

10 M. D. 1st Depot Battalion Manitoba. Regiment  
Regtl. No. 2383508.

**PARTICULARS OF RECRUIT**  
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname Bergstein.

2. Christian name Herbert.

3. Present address Box 105. Post Office Kenora. Ontario, Canada.

4. Military Service Act letter and number 693562. T.C.

5. Date of birth January 22nd. 1888.

6. Place of birth Sundavott. Sweden.  
(town, township or county and country)

7. Married, widower or single Single.

8. Religion Lutherian.

9. Trade or calling Carpenter.

10. Name of next-of-kin Peter Bergstein.

11. Relationship of next-of-kin Father.

12. Address of next-of-kin Eovik, Sundavott. Sweden.

13. Whether at present a member of the Active Militia No

14. Particulars of previous military or naval service, if any No

15. Medical Examination under Military Service Act:—  
(a) Place Kenora. Ontario, Canada. (b) Date 6-11-1917. (c) Category A.2

**ORIGINAL**

**DECLARATION OF RECRUIT**

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

Herbert Bergstein

(Signature of Recruit)

**DESCRIPTION ON CALLING UP**

Apparent age 29 yrs. 10 mths.

Height 5 ft. 6 ins.

Chest measurement } fully expanded 1½ ins.  
range of expansion 35½ ins.

Complexion Medium.

Eyes Blue.

Hair Brown.

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

H. A. Carter

Major

O. C. O. C. "H" Coy. 1st Depot. Battalion  
Manitoba Regiment. Depot Btln.

Manitoba. Regt.

Place Port Arthur, Ontario. Date January 14th 1918.  
Canada.



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

13695

This is to Certify that No. 2383508 (Rank) Private

Name (in full) Herbert Bergstein enlisted in

the 1st Depot Battalion M.R.

CANADIAN EXPEDITIONARY FORCE at Port Arthur on the 14<sup>th</sup>

day of January 1918

HE served in France with 16<sup>th</sup> Battalion month 21 days

and is now discharged from the service by reason of Demobilization R.O. 1420 (a)  
★ C.O. 43 - 517 D.O. 51 ★

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

Age 31 years

Height 5 feet 6 in

Complexion Medium

Eyes Blue

Hair Brown

H. Bergstein

Signature of Soldier

Marks or Scars

Nil

A. Forbes

Major

Issuing Officer  
Officer Commanding No. 10 District Depot

Rank

Date of Discharge Feb 24<sup>th</sup> 1919

Signed at Winnipeg this 24<sup>th</sup> day of February 1919

in Military District No. 10

File Reference No. 44-B-1882

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 .....

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

.....  
Name of Officer

.....  
Rank

.....  
Appointment

LTR Rank Name BERGSTEIN, Herbert Reg'l No. 2383508  
 Unit 3rd Dft Ist Bn Man Regt If in perm. Corps, }  
 What Unit? } Married or Single Single ✓  
 Place and Date of Enlistment <sup>Port</sup> Arthur, Jan, 14th, 1918. Place of Birth Sundavott ~~Russia~~ Sweden.  
 Name and Address, Next-of-Kin Peter Bergstein  
 Eovik St, Sundavott Sweden Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 15625  
 File R.L.  
 Category OR CAT

Discharge, Date and Place Reason Character OC

Report. Date	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England	ckd, 8 S. J. B.	4-3-18	S/S CRE. IC
6-3-18	11 <sup>th</sup> Res	Taken on Strength	Pte Schiffe	4-3-18	Pt 50.55.
21-8-18	---	SOS to 16 <sup>th</sup> Bn Spear	Pte Seaford	21-8-18	Pt 50.196. 16 <sup>th</sup> Bn Pt 50.86 d/25/18
9-10-18	16 <sup>th</sup> Bn	Wounded	Field	2-10-18	6 h A 340
19-10-18	---	In. W + posted to MRD	Pte ---	11-10-18	Pt 50.121. MRD Pt 50.301 d/28/18
2-12-18	3 <sup>rd</sup> CCW	Attached for P. Tete	Pte Seaford	28-11-18	Pt 50.284. MRD Pt 50.344 d/7/12
21-12-18	MRD	Leases on Com 3 <sup>rd</sup> CCW. SOS to 11 <sup>th</sup> Res.	Pte ---	19-12-18	Pt 50.355 + 11 <sup>th</sup> Res 299 d/19/18 M.D.10.
30-12-18	11 <sup>th</sup> Res.	On Com Kimmel Park	Pte ---	30-12-18	Pt 50.308. Pt 50.1 d/21/19.
14.1.19	M.D.10	ltd for all purposes	R. hyl	30.12.18	A.O.13
14.1.19	---	Leases att.	---	12.1.19	- 13.



