3348348	ANDERSON	CLIFFORD CRAIG
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 145

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048(86/06)

gm 5-3-18

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

Attestation Papers..... 4

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..... 2

M 7 W. 71 —— /
A 7 B 122 —— /
M 7 B 465 —— /
M 7 W. 129 —— /

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name ANDERSON CLIFFORD CRAIG

Regt. No. 3348348 Rank Pte.

Corps 1st Dpo. Bn. M.R.

Demob'n.

C

H

ORIGINAL

#10 M. D. 1st Depot Battalion Manitoba Regiment

Regtl. No. D 3348348

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname: Anderson
2. Christian name: Clifford Craig
3. Present address: Myrtle..P.O..Manitoba,Canada
4. Military Service Act letter and number: 527122 JC
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth: May 5th.,1897
6. Place of birth: Winnipeg,Manitoba,Canada
   (town, township or county and country)
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: Farmer
10. Name of next-of-kin: John Anderson
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Myrtle..P.O..Manitoba,Canada
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None
15. Medical Examination under Military Service Act :—

(a) Place Winnipeg,Canada (b) Date July 23rd.,1918 (c) Category A 2

Discharged Demobilization No 1357 60.2.of 3-1-19 Effective 7-1-19

DECLARATION OF RECRUIT

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

Clifford C. Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	21 yrs.	2 mths.
Height	5 ft.	5¾ ins.
Chest measurement — fully expanded		37 ins.
Chest measurement — range of expansion		2 ins.
Complexion	Ruddy	
Eyes	Light Blue	
Hair	Light	

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

Scar left shin.
Birthmark left elbow.

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

Place Winnipeg,Canada Date July 23rd.,1918

23/7/18

M. F. W. 133.
500M.—5-18.
1772—39—1158

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

1414

DISTRICT CASHIER'S OFFICE
JAN 25 1919
M. D. No. 10

This is to Certify that No. 3348348 (Rank) Private

Name (in full) Clifford Craig Anderson enlisted in

the 1st Depot Battalion Manitoba Regiment

CANADIAN EXPEDITIONARY FORCE at Winnipeg Canada on the 23rd

day of July 1918

HE served in Canada

and is now discharged from the service by reason of demobilization (draftee)

R.O. 1357. (C.O.2-of 3-1-19)

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

Age 21 years 8 Months

Height 5 feet 5 3/4 inches

Complexion Ruddy

Eyes Light Blue

Hair Light.

Marks or Scars Scar left shin

Birth mark left elbow.

ORDERLY ROOM
JAN 18 1919
1st DEPOT BATTALION,
MANITOBA REGIMENT

Clifford Craig Anderson
Signature of Soldier

W. R. Wood
Issuing Officer ..... Major for
Commanding, 1st Depot Battalion Manitoba Regiment
Rank

Date of Discharge January 7th 1919

Appointment

Signed at Winnipeg Canada this 7th day of January 1919

in Military District No. Ten

File Reference No. 10; M.D.-44-a.489

D. Nicholetson Capt.
District Casualty Officer.

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 .....

.....

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

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

.....
Name of Officer

.....
Rank

.....
Appointment

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battalion, Manitoba Regiment

Regimental No. D 3348348 Rank PRIVATE Name Anderson, Clifford Craig

Enlisted (a) 23.7.18 Terms of Service (a) ~~C.E.F.~~ C. E. F. M.D. Service reckons from (a) 23.7.18

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) Farmer

CIVIL 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				
3-1-19	Adj	Discharged Demobilization R.O. 1357	Winnipeg	7-1-19	C.O. 2 of 3-1-19

D. E. Bretton
major

W. B. Wood 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				

Canada Single Presbyterian Farmer

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 Clifford Craig

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 527122 JC

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

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

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd day of July 1918 1917, by the undersigned medical board sitting at WINNIPEG, MANITOBA, CANADA.

5. Age as stated 21 Years 2 Months. 6. Apparent age Years Months

7. Height 5. Feet 5 3/4 Inches. 8. Weight 129 Pounds.

9. Chest measurement Minimum 35 Ins. Maximum 37 Ins. 10. Complexion Ruddy Eyes L. Blue Hair Light.

11. Physical development. Good (Good / Fair / Poor) 12. Smallpox marks

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

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar. L. shin
Birth mark. L. Elbow.

16. Slight defects but not sufficient to cause rejection ✓

The man denies having had Rheumatism / Tuberculosis / Syphilis (Strike out disease admitted or suspected.)

We find no evidence of past Rheumatism / Tuberculosis / Syphilis

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2.

R. Patton Capt. President.

J. McGregor Capt. Member. Member.

Signature of Man Clifford C. Anderson

Vision R. Eye 20/20
" L. Eye 20/30
Hearing R. Ear N
" L. Ear N

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
10/8/18		M.O.	30/7/18		M.O.
		M.O.	3/8/18		M.O.
		M.O.	10/8/18		M.O.

