S

REGIMENTAL DOCUMENTS

NAME ANDERSON. Arni REGT. NO. 2382691 UNIT 1st Depot Bath M. R. H. Q. FILE NO.

H

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

C

H

W. 2589
100M-11-19
1772-39-1377

ORIGINAL

No. 10 M. D. First Depot Battalion Manitoba Regiment

Regtl. No. 2382691

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname: Anderson
2. Christian name: Arni
3. Present address: Bifrost, P.O. Manitoba, Canada
4. Military Service Act letter and number: 503526
5. Date of birth: September 15th, 1896
6. Place of birth (town, township or county and country): Arborg, P.O. Manitoba, Canada
7. Married, widower or single: Single
8. Religion: Lutheran
9. Trade or calling: Farmer
10. Name of next-of-kin: Arni Yefusson
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Arborg, Po. Manitoba, Canada
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: Nil
15. Medical Examination under Military Service Act:—

(a) Place Winnipeg, Canada (b) Date May 2nd, 1918 (c) Category A 2.

DECLARATION OF RECRUIT

I, Arni Anderson, do solemnly declare that the above particulars refer to me, and are true.

Arni Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	22	yrs	5	mths.
Height	5	ft	11	ins.
Chest measurement	fully expanded		40	ins.
	range of expansion		3	ins.
Complexion	Ruddy			
Eyes	Blue			
Hair	D. Brown			

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

Nil

D. E. Brulin Major for
Commanding, 1st Depot Battalion Manitoba Regiment
O. C. Depot Btln.
Regt.

Place Winnipeg, Canada Date Many 2nd, 1918.

MAY 2 - 1918

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

Discharged Manitoba Regt. 13/1/19

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

11671

This is to Certify that No. 2382691 (Rank) Private

Name (in full) Arni Anderson enlisted in

the 1st Depot Battalion Manitoba Regiment

CANADIAN EXPEDITIONARY FORCE at Winnipeg Canada on the 2nd

day of May 1918

HE served in Canada

and is now discharged from the service by reason of Demobilization R.O. 1357

Conditional Leave (Draftee) C.O. 19 9/1/19

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

Age 23 yrs 3 mths

Height 5 ft 11 ins

Complexion Ruddy

Eyes Blue

Hair D Brown

Marks or Scars

Nil

ORDERLY ROOM
JAN 26 1919
1st DEPOT BATTALION,
MANITOBA REGIMENT

Arni Anderson
Signature of Soldier

W. Rawlinson Major for
Issuing Officer
Commanding, 1st Depot Battalion Manitoba Regiment

Rank

Appointment

Date of Discharge January 13th 1919

Signed at Winnipeg Canada this 13th day of January 1919

in Military District No. Ten

File Reference No. 10-M.D.-44-A.503

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Single, Canadian, Farmer, Lutheran

M.S.A. 15.

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 Anderson Christian name Arni

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 593526 JC.

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

4. Address (including street and number, if any) Bifrost P.O., Arborg Stn, Manitoba, Canada

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 2nd day of MAY 1918, by the undersigned medical board sitting at Winnipeg, Canada

5. Age as stated 22 Years 5 Months. 6. Apparent age Years Months

7. Height 5 Feet 11 Inches. 8. Weight 175 Pounds.

9. Chest measurement { Minimum 37 Ins. Maximum 40 Ins. } 10. Complexion Ruddy { Eyes Blue Hair D Brown

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

13. Number of vaccination marks { Right arm 0 Left arm 1 } 14. When vaccinated last 1915

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

16. Slight defects but not sufficient to cause rejection

Vision R. Eye 20/20 L. Eye 20/20 Hearing R. Ear ✓ " L. Ear ✓

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 A II

J Wardlaw President.

A Thaux Capt Member. W J Grant Member.

Signature of Man Arni Anderson

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 2nd day of May 1918 at Winnipeg, Canada

	Corps	Reg'tl Number	Habits	Date
1st Depot Batt. Joined on enlistment	Manitoba Regt.	2382691		2-5-18
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

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

Surname Andaraan Christian Name Arnd

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 10

Name of Soldier A. Anderson

Regiment LDBM

Rank Pte.

No. 2382691

M.F.B. 465
150M--10-18
1772-39-950

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report, record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge from the Service.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	Prophylaxis	OPERATOR	Military District	REMARKS
	1919.																						O.K.
Condition on first Examination																							Cavities
Jan. 7.																					[illegible]		Extractions

FEB 1 1919

ORIGINAL

M. D. 10
No. 29

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 2382691 Rank Pte. Name Anderson A

Corps I D B M who was* discharged

On 13.1.19 191...., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 7.1.19 191...., to 13.1.19 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	20	20
Advances by Cheques } No.			Regt'l. Pay 7 days at $ 1 c.	7	00
} No.			Field Allow. 7 days at $ 10 c.		70
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No. 11647	27	90	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	27	90	Total	27	90

*Give particulars.

A monthly stoppage of $ 15.00 (†) has not (‡) been paid on account of Assigned Pay for the month of Jany 191 9 and Sep'n Allce. for month of nil 191... (to) Assignee Arne Mrs. I. Yegfusson

(Address) Befrost Man.

