

REGIMENTAL DOCUMENTS

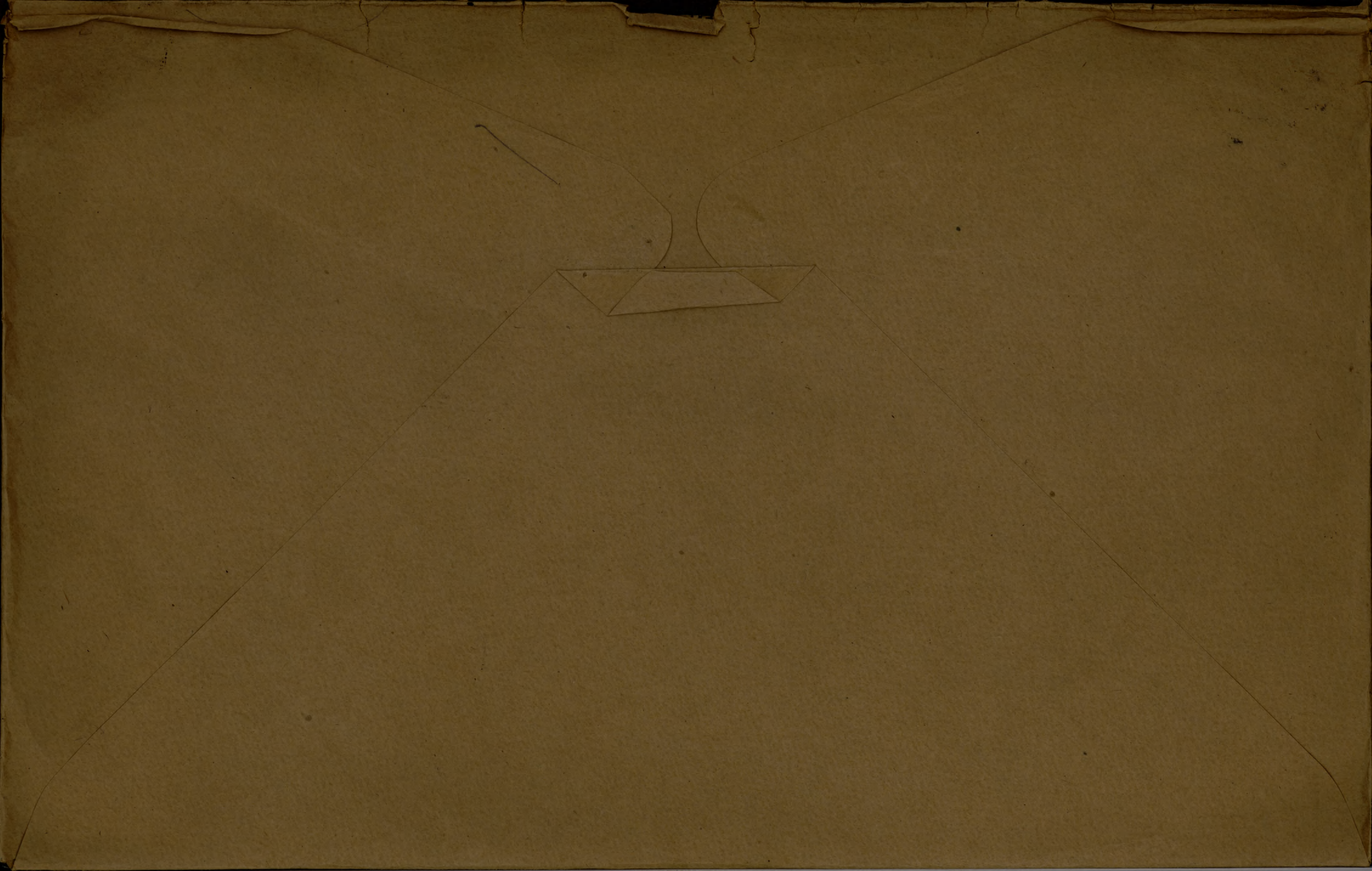
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H

NAME Baker James C Dufford PLE REGT. NO. 3133001 UNIT Baptist War H. Q. FILE NO. _____

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CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
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.F.B. 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)					<i>Demot^W</i>
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
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)					
<i>M.F.C. 565</i>					
<i>misc</i>					



ORIGINAL

M. D. Depot Battalion 1st Depot Battalion, W. O. R. Regiment

Regtl. No. 3133001

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE.)

