 21 YEARS 2 MONTHS

HEIGHT 5 FEET 8 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 4 INCHES

COMPLEXION Dark. EYES Brown. HAIR Dark.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Montreal, P.Q. DATE Nov. 27th 1917.

Present Address - Ormstown P.Q.

No. 252 2460 RANK Gnr. NAME Moore. A. R.

T. O. S. 28-11-17 UNIT 79th Battery C.F.A.

DO 241 Nov payist Depot

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917.			
Nov 28	Nov 30	"		
	Dec	"		
1918	Jan 1918	"		
	Feb	"		

bm
Coll

Number. 2522460 ..... Rank. Gnr .....

Surname. MOORE .....

Christian Name. Albert Robert .....

Units 6 Fd A. ..... Theatre of War. France .....

Date of Service. 22-6-18 .....

Remarks. .....

Latest Address. Ormstown P.Q. .....

Roll No. B. Page 5848.

No. Rank Name

T. O. S. Unit

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY

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. 252460 Rank Gnr Surname Moore
(Given name in full) Albert Robert

Unit or Corps 12 C H A Birthplace Ormstown Que

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

1. GENERAL DESCRIPTION:

Physique Good Weight 152 lbs. Height 5 ft. 8 in. Colour of Eyes brown

Nutrition Good

Pulse 74

Condition of arteries soft

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.
Left 20 ft.

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

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.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Kimmel PA. (Overseas)

Date 17.4.19 Signed J R Ward 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 A. B. Moore

(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.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 25-22460 (Rank) Gnr.

Name (in full) Moore Albert Robert. enlisted in

the 19th Bty C.F.A.

CANADIAN EXPEDITIONARY FORCE at Montreal on the 27th

day of Nov. 1917.

HE served in 1st Can Heavy Bty, France

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

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

Age 22 yrs 6 mos.	Marks or Scars Vaccine left.
Height 5 ft 8 in	
Complexion Dark	
Eyes Brown	
Hair Dark	

E. R. Moore
Signature of Soldier

Date of Discharge

Dispersal Station "F" MAY 12 1919 Military District No. 4

Issuing Officer Lieutenant
Officer i/c Discharge Section, Dispersal Station "F"

Rank

Date May 12 1919

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.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.