REGIMENTAL DOCUMENTS

T	NAME TOTALAN W	led the	REGT. NO. 93/6-34	UNIT & Const B	H. Q. FILE NO.	Y
45	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
A	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		A SHOW THE TANK		A SECTION AND A SECTION ASSESSMENT OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADD	DEATH
31.	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				THE PARTY	Category
1	TRAINING HISTORY SHEET (M.F.W. 113)				Contract of the second	
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					Services of the Parish
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)			The local content of the		
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
/	DENTAL HISTORY SHEET (M.F.B. 465)				* A THE STATE OF	Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					0 1
2	MEDICAL EXAMINATION (M.F.W. 129)				THE STATE OF	Demot.
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				MAN STREET	
	PROCFEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					STATE OF THE PARTY
The same	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
2	LAST PAY CERTIFICATE (M.F.W. 44)					
1.	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)				YA'LLE YE.	
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)			15251		91
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	Vacanta de la constitución de la	REPORT OF THE PARTY OF THE PART				
-		TO THE REAL PROPERTY.				
W	2539 4-11-18				ENGLISH EN	

TRIPLICATE ATTESTATION PAPER.

No.931634

No. 2 CONSTRUCTION BY CEF CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS	TO I	BE PUT	BEFORE	ATTESTATION.
------------------	------	--------	--------	--------------

	(ANSWERS.)
1. What is your surname? Toulmin	
1a. What are your Christian names?	
1b. What is your present address?	Bourbon St., Detroit, Mich.
2. In what Town, Township or Parish, and in what Country were you born?	Bisbee, Arizona
사람들은 하나 가는 것이 있다면 그 나는 사람들이 얼마나 되었다. 나는 사람들이 얼마나 그는 그렇게 하는 것이 되는 것이 없는데 그를 하나 되었다.	Millie Nichols
4. What is the address of your next-of-kin?	356 Texas St., Mobile, Ala
4a. What is the relationship of your next-of-kin?.	Mother
5. What is the date of your birth?	Sept. 28th, 1882
	Laborer
	No
8. Are you willing to be vaccinated or re-	
(1) [2] 14 (국가) (2) 15 (1) 2 (2) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1) 15 (1)	Yes
	No
	U. S. Army, 1898-1902
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 \	Yes
Canadian Over-Seas Expeditionary Force?	
discharged.	jesty should so long require my services, or until legally (Signature of Recruit)
DateNov. 20th. 191 6	(Signature of Witness)
OATH TO BE TAKEN B	Y MAN ON ATTESTATION.
bear true Allegiance to His Majesty King George in duty bound honestly and faithfully defend His M Dignity, against all enemies, and will observe and of all the Generals and Officers set over me. S	
	ley : Gallamin (Signature of Recruit)
Date	Chunton (Signature of Witness)
CERTIFICATE	OF MAGISTRATE.
questions he would be liable to be punished as prov The above questions were then read to the R I have taken care that he understands each	me that if he made any false answer to any of the above ided in the Army Act. ecruit in my presence. question, and that his answer to each question has been as made and signed the declaration and taken the oath
before me, atWindsor Ont this	20th day of November 191 . 6
	Signature of Justice)
M. F. W. 28 750M—3-16 W. O. (372-39-84)	# \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

	determined according to the instructions given in the Reguions for Army Medical Services.)	Distinctive marks, and marks indicating congenital peculiarities or previous disease.
200		(Should the Medical Officer be of opinion that the recruit has served before, he will unless the man acknowledges to any previous service, attacn a slip to that effect, for the information of the Approving Officer).
Heig	ht	None
tre-	Girth when fully expanded	
	Range of expansion 2-1/iss.	
	olexion Dark	
Eyes	Brown	
Hair	Black	All the second of the second of the
	(Church of England	
	Presbyterian	
is ons.	Methodist	
igiou	Baptist or Congregationalist	
Religious denominations	Roman Catholic	
ğ	Jewish	-to sail the first the brownedga rospess and
	Other denominations (Denomination to be stated.)	
free Date	He can see at the required distance with eit use of his joints and limbs, and he declares that I consider him*	her eye; his heart and lungs are healthy; he has the he is not subject to fits of any description. Anadian Over-Seas Expeditionary Force. Captain, A. M. C. Medical Officer. the will fill in the foregoing Certificate only in the case of those who have
-		
	CERTIFICATE OF OFFIC	ER COMMANDING UNIT.
	Alex Toulmin	having been finally approved and
	ected by me this day, and his Name, Age, Date recorded, I certify that I am satisfied with the	of Attestation, and every prescribed particular having correctness of this Attestation.
		(Signature of Officer)
Deta	26/11/16 199.	DH Sutherland
2000		Q. Comd'g No. 2 Construction Battalian C 1

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. #2Con	nstruction Be	attalio	n, CEF		
	Regimental No. 931634 RankPrivate Name Alex Toulmin							
	Enlisted (a) 11/20/16. Terms of Service (a) Duration of war. Service reckons from (a) 11/20/16 Date of promotion to Date of appointment Numerical position on to lance rank							
		sent rank	to lance rank	····}	roll	l of N. C. Os.		
	Extende	ed	Re-engaged	Qualification (b)	Lab	orer		
	-	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks		
CONTRACT OF THE PARTY OF THE PA	Date	From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	taken from Army Form B. 213, Army Form A. 36, or other official documents		
CT	NO.		Imfaithed, Canada	Jarya n.S.	26/3/19	7		
CORRI	717	mar.	Wesem forfred, england	diverpool	9/4/17			
Ö,	JUN. IST	CAV	(housed overses	Seoford '	1 0	172 2.0#		
101	6 9	- Charps						
是	0				TA V	a samuel.		
3	770					Adjutant, No. 2 Construction Patt'n, C.E.F.		
			T 2-3	6 77				
				fn France 1				
•	から	00.	to his augura Office	one Trela	215	B2069. Ot 2.0. 119. 25 7		
			Forfeits 5 days pay for					
21.	5.17.	OC.	Making avv y with	do d	31.5.17	Brolg 12.0.120. 26/7/		
			Iron Rations					
	(a) (b)	In the case of a mai e.g. Signaller, Shoe	n who has re-engaged for, or enlisted into Section D. Aring Smith, etc., etc., also special qualifications in technical	my Reserve, particulars of ical Corps duties.	f such re-enga	gement or enlistment will be entered. [P.T.O.		