1. Surname BAKER.
2. Christian name JAMES CLIFFORD.
3. Present address 834 Richmond St. London, Ont.
4. Military Service Act letter and number 438645 AR.
5. Date of birth November 16th. 1896.
6. Place of birth Wallacetown, Elgin County, Ont.
7. Married, widower or single Single.
8. Religion Presbyterian.
9. Trade or calling Chauffeur.
10. Name of next-of-kin Mr John Henry Baker.
11. Relationship of next-of-kin Father.
12. Address of next-of-kin Wallacetown, Ont.
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 London, Ont. (b) Date Oct 13th./17 (c) Category P.2.

DECLARATION OF RECRUIT

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

April 15th. 1918. James Clifford Baker (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs 4 mths.
Height 5 ft 10 ins.
Chest measurement fully expanded 36 ins. range of expansion 33 ins.
Complexion Fair
Eyes Blue
Hair Brown.
Distinctive marks, and marks indicating congenital peculiarities or previous disease. Birthmark on right buttoch, size of 5-cent piece. Index and 2nd. finger of right hand amputated. Left Varicocele.

Right Eye. D 20 Left Eye. D 20
20 20

Hearing R. Normal. L. Normal.

H. Mulligan Lieut. Colonel
1st Depot Battalion, W. O. R. Depot Btn.

Place LONDON, ONT. Date APR 15 1918

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3133001 (Rank) Private

Name (in full) James Clifford Baker enlisted in
the 1st Depot Battalion W. O. R.

CANADIAN EXPEDITIONARY FORCE at London, Ontario on the 15th
day of April 1918

HE served in Canada

and is now discharged from the service by reason of "On Demobilization" R. O. 1420
I. D. 30-B-814/18-1-19 S.M.C.H.-D.O. Pt-II No. 37/6-2-19.

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

Age 22 years 1 mo.

Height 5 feet 10½ ins

Complexion Fair

Eyes Blue

Hair Brown

James C. Baker
Signature of Soldier

Marks or Scars Birthmark on
right-buttock, size of 5-cent
piece. Index and
middle fingers of right-
hand amputated.

A. G. W. Barron
Issuing Officer
Lieutenant
Rank

Date of Discharge 5-2-19

Adjutant-General's Hospital
Appointment

Signed at London, Ontario this 5th day of February 1919

in Military District No. One

File Reference No. S.M.C.H. B-17-P

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.

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.

MILITARY SERVICE ACT, 1917.

Original

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 BAKER. Christian name JAMES CLIFFORD.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 438645 AR.
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) 594 Dundas St. London, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 13th. day of October. 1917, by the undersigned medical board sitting at London, Ont.

5. Age as stated 20 Years 11. Months. 6. Apparent age 20 Years 11. Months
7. Height 5 Feet 10 Inches. 8. Weight 140 Pounds.
9. Chest measurement { Minimum 33 Ins. Maximum 36 Ins.
10. Complexion Fair. { Eyes Blue. Hair Brown.
11. Physical development Good. { Good Fair Poor
12. Smallpox marks None.
13. Number of vaccination marks { Right arm None Left arm
14. When vaccinated last Never.
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Birthmark on right buttoch, size of 5-Cent piece. Index and 2nd finger of right hand amputated.
16. Slight defects but not sufficient to cause rejection Left Varicocoele.
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 B.2.
Normal. Normal.
T.C. Cowan Major. A.M.C. President.
A.D. Duncan. Capt A.M.C. Member. F W Hall Capt A.M.C. Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes handwritten dates like 16/4/18 and 21-5-18, and signatures.

Joined day of APR 15 1918 191 at LONDON, ONT.

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Includes handwritten entries: 1st Depot Battrn., W. O. R., #188 Coy, 1st CER, 3133001, APR 15 1918, 30-4-18, 1-5-18.

Table with columns: STATION, DATE, DISEASE, RESULT. Includes handwritten entries: London, Ont., 15-4-18, Clowan, Pres. Cat, 205.

