Veuillez noter:

Les photographies des documents de Bibliothèque et archives (BAC) qui suivent ont été prises par des utilisateurs de BAC qui participaient à un projet-pilote de numérisation en libre-service (2011).

Please note:

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M7 22 6 18.

DISCHARGE DOCUMENTS

R. O. No. .....

H. Q. No. .....

Name McComas Thomas

Regt. No 2006851 Rank Spr

Corps Can. Engineers

A Minor

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 4

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit..... 2

Last Pay Certificate..... 1

M7 W 82-1

M7 W 67-2

M. F. W. 62.
100m.—6-17.
H. Q. 1772—80—935.

Removed 14/1/18.

Casualty

C4553

This space to be for numbers

Proceedings on Discharge.

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

No. 2006851

Rank Sapper

Surname McComas

Christian Name Thomas

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

Corps (Squadron, Battery or Company) Canadian Engineers

Date of Discharge February 1, 1918

Place of Discharge St. Johns P.Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	21 years 9 months.
Height	5 feet 9 ½ inches.
Complexion	Medium
Eyes	Blue
Hair	Lt. Brown
Trade	Mason
Intended place of residence (To be given as fully as practicable.)	1529 Norton Ave Kansas City Mo USA.

Descriptive Marks

Scar small of back.
Scar back of head.

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

Minority
(MD4. 22-M-2134)

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.

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

3. Conduct and character while in the service have been, according to the records, etc.

Bad

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.)

Mason

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

Noted
N.E. Sect.
26.2.18
GB

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

Nil

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

6. Medals and Decorations ..... Nil

To be copied by the Command. The Officer on 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) ST. JOHNS, P.Q. ..... H. M. Mabbott ..... Lt. Colonel C. E.

(Date) Feb 1, 1918 ..... O. C. Engineer Training Depot. *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) ST. JOHNS, P.Q. T. H. McComas ..... *(Signature of Soldier.)*

(Date) Feb. 1, 1918 E. Woollett ..... *(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.

T. H. McComas. ..... *(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) ST. JOHNS, P.Q.

(Date) Feb 1, 1918 *(Signature)* H. M. Mabbott ..... Lt. Colonel C. E. O. C. Engineer Training Depot.

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

T. H. McComas.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

Not applicable

DUPLICATE

A2 Canadian

ATTESTATION PAPER.

No. 2006851

Canadian Engineers

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — M C C O M A S
1a. What are your Christian names? — Thomas
1b. What is your present address? — 15 Ash St. Kansas City Mo. USA
2. In what Town, Township or Parish, and in what Country were you born? — Winnipeg Man. Canada
3. What is the name of your next-of kin? — Lydia McComas
4. What is the address of your next-of-kin? — 1829 Norton Ave. Kansas City Mo. USA
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — Apr. 22nd 1896
6. What is your Trade or Calling? — Mason
7. Are you married? — Single
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? (If so, state particulars of former Service.) — No
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, Thomas McComas, 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.

Thomas F. McComas (Signature of Recruit)

Date Nov. 8th 1917 191 . W. McCleod (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas McComas, 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.

Thomas F. McComas (Signature of Recruit)

Date Nov. 8th 1917 191 . W. McCleod (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 Toronto, Canada this 8th day of November 1917.

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

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 Thomas McComas on Enlistment.

Apparent Age 21 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 9½ ins.

Chest measurement: Girth when fully expanded 38½ ins.; Range of expansion 4½ ins.

Complexion Medium

Eyes Blue

Hair Lt Brown

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist Bapt.
- 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).

scar small of back scars of back of head

Hearing O.K. Nose & throat O.K.
Each eye D. 20

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.

DECLARED FIT BY MEDICAL BOARD TORONTO MOBILIZATION CENTRE

Date November 8th 1917 191 .

Place Toronto, Canada

E. M. Hooper Lt. M.O.
Medical Officer. PRESIDENT

*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.

Thomas McComas 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.

Wm Steele
(Signature of Officer)
Lt. Colonel C. E.
O. C. Engineer Training Depot.

Date NOV 29 1917 191 .

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 Canadian Engineers. ENGINEER TRAINING DEPOT

(2) Regimental Number 2006851

(3) Full Name of Soldier McComas, Thomas

(4) Place of Birth Winnipeg, Man., Can

(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 —

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Unknown

If so, state name and address Unknown

(10) Is your Mother alive? Yes

If so, state name and address Lydia E McComas
1829 Norton Ave., Kansas City, Mo., U.S.A.

(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

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.

R M Michelle Lt. Colonel C. E.
Officer Commanding.
O. C. Engineer Training Depot.

Date DEC 1 1917

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

2006851

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 McComas Christian name Thomas

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) 15 Ash St. Kansas City Mo. USA

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 8th day of November 1917, by the undersigned medical board sitting at Toronto, Canada

5. Age as stated 21 Years 7 Months. 6. Apparent age Years Months

7. Height 5 Feet 9½ Inches. 8. Weight 164 Pounds.

9. Chest measurement { Minimum 34 Ins. / Maximum 38½ Ins. } 10. Complexion Medium { Eyes Blue / Hair L. Brown }

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

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

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

Hearing O.K. Nose & throat O.K.

16. Slight defects but not sufficient to cause rejection Eachbye D. 20

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

W. D. Slaten Sr. President.

H. J. Sproule Lt. Member. E. M. Hoopen Dr. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.	3/11/17	T.A.B.	M.O.
		M.O.	20/11/17	1 c.c. double	M.O.
		M.O.	5/12/17		M.O.

Joined 8th day of November 191 7 at Toronto, Canada

	Corps	Regtl Number	Habits	Date
Joined on enlistment	Can. Eng.	2006851		NOV 8 1917
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
			Fit Class A2

EXAMINING MEDICAL BOARD No. 2 DEC 3 1917 ST. JOHNS, P. Q.

