



No 10 M. D. First Depot Battalion Manitoba Regiment
Regtl. No. D3347333

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

C.P.
Attn

1. Surname Anderson

2. Christian name Nels

3. Present address Gonor P.O. Manitoba Canada

4. Military Service Act letter and number 518537JC
(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 24th March 1893

6. Place of birth Winnipeg Manitoba Canada
(town, township or county and country)

7. Married, widower or single Single

8. Religion Church of England

9. Trade or calling Farmer

10. Name of next-of-kin Mrs. Edna Abrahamson

11. Relationship of next-of-kin Mother

12. Address of next-of-kin Gonor 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 11th June 1918 (c) Category C1

DECLARATION OF RECRUIT

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

Nels Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	<u>25</u> yrs.	<u>3</u> mths.	Distinctive marks, and marks indicating congenital peculiarities or previous disease. Scar left shin Scar left knee Scar bridge of nose
Height	<u>5</u> ft.	<u>11 1/2</u> ins.	
Chest measurement	fully expanded	<u>40 1/2</u> ins.	
	range of expansion	<u>3 1/2</u> ins.	
Complexion	<u>Dark</u>		
Eyes	<u>L. Blue</u>		
Hair	<u>D. Brown</u>		

H.T. Adams for
Commanding, 1st Depot Battalion Manitoba Regiment
O. C. Depot Btin.
Regt.

Place Winnipeg Canada Date 11th June 1918

11/6/18.

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 Nels.
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule..... } 518537JC
 3. Consecutive number on schedule of men reporting for service (if he appears on it) }
 4. Address (including street and number, if any)..... } Gonor P.O. Manitoba Canada

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11th day of June 1918 1917, by the undersigned medical board sitting at WINNIPEG, MANITOBA CANADA

5. Age as stated 25 Years 3 Months. 6. Apparent age _____ Years _____ Months
 7. Height 5 Feet 11 Inches. 8. Weight 169 Pounds.
 9. Chest measurement { Minimum 37 Ins. 10. Complexion Dark { Eyes L. Blue
 { Maximum 40½ Ins. { Hair D. Brown
 11. Physical development. Good { Good Fair Poor 12. Smallpox marks _____

13. Number of vaccination marks { Right arm _____ 14. When vaccinated last _____
 { Left arm N I L
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar L. knee
Scar L. shin Scar bridge of nose

16. Slight defects but not sufficient to cause rejection Caricose Veins Right leg.
 The man denies having had { Rheumatism We find no evidence of past { Rheumatism
 { Tuberculosis { Tuberculosis
 { Syphilis { 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 C1
H.C. Pant on Capt. President.
J.B. McGregor Capt Member. _____ Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 11th day of June 1918 191 at WINNIPEG, MANITOBA, CANADA

CORPS	REG'TL NUMBER	HABITS	DATE
1st Depot Battalion, Joined on enlistment Transferred to..... { Manitoba Regiment	<u>D3347333</u>		<u>11.6.18</u>

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.

Signature of Man

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. D3347333 Rank PRIVATE Name Nels Anderson

Enlisted (a) 1.6.18 Terms of Service (a) C.E.F. Service reckons from (a) 1.6.18

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				
		Demobilization:—S.O.S. on return to Registrar's Records <u>281/18</u> Daily Order <u>8/10/18</u> Discharged under Auth. PC 3015 of 11-12-18, Documents to H. Q.			
		<u>9 of Cameron</u> <u>lieut</u> 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.]

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....		Militia Form W. 23
or Particulars of Recruit.....	4	Militia Form W. 133
Field Conduct Sheet.....	1	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	1	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.....	2	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.....	1	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

Man on Conditional Leave previous to order to return to Registrar's Records Missing Documents unobtainable

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No.	3347333	
2. Rank.	Private	
3. Name.	Anderson, Nels	
4. Unit.	1st Depot Battalion W.F.	
5. Date of Discharge	15-8-18	Place Winnipeg, Manitoba.
6. Reason for Discharge	Demobilization:- Struck off strength on return to Registrar's Records. 15-8-18 Daily Order 281/18 para 4453 8-10-18	
7. Authority.	P.C. 3051 of 11-12-18	
8. Proposed Residence after Discharge.....	Gonor P.O., Manitoba.	
9.	<p style="text-align: center;">CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W.?.....</p> <p style="text-align: right;">Signature of Soldier.</p>	
10.	<p style="text-align: center;">CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place.....Winnipeg, Manitoba.</p> <p>Date.....December 30th, 1918.</p> <p style="text-align: right;">Signature..... <i>W. Wood</i> Major for Commanding, 1st Depot Battalion W.F. (O. C. Discharging Unit.)</p>	