

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

DISCHARGE DOCUMENTS

Name

Regt. No.

Rank

Corps

Blackbirde Gilbert

820315

Pte

141st Inf Br

R. O. No.

21934

H. Q. No.

Disc. under H. R. & O. 322, sub. 1,

Irregular enlistment



M. F. W. 67-2
m. J. B. 465-1
1. P. C.

16-22

24-22

30-22

2

2.9

Proceedings on Discharge.

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

| | | | |
|---|--|--|--|
| No. | 820315 | | |
| Rank | Private | | |
| Name | Gilbert Blackburde. | | |
| <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small> | | | |
| Corps (Squadron, Battery or Company) | 141st.O/S.Batt. | | |
| Date of Discharge | July 11th 1917. | | |
| Place of Discharge | Winnipeg.Man. | | |
| 1. DESCRIPTION AT THE TIME OF DISCHARGE. | | | |
| Age.....19.....years.....3.....months. Height.....5.....feet.....6 $\frac{1}{2}$inches. Complexion Copper Colour Eyes Black Hair Black Trade Farmer. Intended place of residence } <i>Barwick</i> (To be given as fully as practicable.) } <i>Ont.</i> | | Descriptive Marks Scar over second joint great toe. | |
| 2. The above-named man is discharged in consequence of being discharged under K.R.& O Para 322 Sub.Sec.1.(Irregular enlistment.) | | | |
| <small>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.</small> | | | |
| 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. <div style="text-align: center;">GOOD</div> <small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small> | | |
| | 4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <div style="text-align: center;">Farmer.</div> | | |

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113.

(OVER)

Discharge
 Section
 27-4-17
 Bf.

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) Winnipeg. Man...... Major......

(Date) July 11th 1917...... Commanding Casualty Clearing Depot.....

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) Winnipeg. Man...... G B Blackbird..... (Signature of Soldier.)

(Date) July 11th 1917...... W Davenport..... (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)..... 1 years..... 135 days.

Total..... 1 years..... 135 days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed. July 11th 1917.

(Place) Winnipeg. Man......

(Date) July 11th 1917...... (Signature)..... Major......
O.C. Casualty Clearing Depot No 10.

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.)

Sign here
X.....G B Blackbirds.....
ml

Intended place of residence

X Barwick Gnt

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 | 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.

141st OVERSEAS BATTALION, C. E. F.

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.

- This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- 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.
- All questions, etc., must be answered.
- 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.
- 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..... 141st OVERSEAS BATTALION C. E. F.

(2) Regimental Number..... 870 315

(3) Full Name of Soldier..... Gilbert Blackbird

(4) Place of Birth..... Long Sault
Ontario

(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? *No*

If so, state name and address

(10) Is your Mother alive? *Yes*

If so, state name and address..... *Sarah Blackbirds*

..... *Barrick Ontario*

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

Are you her sole support, or not? *No*

(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? *No*

If so, in what Company?

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.

Date *OCT 20 1916*

P. A. Stukem
for *Officer Commanding* *Col.*
Commanding 141st Overseas Battalion, C. E. F.

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.

75M.—9-19.

1772-39-1332.

No. 820315. RANK *Pt.*

NAME

Blackbird G.

T. O. S. 28-2-16

UNIT

*141st. Battalion. C. E. F.**Mar. p. l.*

M. D. 10.

| PAID FROM | PAID TO | SIG. OR REC'D | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-----------------|-----------------|---------------------|---|--|
| | | | PARTICULARS | AUTHORITY |
| <i>1916.</i> | <i>1916.</i> | | | |
| <i>Feb. 28.</i> | <i>Mar. 31.</i> | <i>d.</i> | | |
| <i>April</i> | | <i>✓</i> | <i>Home furlough 1-5-16 to 1-6-16</i> | <i>D.O. 106 of 4-16.</i> |
| <i>May</i> | | <i>n</i> | <i>Reported for duty 12-5-16</i> | <i>D.O. 130 of 5-16.</i> |
| <i>June</i> | | <i>✓</i> | <i>Forfeit 3 day pay a.w. d. 14-7-16.</i> | <i>D.O. 174 of 19-7-16.</i> |
| <i>July</i> | | <i>✓</i> | <i>a.w. d. 10-7-16 to 2 p.m. 12-7-16</i> | <i>D.O. 174 of 19-7-16.</i> |
| <i>Aug.</i> | | <i>✓</i> | | |
| <i>Sept.</i> | | <i>✓</i> | | |
| <i>Oct.</i> | | <i>✓</i> | | |
| <i>Nov.</i> | | <i>✓</i> | | |
| <i>Dec.</i> | | <i>n</i> | <i>a.w. d. 12 noon 6-12-16 cancelled</i> | <i>D.O. 297 of 12-16 & D.O. 305 of 12-16</i> |
| <i>1917</i> | <i>1917</i> | | | |
| <i>Jan.</i> | | <i>n</i> | | |
| <i>Feb.</i> | | <i>n</i> | | |
| <i>Mar.</i> | | <i>✓</i> | | |
| <i>April</i> | | <i>✓</i> | <i>Transf to #10 C.C. d.</i> | <i>D.O. 12, 5-5-17.</i> |

| | |
|---------|---|
| Red — | Condition of teeth |
| Blue — | Operations performed at presentation by C. A. D. C. |
| R. F. — | Root filling |
| A. F. — | Amalgam filling |
| C. F. — | Cement filling |
| G. F. — | Gold filling |
| G. B. — | Gold bridge |
| G. C. — | Gold crown |
| P. C. — | Porcelain crown |
| N. A. — | Acute access |
| P. — | Pyorrhoea |
| N. — | Extractions |
| F. L. — | Full lower |
| P. L. — | Partial lower |
| N. U. — | Full upper |
| P. U. — | Partial upper |