(†) 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.

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

REMARKS:—

State (1) date of enlistment 2.5.18

(2) if married and if a Separation Allowance Card has been submitted no no

(3) cause of discharge R.O. 1357 authority B O 11

(4) authority for transfer

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 January 24th. 1919

Place Winnipeg Man.

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.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

Bifrost, Man.

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2382691 Rank Private Surname Anderson
(Given name in full) Arni.

Unit or Corps 1st Depot Batt. M.R. Birthplace Canada.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 5 ft. 11 in. Colour of Eyes Blue

Nutrition Good

Pulse 76

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Nil

Opinion as to general health and physical condition Good Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No. Genito Urinary Sytem No. Cardio-Vascular System No.

Special Senses No. Integumentary System No. Respiratory System No.

Disturbance of mentality No. Muscular System No. Digestive System No.

Osseous and Joint System No. Any other general condition No.

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

10 M. D. JAN 7 1919 HEADQUARTERS WINNIPEG

Asst Director Medical Services No. JAN 7 1919 M/D. Dist. No. 10, Winnipeg.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Winnipeg, Man (Canada)

Date January 7th, 1919. Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

APPROVED

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

JAN 7 1919

FOR A. D. M. S., M. O. No. 10
WINNIPEG, MAN.

[OVER]

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

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st. DEPOT BATTALION, MANITOBA REGIMENT.

Regimental No. 2382691 Rank PRIVATE C. E. F. Name Anderson Arni

Enlisted (a) 2/5/18 Terms of Service (a) C.E.F. Service reckons from (a) 2/5/18

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) CIVIL. Farmer MILITARY

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				
9/1/19	A.A.G.	Discharged Demobilization R.O. 1357. C.S. (Drafter)			

W. Bedford ..... Major for
Commanding, 1st Depot Battalion Manitoba Regiment

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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				

No. 2382691 Name Anderson A Sqn., Batty., or Company Corps Date of enlistment 2/5/18 G.C. Badges Service or Proficiency Pay

Date of last entry in Company Conduct Sheet No. and date of last drunk Period not reckoning towards freedom from extra fine Sheet No. one Signature O.C. Company, etc. Character

Major
O.C. "B" Co., No. 1 Depot Bn., Man, Regt

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
				Discharged Demobilization R.O. 1357. C.S. C.O. 7 of 9/1/19 eff. 13/1/19.					

Major 1st
Commanding, 1st Depot Battalion, Manitoba Regiment

M. F. W. 178 (A.F.B. 122)
150M—1-18—1772-39-1211

C.L.F.O. 192

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

AP

B. COY.

M. F. W. 71.—700 M.—5-16.
1772—39—961.

NAME

XX ANDERSON. Arne

REGIMENTAL NO. 2382691

RANK Pte

ENLISTED AT 1ST DEPOT BATT'N MANITOBA REGT WINNIPEG, MAN.

PROMOTIONS, &c. AND DATE

DATE 2/5/18

IF SERVED PREVIOUSLY, STATE UNIT, &c. No

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Arne Yegfuson

RELATIONSHIP Father

ADDRESS OF Befrost, Manitoba

ASSIGNMENT OF PAY $ 15.00 C. TO Mrs Ingbjgurg Yegfusson

ADDRESS Befrost. xxxfarmx, Manitoba

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

B0123

B

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II, D. O. No	 DATE	REMARKS IF IN HOSPITAL, NOTE NAME &c.
Trans. "N" to "B" Coy	125	5-5-18.	Eff. 4-5-18.
C.L. Trans Sec D of U Co	247	4-9. 18	From 23.5.18
Reports from C.L.	7	7.1. 19	6.1.19
Sos. RO 135-7 (CL)	11.	11.1.19	13.1.19

Copy

S. }
A. }

Separation Allowance and Assigned Pay

CANADIAN EXPEDITIONARY FORCE

A. }
P. }

1. Name in full (Surname first) Anderson Arne
2. Rank and Regimental Number 2382691
3. No. of Battalion or Corps
4. Date of Enlistment 2-5-18
5. Full name of Wife ..... or

   Widowed Mother ..... or

   Children's Guardian
6. Address
7. State ages of Children : Girls under 17 ..... Boys under 16
8. With whom do your Children reside ?
9. Amount of Assigned Pay 15.00 10. Name of Assignee Mrs Ingbjurg Mother
11. Address Belfrost Man

12. From what date is Assigned Pay effective? 2-5-18

13. Date of Marriage?

14. Date Marriage Certificate examined by Paymaster

15. Have you made a previous Claim for Separation Allowance? Give particulars

16. Is Separation Allowance being paid on your Account to any person?

17. Were you at the time of enlistment an employee of the Local or Dominion Government? In what capacity, and in what place?

18. Will you be in receipt of a salary as such, while serving? If so paid, how much per month?

19. Name of Corps prior to enlistment in the C.E.F.

I hereby certify that the above is a true statement.

Name of Soldier.