	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re- ported on Army Form B. 213, Army Form	Place	Date	Remarks taken from Army Form B, 213,	
Date	From whom received	A 36, or in other official documents. The authority to be quoted in each case	Trace	Date	Army Form A. 36, or other official documents	
5.7.17.	óc.	Jentined 28 days Fr. Awo & from Tattoo 24 6 pm 36/6/17 (44hrs); the locort, using observance to an n.c. Forfieto 3 days pay	Resisting cene + threater	7	Booky 9/110 172	
6.6.17	o.c.	Sentenced 4 days 4.P. 1. 1. Late falling in for fate undergoing puncih men 2. making an improves		31/5/17		
30 4	as	10 days nor far Droheyng a Grala.	Field	247	125 it /19	
1.0/17.8	Jana la J	oud Myalyu Back	adm	1/10/17	W3024/23581	
69/17.	oc	Tdays FPNP2 for awlear 10pm 2/9/17 white 7-30 and 1900 feel 1 days Pay mules	re front Rasgett.	3-9-17	Brosg P/133 dp 18 19	
8/18/17	Jura Horp			8-10-1)	W so 4/ 95044	
13-10-17	oc	Rego pombosp		8/10/17.	B713	
3/1/18	Ocume	ant Midial CAC			7 Bns.	
6-6-1918	0742 Con C 20.	14 day 86 ho 1 3-6-18 for. Hertating to obey an Order	Sula	2-6-18	Broleg. 400.357 June 1918	

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Casualty I	Form-Active	Service.
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	Regi	ment or Corps No 2 Can los	whenter Ca	y.			
Rankuvali Surname Toul MIN Christian Name alex							
Religionyearsmonths							
Enlisted (d	a)	Terms of Service (a)	Service reckons	from (a).			
Date of pr	omotion to presen	t rank Date of appoin	ntment to lance	rank			
Extended	{·····}	Re-engaged	ualification (b) Corps Trade an				
Occupation	` a			Signa	iture 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	Remarks Taken from Army Form B.213, Army Form A.36,		
Date	From whom received	The authority to be quoted in each case.		Casualty	or other official documents.		
		Embarked					
		Disembarked					
20/6/18	42 Cog.	14 days 50 ho 1. 13-6-1918					
		To our Concumently inst			a.		
		mevious award) For			9 Gleg		
		To Inte undergany 36 201	Freld.	10/6/18	Nr90 39		
		absent from Wenting Party	THE RESERVE OF THE PARTY OF THE		9 July 1918		
		from 1. or por 10 6 18 week					
		6. 20pm 11. 6-1918 (Inful					
		2 days pay by Res.	1				
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27.7.1918	00/42 Co, cpc	To the ro General Hupline	Filer	207-19	12/3		
21.73/8	10 hen Hosp	Supliencya allustra	10 General	21-7-18	607768		

⁽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.

	Report	Record of promotions, reductions, transfers, casualties, &c during active service, as reported on Army Form	Place of Casualty	Date of	Remarks Taken from Army Form B.213, Army Form A.36, or other official	
Date	From whom received	B.213. Army Form A. 36, or in other official documents. The authority to be quoted in each case.	race of Casualty	Casualty	or other official documents.	.,
27.7-18	10 Leveral.	Influency. Is, face Nep	et Lule .	27.7-18	48321/95-246	4
28-18	le & Basedy	sound from Hupelal	Buld.	2-8-18	AND RX 1099	7
5-8-19	leg Bs is	Depr for went.	Sull	5.8.18	RA 1336.	
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25.9.8	2 bonh Cog.	arrived from Don Def Words	unt)	18.8.18	(kd + 8/18 54)	Na auto
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3-11-18	43 Coy. C.F.C.	andt. to Hosp. (Detention)	Conches.	14.11.10	18243:	
11 12/1	dag-	Trans to England chales	rainholl	NA 13 8	KR344	2%
	NT CANA	DA 🖛	6	hewet	0	1 m
En	barked	B 10 10	Lieut. for LL	In a la	helon, B. E. E.	0
	95	FEB 1919 Canad	an Section, G. H.	Q. Old Ec	holona —	6
Y-12.18	embarked	7.0.5 and attel And 6.6.0 for	Bramshott	14.12.18	D.O.305	6
		Quarters & Kations			3	2
	NSRD	ON COMMAND TO CAS Kinimel	BRAMSHOTT		PART II D.O.	WR 2313 2
7.0	S	Kheft			7	
		mel Park for return to Canac	axo		ba thry	TIEUT
, art	II Order No.	January or an an and an and		. S.w. Llout.	OFFICER I	c RECORDS,
8/200	hanking in Oar	ned C.C.O. Kimmel Park on Nadar Part II Order No	o. 4 M.D. Concentre	tion Wing.	NOVA SCOTIA I	REGTL DEPOT.