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 James Clifford Baker.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DIVISION *R. 1*

NAME OF SOLDIER *Baker James Clifford*

REGIMENT *R. M. C. C. A. C. H.* RANK *Plt* No. *3133001*

DATE	No.	FILLINGS				Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2° 3	Pulp Removed	Put Pulp	Artificial Teeth <i>Pre. Len</i>	OPERATOR	REMARKS
		Amal.	Phosp.	G. Per.	Cement											
<i>July 23</i>	<i>2</i>	<i>11</i>												<i>Ms. Ryan</i>		
<i>Aug 7</i>	<i>5</i>	<i>5</i>												<i>"</i>		
<i>Aug 10</i>	<i>6</i>	<i>6</i>					<i>7</i>							<i>"</i>		
<i>Sept 3</i>	<i>9</i>	<i>9</i>												<i>"</i>		
<i>Sept 16</i>	<i>10</i>	<i>10</i>												<i>"</i>		
<i>Sept 18</i>	<i>11</i>	<i>11</i>												<i>Dr. S. J. Ryan</i>	<i>Complete 18-9-18</i>	

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R

3'-7'
2'-7'
10'
9'
11'

DENTAL HISTORY SHEET

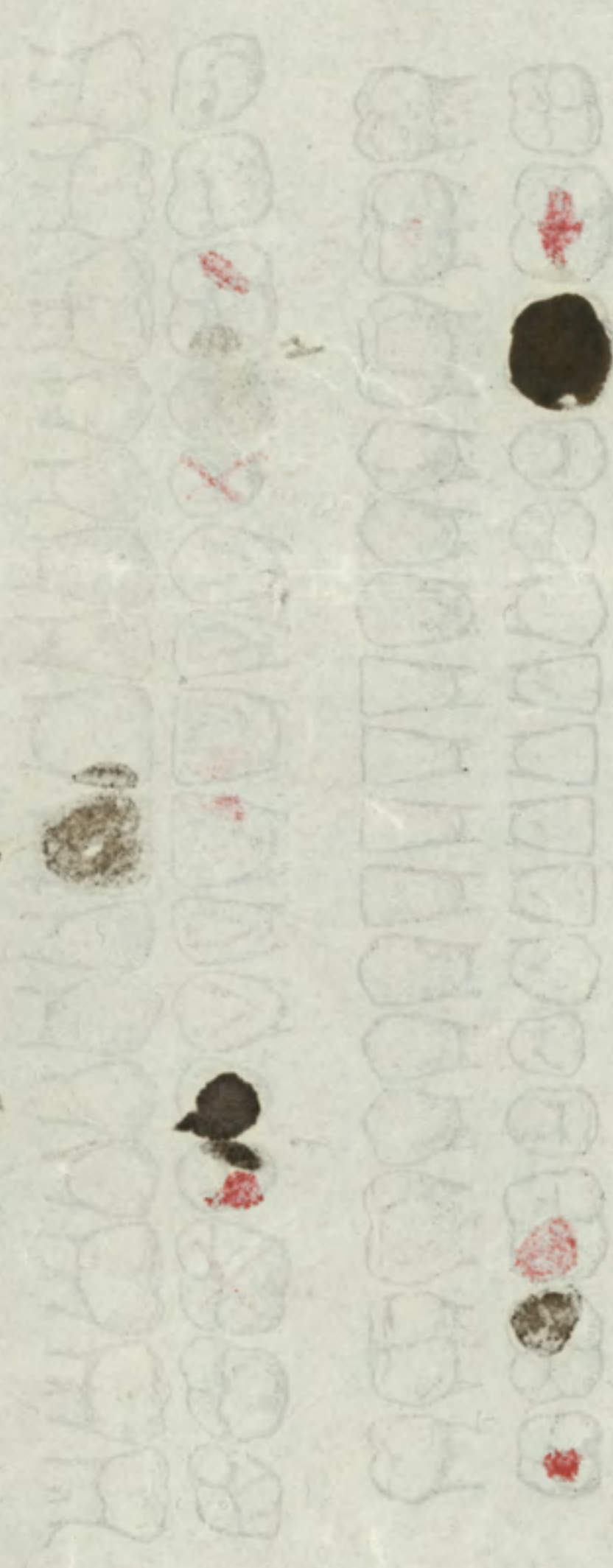
CANADIAN ARMY DENTAL CORPS

Division *1*

No. *223001*

RANK

DATE	TIME	DENTAL	EXAMINATION	TREATMENT	REMARKS
<i>1944</i>	<i>10:30</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
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<i>1944</i>	<i>24:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
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<i>1944</i>	<i>54:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
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<i>1944</i>	<i>55:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>55:30</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>56:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
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<i>1944</i>	<i>57:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>57:30</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>58:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>58:30</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>59:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>59:30</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>
<i>1944</i>	<i>60:00</i>	<i>Examined</i>	<i>Good</i>	<i>None</i>	<i>Good</i>



