68m 4-1-19

8270

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

Attestation Papers.....3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....1

Proceedings on discharge.....1

Corps History Sheet.....

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

Parchment Certificate.....Discharge 1

Medical Report for Invalids.....

Medical History Sheet.....1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....1

AFB-122-1
MFW-113-1
MFW-129-1
Dent-HS-1

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

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name ANDERSON. FLOYD ESLIE.

Regt. No. 3328994 Rank Pte

Corps 2nd Depot Bde & O Regt.

"Demobilization".

C

H

2nd. DEPOT BATTALION,
Eastern Ontario Regiment.

3 M. D. Depot Battalion Original Regiment

Regtl. No 3328994

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname: Anderson
2. Christian name: Floyd Elzix Eslie
3. Present address: R.R.#2 Cardinal Ont.
4. Military Service Act letter and number: PC956988
   (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: June 8th. 1898
6. Place of birth: Cardinal Ont.
   (town, township or county and country)
7. Married, widower or single: Single
8. Religion: Methodist
9. Trade or calling: Farmer
10. Name of next-of-kin: Mrs. Ruby Anderson
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: R.R.#2 Cardinal Ont.
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: Brockville Ont. (b) Date: 23rd. Oct. 1917 (c) Category: C111.

A II Re Exam. 22-8-18

DECLARATION OF RECRUIT

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

Floyd E. Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 20 yrs. 4 mths.

Height: 5 ft. 8½ ins.

Chest measurement: fully expanded 38 ins.; range of expansion 3 ins.

Complexion: Fair

Eyes: Blue

Hair: Light

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

V.D.H.

Compensation Fair.

O. C. Lt. Col. O. C. 2nd. Depot Batt., E. O. R. O. C. Depot Btln.

Regt.

OTTAWA.

Place: Date: October 18-1918

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. --3328994.------ (Rank) -------Private----------

Name (in full) ----------Floyd Anderson---------- enlisted in

the ----------2nd Depot Bn. R.O.R.----------

CANADIAN EXPEDITIONARY FORCE at ---Ottawa, Ont.----- on the ----18th--------

day of ----October---------- 19 18.

HE served in ----------Canada----------

and is now discharged from the service by reason of -------Debobilization----------

----------R.O. 1328----------

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

Age	-----20Years 5months-------	Marks or Scars	----------
Height	-------5'8½"----------		
Complexion	-------Fair----------		
Eyes	----------Blue----------		
Hair	----------Light----------		

Floyd Estie Anderson
Signature of Soldier

W. M. Scott Major
for Lieut-Colonel.
Issuing Officer

Rank

O.C. 2nd Depot Bn. R.O.R.
Appointment

--Nov 27th 1918.
Date of Discharge

--Ottawa, Ont.------ --27th--------- ---Nov --------- 18.
Signed at this day of 19

in Military District No. -----3-------

----1-A-151.----
File Reference 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.

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

ON DEMOBILIZATION, PARTICULARS CALLED FOR ON BACK OF DISCHARGE CERTIFICATE WILL NOT BE COMPLETED.
D.O.1676.

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

M. A. 15. 332 Brockville, Ont. 3328994

MILITARY SERVICE ACT, 1917.

2nd Depot Bn. F.O.R.

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 Floyd Esly

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule P.C. 956988

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

4. Address (including street and number, if any) Cardinal Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23 day of October. 1917, by the undersigned medical board sitting at Brockville, Ont.

5. Age as stated 20 Years 4 Months. 6. Apparent age 20 Years Months

7. Height 5 Feet 8½ Inches. 8. Weight 121 Pounds.

9. Chest measurement { Minimum 35 Ins. / Maximum 38 Ins. } 10. Complexion Fair { Eyes Blue / Hair Light.

11. Physical development good { Good / Fair / Poor } 12. Smallpox marks None

13. Number of vaccination marks { Right arm nil / Left arm nil } 14. When vaccinated last Never.

15. Distinctive marks and marks indicating congenital peculiarities or previous disease V.D.H.

Compensation fair.

16. Slight defects but not sufficient to cause rejection None

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 [C 3]

Vision L.E.D. 30
R.E.D. 30

(Sgd) C.A. Publow Capt. A.M.C. *President.*

R.T. Horton Major A.M.C. *Member.* F.J. Williams Capt. A.M.C. *Member.*

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

RECEIVED AUG 27 1918 MILITARY HOSPITALS COMMISSION

Joined 18th *day of* October *1918 at* Ottawa Ont.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	2nd Depot Bn	3328994		18-10-18
Transferred to	F.O.R.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Kingston, Ont.	22-8-18.	Nil.	"A"2.

MEDICAL BOARD OF REVIEW
W. Mockford Major Capt. A.M.C.
J. Coghlan Capt. A.M.C.
C. Hellier Capt. A.M.C.

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.

Signature of Man Floyd E. Anderson

Certified Copy 27-8-1918 J. E. Gray Capt. A. M. C. District No. 3

Surname Anderson Christian Name A. E.

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

NAME OF SOLDIER Anderson F. E.