Reg'l No. 931634 C.T. Name Rank If in perm. Corps, Married or Single Single Unit No 2 Construction Bn. What Unit? Place and Date of Enlistment Windsor. Ont. 20th Nov. 1916 -Place of Birth Bisbee. Arizona. Millie Nichols, . Name and Address, Next-of-Kin Mother Relationship 356, Texas St., Mobile, Ala, U.S.A. Payable to Assigned Pay Monthly \$ N/E. R.B. NS 7/76 Relationship Payable to Separation Allowance\$ Character Reason Discharge, Date and Place H. W. V., Ld.-9546-16. Report. REMARKS Record of promotions, reductions, transfers, Date. Place. casualties, etc., during active service. Taken from Official Documents. From whom The authority to be quoted in each case. Date. received. 8.10.17 CL 0.30 14.12.18 BO305-871 9119.12.18 16.12.18 MSRD. T.OS from 2 000 " Ripon 15. 2.19 ~ 4.8 445 / M. D. X 1-3-19 hoRD. Ceases Te con Phyl. 4 5'05 to Canada M.04 auch Rd-23 Vol. 15/173 26219.

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.	The authority to be quoted in each case.				Taken from Official Documents.	
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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 No. 2 CONSTRUCTION, B'H. C.E.F.
(2)	Regimental Number 93/63 #
(3)	Full Name of Soldier 98/632 Alex Loulin
(4)	Place of Birth Prsber anzona U.S.a.
(5)	Are you married, or not?
(6)	If married, state, (a) Full name of your wife
	(b) Present Postal Address
(7)	Are you a widower?
(8)	Are you a widower? Have you any children?
	If so, give number of boys and girls
	Also their names and ages.

(9) Is you	ir Father alive?
I	f so, state name and address
(10) Is yo	our Mother alive?
I	f so, state name and address This Millie Licholes 3 6 Textoo
	Grobile alabana
	our Mother is a widow
P	Are you her sole support, or not?
(12) If so y	le support of widowed mother, state what amount you have given her per month prior to our enlistment, also reason she has no other support than yourself.
a	ou 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.
1	ou have a wife, or children, or a widowed mother who depends on you as her sole support, nave you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.
(15) Are	you insured?
	If so, in what Company?
	Have you made arrangements for payment of your Insurance premium
1.	If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.
1	
0	Officer Commanding.
Data M	or 201/9/6 O. Comd'g No. 2 Construction Battalien, C. E. F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931634	(Rank)
	lex. enlisted in
the 22 Constructi	
CANADIAN EXPEDITIONARY FORCE at	DSOR. Ont. on the 20th.
day of19 16.	
HE served in	
and is now discharged from the service by reason	of
THE DESCRIPTION OF THIS SOLDIER on the Description of the Description	Marks or Scars On right cheek year On stocked soars 1: Office I/c Disclosuring Officer istrict Depot 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

		2 2 .	
No(Rank)	Nar	ne O	
Unit	Ś	7 2 5 2	
Address on Discharge	17:	8	
Address on Discharge	8	7.0	
Character and Conduct	· N	070	
	77	ななど	
	20, 60	c C	
Former Occupation	0,0	7 7	
Special Qualifications of Value in Civil	Life 8 8	57	
	1000	17	
	020	A	
Medals and Decorations	4.0.0	0)	
	0.43~1	<u> </u>	
D 1	369		
Remarks	0 0 0	120	
	K. E. F.	Ø	
	49'		
Signed at	this	day of	19
		Name of Officer	
		Rank	

		Appointmen	t

500м,—9-16 Н. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 2 Can. Contrustions Coy Numerical position on roll of N. C. Os. Date of appointment to lance rank Date of promotion to \ present rank Qualification (b)...... Extended Re-engaged Record of promotions, reductions, transfers, Report Remarks casualties, etc., during active service, as retaken from Army Form B. 213, ported on Army Form B. 213, Army Form Place Date Army Form A. 36, or other From whom A. 36, or in other official documents. The Date official documents received authority to be quoted in each case 14/19 S.O.J. Deach Cota Lieutenant, Officer i/c Discharge Section 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.

Casualty Roun-Active Service.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks
Date	From whom received	casualities, 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	taken from Army Form B. 213, Army Form A. 36, or other official documents
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		the state of the s		Topeson.	State of the State
			period		
	the state of the s	Tental Allen	TO THE THE STATE OF THE STATE O		Hard A Committee
			a Proceedings		
			The Theory of Bankle		a control despesa materials de la control de

LAST PAY CERTIFICATE

Regimental No. 931634	Rank. Pte.	Name	Toulmin A	lexander.
Unit IZMENIE 2nd.	Con. Bn. who			
	. 191, to *Insert "discharged" or			
The following is a statement of t		ned from2-19	to	
the inclusive date of transfer or disch	large.			
DR.				Dr. Cr.
Bal. Dr. or Cr. from prev month Regimental Pay	ys at \$ IOc			40
Clothing Allowance Post Discharge Pay. Subs De *Other Credits				
Advances	25888		i5	. 00
Separation Allowance and Assigned P *Other Charges	ay Cheque No			
Balance on transfer or on discharge,	cheque No	23768	120	0.62
Total	*Give partic			. 190.1E0.0 Ap. 10.
A monthly stoppage of \$ Assigned Pay for the month of and Separation Allce. for month of	FEB 191 9 N IL. 191 }	(to) Assignee Mrs	s. M.Nichad	is.
(Address) . C/O Edwin B. 1 (†) Insert amount to be assigned, whether	Long. 214 Arch S	(\$) Insert "not" if amount		
	ON TRANSFER OF	AN OFFICER.		
Outfit Allowance of \$	has been paid by Paym	aster, Military District	No	
REMARKS:— State (1) date of enlistment	20-II-I6		married or single	·
(2) Separation Allowance, entitled or		3) Reason for discharge	ge	
(4) Authority for discharge or trans	sfer. D.D. 4-I9 -T	365.		
NOTE.—S.A. & A.P. Card and Inde	x Card (M.F.W. 71) are to	accompany Last Pay	Certificate on trans	fer.
I have carefully examined this strong soldier. Date	nks (vide Article 122-180 and 141) be made out in triplicate. Copies	Financial Instructions, C.E. will be disposed of in accor	F., 1916.	AIN PAYMASTER for Military Dist. a Paymaster. as laid down in Routine
(C) For purpose of discharge it is to l	ave been made, the words "on tran to Post Discharge Pay, Last Pay	py to accompany discharge p sfer or" will be deleted.	papers, and one copy for	or retention as a record.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMO	UNT	Signature of Officer Making Payment.	
Date	Trace	or other awareness	Dr.	Cr.		
••••••						
		••••••				
• • • • • • • • • • • • • • • • • • • •		***************************************				
***********		••••••••••				

17

Class " A " No 248/5] ISSUED

Proceedings on Discharge.