Handwritten signature

OPERATOR

DATE

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 5133001 Rank Private Name BAKER, James Clifford
(Surname first)
Unit London Military Con. Hospital who was* Discharged
On 5-2-19 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 5-2-19 191.....
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		10 20
Regimental Pay..... days at \$. <u>1</u> c.....		5
Field Allowance..... days at \$. <u>10</u> c.....		50
Separation Allowance		35
Clothing Allowance		
Post Discharge Pay		
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>8 9008</u>	50 70	
Total	<u>50 70</u>	<u>50 70</u>

*Give particulars.

A monthly stoppage of \$ NIL (†) has..... (‡) been paid on account of
Assigned Pay for the month of.....191..... }
and Separation Allee. 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 15-4-18 married or single Single
(2) Separation Allowance, entitled or not NOT (3) Reason for discharge On Demobilization
(4) Authority for discharge or transfer 1.D.3068814 d/ 18-1-19

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 5th. February 1919

Place London, Ont.

W. Malcheway
Paymaster, Medical Services, M. D. No. 1
Paymaster.

- N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

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. 3133001 Rank Private Surname BAKER, JAMES CLIFFORD
(Given name in full)

Unit or Corps Canadian Army Medical Corps Birthplace Wallacetown Canada

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

1. GENERAL DESCRIPTION:

Physique Fair Weight 134 lbs. Height 5 ft 10 1/2 in Colour of Eyes Blue
 Nutrition Poor
 Pulse at rest 50 per minute
 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.)
Index and middle fingers of left hand amputated middle of proximal phalanx June 5. 1916. Cut off by knife of a joiner in a Carpenter Shop.

Opinion as to general health and physical condition He is underweight

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 yes 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 yes 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.

1. Genito Urinary System - He has a very large left sided varicocele. He states that it gives him no inconvenience. He has had it since he was 3 weeks old. He states that it was caused by abdominal strain while crying. It has a distinct impulse on coughing. It is irreducible.
2. Osseous system - Index and middle fingers of left hand amputated at the middle of the proximal phalanx. Scars are healed, nonadherent, not tender. They were amputated June 5. 1916 by a knife on a (over)

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

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.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 *London Ont.*.....(Canada)

Date *27-1-19.* Signed *P.M. Jones Capt.*M.O.
Camro

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 *Jas. L. Baker*.....

(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.)

joiner in a carpenter shop:

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.

Unit, Regiment or Corps 1st Depot Battn., W. O. R.

Regimental No. 3133001 Rank PT Name BAKER Jas. Clifford
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a) 15-4-18

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

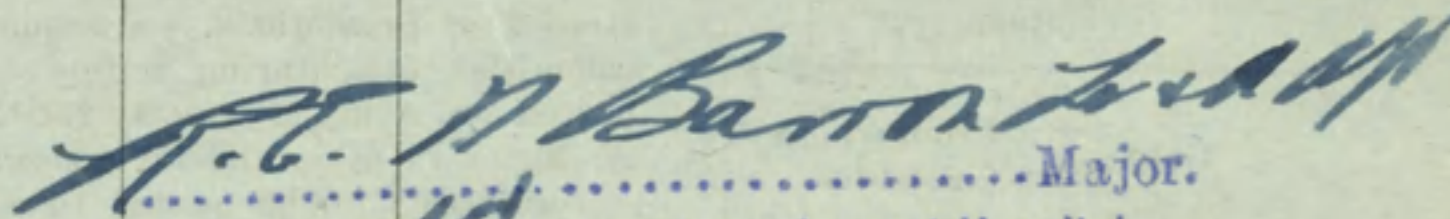
Extended..... Re-engaged..... Qualification (b) Chapman

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>Trans to # 1st Coy Effect 30-4-18 5/0-117 d/27-4-18</i>					
					<i>W. Scott Hunter Capt. Adjt. for O. C. 1st Depot Battalion, W. O. R.</i>
30-4-18	T.O.S.	No 1 Special Service Co. London. Ont			<i>Gerald</i>
		1st Depot. Bn W.O.R. Auth. D. O. #118 Para. A. Part 2. 10/28-4-18			
1-5-18	T.O.S.	1st Bn Canadian Garrison Regiment			<i>Gerald</i>
		No 1 Special Service Do No 1 para (c) part 2 d/1-5-18.			
2-1-18.		Transferred to A. M. C. M. P. No. 1			<i>Gerald</i>
		P.O. No. 7. Part II London 2/1/18. ontario			

(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.