Joined 23rd day of July 1918 at WINNIPEG, MANITOBA, CANADA

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment 1st Depot Battalion	Manitoba Regiment	D 3348348		July 23rd.,1918
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 Anderson Christian Name Clifford Craig

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

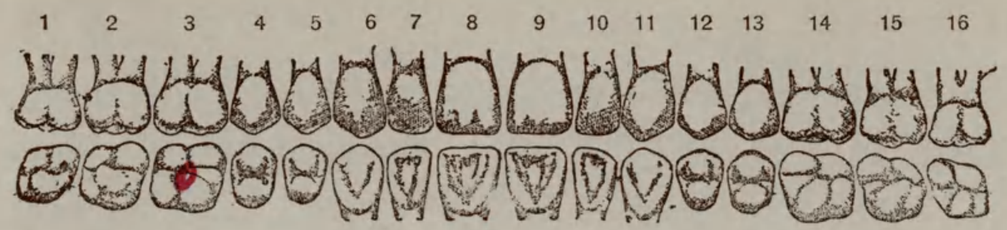
CANADIAN ARMY DENTAL CORPS

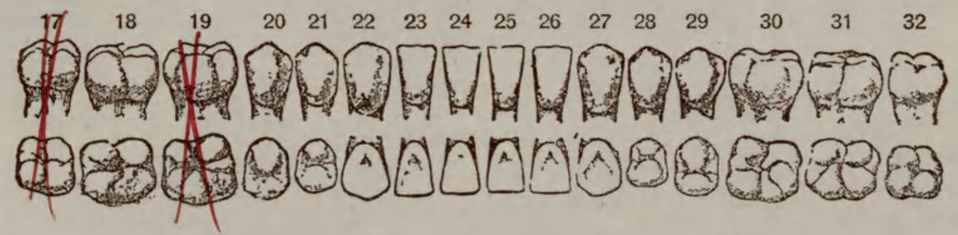
DISTRICT 10

NAME OF SOLDIER Anderson C C

REGIMENT C D B M RANK Pte No. 3748348

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
	1918																						
Condition on first Examination																							Cavities
Dec	31	1/3									2/1218.										F G McCarter Capt.		Extractions

Myrtle, Man.

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

44. a. 489

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. 3348348 Rank Private Surname Anderson
(Given name in full) Clifford Craig.

Unit or Corps 1st Depot Batt. M.R. Birthplace Winnipeg, Man.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 139 lbs. Height 5 ft. 5 in. Colour of Eyes Blue

Nutrition Good.

Pulse 72

Condition of arteries normal

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).

Birthmark L. Elbow

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 2 1918 HEADQUARTERS WINNIPEG

Ass't Director Medical Services No. JAN 1 1919 Mily. Dist. No. 10

(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 December 31st, 1918 Signed W. W. Smith Capt. 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 C. C. Anderson

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

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

APPROVED
E. Thorburn
JAN 1 1919
FOR A. D. M. S., M. D. No. 10
WINNIPEG, MAN.

[OVER]

M.F.W. 129.
1633 (D.P.) 500M-11-18.
1772-39-1142.

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 3348348 Rank Pte. Name Anderson C.

Corps I D B M who was* struck off strength

On 7.1.19 191...., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.1.19 191...., to 7.1.19 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	11	15
Advances by Cheques } No.			Regt'l. Pay 7 days at $ 1 c.	7	00
Advances by Cheques } No.			Field Allow. 7 days at $ c. 10		70
Assigned Pay and Sep'n Allce. No			Separation Allowances* (Monthly)		
Other charges hyst lye	7	70	Other Allowances* clothing	35	00
Payment on transfer or discharge ~~No.~~ 11372	46	15	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	53	85	Total	53	85

*Give particulars.

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

N I L N I L

(Address) .....

(†) 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 23.7.18

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

(3) cause of discharge R O 1357 authority B O 4

(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 16th 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.

M.S.A.....527122 JC

REG. NO. D 3348348 NAME Anderson, Clifford Craig

ENLISTED AT Winnipeg, Canada DATE 23.7.18 CATEGORY A 2

PREVIOUS SERVICE None NATIONALITY Canadian

CLASS OF ENLISTMENT Draftee OCCUPATION Farmer

WHEN ORDERED TO REPORT 23.7.18 WHERE Winnipeg, Canada

MARRIED OR SINGLE Single RELIGION Presbyterian

AGE 21....2 HEIGHT 5.....5¾ WEIGHT 129

COLOR OF HAIR Light EYES Light Blue COMPLEXION Ruddy

CHEST MEASUREMENT, NORMAL 35 EXPANDED 37

NAME OF NEXT OF KIN John Anderson RELATIONSHIP Father

ADDRESS Myrtle..P.O..Manitoba, Canada

REMARKS

Phot. 4-1-19. Dercha Ro 1257

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

26/7/18

DEPT MILITIA & DEFENCE
FEB 21 1919
H.Q.
CANADA

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3348348

2 Rank. Private

3. Name. Clifford Craig Anderson.

4. Unit. Ist Depot Battalion Manitoba Regiment.

5 Date of Discharge 7-1 -19. Place Winnipeg. Canada.

6 Reason for Discharge Demobilization, R.O. 1357 (Draftee).

7. Authority. C.O. 3 of 3/1/19.

8. Proposed Residence after Discharge Myrtle P.O., Manitoba.

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.

~~XXXXX~~

Clifford Craig Anderson
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Winnipeg. Canada.

Date 7-1-19.

Signature W. R. Wood, Major for
(O. C. Discharging Unit.)
Commanding, 1st Depot Battalion Manitoba Regiment

M.F.B. 218a—300M.-11-18—1772-39-113.