Regional No.....

# MEDICAL HISTORY of

A.F. B.178

Regimental No.....

Region.....

Surname Bergsten #

Christian Names.....

TABLE I.—General Table.

Birthplace { Parish.....  
County.....

Examined { on.....day of.....191  
at.....

Declared Age.....years.....days.

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair.....Complexion.....

„ Eyes.....

Chest Measurement { Girth when fully expanded }.....inches.  
Range of expansion.....inches.

Physical Development.....

Vaccination Marks { Arm, RIGHT | LEFT  
Number.....

When Vaccinated.....

Vision { R.E.—V = ..... With Glasses { R.....  
L.E.—V = ..... L.....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

Defects or Ailments :—

Examined and found—

Fit for Grade { I.  
II.  
III.  
IV.

(Strike out those which do not apply.)

Signature.....  
Chairman of Medical Board.

Re-examined for posting at.....

On.....day of.....191.....

Enlisted { at.....  
on.....day of.....191.....

	Corps	Regtl. No.
Joined on enlistment		230350
Transferred to	16 Para	
	4 Coy	

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature
11:10:14	1500 hrs 6.48 W 65 hrs 26 hrs
11:10:14	500 hrs 6.48 W 65 hrs 26 hrs

Special Remarks : state if a discharged Soldier

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by.....  
on.....day of.....191.....  
(Signature).....  
(Rank).....





PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins "H" Co., 1st Depot Battalion, M.R.

(2) Regimental Number 2383508.

(3) Full Name of Soldier Bergstein, Herbert.

(4) Place of Birth Evok Street Sundavott, Sweden

(5) Are you married, or not? Single.

(6) If married, state,  
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower? .....

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive? Peter. Bergstein.

If so, state name and address Eovik Street, Sundavott, Sweden.

(10) Is your Mother alive? Annie. Bergstein.

If so, state name and address Eovik. Street, Sundavott, Sweden.

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?..... Yes

If so, in what Company?..... Beaver Insurance Co. Wisconsin.

Have you made arrangements for payment of your Insurance premium..... Yes.

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

*W. H. O'Brien*

C. S. "H" Coy. 1st. Depot. Battalion  
Manitoba Regiment  
Officer Commanding.

JAN 14 1918 PORT ARTHUR, ONT.  
Date.....

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 Bergstein Christian name Herbert
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 693562 17 OCT 1918
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Kenora Ontario, Canada.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 6th day of November 1917, by the undersigned medical board sitting at Kenora, Ontario, Canada.

- 5. Age as stated 29 Years 10 Months. 6. Apparent age Years Months
7. Height 5 Feet 6 Inches. 8. Weight 142 Pounds.
9. Chest measurement { Minimum 35 1/2 Ins. Maximum 37 Ins.
10. Complexion Medium { Eyes Blue Hair Brown
11. Physical development Good { Good Fair Poor
12. Smallpox marks
13. Number of vaccination marks { Right arm Left arm 1
14. When vaccinated last 4 years ago
15. Distinctive marks and marks indicating congenital peculiarities or previous disease

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 All
V.R. 20/20
V.L. 10/200
H.R. Normal
H.L. Normal

Dgd. Wm. Carr Capt President.
Dgd. Mc. Burke Capt Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC.
2-2-18 G.M. Brown M.O. 19-1-18 G.M. Brown M.O.
M.O. 26-1-18 G.M. Brown M.O.
M.O. 2-2-18 G.M. Brown M.O.