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.

W. A. Farwell Major

Signature of Man Thomas H. McComas.

M.S.A. 15.

2006851

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 McComas Christian name Thomas

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)

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The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 8th day of November 1917, by the undersigned medical board sitting at Toronto, Canada

5. Age as stated 21 Years 7 Months. 6. Apparent age Years Months

7. Height 5 Feet 9½ Inches. 8. Weight 164 Pounds.

9. Chest measurement { Minimum 34 Ins. / Maximum 38½ Ins. } 10. Complexion Medium { Eyes Blue / Hair L Brown }

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

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

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

Hearing O.K. Nose & throat O.K.

16. Slight defects but not sufficient to cause rejection Eachbeys D. 20

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

W. D. Slaker President.

H. F. Gronlund Member. E. M. Hooper Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.	13/11/17	T.A.B.	M.O.
		M.O.	20/11/17		M.O.
		M.O.	5/12/17	ICC	M.O.

Joined 8th day of November 191 7 at Toronto, Canada

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	Can. Eng.	2006851		NOV 8 1917
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

EXAMINING MEDICAL BOARD No. 4. M.D.M. 4. FIT Class A1 DEC 3 ST. JOHNS, P.Q.

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.

W. A. Harwell Major

Signature of Man Thomas McComas

FORM OF WILL

I, Thomas Harrison McComas (Name in full)

Regimental Number 2006851 serving in Canadian Engineers.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

———	Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Lydia McComas. 1829 Norton Ave Kansas City Missouri	Name and Address of person or persons to receive personal estate* (*See note*).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 30 day of November A.D. 1917

T. H. McComas. Signature of Soldier.

*N.B. Personal estate includes ~~pay, effects, money in bank, insurance on policy, in fact~~ everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Archie McSweyn

Address of Witness 1235 W. Madison St. Chicago, Ill.

Occupation of Witness Painter

Signature of Second Witness R. G. Garratt

Address of Witness 176 Regular Ave Detroit Michigan

Occupation of Witness Bricklayer

M. F. W. 82.
300M.-12-16.
1772-39-983.

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).

Regimental No. 2006851 Rank Sapper Name McComas, Thomas.

Corps Engineer Training Depot who was* discharged

On February 1st 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st February 1918, to 1st February 1918, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	43	10
Advances by Cheques No.			Regt'l Pay 1 days at $ 1.00	1	00
No.			Field Allow. 1 days at $ .10		10
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Forfeits 8 days pay	8	80			
Q.M.Stores	31	76	Other Allowances*		
Payment on transfer or discharge No. 6579	3	64	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	44	20	Total	44	20

*Give particulars.

A monthly stoppage of $ NIL (†) has (‡) been paid on account of Assigned Pay for the month of 191 and Sep'n Allce. for month of 191 (to) Assignee

(Address) NIL

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment 8-11-17

(2) if married and if a Separation Allowance Card has been submitted Single Nil

(3) cause of discharge Underage authority MD4: 22-M-2134

(4) authority for transfer D.O.Part"2"#32 d/1-2-18

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date February 5th 1918.

Place St Johns, P.Q. (Signed) Captain

Engineer Training Depot. *Paymaster.*

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.
100M.—12-17.
H. Q. 1772-30-902.

M. F. W. 129.

50m.—7.17.
1772—39—1142.

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 Sapper Name Thomas Surname Mc Comas

Unit of Corps Can. Engineers (If a soldier) Regtl. No. 2006851

Born at Winnipeg Man. on, (date) April 22nd 1896.

Signature (for identification)

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

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

Weight 164 lbs. Colour of eyes Blue

Height 5 ft. 9½ in. Identification Marks Nil

2. NUTRITION AND DIATHESIS? Normal

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

3. NERVOUS SYSTEM? Is there a history of previous disability? None

4. RESPIRATORY SYSTEM? Is there a history of lung trouble? None

5. HEART?

Abnormal Sounds? Nil

Abnormal Size? Nil

Pulse Rate? 76 Intermittence or Irregularity? Nil Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? None

(b) Blood Pressure. Normal

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included) Good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1020 Reaction? Acid Albumen? Nil Sugar? Nil

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

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? Class A

Examined at St Johns P.Q. Signed. J Campbell M. O.

Date 1/2/18 Signed. M. O.

(S) J. Mc Comas
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, 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

SURNAME. McComas

CHRISTIAN NAMES Thomas, H.

REGL. No. 2006851 RANK Spr.

UNIT Can. Eng. Tr. Depot

FORMER CORPS Nil

SOS Dis 1-2-18 - 4

minority.

Auth. Reis card

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL McComas, Mrs. Lydia

RELATIONSHIP TO SOLDIER Mother

ADDRESS 1829 Norton Ave., Kansas City Mo., U.S.A.

COUNTRY OF BIRTH Canada, Winnipeg, Man DATE April 22nd, 1896

PLACE OF ATTESTATION Toronto, Ont. DATE Nov. 8th, 1917

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

M. F. W. 22. 100M.—11-16. H. Q. 17 2-39-339.

D&D

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Mason RELIGION Baptist

DESCRIPTION.

APPARENT AGE 21. YEARS 7. MONTHS

HEIGHT 5. FEET 9 1/4. INCHES

CHEST MEASUREMENT 38 1/2. INCHES EXPANSION 4 1/2. INCHES

COMPLEXION Medium EYES Blue. HAIR L. Brown.

DISTINGUISHING MARKS Scar small of back. Scars on back of head.

MEDICAL EXAMINATIO PLACE Toronto, Ont. DATE Nov. 8th 1917.

Present Address, 15 Ash St., Kansas City, Mo., U.S.A.