Surname Blackbird Christian Name Gilbert

| | | | | |
|---|---|------------------------------------|--------------|---------------------------------|
| Examined | on <u>28th</u> day of <u>February</u> 191 <u>6</u> | Approved by <u>E. L. MacIntyre</u> | | |
| | at <u>Barrick out</u> | Rank _____ of M.O. | | |
| Birthplace | City or Town <u>Long Sand Indian Reserve</u> | Rank _____ of M.O. | | |
| | County <u>of Rainy River</u> | | | |
| Apparent age | <u>18</u> | Date | Fit or Unfit | EXAMINED FOR RE-ENGAGEMENT |
| Trade or occupation | <u>Farmer</u> | | | M.O. |
| Height | <u>5</u> feet <u>7</u> Inches | | | M.O. |
| Weight | <u>130</u> lbs. | | | M.O. |
| Chest measurement | Minimum <u>32</u> inches | | | M.O. |
| | Maximum expansion <u>35</u> inches | | | M.O. |
| Physical development | <u>Fair</u> | | | M.O. |
| Small-pox Marks | <u>none</u> | | | M.O. |
| Vaccination Marks | Arm. Right Left | Date | Result | VACCINATIONS |
| | Number | | | |
| When Vaccinated last | <u>not before</u> | <u>1916 Oct.</u> | | M.O. |
| (a) Marks indicating congenital peculiarities or previous disease | | | | M.O. |
| | | | | M.O. |
| (b) Slight defects but not sufficient to cause rejection | | Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
| | | <u>1916</u> | | |
| | | <u>17/4/16</u> | <u>Good</u> | <u>E. L. MacIntyre</u> of M.O. |
| | | <u>Aug.</u> | <u>TAB</u> | <u>2</u> M.O. |
| | | <u>Sep.</u> | <u>TAB</u> | <u>3</u> M.O. |

Enlisted on 28th day of February 1916 at Barrick out.

| | | | | |
|----------------------|-------------------------------------|---------------|------------------|-----------------|
| | CORPS | REG'TL NUMBER | HABITS | DATE |
| Joined on enlistment | <u>Barrick Detachment</u> | <u>820315</u> | <u>Temperate</u> | <u>25/2/16.</u> |
| | <u>B.C.O. 141st B.B.</u> | | | |
| Transferred to | | | | |

| EXAMINED OR DISCHARGED BY A MEDICAL BOARD | | | |
|---|---------------------|----------|--------|
| STATION | DATE | DISEASE | RESULT |
| <u>Port Arthur</u> | <u>Nov. 16-1916</u> | <u>—</u> | |
| | | | |
| | | | |

Christian Name.

Signature of
Medical Officer

ATTESTATION PAPER.

No. 820315

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?.....
1a. What are your Christian names?.....
1b. What is your present address?.....
2. In what Town, Township or Parish, and in
what Country were you born?.....
3. What is the name of your next-of kin?.....
4. What is the address of your next-of-kin?.....
4a. What is the relationship of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-
vaccinated and inoculated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?..
If so, state particulars of former Service.
11. Do you understand the nature and terms of
your engagement?.....
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Gilbert Blackburde, 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.

after the termination of that war provided his property should be long required by Government, or otherwise being discharged.

Date February 28th 1916 Gilbert Blackburde (Signature of Recruit)
W. C. McLean (Signature of Witness)
Rec't. 141st Inf. Bn.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Julbert Blaenburd, 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.

and of all the Generals and Officers set over me. So help me God.

Date February 28th 1916. Robert Blackburde (Signature of Recruit)
W. C. McLean (Signature of Witness)
Plent 14th of 3rd Bn

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 Barwick Ont. this 28th day of February, 1916.

.....
Thos. Weston J.D. (Signature of Justice)

Description of Gilbert Blackburd on Enlistment

Apparent Age 19 years 3 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. 6 1/2 ins.

Chest measurement { Girth when fully expanded 34 1/4 ins.
Range of expansion 3 ins.

Complexion Copper color

Eyes Black

Hair Black (jet)

Religious denominations. { Church of England Yes

Presbyterian

Methodist

Baptist or Congregationalist

Roman Catholic

Jewish

Other denominations
(Denomination to be stated.)

*Scar over second joint
great toe*

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 February 28 1916

Place

E. L. McIntyre
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.

Gilbert Blackburd 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 February 28 1916 W. E. McLean (Signature of Officer)
Lieut. 141st ofs Batt.

for Lieut.-Col.
Commanding 141st Overseas Battalion, O. E. F.