REGIMENT 2nd. DEPOT BATTALION, Eastern Ontario Regiment

RANK Pte.

DISTRICT 3

No. 3328994

M.F.B. 4[illegible]
200M.—6-18.
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.

	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	OPERATOR	Military District	REMARKS
Condition on first Examination	1918. Nov 26 9 / 3.4.5.10.13.14 17.18.31.									V 8	2 19.30									Lt Patterson	3.	Cav# 8.9.12.23.28. 32.

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. 3328994 Rank Pte Surname Anderson
(Given name in full) Floyd Esly

Unit or Corps 3rd Bn Dgt. E.O.R. Birthplace Cardinal Ont.

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

1. **GENERAL DESCRIPTION:**

Physique good Weight 121 lbs. Height 5 ft. 8½ in. Colour of Eyes Blue

Nutrition good

Pulse 72

Condition of arteries good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
moles right & left scapula

Opinion as to general health and physical condition 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 System 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.

(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 Ottawa.....(Canada)

Date November 26/18 Signed R B Gardman 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 Floyd Eslie Anderson

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

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

[OVER]

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

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

Nov.
F. 1
L. 23

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 3328994 Rank Pte. Name Anderson, Floyd Eslie

Corps 2nd Depot Bn. E.O.Rs. who was* Discharged

On 27-11-18 191...., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named ~~from~~ on 27-11-18 191...., to 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	7	70
Advances by Cheques } No.			Regt'l Pay days at $ c.		
Advances by Cheques } No.			Field Allow. days at $ c.		
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No. 7846	7	70	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	7	70	Total	7	70

*Give particulars.

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

(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

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

REMARKS:—

State (1) date of enlistment 18-10-18

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

(3) cause of discharge Demobilization authority R.O.1328 D.O.332

(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 Nov. 29th, 1918.

Place Ottawa, Ont.

Douglas P. Stewart Capt.
Paymaster
Paymaster, 2nd Depot Bn. E.O.R.

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.

300M.—2-18.
H. Q. 1772-39-903.

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.

2nd. DEPOT BATTALION,
Eastern Ontario Regiment.

Unit, Regiment or Corps .....

Regimental No. 3328994 Rank Pte Name ANDERSON Floyd Eslie

Joined ~~Enlisted~~ (a) 18-10-18 Terms of Service (a) C. E. F. C. E. F. Service reckons from (a) 18-10-18

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

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				
		O. S. 2nd. Depot Bn. E. O. R., B. O. 332			A W Burnett ..... Lt. Col. O. C. 2nd. Depot Batt., E. O. R.

(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				

Rank Name Anderson Lloyd E Regt'l No. 332 8994

T.O.S. 18.10.18 B.O. No. 291 Serial No. P.C. 956988

Examined at Date Co. C 299

Nationality Born at Date Age yrs. mos.

Height ft. Ins. Chest Ins. Weight lbs.

Complexion Eyes Hair

Distinctive Marks

Category

Married or Single Religion Occupation

Next of Kin S.O.S. Date 27-11-18 B.O. No. 332

Overseas. Date B.O. No.

Transf'd to Date B.O. No.

291

2ND DEPOT BATTALION, EASTERN ONTARIO REGIMENT

LIBRARY BUREAU C22597
LOWE-MARTIN, MAN'F'RS

B O. No.	Part	Date	Nature of Casualty	Remarks
303	5	30-10-18	F/L from 29-10-18 to 15-11-18.	
			B O 318 F/L EXT. TO 1-12-18	
331	4		Returned F/L 26-11-18	

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or.		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form B. 313	
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form W. 23	
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(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.

This space to be for numbers.

DEPT. MILITIA & DEFENCE
DEC 23 1918
H.Q. CANADA

Proceedings on Discharge.

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

No. 3328994.

Rank Private.

Surname Anderson.

Christian name Floyd.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 2nd. DEPOT BATTALION, Eastern Ontario Regiment.

Date of discharge Nov 26th 1918.

Place of discharge OTTAWA.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 20 years 5 months.

Height 5 feet 8½ inches.

Complexion Fair

Eyes Blue

Hair Light.

Trade Farmer.

Intended place of residence (To be given as fully as practicable.) Cardinal R.R.No.2 Ont.

Descriptive marks

V.D.H.

Compensation Fair.

2. The above-named man is discharged in consequence of ON DEMOBILIZATION

Authority for discharge R.O. 1328

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.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Good.

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.)

Farmer.

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

Nil.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... Nil.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery*, and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) OTTAWA

(Date) Nov 27th 1918.

Commanding for O. C. 2nd. Depot Bn. E. O. R. Lt. Col.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) OTTAWA Floyd Eslie Anderson *(Signature of Soldier.)*

(Date) Nov 27th 1918. H L Brook *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

Floyd Eslie Anderson *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.... (the date to which the Record of Service is completed).....years 40 days.

Total.....years 40 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) OTTAWA

(Date) Nov 27th 1918.

(Signature) for O. C. 2nd. Depot Bn. E. O. R. Lt. Col.

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.)

Nil.

Floyd Eslie Anderson