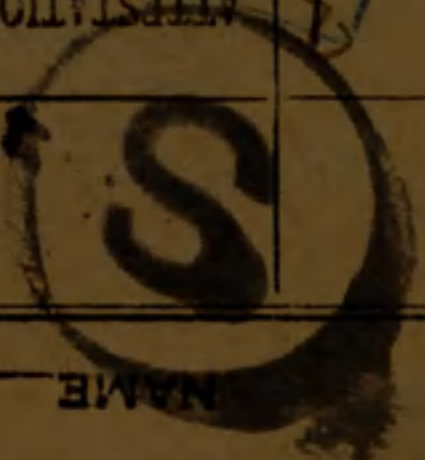
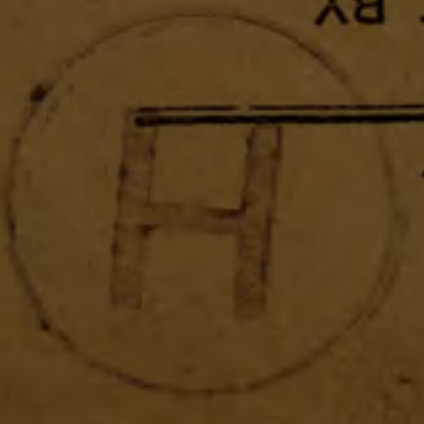