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

No. 931634
Rank Pte.
Surname TOULMIN, Christian name Alex. NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.
Corps (Squadron, Battery or Company) #2 Construction Bn.
Date of discharge March 12th.,1919.
Place of discharge MONTREAL, Quebec.
1. DESCRIPTION AT THE TIME OF DISCHARGE.
Age
Complexion Dark Eyes Brown on right cheek Hair lack near eye. Linear scar Trade Intended place of lst National Bank residence (To be given as folly as practicable.) Two curved sears lack on right cheek near eye. Linear scar 2" on stomach region.
2. The above-named man is discharged in consequence of R.O.# 1420.Para (c).Cat. "A".DEMOB.
Authority for discharge.
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.)
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.)
tificate and tific
The discharge of the above-named min is hereby continued.

M. F. B. 218.

200M.—5-18. H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of	
in Discharge.	
List of Discha	ree Documents.
proceedings should be accompanied by	When forwarded for confirmation these
ed on fourth page."	the documents specifi
No reference to G. C. Badges is to be made	on either the discharge or character certificate.
	nan d
Sea to story Selection ()	C Comm
6. Medals and Decorations	To be copied by the Commanding Officer on to the parchment Discharge Certificate.
Applications will start to the first for	pied b
Tell meters and note or to the	be co
A spire of the following the first of the fi	Aig. 3
7. His account is correctly balanced, and signed	by the Officer Commanding his Company, (Squadron
or Battery, and I have impartially enquired into Regulations.	o all matters brought before me in accordance with
TME OF DISCHARGE.	
(Place)	
man Papel 6990 and St. 35 - 44	Age years 9 months
(Date)	Commanding
8. Certificate to be signed b	by the Soldier on Discharge
THE OF THERE I THE TWO	A CAMPAGE A A A SINTE
to the present date, subject to the reservation have received my permanent discharge certifi	Allowances and Clothing, and all just demands, up as of the claims noted on the third page, and that I cate.
(Place) MONTREAL, Quebec.	Or Tanky (Signature of Soldier.)
	(Signature of Solater.)
March 12th., 1919.	(Signature of Witness.)
When a soldier is absent through illness or any	other cause and it is not desirable to forward these
when returned, should be attached here.	ript copy should be sent for the man to sign, and
	agamineto not garronigue.
	of a Soldier who takes his discharge vn request.
I hereby declare that I do of my own free will red	quest to be discharged from His Majesty's Service.
r hereby declare that I do of my own free whitee	quest to be discharged from This Majesty's Service.
	(Signature of Soldier.)
10. Statemen	t of Service.
	ch the Record of Service is completed)yearsdays.
nt in civil ate. (Vide para 332, Jr. R. & U.,	
	Totalyearsuays.
11. Confirmation	n of Discharge.
The discharge of the above-named man is hereby	confirmed.
	A.11
(Place) MONTREAL, Quebec.	KINUS MAN
	gnature) Lieutenant,
(Date) March 12th., 1919.	Officer I/c Discharge Section, District Depot No. 4.

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.)

NO RESERVATIONS.

er Foulmin

Attention Paper Milkin Form W123	
Particulars of Restrict of the W. 134	
Proceedings on Discharge Bu 218	
	Field Conduct Sheet cas graph of W. 178
bank in her reject one only afficient to settled; all a ?	Copies of Convictions, by C. P. in NS.
approval, the disduster documents will consist of	Med. Hist. Shoat. Million form B. 413
	Casualty Form W. 54
ANT TA STATE STATE (a) Proceedings on Discharge	Medical Report for Invalids [117] [1 18 [22]
	Thorm of Williams Sevens Car w. 82
	SOrdy it discharged "Medically unfit."
	Cody if this has been been by areas 5
the based of biods molesid	Documents not accompanying t

t hereby certify that the following documents are unobtainable

Anthorn for National

Officer Com

a and character

Carrier Car Walle III

of a man discharged by parchas

mount of same is to be noted/hercon.

Reservations referred to at Para. 8.

List of Discharge Documents.

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

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. MEDICAL HISTORY SHEET. 43/634