Signature of officer forwarding this application,

Unit

Date

S. A. Paid by From To

Paid by From To

M.F.W. 130.—200M.—4-18. 1772-39-1147

~~N~~ ~~B~~ N

M.S.A? . 503526JC

REG. NO. 2382691 NAME Anderson Arni

ENLISTED AT Winnipeg, Canada DATE 2/5/18 CATEGORY A 2

PREVIOUS SERVICE None NATIONALITY Canadian

CLASS OF ENLISTMENT Draftee OCCUPATION Farmer

WHEN ORDERED TO REPORT 2/5/18 WHERE Winnipeg, Canada

MARRIED OR SINGLE Single RELIGION Lutheran

AGE 22 - 5 HEIGHT 5 - 11 WEIGHT 175

COLOR OF HAIR D Brown EYES Blue COMPLEXION Ruddy

CHEST MEASUREMENT, NORMAL 37 EXPANDED 40

MAME OF NEXT OF KIN Arni Yefusson, RELATIONSHIP Father

ADDRESS Arborg, P.O. Manitoba, Canada.

REMARKS Ro 173. 175 20 B 145 CL 142 CC NdH .711

11 of 11-1-19 S.S. R.O. 1357.

S.
A.

Separation Allowance and Assigned Pay
CANADIAN EXPEDITIONARY FORCE

A.
P.

1. Name in Full (Surname first) Anderson Arne
2. Rank and Regimental Number 2382691 Pte
3. No. of Battalion or Corps 1ST DEPOT BATT'N MANITOBA REG'T WINNIPEG, MAN.
4. Date of Enlistment 2-3-18
5. Full Name of Wife ..... or
   aged ~~Widowed~~ Mother Mrs Ingbjgurg Yngfusson or
   Children's Guardian .....
6. Address Befrost Man
7. State ages of Children: Girls under 17 ..... Boys under 16 .....
8. With whom do your Children reside? .....
9. Amount of Assigned Pay 15.00 10. Name of Assignee .....
11. Address as above

12. From what date is Assigned Pay effective? 2. 5. 18

13. Date of Marriage

14. Date Marriage Certificate examined by Paymaster

15. Date Birth Certificates (in case of guardian) examined by Paymaster

16. If soldier is sole support, does Statutory Declaration accompany this application? Yes

17. Have you made a previous Claim for Separation Allowance? Give particulars No

18. Is Separation Allowance being paid on your Account to any person? No

19. Were you at the time of enlistment an employee of the Local or Dominion Government? In what capacity, and in what place? No

20. Will you be in receipt of a salary as such, while serving? If so paid, how much per month? No

21. Name of Corps prior to enlistment in the C.E.F.

I hereby certify that the above is a true statement.

Ross Anderson

Name of Soldier.

Signature of Officer forwarding this application.

Unit

Date

M. F. W. 130—100M.—9-17. 1772-39-1147.

CL Bo 211

S.
A.

Separation Allowance and Assigned Pay
CANADIAN EXPEDITIONARY FORCE

A.
P.

1. Name in Full (Surname first) Anderson Arne
2. Rank and Regimental Number 2382691 Pte
3. No. of Battalion or Corps 1ST DEPOT BATT'N MANITOBA REG'T WINNIPEG, MAN.
4. Date of Enlistment 2-5-18
5. Full Name of Wife ..... or
   aged ~~Widowed~~ Mother Ingbjurg Yegfusson or
   Children's Guardian
6. Address Befrost Man.
7. State ages of Children: Girls under 17 ..... Boys under 16 .....
8. With whom do your Children reside? .....
9. Amount of Assigned Pay 15.00 10. Name of Assignee .....
11. Address as above

12. From what date is Assigned Pay effective? 2. 5. 18.

13. Date of Marriage

14. Date Marriage Certificate examined by Paymaster

15. Date Birth Certificates (in case of guardian) examined by Paymaster

16. If soldier is sole support, does Statutory Declaration accompany this application? Yes

17. Have you made a previous Claim for Separation Allowance? Give particulars No

18. Is Separation Allowance being paid on your Account to any person? No

19. Were you at the time of enlistment an employee of the Local or Dominion Government? In what capacity, and in what place? No

20. Will you be in receipt of a salary as such, while serving? If so paid, how much per month? No

21. Name of Corps prior to enlistment in the C.E.F.

I hereby certify that the above is a true statement.

Ann Anderson

Name of Soldier.

Signature of Officer forwarding this application,

Unit

Date

M. F. W. 130—100M.—9-17. 1772-39-1147.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

DEPT. MILITIA & DEFENCE FEB 18 1919 H.Q.

1. No. 3382691

2 Rank. Private

3. Name. ANDERSON, Arni

4. Unit. 1st Depot Battalion, Manitoba Regiment

5 Date of Discharge Jan.13th.,1919 Place Winnipeg, Canada

6 Reason for Discharge

Demobilization. R.O.1357 Conditional Leave. Draftee

7. Authority. C.O. 7 of 9.1.19

8. Proposed Residence after Discharge

Bifrost.....P.O.

Manitoba, canada

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 39

Arni Anderson

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Winnipeg, Canada

Date January 13th.,1919

Signature W. R. Wood Major for Commanding, 1st Depot Battalion Manitoba Regiment

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.