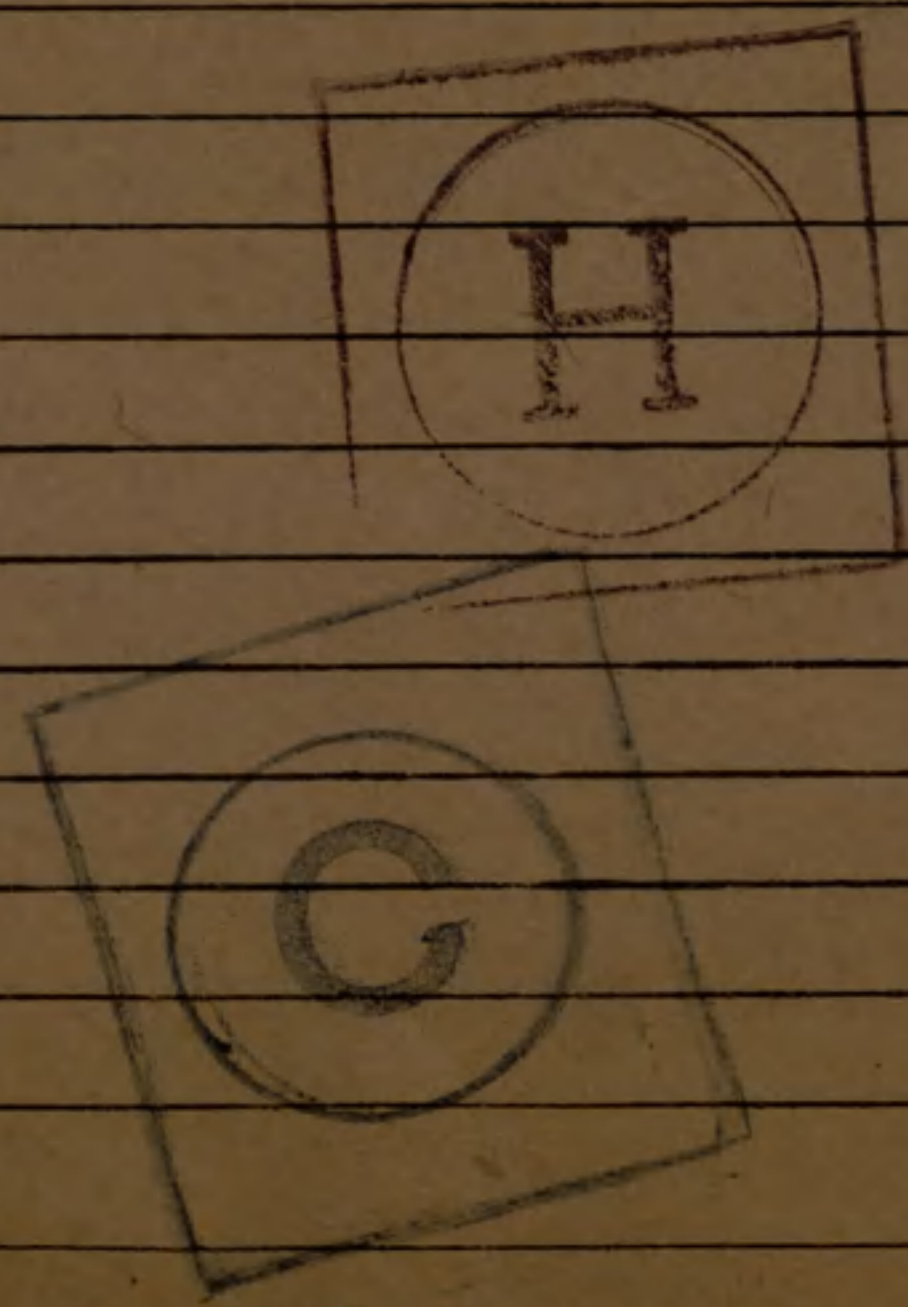
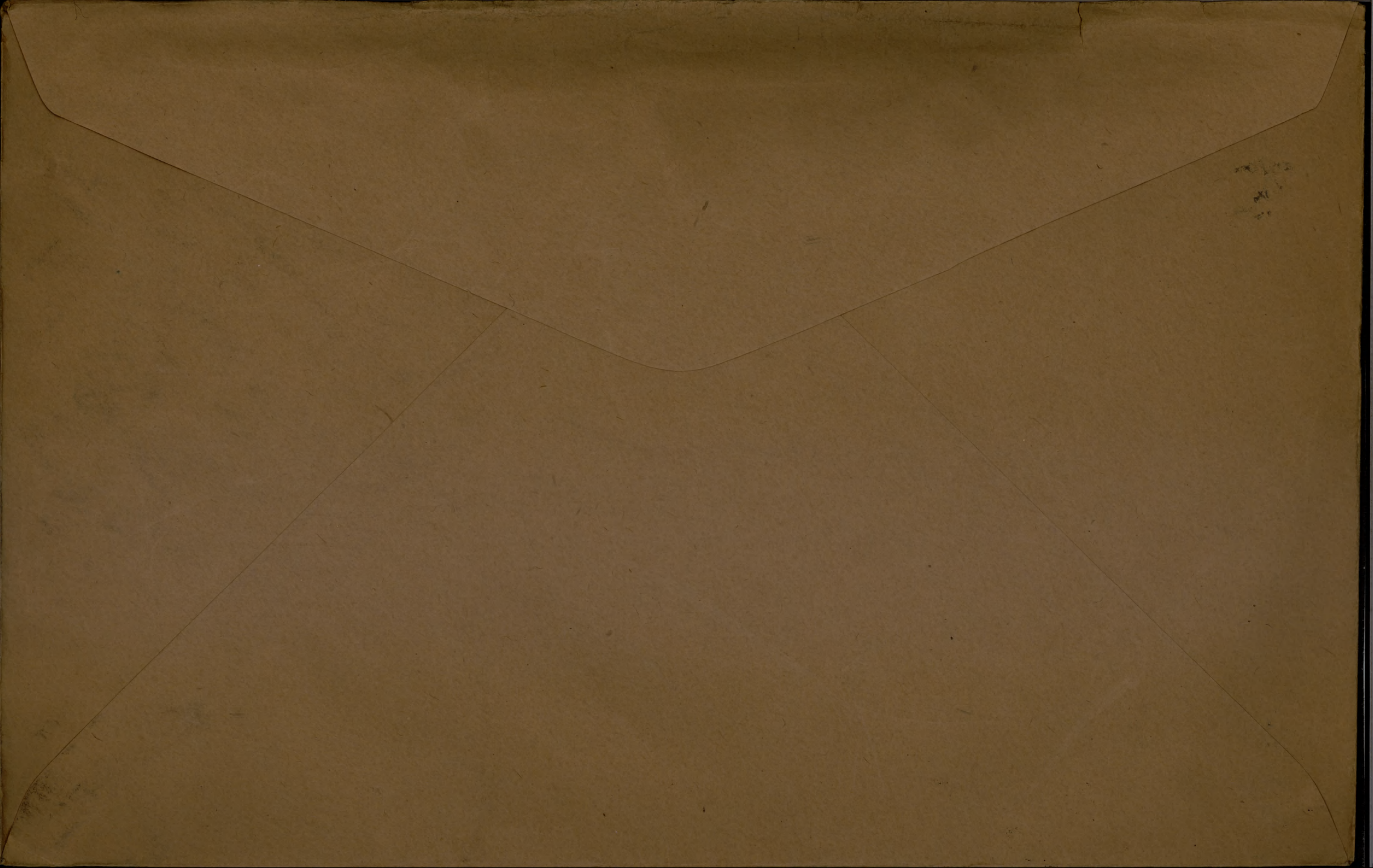