Joined 14 day of Jan 1918 at Port Arthur

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE
Joined on enlistment 1st Depot Bat. Fur 2383508 14-1-18
Transferred to 11th Rec Bn 16th Bn

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: 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

CANADIAN



Kenora, Ont.

I.S. Emp Britain

# 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. 2383508 Rank Rte Surname Bergstein  
(Given name in full)  
Herbert  
Unit or Corps 320th R. B. A. 11.16.11.1058 Birthplace Sundswall, Sweden

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

### 1. GENERAL DESCRIPTION:

Physique Good Weight 140 lbs. Height 5 ft. 6 in. Colour of Eyes Blue  
Nutrition Good  
Pulse 78  
Condition of arteries Normal  
Vision Rt.  $\frac{20}{20}$  Left  $\frac{20}{20}$   
Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin).  
1. Scar <sup>4"</sup> right side of abdomen  
Gall stone operation 1913.  
2. slight scar on right side of back of head - slight shrapnel wound Oct 15 1918  
3. Scar marks left upper arm - childhood

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 except as above stated Respiratory System no  
Disturbance of mentality no Muscular System no Digestive System yes  
Osseous and Joint System no Any other general condition no

DISTRICT DEPT. NO. 1  
RECEIVED HEADQUARTERS FEB 15 1918

### 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.

He was operated on for Gall stones in 1913. (cause infection)  
The Condition has troubled him since on several occasions but not since he entered the army on Jan 14<sup>th</sup> 1918.

On Oct 15<sup>th</sup> 1918 he received a slight shrapnel wound of the back of the head. He was in the hospitals in France 7 days and 4 weeks in

(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* (Canada)

Date *Feb 11<sup>th</sup> 1919* Signed *E. J. MacIntyre* 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 *H. Bogotaer* .....

(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.)

*the hospitals in England. He made a good recovery. no disability results*

*[Signature]*

[OVER]

# Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte Name Bergstein Surname Herbert  
Unit or Corps 11<sup>th</sup> Res (If a soldier) Regtl. No. 28 83 508  
Born at Sundsvall, Sweden on, date Jan 22<sup>nd</sup> 1888.  
Signature (for identification) Herbert Bergstein

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight 140 lbs. no  
Height 5 ft. 4 ins. no

2. **NUTRITION AND DIATHESIS?**

Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?**

no

4. **RESPIRATORY SYSTEM.**

no

5. **HEART?**

Abnormal Sounds? no  
Abnormal Size? no  
Pulse Rate? 76 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening?

no

7. **DIGESTIVE SYSTEM?**

no

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g. ? 1.020 Reaction ? acid Albumen ? tr Sugar ? tr

9. **SKIN, MIDDLE EAR, EYE**  
or any other part?

no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Wentworth Park } Signed [Signature] M.O.  
Date 3-1-19 } Signed [Signature] M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.