Casualty Form - Active Service

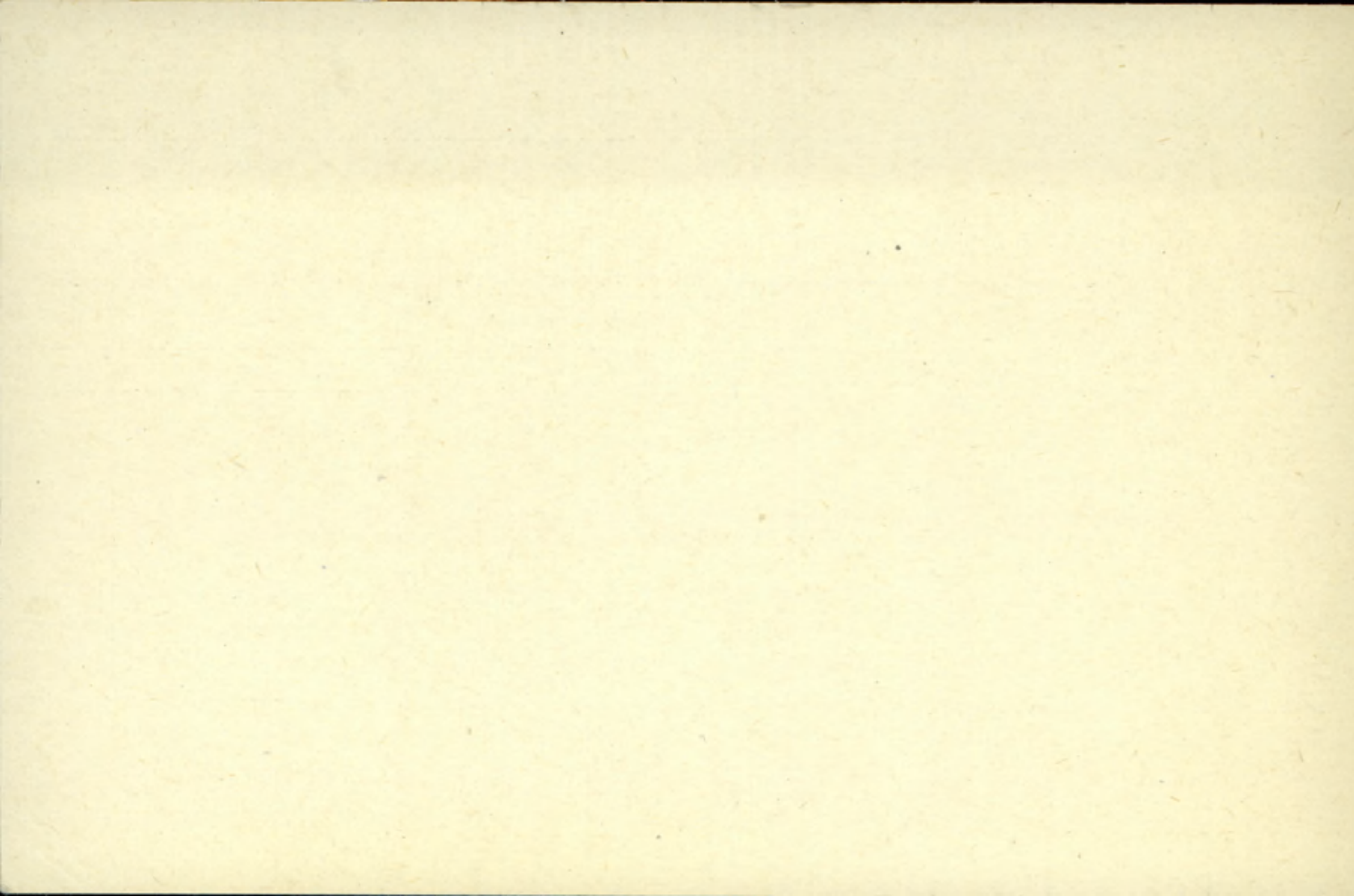
Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
5-2-19		Discharged from His Majesty's Service "On Demobilization" R.O. 1420 I.D. 30-B-814/18-1-19.	London, Ont.	6-2-19	S.M.C.H., D.O. Pt II No 37/6-2-19. <div style="text-align: right;">  Major. O. C. London Military Convalescent Hospital, </div>