			o svecme	Alex	
(vamined)	day of November 1916	Appr	oved by	Statio	2
(City or Town	Bisbee,		Rank (Captain, A. M. C.	M.O.
	rizona, U. S. A.		Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.	
Apparent age 34yr	s. 1 Mo	and the same of th	Unit.	TOTAL AND MANUAL DIRECT.	
Prade or occupation	Laborer				M. O.
leight 5	Feet 8-1/2 Inche	es.			_M.O.
Veight	Lk	os.	1 1 1 N	1	M.O.
(Mi	nimum 34 inche	es.			M.O.
Chest measurement { Ma	aximum expansion 36 - In/12	es			M.O.
hysical development	Good		1		MO
	None				
(Ar	m Right. Left.				IVI.O.
Vaccination Marks Nur	mber None	Date. 3/3/	Result.	Vaccinations.	
When Vaccinated last	Never	1/11	2541	38)	M.O.
(a) Marks indicating	congenital peculiarities	or			M.O.
revious diseaseN					MO
		Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC	_
					M.O.
		4/3/17	XIGHT O	Dan Murray	м.о.
Inlisted on 20th day	y of Novmeber	19	2999 0 2999 0 1 6 at W1	Dau Murray	M.o.
Inlisted on 20th day		19. NUMBER.	2999 1 2001 1 1 6 at Wi	ndsor, Ont.	M.O.
inlisted on 20th day				ndsor, Ont.	M.O.
7				ndsor, Ont.	M.O.
oined on enlistment		NUMBER.	Habits	ndsor, Ont. DATE.	M.O.
oined on enlistment	CORPS. REGT'L REGT'L Betta 6.E.f. 93163	NUMBER. 34 GED BY	Habits	ndsor, Ont. DATE.	М.О.
oined on enlistment	CORPS. REGT'L 2 Cautractus Bella 6E, 1. INED OR DISCHARO	NUMBER. 34 GED BY	A MEDIO	ndsor, Ont. DATE. 20/11/16 CAL BOARD. RESULT. Fit Q.J. Sturr	M.O.
Fransferred to EXAM STATION.	CORPS. REGT'L 2 Cautractus Bella 6E, 1. INED OR DISCHARO DATE. NOV 20, 1916	NUMBER. 34 GED BY	A MEDIC	ndsor, Ont. DATE. 20/11/16 CAL BOARD. RESULT. Fit Q.J. Sturr	M.O.

DATES OF 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 ineculations. Date of Arrival Number of Signature Admission into Hospital. Discharge from Hospital. STATION. at the DISHASE days in of Medical Officer. Station. Day Month Year Day Month Year Name Christian Toulmin Surname

			5	Medic	cal	Exa	mination	upon	leavi	ing	the	Sierv	ice	+/
4	of	an					general		-					1
ers	lea	ving	the	Service	ироп	being	found unfit	for genera	l servi	ce b	y a Mei	ical B	oard, ar	nd Soldiers

	of an Officer fit for general service or a Soldier fit for duty.
P	Officers leaving the Service upon being found unfit for general service by a Malical 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.
l E	Rank Me Name Toulmin Survame Hereandly
	Juit or Corps (If a soldier) Regtl. No. 93/634
	Bisher Rax 1. Son, date IS 28th 1866
	ignature (for identification)
	The examination is to be made jointly by two Medical Officers.
1.	PHYSIQUE—Any deformity, maiming or lameness? If so, describe.
	Weight
	5 ft. 7 ins.
2.	NUTRITION AND DIATHESIS ?
	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 ?
	wind the state of
4.	RESPIRATORY SYSTEM.
5.	HEART P
	Abnormal Sounds?
	Abnormal Size?
	Pulse Rate? 70 Intermittence or irregularity?
6.	ARTERIES.—Any hardening?
7.	DIGESTIVE SYSTEM P
8.	GENITO-URINARY SYSTEM P
	Urinalysis—s.g.?
9.	or any other part?
10.	. Is there any evidence of
	impairment of health or physical condition not mentioned above? If
	so, describe.
11	. Opinion as to the health and physical condition
	of the one examined?
1	Examined at Kriege Park Signed De Soine Oft MO.
	Date Signed Signed MO
1	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.
1	O.C. Concerned for the Officer of Soldier to be sent office a minute bound for its

: Gulfport mississippi usa

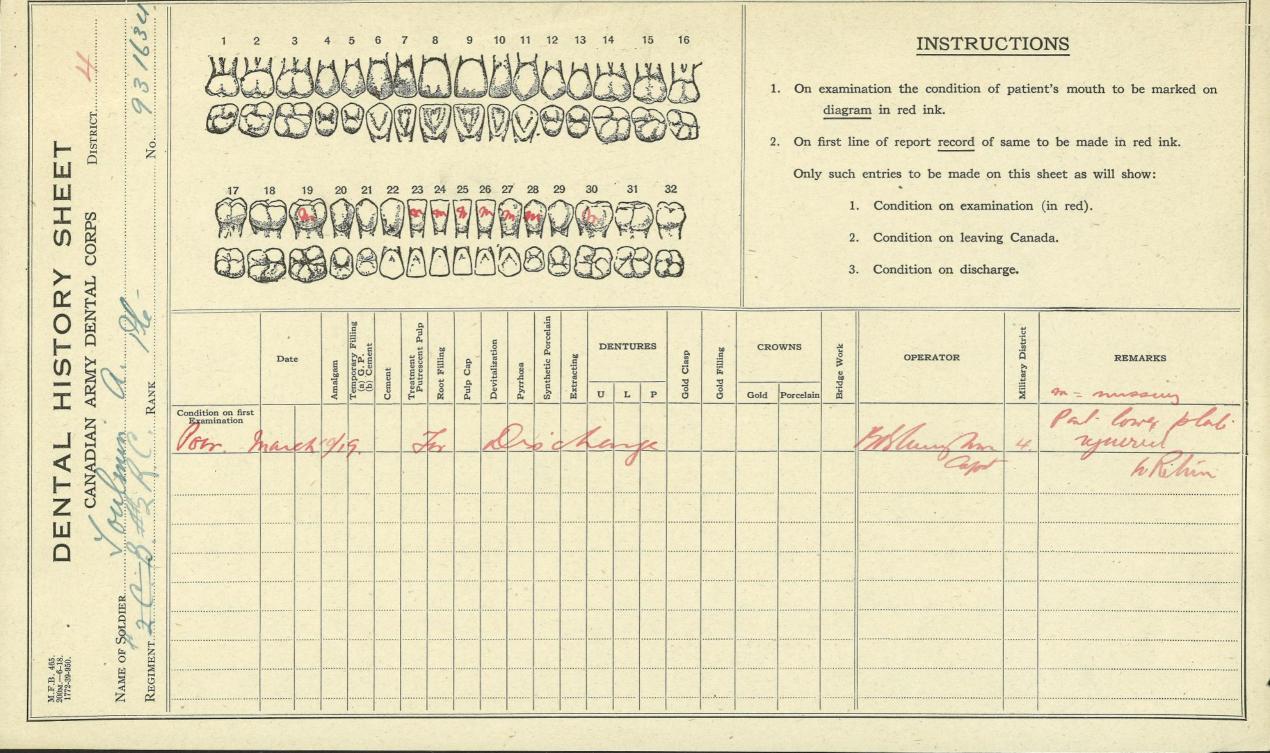
MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

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.