Medical Examination upon leaving the Service

of an Officer in the General Service of a Soldier in the Army

1. Name of the Soldier: \_\_\_\_\_

2. Regiment: \_\_\_\_\_

3. Company: \_\_\_\_\_

4. Rank: \_\_\_\_\_

5. Date of Examination: \_\_\_\_\_

6. Name of the Medical Officer: \_\_\_\_\_

7. Name of the Surgeon: \_\_\_\_\_

8. Name of the Assistant Surgeon: \_\_\_\_\_

9. Name of the Apothecary: \_\_\_\_\_

10. Name of the Hospital: \_\_\_\_\_

11. Name of the Barracks: \_\_\_\_\_

12. Name of the Garrison: \_\_\_\_\_

13. Name of the District: \_\_\_\_\_

14. Name of the Province: \_\_\_\_\_

15. Name of the Country: \_\_\_\_\_

16. Name of the Army: \_\_\_\_\_

17. Name of the Division: \_\_\_\_\_

18. Name of the Brigade: \_\_\_\_\_

19. Name of the Regiment: \_\_\_\_\_

20. Name of the Battalion: \_\_\_\_\_

21. Name of the Company: \_\_\_\_\_

22. Name of the Platoon: \_\_\_\_\_

23. Name of the Squad: \_\_\_\_\_

24. Name of the Section: \_\_\_\_\_

25. Name of the File: \_\_\_\_\_

26. Name of the Rank: \_\_\_\_\_

27. Name of the Grade: \_\_\_\_\_

28. Name of the Class: \_\_\_\_\_

29. Name of the Order: \_\_\_\_\_

30. Name of the Regulation: \_\_\_\_\_

31. Name of the Article: \_\_\_\_\_

32. Name of the Section: \_\_\_\_\_

33. Name of the Chapter: \_\_\_\_\_

34. Name of the Part: \_\_\_\_\_

35. Name of the Volume: \_\_\_\_\_

36. Name of the Edition: \_\_\_\_\_

37. Name of the Author: \_\_\_\_\_

# CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BERKSTEIN, H. MD 10  
REGIMENT 16th RANK Pte No. 2383508

Date of Examination in England 2-1-19 Date of Examination in France \_\_\_\_\_



### DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

### PRESENT DENTAL REQUIREMENTS

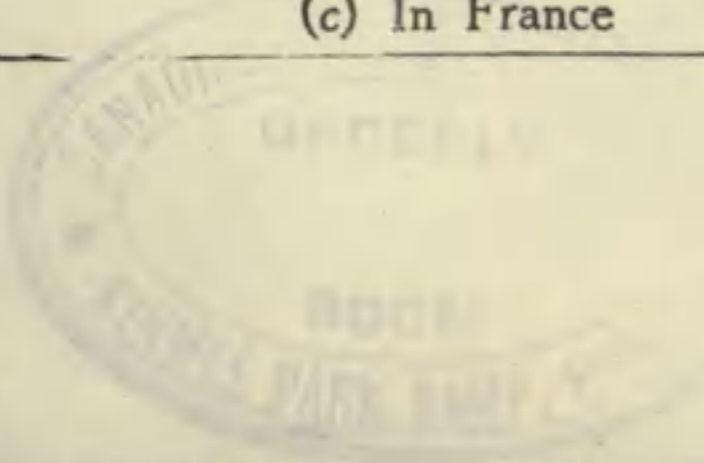
1. FILLINGS \_\_\_\_\_
2. EXTRACTIONS \_\_\_\_\_
3. CROWNS \_\_\_\_\_
4. DENTURES
  - (a) Full Upper \_\_\_\_\_
  - (b) Part Upper 2-3-4-11-12-13-14
  - (c) Full Lower \_\_\_\_\_
  - (d) Part Lower 18-19-20-30-31

HAS HE EVER REFUSED DENTAL TREATMENT? \_\_\_\_\_

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada \_\_\_\_\_
- (b) In England Yes
- (c) In France \_\_\_\_\_

Signature of Dental Officer W. Kennedy  
Quint



UNITED STATES ARMY DENTAL CORPS  
DENTAL CERTIFICATE FOR MOBILIZATION

Name: [Faint Name] No. [Faint Number]  
Rank: [Faint Rank] Branch: [Faint Branch]

1. [Faint Text] 2. [Faint Text]  
3. [Faint Text] 4. [Faint Text]

5. [Faint Text] 6. [Faint Text]  
7. [Faint Text] 8. [Faint Text]

9. [Faint Text] 10. [Faint Text]

11. [Faint Text] 12. [Faint Text]  
13. [Faint Text] 14. [Faint Text]

15. [Faint Text] 16. [Faint Text]

2383508 Pte Berenstein Herbert.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received.					

	M.D 10	Attended to b.b. b. Samuel Park.			31-12-18	Pt 11 5/6 19.
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	M.D 10	be assigned to be attended transferred to b.b. f.			13. 1. 19	Pt 11 5/6 11.
--	--------	--	--	--	-----------	---------------

Embarked for Canada  
*W. G. G. G. G.*  
 at P.M. D 10 Samuel Park.  
 12-1-19

13.1.19  
 T. O. S. of No. 10 District Depot,  
 Part 2 Order No. 34 Para 2  
*W. G. G. G. G.* Lt.-Col.  
 C. C. No. 10 District Depot.