No. *3153001*, RANK *Pvt.*

NAME *Baker, Jas. Clifford*

T. O. S. *Trans. fr. 1st Dep Bn.* UNIT *No. 1 Special Service Co.*
36-4-18. (to 18. April 1918) M. D. *1*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1918</i>	<i>1918</i>	<i>m</i>	<i>Trans. to Amb 18th 2/5/18</i>	<i>So 2-2-5-18.</i>
<i>May 1</i>	<i>May 2</i>	<i>m</i>		



No. 3133001 RANK *Pte.*

NAME *Baker, J.* *C.*

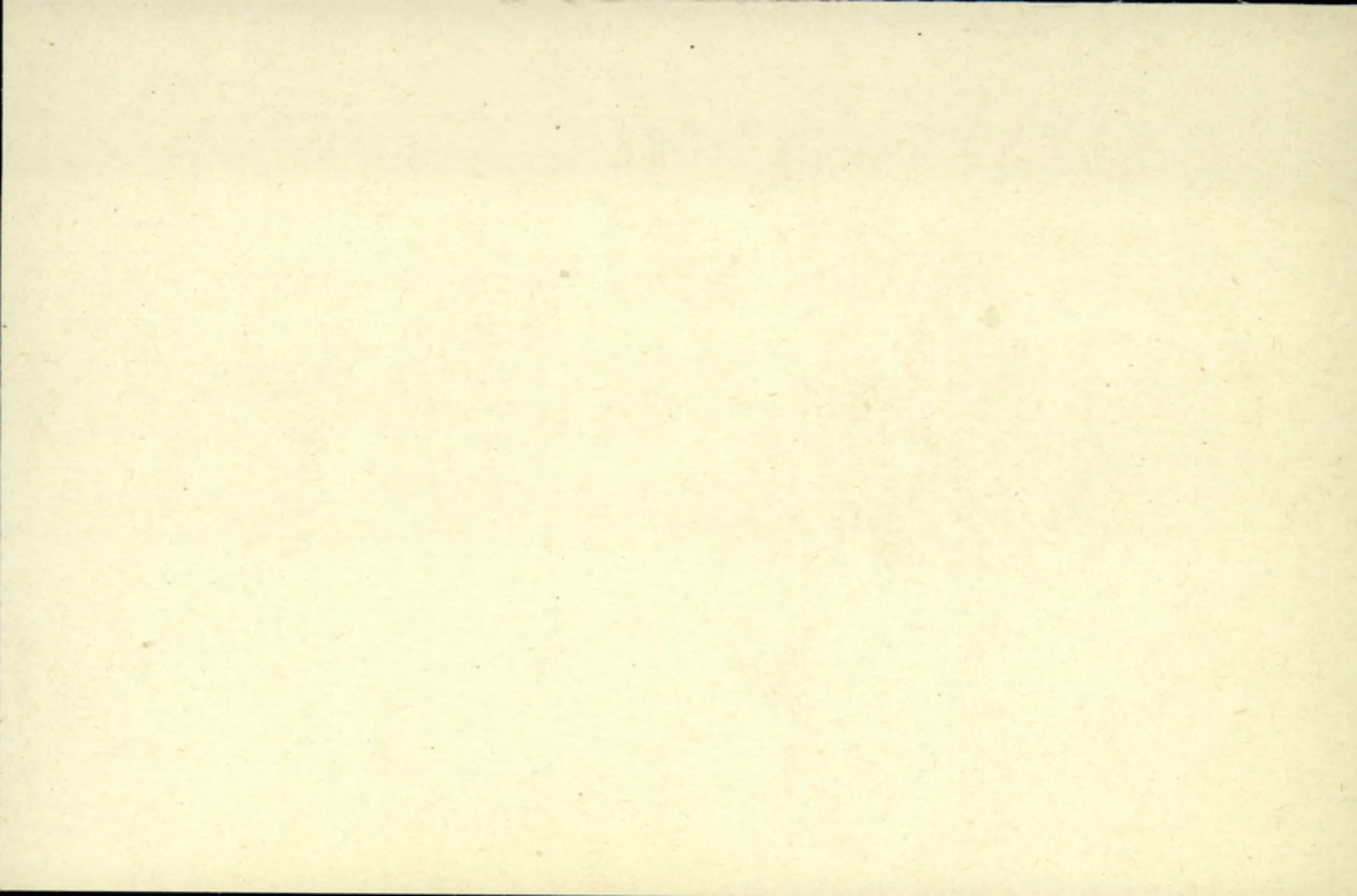
T. O. S.