Ur	it or Corps	alex Birthplace arizona u
	(Examination of Officer or Other Rank (st	ripped) to be made by one Medical Officer).
1.	GENERAL DESCRIPTION:	Comments in the second of the second of
	Physique Cord	Heightftin. Colour of Eyes
	Nutrition Sold	
	Pulse 82	Identification marks, scars, or deformities. (Give cause and date of origin).
	Condition of arteries food	
		Z cerned sous 11/2" on right relar eye - linear sour 2" on stomachy
	Vision Rt 4.0 Left 40	linear ocar z" on stomachie
	Hearing (conversational voice) Rtft.	The whoe to be and the capacity
	Left 3.0ft.	
Op	inion as to general health and physical condition	food
2.	Has Officer or Other Rank ever suffered from, o (Answer "Yes" or "No"). (Subjective evidence	r has he now, any affection of the following system may be sufficient in certain cases.)
	Nervous System Genito Urinary S	ytem Cardio-Vascular System
	Special Senses	ystem Respiratory System
		Digestive System
	Osseous and Joint System Any other general	l condition

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS	
Examined at Municipal (Overseas)	STATE OF THE STATE
Date	Thillp Allewelle at
Date	a
I hereby certify that I have read, or have heard reacondition; that I find it correctly stated; and that I having any other affections from which I suffered, either pri	e not withheld any information concern-
Signatur	ex a Torslynin
(If not satisfied, M.F.B. 227 will be comp	leted by Medical Board.)
Examined at(Canada)	
Date Signe	d
I hereby certify that I have read, or have heard rescondition; that I find it correctly stated; and that I have ing any other affections from which I suffered, either pr	not withheld any information concernior to, or during service.
Signatur	e
(If not satisfied, M.F.B. 227 will be completed)	
(This space to be used, if necessary, in connect	ion with Section 3 overless only
(,	The second of overload, only.)



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

Canadian Printing and Stationery Services, London

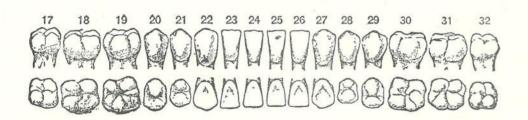
NAME OF SOLDIER (Block Letters)

REGIMENT # 4 V. V. 19 OW.

No. 93/634

Date of Examination in England 3-1-19

Date of Examination in France.



DIRECTIONS TO DENTAL OFFICERS

- This form will be made out for each individual at the time of Demobilization in England or France.
- Figures as per chart will be used to designate teet// concerned.
- 3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

- 1. FILLINGS
- 2. Extractions
- 3. Crowns
- 4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

11 23,24,26,26,27,28,29

'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

Wo Much Capl

Signature of Dental Officer_

REG. NO. 93/634 NAME Youlmin, a.
(CIDNAME FIDEY)
RANK Ote CORPS NO. 2. Con. Ballu.
AGE 35 SERVICE 1/12.
NAME OF HOSPITAL Military PLACE Loudon
DATE OF ADMISSION /2 / /2 / 6
DISEASE TONOTTHOLA
DISCHARGE S. 1. 14.
OPERATION
DISCHARGED TO DUTY LLS
TRANSFERRED TO.
DISCHARGED BY MEDICAL BOARD

REMARKS				
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-	*			

		*		

NAME V	sulm	// / / .	REGT'L NO. 93/634 H. Q. FILE NO. 649.
RANK AND	CORPS A	v. 2 Con. A J (Keg)	Follows
NO. DATE		NATURE OF CASUALTY	No. Follows
	100000000000000000000000000000000000000		FOLLOWS
L. L. 20497—	M. & D. 7908		M. F. W. 42-50m5-17. H. Q. 1772-39-893.

LIST No. HOSPITAL REMARKS

NAME Paulmin alex. No. 931634. RANK Pte.

no 2. Construction Battalion.
M.D. 6 J.O.S. 20-11-16 UNIT D.O. 87. 25-11-16

PAID PAID	OR	PROMOTIONS, TRANSP	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.			
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FORM R 149 7106--250m--7/2/17 Reg. No. 93/634 Name TOULMIN Next of Kin Movement Date Casualty

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

1 1

Form R. 149	Constitution of the second	tlex	· invited			
Nam	e Toulmin	Rank Re.	R	eg. 1	Vo. 93	1634.
Unit	2ccen					
Next	of Kin U.S.A.				operation is an	
Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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SURNAME. Youlmin	4 CARD NO.
CHRISTIAN NAMES alex	Demobod 4
REGL. NO. 93/634 RANK Pt.	Does.
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FORMER CORPS U.S. army (4 yrs.)	
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Hichals, Ims. Millie	
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ADDRES Herrill, Hass, U. S. C. 214 au	d St-
Little Rock art. 4	0 0.
5. a. a. 9. 2/5/17, 22/1/18.	
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PLACE OF ATTESTATION Windson, one, DATE	Sept: 28 1882 How. 20 4- 1916
C/C. 23/2/	A CONTRACT OF THE PARTY OF THE
	-8-16. H. Q. 1772-39-539.

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	MARRIED	SINGL	E	yes.	WI	DOWER		11/
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			DESCRIE					
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	HEIGHT	5-	FEET		82	INCHES		
	CHEST MEASUREMENT	362			EXPANSI	ION	22	INCHES
	COMPLEXION Lloub		EYES B	ronn		HAIR B	Pack	
	DISTINGUISHING MARKS	Irone						
	MEDICAL EXAMINATION. P	LACE U	linds	or, 5,	nli.	DATE HO	, 20	1916
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	n L 11		0 1	2 0	-			, ,

Bresent address 256 Bourdon St., Debroit, Mich. S.a.