Discharged 24-2-19  
 C. O 43 / 517 D. O 51  
*W. G. G. G. G.*  
 Officer Commanding No. 10 District Depot Major

Nothing to be written in this margin.

# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1,  
Part I.

**Army Form B. 103 (II.) to be gummed on here if required.**

**Nothing to be written in this margin.**

W1889-PP 1150 IM 5/18 G.W.P.Co (34/90)

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration,] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d)
--	---

Initials and Rank of  
an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
---	---	-----------------------------------

(22) Extended { } (23) Re-engaged { }

(24) Miscellaneous entries:—

**NOTES.**—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Bergstein Herbert.

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

M. F. W. 54. (A. F. B. 103.)  
350M.—5-16  
H. Q. 1772-32-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battalion, Manitoba Regiment  
 Regimental No. 2383508 Rank Private Name Bergstein Herbert  
 Enlisted (a) 4-1-18 Terms of Service (a) By War Service reckons from (a) 14-1-18  
 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. Carpenter  
Military. None

CERTIFIED CORRECT.  
29 AUG 1918  
CAN. RECORDS, LONDON.

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				
		EMBARKED SS "CRETIO"	HALIFAX, NS	19-2-18	
		DISEMBARKED LIVERPOOL		4-3-18	
3-18	O. C. 11th TOS 11th C.E. Bn.	on arrival in England.	Digby	4-3-18	Pt. 11 Bn. 0.56
21-8-18	O.C. 11th	SOS on proceeding O/S to 16th Batt'n.	Seaford	21-8-18	Pt. 11. Bn. 0.195
75-8-18	P.O.	Ltd. 16th Bn		27-8-18	No 86
76-8-18	ltdc	joined CAN. CORPS REINF. CAMP		76-8-18	
30-8-18		LEFT FOR UNIT		30-8-18	
31 AUG 1918	octin	JOINED UNIT		30 AUG 1918	
2-10-18	H. Gun	S.W. Head	56 Gun	2-10-18	45531
10-10-18	1. lts.		146 a.s.	2-10-18	25

*[Signature]*  
 Capt & Adjutant  
 11th (Res.) Battalion

(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				
11-10-18	Brighton	W. (Wounded) posted to M. S. Seaford.		11-10-18	W. 3083-6229 M. S. 0.171/18  LIEUT. FOR LT COL. A.A.G.
28-10-18	M.R.D.	Taken on Strength	Seaford	11-10-18	W. 301 WR 5-11-18  M. S. Charts LIEUT. FOR LT COL. I/G RECORDS, C.O.M.F.
19-12-18		Discharged from 8th C.C.D. Seaford	Seaford	11-12-18	W. 301 WR 5-11-18 19-12-18 LIEUT. FOR LT COL. I/G RECORDS, C.O.M.F.
7-12-18 21-12-18	M.R.D.	Command 3rd C.C.D. Ceases to be on Command 3rd C.C.D. S.O.S. on posting to Res.	Seaford Seaford	28-11-18 19-12-18	P.O.# DO. 341. Pt. 2.D.O. 355.  LIEUT. Manitoba Regimental Depot
14/12/18	D.C. 11th	T.O.S. on 1st Reg from M.R.D.	Seaford	14/12/18	PT II B.C. 299
30-12-18	O.C. 11th	on com to 1st Reg part pending transfer to Canada.	Seaford	30-12-18	PT II Bn 309. John Sturrock LIEUT. COL. I/G RECORDS, C.O.M.F.

\*Name Bergstein, Hebbert Rank Pte. Regtl. No. 2383506

Original unit 1st Dep Present unit M M. or S. Age 30 Religion Luth. Fyle Depot..... Ref. H.Q.....

Port, ship, and date of arrival 13-1-19 S.S. Empress of Britain, Halifax

Next of kin Peter Bergstein, (Father) Eovik St. Sunavott, Sweden.

Address on leave.....

Address on discharge.....

Transportation issued  Yes  No Date..... Character on discharge.....