UNIT *No 1 Training Depot. A. M. C.*

*Trans. fr. 1st. Bn. C. & R.
3-5-18 D. O. 123 of 3-5-18*

M. D. *1*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1918 May 3 June</i>	<i>1918 May 31</i>	<i>✓ ✓</i>		



SURNAME.

Baker

CARD No.

CHRISTIAN NAMES

James Clifford

*S.O. 5-2-19
demon FOLL R. 0:1420
PTA D.O 370 of 6-2-19*

REGL. NO.

313300

RANK

Pte.

UNIT

West Ont. Regt. 1st. Dep. Bn.

T. O. S. Apr. 15. 1918.

FORMER CORPS

Nil

D.O. Part II No 184.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Baker, John Henry

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Wallacetown, Ont

COUNTRY OF BIRTH

Canada, Wallacetown, Ont.

DATE

Nov. 16th 1896

PLACE OF ATTESTATION

London, Ont

DATE

Apr. 15th 1918

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

AUDITOR *YH* PAYMASTER *RS*

OK

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. *Single*

REGT. No. *3193001*

RANK *Pte.*

NAME (IN FULL)

BAKER, J. C.

NEXT OF KIN *John Henry Baker, Father*
 ADDRESS *Wallacetown, Ont.*
 IS SEPARATION ALLOWANCE PAID? *nil*
 TO WHOM PAID *nil*
 ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C. E. F. *10th Bn. P. Coy.*
 PLACE OF ATTESTATION *London, Ont.* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *15-4-18* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY, \$ *nil* DATE EFFECTIVE
 PAYABLE TO *nil* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
 ADDRESS
 STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE
 DISCHARGED *London, Ont 5-2-19* PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY *On leave delegation 1030 B-814*

Balance from previous account
W. J. J. S. Sgt. Capt.
 For Paymaster Misc. Vints 6-2-20

MONTH	PAY AND F. A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES			TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3			DEBIT	CREDIT	DEBIT	CREDIT				
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.							\$	C.	\$	
<i>FEB 1919</i>	<i>5</i>	<i>1.50</i>	<i>5.50</i>	<i>35-</i>	<i>10</i>	<i>20</i>	<i>88</i>	<i>51</i>	<i>2/19</i>	<i>50</i>	<i>70</i>	<i>50</i>	<i>70</i>	<i>RM</i>	<i>50</i>	<i>70</i>	<i>2037. Dischd. 5-2-19</i>	<i>35</i>	<i>for blocking allow.</i>			

X

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	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 (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	
*Only if discharged "Medically unfit."	

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.

Proceedings on Discharge.

Military District No. 1
FEB 7 1919
30-B-814
I.M.D.

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

No.	3133001
Rank	Private
Name	James Clifford Baker
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	London Military Convalescent Hospital
Date of Discharge	5-2-19
Place of Discharge	London, Ontario
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 22 years..... 1 months.	Descriptive Marks Birthmark on right buttock, size of 5 cent piece. Index and middle fingers of right hand amputated.
Height..... 5 feet..... 10 1/2 inches.	
Complexion Fair	
Eyes Blue	
Hair Brown	
Trade Chauffeur	
Intended place of residence } 18 1/2 Central Ave. (To be given as fully as practicable.) } Lndn. St.	
2. The above-named man is discharged in consequence of "On Demobilization" P.O. 1420 I.D. 30-B-814/18-1-19 L.M.C.H.D.C. Park-II no. 37 4/6-2-19.	
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.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218

50m.—3-16.
H. Q. 1772-30-113.

(OVER)

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

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

6. Medals and Decorations.....

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).....

(Date)..... Commanding

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.

(Place) London, Ontario Jas. G. Baker..... (Signature of Soldier.)

(Date) 5-2-19 R. Woods..... (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.

..... (Signature of Soldier.)

10. Statement of Service.

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

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) London, Ontario.....

(Date) 5-2-19.....

(Signature) R. E. M. Burton Major, C. C. London Military Convalescent Hospital.

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.)