NON-EFFECTIVE BY	M. F. W. 2505 REFERENCE	DATE FORWARDED	TO WHOM FORWARDED	DATE RECEIVED	CONTENTS
DEATH					ATTESTATION PAPER (M.F.W. 23, 133, or 51)
Category					CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
					TRAINING HISTORY SHEET (M.F.W. 113)
					FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
					REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
					COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
DISCHARGE					MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
Category					DENTAL HISTORY SHEET (M.F.B. 465)
					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)
DESERTION					DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
					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 PARCMENT DISCHARGE CERTIFICATE (M.F.W. 39A)



REGIMENTAL DOCUMENTS
 NAME: Anthony, Allison B
 REGT. NO. 4050952
 UNIT 1st Lt. 1100
 H. Q. FILE NO. 1055



DUPLICATE

6th M. D. 1st.

Depot Battalion Nova Scotia.

Regiment

Regtl. No. 4050950.

1510-118

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

1. Surname Anthony.

2. Christian name Allison B.

3. Present address Berwick, Kings Co. N.S. *Sufficient Address*

4. Military Service Act letter and number Claims underage. Arrested 26-8-18.
(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 March 21st. 1901.

6. Place of birth Port Maitland, Yar. Co. N.S.
(town, township or county and country)

7. Married, widower or single Single.

8. Religion Methodist.

9. Trade or calling Student.

10. Name of next-of-kin Mrs. Nora Gertrude Anthony.

11. Relationship of next-of-kin Mother.

12. Address of next-of-kin Berwick, Kings Co. N.S. *Sufficient Address EMB*

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 Camp Aldershot, N.S. (b) Date 27-8-18. (c) Category A-2.

DECLARATION OF RECRUIT

I, Allison B. Anthony., do solemnly declare that the above particulars refer to me, and are true.

Allison B. Anthony (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 17 yrs. 5 mths.

Height 5 ft. 8½ ins.

Chest measurement } fully expanded 35½ ins.
range of expansion 2½ ins.

Complexion Fair.

Eyes Blue.

Hair Brown.

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

Emil Arnold Capt Lt. Col.
O. C. 1st. Depot Btin.
Nova Scotia. Regt.

Place Camp Aldershot, N.S. Date 27-8-18.

Service reckons from 11-11-17 as per cas forms gys

fox team

4050950

ORIGINAL

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 Anthony Christian name Alison B
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. Defaulter
3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
4. Address (including street and number, if any) Berwick King's Co. N.S.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 27 day of August 1917, by the undersigned medical board sitting at Aldershot Camp N.S.

5. Age as stated 17 Years 5 Months. 6. Apparent age 17 Years 5 Months
7. Height 5 Feet 8 1/2 Inches. 8. Weight 142 Pounds.
9. Chest measurement { Minimum 33 Ins. Maximum 35 1/2 Ins. } 10. Complexion Tan { Eyes Blue Hair Brown
11. Physical development. { Good Fair Poor } 12. Smallpox marks none
13. Number of vaccination marks { Right arm Nil Left arm 1 } 14. When vaccinated last Boyhood.
15. Distinctive marks and marks indicating congenital peculiarities or previous disease scar left leg.

16. Slight defects but not sufficient to cause rejection _____
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 V.R. 20/40 L, 20/30 Hearing) normal.
Dr. J. G. MacIsaac President.

Dr. J. G. MacIsaac Member. _____ Member.

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

Joined 26th day of August 1917 at Camp Aldershot. N.S.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>1st. Depot Bn.</u>			
Transferred to.....	<u>N.S.R.</u>	<u>4050950.</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Aldershot Camp N.S.</u>	<u>27/8/18</u>	<u>nil</u>	<u>Lab. A II</u>

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 Alison Borden Anthony

Original not available
Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)
 500M.—9-16
 H. Q. 1772-39-910.

Casualty Form—Active Service.

Unit, Regiment or Corps..... *1st Depot Bn. A.S. Regt.*

Regimental No. *405 0950* Rank *Pte* Name *Anthony, Allison B.*
TOS Defaulter C. E. F.

Enlisted (a) *11-11-17* Terms of Service (a) *War & 6 months* Service reckons from (a) *11-11-17*

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) *Student*

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				
<i>28-8-18</i>	<i>1st A.S.R.</i>	<i>S.O.S. having been arrested as defaulter 26-8-18. & posted to "B" Coy.</i>	<i>Aldershot Camp. N.S.</i>	<i>11-11-17</i>	<i>P6 # D.D. # 238</i>
<i>31-8-18</i>	" "	<i>S.O.S. on being Ennearly apprehended "Under Age"</i>	" "	<i>11-11-17</i>	<i>PT # D.D. # 241</i>

D. Puthie
Capt for Dept

(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				

Surname *Anthony*
 Christian names *Allison B*
 Regtl. No. *4050950* Rank *Pte*
 Unit *Med Regt 1st Depo Bn*
 H. Q.
 M. D. No. *6*
 T. O. S. *Nov 11th* 19 *17*
 D. O. Pt. II *238* of *288-18*
 S. O. S. *Dis 11-11* 19 *17*
 Reason *P. to R.*
 Auth. *W. O. 241 of 31-8-18*

Next of kin *Anthony Mrs Nora G* Relationship *Mother*
 Address *Burwick, Kingslea N.S.* Also notify:

BORN—Place *Canada, Port Maitland N.S.* Date *March 21st* 19 *01*
 ATTESTED—Place *Aldershot Camp N.S.* Date *Aug 27th* 19 *18*
 O/S..... R/C.....