Previous occupation Carpenter Date and place of enlistment November 11th 1917 Kenora, Ont

Diagnosis..... Date of Medical Boards Feb 14

Date.	Remarks	Pt. 2 Order No.
13-1-19	T.O.S. #10 D.D. and Posted to Cas. Coy 14 days landing leave with Subs.	D.O. 34 Pa 2

\*—Name will be given in full; surname first.



Date.

Remarks.

Pt. 2 Order No.

Date.	Remarks.	Pt. 2 Order No.
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

Surname

Christian Name or Names

Reg. No.

Rank *Bergstein*

*As.*  
Unit

*2383508*

*pte*

*Man-16*

Cas. List.

*56 G. Elaples 2-10-18.*

*9-10-18 B 340-9*

*SW Head. 16*

*23-10-18 B 352-2*

*Cent. Mil. Fort Pitt & Katham 11-10-18*

*2. H. 18 B 361*

*3rd Mil Co Woodcock <sup>pte</sup> 26.10.18.*

*11-11-18 B 368-2*

*Risc. 1-11-18.*

A.M.D., 2 DEPT.

Dep. of D.O.M.B. O.M.F.C. London.



NAME

RANK AND CORPS

REGT'L. No.

2383508

H. Q. FILE NO 649

CABLE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

NO.

DATE

Wife Sweden

N 382 11-10-18 Adm. 56 Gen H. Etaples Oct

(H.N. 0340. 9-10-18) Ind 1918. GLEN Head

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

B352-2	Capt. Mil. F. Pitt. Chalk <sup>arr</sup>	11-10-18	S. W. Head.
B361-3	Mil. Co. W. P. Eason	26-10-18	" " "
B368-2	" " " " " " " "	1-11-18	" " " "

Name **Bergestein** Rank **Herbert**

Reg. No. **2383508**

Unit **16**

Next of Kin **Peter Bergstein, Kovicks St., Sundarott, Sweden**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-10-18	56 1/4	Staples	Sw. Head	4542	4382	4572/7
11-10	Mil Fort Pitt	Chatham	do.	3352		28900
26-10	M C H	Epsom	do.	3361		30153
1-11	Discharged	do.	(flier)	3368		9230
1-11	Exp Camp. Rhyt	(Rk 4/11)				



M.S.A. 6

SURNAME.

Bergstein

CHRISTIAN NAMES

Herbert

REGL. No.

2383508

RANK

Pte.

UNIT

Man. Regt. 1st Depo. Bn.

FORMER CORPS

Nil

10  
 CARD NO. ✓  
 808-110-21-2-19  
 FOLL.  
 100.51 of 20-2-19  
 10-1010

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Bergstein, Peter

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Crook St. Sundsvall, Sweden.

COUNTRY OF BIRTH

Sweden, Sundsvall.

DATE

Jan. 22<sup>nd</sup> 1888

PLACE OF ATTESTATION

Port Arthur Ont.

DATE

Jan. 14<sup>th</sup> 1918

0/10 21-2-18  $\frac{1151}{2}$

R/O. 25-1-19  $\frac{256}{84}$  Pte



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

a.m.m.

Number 2383508 Rank P-6

*mul*

Surname BERGSTEIN

Christian Name *Herbert*

*P*

Units *16* *Bn. Can. Inf* Theatre of War *France*

Date of Service 22-8-18

Remarks *sent to*

Latest Address *Box 649 Kenora, Ont.*

*619*

Roll No. *Page 19345.*

200m.-6-21.

DESP. JUL 11 1925

REGN. NO. 14797

Date of Enlistment *14-Jan-18*

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# B

5969

*1st May 18*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15:</i>			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. *2383508*  
 Rank *Pte* Promoted Reverted Discharge  
 Soldier's Name *Herbert Bergstein*  
 Battalion *1st Dft. M.R. D*  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name  
 Address  
 Change of Address  
 1 WALTER BERGSTEIN,  
 BOX 266 KENORA,  
 2 ONT. 15 15.00  
 3 % 2383508 PTE HERBERT BERGSTEIN  
 4 FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1918</i>					<i>File 1345-H-3 NR 702<sup>a</sup></i>
<i>May</i>	<i>J 1994</i>		<i>15</i>	<i>15</i>	<i>R Mailed 28/5/18.</i>
<i>June</i>	<i>D 15613</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>X 29896</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>AUG</i>	<i>B 34904</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>SEP</i>	<i>B 39922</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>OCT.</i>	<i>B 44882</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>NOV</i>	<i>A 61085</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec</i>	<i>C 63076</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>JAN</i>	<i>D 72216</i>		<i>15</i>	<i>15</i>	
			<i>135</i>	<i>135</i>	