FORM D.M.S. 1300

REG. No.

Toulmin a.	931634
RANK UNIT	Co. TROOP BATTY.
HOSPITAL N. S. (260	DATE OF ADMISSION
· tura H. La'l	Jour Jura Hosp. 1.10.17
10. G. Rouse 1	2/. 7. //8 Hosp.
3,	Hosp.
4.	Hosp.
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3.	
DISPOSITION	(A): 6 10 170 TT
6. L. 13 . 10 14 a35.	Dis 8. 10. 17DATE " 27. 7. 18 REMARKS
· 18.10.14 Q 3 9	
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***************************************	A M.D. 2 Dept.

Boh. of D.G.M.S. O.M.F.C. Longen

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
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2,		
3,		
4,		
5,		
6,		
7.		

931634 Christian Name Units 60 P 66 Theatre of War.... Date of Service 17-5-/7 Remarks Latest Address..... 200m-2-21.

DE BR. MAR & 1826

*Name TOULMIN	Alex.	Rank	Regtl. No	931634
Original 2nd Con	Present D.D.#4 M. or S.S Age		Fyle Depot	19-1-365
Port, ship, and date	of arHalifax N.S. S.S. H.M.T	. CANADA"22-2-19		
Next of kin. M. N	ichols, 356 Texas St. Mobile,	Ala. (M)		
Address on leave		4		
Address on discharg	e			
Transportation issu	Yes Character on discharge			
Previous occupation	Laborer Date and place enlistment.	of Nov. 20-16 W	indsor Ont	•
Diagnosis		Date of Medical Boards		
Date.	Remark	ks		Pt. 2 Order No.
27-2-19	T.O. S. from 0/S 14-2-19	Posted to Cas.	Coy. 26-2-	19
	Fur. W/S to 11-3-19			
				58
				/

^{*—}Name will be given in full; surname first.

14-3-19	SOS.discharge R.O.1420.Para.C.demo.b eff.12-3-19	#73
	Cat."A"	

M.F.W. 192 150M-6-18.

1772-39-1243.

MILITIA AND DEFENCE ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Millis Michols

Care Edwin Blang Horrid

Address And Horrid

Gulffort Marrill

Lauth non Roll 27 is. Miss u.s.a

Rate 1500 APR 1917

a Corps

By Whom Assigned Joulmin. U.

Regtl. No. 93/634

Rank Pla.

no h. bow ou

PAYMENTS

	Month	Year	Cheque No.	Amt.	REMARKS	
	Aug.	1914				
	Sept.					
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	March					
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	Dec.					11.
	Jan.	1916				
	Feb.		A SILVER IN CONTRACTOR			
	March					

M. F. W. 12a. 50m.—7-16 1772—39—819.

ASSIGNED PAY

Sheet No. 2. (Assignee)

July

is Ticholo CONTINGENTS

MENTS. 9

Name of Soldier

34. no 2. Bu Du

L. L. Job 5470—Req. 6888.	(/	PAYIM	ENIS.	10. 93163	74. no 2. 68	u Du	
	Month.	Year.	Cheque No.	Amt,	1500	Remarks. APR	1917	
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	May							
	June							
	July							
	Aug.							
	Sept.							
	Oct.							
	Nov.							
	Dec.							
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	Feb.							
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	Oct.	Z	115006	15			de la	
	Nov.	F	5-3328	7 15				
	Dec.	X	60501	15-	135-00			
	· Jan.	1918						
	Feb.							
	March							
	April							
	May							
	June							
				Maria Company of the			The Land of the La	4

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier_____

	Month.	Year.	Cheque No.	Amt.	Remarks,				
	Aug.	1918							
	Sept.								
	Oct.								
	Nov.			*					
	Dec.								
	Jan.	1919							
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	Nov.					2000年 1000年 100			

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE	OF SE	PARAT	ION AL	LOWAN	CE

RATE OF ASSIGNMENT								

Date of Assignment

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.			Name	
Rank Promoted	Reverted	Discharge	Address	
Soldier's Name			Change of Address	
Battalion			1	
Beneficiary			2	
Relationship			3	
Address			4	

	Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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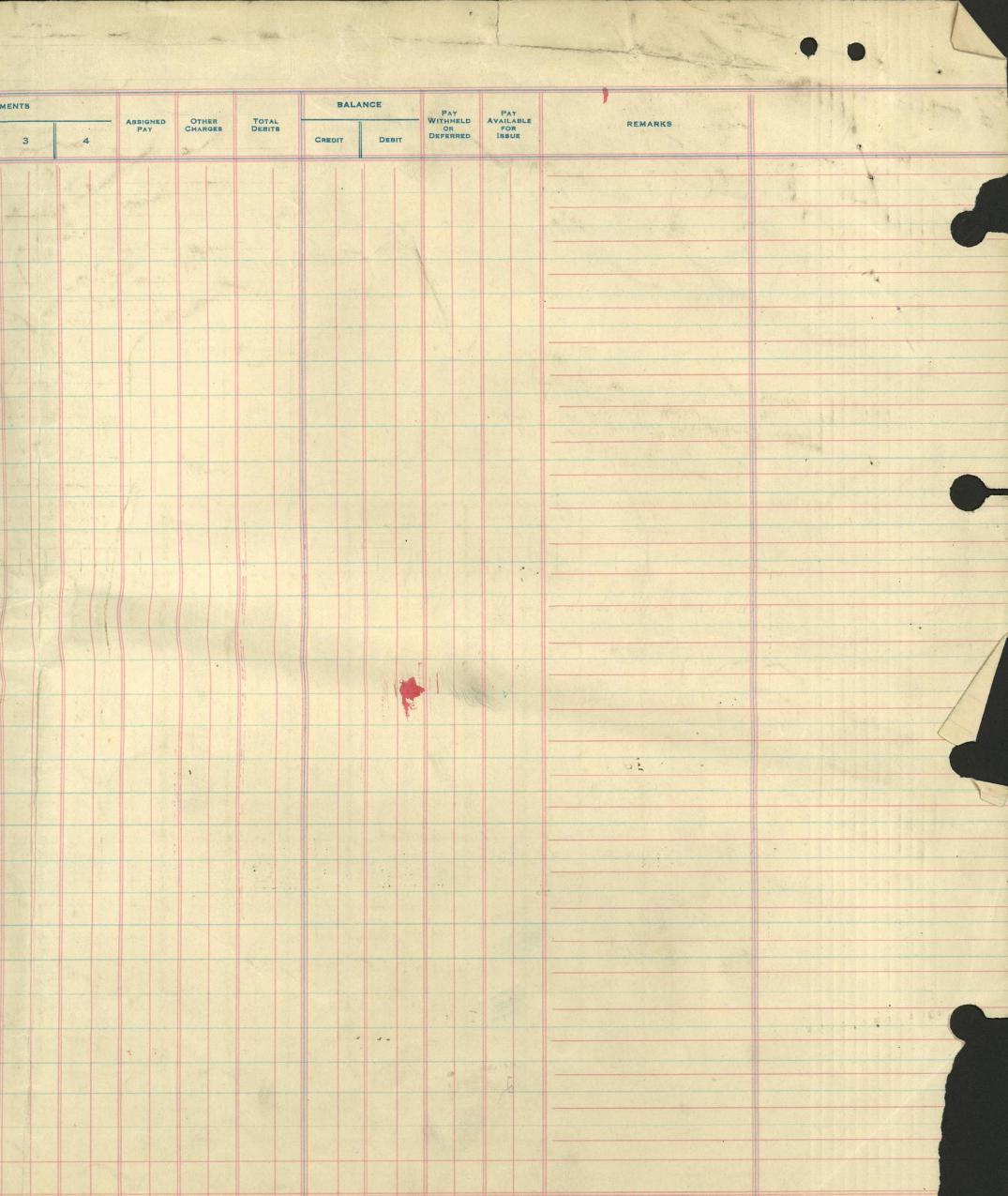
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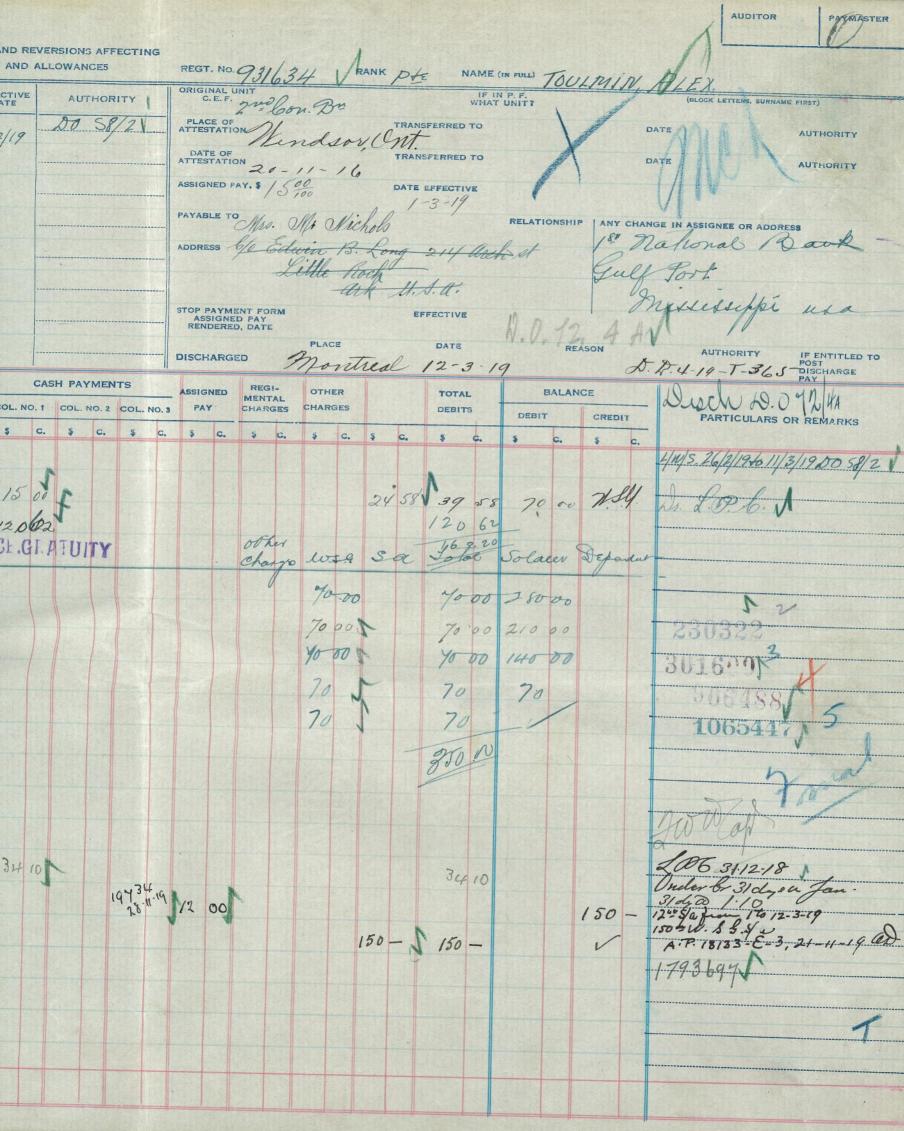
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