REGIMENTAL DOCUMENTS

NAME ALDRIDGE. Herman REGT. NO. 736 327. UNIT 113th Battn H. Q. FILE NO. 3945

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	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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1	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
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W. 2589
100M-11-19
1772-39-1377

ORIGINAL

ATTESTATION PAPER.

No. 736327

Folio. Original

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Aldridge
1a. What are your Christian names? ..... Herman
1b. What is your present address? ..... Cardston, Alberta
2. In what Town, Township or Parish, and in what Country were you born? ..... Cardston, Alberta
3. What is the name of your next-of kin? ..... William Aldridge
4. What is the address of your next-of-kin? ..... Cardston, Alberta
4a. What is the relationship of your next-of-kin? ..... father
5. What is the date of your birth? ..... July 4th 1893
6. What is your Trade or Calling? ..... Engineer
7. Are you married? ..... no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ~~No~~ ..... Yes
9. Do you now belong to the Active Militia? ..... no
10. Have you ever served in any Military Force? ..... no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Herman Aldridge, 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.

Herman Aldridge (Signature of Recruit)

Date January 11th 1916. [illegible] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Herman Aldridge, 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.

Herman Aldridge (Signature of Recruit)

Date January 11th 1916. [illegible] (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 Cardston this 11th day of January 1916.

H. H. MacDermott (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Aldridge, Herman on Enlistment.

Apparent Age 22 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 11 ins.

Chest measurement: Girth when fully expanded 38 ins.; Range of expansion 4 ins.

Complexion Dark

Eyes Grey

Hair dark brown

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic
- Jewish
- Other denominations (Denomination to be stated.) Later Day Saint

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).

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 January 11th 1916.

Place Claresholm, Alta.

H. E. Duce
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.

Herman Aldridge 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.

A. E. Sayre Jones Lt. Col.
(Signature of Officer)

Date Jan 17 1916.

ORIGINAL

MEDICAL HISTORY SHEET

Surname Aldridge Christian Name Herman

Examined { on 11th day of Jan 1916 / at Cardston, Alberta

Approved by H. E. Dice

Rank ..... M.O.

Birthplace { City or Town Cardston / County Alberta

Apparent age 22 yrs. 6 mos

Trade or Occupation Engineer

Height five Feet Eleven Inches

Weight 150 lbs Lbs

Chest Measurement { Minimum 34 inches / Maximum expansion 4 inches

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm ~~Right~~ none Left / Number

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-engagement
		M. O
		M. O.
		M. O.
		M. O.
		M. O.
		M. O.

Date	Result	Vaccinations
2/5/16		W. W. Beeman M. O.
		M. O
		M. O.

Date	Result	Anti-Typhoid Inoculations, Etc.
13/3/16	Reac-	[illegible] M. O.
11/4/16	"	[illegible] Reed M. O.
		M. O.

Enlisted on 11th day of January 1916 at Cardston Alta

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	113th Bn C. E. F.	736327		Jan 11th/16
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313

H.Q. 1772-39-439.

Surname Aldridge Christian Name Herman

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				

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 ..... 113th. O.B.C.E.F. .....

(2) Regimental Number ..... 736327 .....

(3) Full Name of Soldier ..... Aldridge, Herman .....

(4) Place of Birth ..... Cardston, Alberta, Canada. .....

(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) Have you any children ? .....

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

Also their names and ages .....

M. F. W. 67.
200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address .....

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

If so, state name and address.....

.....

(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 ?.....

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.

.....

Officer Commanding.

Date.....

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

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(2) Regimental Number ..... 736327 .....

(3) Full Name of Soldier ..... Aldridge, Herman .....

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(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) Have you any children? .....

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

Also their names and ages .....

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address .....

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

If so, state name and address.....

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(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.

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(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.

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.....

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(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 ?.....

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.

.....

Officer Commanding.

Date.....

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				

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 113th O. Battalion C.E.F.

Regimental No. 786327 Rank Private C. E. F. Name Herman Aldridge

Enlisted (a) 11-1-16 Terms of Service (a) Period of war Service reckons from (a) 11.1.16

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

Extended Re-engaged Qualification (b)

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				
26-8-16	113th Bn	S.O.S. as "Deserter"	Sarcee Camp.	18-7-16	pt. II Order # 206.
22-8-21	"	" pt. II O. # 206 d/26-8-16 amended to read:- Alleg. absent from 18-7-16, by C. of A. held 14-8-16, is S.O.S. as Deserter w/e.	Issued at Ottawa	14-8-16	after Order # 12.

H. Langman
Dr or D. of R.

No. 736327 RANK Pte. NAME Aldridge Herman

T. O. S. 11-1-16
DO. 140 of 17-1-16

UNIT 113th Battalion C. E. F.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan. 11	1916 Jan. 31	✓		
Feb.		✓		
Mar.		✓		
Apr.		✓		
May.		✓		
June		✓		
July		✓		
Aug.		n.		
Sept. 1	Sept 1	n	SOS. 18-7-16 deserter	Sept. Paylist
				UNIT SAILED SEP 25 1916
			a/c not closed	n.