*m.r.o. 61085 issued 28/1/19*

M. F. W. 128  
400M.-6-17-1772-38-1141  
L. L. 22320-M. & D. 7953.

.....A/c Closed  
 Ret'd per *Impress of Britain*  
 Date *27-1-19 F.X. 28-1-19*  
 Clerk *M.D. 10.*

AUTHORITY } *2 M 27-3-18*  
 FOR }  
 NEW ACCT. } *DC Brown 23/5/18*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.	Promoted	Reverted	Discharge
Rank			
Soldier's Name			
Battalion			
Beneficiary			
Relationship			
Address			

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128  
400M. 6-17-1772-38-1141  
L. L. 4220-M. & D. 1953.

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

REGT. No. *2383508* RANK *Pfc* NAME (IN FULL) *Bergstein N.*  
IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

M. Q. S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE	
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	DATE EFFECTIVE	
					DISCHARGED	PLACE DATE	REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

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		\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.		
			\$	C.																				NO.
<i>1/19/19</i>	<i>24</i>	<i>55</i>	<i>110</i>	<i>60</i>	<i>50</i>	<i>35</i>																		<i>Trans 25.83 for pay on 1/19</i>
																								<i>25.83</i>
																								<i>106.70</i>
																								<i>69</i>
																								<i>25.83</i>
																								<i>106.70</i>
																								<i>89</i>
																								<i>132.53</i>
																								<i>25.83</i>
																								<i>89</i>

BALANCE FROM PREVIOUS ACCOUNT

B-1149

1-24

AUDITOR *aw*

PAYMASTER *14*

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

REGT. No *2383508*

RANK *Pt*

NAME (IN FULL) *Bergstein Herbert*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE	
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE	DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

*1st Dept Btm*

*14-1-18*

*Box 340 Kenota Ont*

*24-2-19*

BALANCE FROM PREVIOUS ACCOUNT

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	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
<i>19</i>																	
<i>Feb 22</i>	<i>122</i>		<i>880</i>													<i>210 00</i>	<i>1st Payment WSS</i>
<i>Mar 22</i>																<i>140 - 00</i>	<i>2nd " "</i>
<i>Apr 2</i>				<i>8 76</i>												<i>148 76</i>	<i>8 76 50% Co. per GPR</i>
<i>- 22</i>																<i>78 76</i>	<i>File B661</i>
<i>May 22</i>																<i>78 76</i>	<i>3rd Payment WSS</i>
			<i>880 - 18 76</i>		<i>288 76</i>				<i>288 76</i>					<i>288 76</i>			<i>4th " "</i>
<i>- d/c closed -</i>																	

AUDITED  
 MAY 22 1919  
 Audit Clerk  
 M. D. Co.





\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.				
EFFECTIVE DATE:-	1.5.18	EFFECTIVE DATE:-					
AMOUNT:-	15 <sup>00</sup>	AMOUNT:-					
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.					
Mr Walter Bergstein Box 266. Kenora Brother Ontario.							
Stopped Office 1.1.19							
PARTICULARS OF RANK OR APPOINTMENT							
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT					
		Private					
UNIT AND TRANSFERS							
ORIGINAL UNIT:- 1 <sup>st</sup> Dep Bn Max Reg. Pt Arthur Det							
DATE ACCOUNT FIRST OPENED:- 1.3.18							
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S/D	UNIT TRANSFERRED TO				
			11 <sup>th</sup> Dis				
	86 1/9/18	20/9/18	16 Bn				
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
12/12/18	8521	Seaford	40.00			Seaford	

PARTICULARS OF RENDERING NON-EFFECTIVE												
MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION	
March	Balance fwd								6000	23		
April	BB	33		A.R 95 13 <sup>th</sup> 11 Res	9 73					38		
				Quots - 1000 15 <sup>th</sup> "	1 32							
		33		A.R 27 27 <sup>th</sup> 11 Res	9 73				72 22			
May	P Pay	3410		b.a.p.				15				
				AR 116 3/5/18 11 Res	38 93							
		3410		" 519 29/5/18 "	9 73			15	42 66	38		
JUN	"	33		b.a.p.				15				
				AR 796 15/6/18 "	9 73							
		33		" 965 28/6/18 "	9 73			15	41 20	38		
JUL	"	3410		b.a.p.				15				
				" 1206 12/7/18 "	9 73							
		3410		" 1266 20/7/18 "	14 60			15	35 97	38		
AUG	"	3410		b.a.p.				15				
				" 1545 13/8/18 "	7 30							
				" 1658 20/8/18 "	4 87							
		3410		D/A 1053 31/8/18 b.b. Hq Det 16 <sup>Bn</sup>	3 57			15	39 33	38		
Sept	"	33		C A P				15				
				AR 454 ✓ 16 Bn 6.9.18	3 57							
		33		✓ 569 ✓ 14.9.18	3 57			15	50 19	38		
Oct	✓	3410		AR 8801 ✓ CCH-Ehs 28.10.18	4 87			15	64 42	38		
		3410			4 87			15				

COMPILED BY *[Signature]*  
CHECKED BY *[Signature]*

NUMBER 2383508 RANK Pte

NAME BERGSTEIN. H. Can. A.P. 15<sup>00</sup>

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				<i>Bal Fwd</i>					64 42	38 -	
Nov.	P. Pay	33 -		CR 1633 Kimmel Park ✓ 5.11.18	4 87			15			
				✓ 5417 ✓ ✓ 20.11.18	14 60						
Dec.	✓	34 10		AF. 0.1823A # 348. Chatham 15.10.18	- 85			15			
				CR 7148 Kimmel Park ✓ 27.11.18	24 51						
	<i>Int on Deferred Pay</i>	1 55		✓ 8521. 3 <sup>rd</sup> ccd 13.12.18	19 47				58 24	38 -	
	S.F. 28.11.18 / 9.12.18 / 12 Days (R.L. Seg. B.)	8 76							47 53		
	80284. 3 <sup>rd</sup> ccd 2/12/18	77 41			64 30			30			
Feb/19				<i>Endorsed on L.P.C.</i>							
				RR. P. 22. RHYL 9.1.19	9 73				37 80		
					9 73						

# List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263	Attestation Paper Militia Form W. 23
Squadron } Battery } Conduct Sheet, " B. 263a	or Particulars of Recruit " W. 133
Company } or Field Conduct Sheet " W. 178	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
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	(a) Proceedings on Discharge.
Duplicate Discharge Certificate " W. 39A	(b) Attestation.
‡Form of Will " W. 82	(c) Medical History Sheet.
§Only if discharged "Medically unfit."	
‡Only if man has not been overseas.	

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.

# Proceedings on Discharge.

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

No.	2383508
Rank	Private
Surname	Bergstein
Christian name	Herbert
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	1st Depot Batt. M.R.
Date of discharge	24-2-19
Place of discharge	Winnipeg
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....31.....years.....months.	Descriptive marks
Height.....5.....feet.....6.....inches.	
Complexion Medium	
Eyes Blue	
Hair Brown	
Trade Carpenter	
Intended place of residence Box 3400 Kenora	
(To be given as fully as practicable.)	Winnipeg
2. The above-named man is discharged in consequence of	
☆ C.O. 43 - 517 D.O. 51 ☆	
Demobilization R.O. 1420 (c)	
Authority for discharge.....	
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 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.)	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	
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

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, and that I have received my permanent discharge certificate.

(Place) Winnipeg H. Bergstein (Signature of Soldier.)

(Date) 24-2-19 Hlood (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) Winnipeg

(Signature) [Signature] Major.

(Date) 24-2-19

O.C. No. 10 District Depot.

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.)

None

H Bergstein