





10

M. D. 1st Depot Battalion Manitoba Regiment

Regtl. No. 2383338

card  
47.87.  
7/2/18

# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

DUPLICATE

(Class 1)

1. Surname..... Bishop
2. Christian name..... Howard Ashley
3. Present address..... 264 College St. Port Arthur Ontario  
Canada
4. Military Service Act letter and number..... 695826 T.C.
5. Date of birth..... February 16th 1896
6. Place of birth..... Hantsport Nova Scotia Canada.  
(town, township or county and country)
7. Married, widower or single..... Single
8. Religion..... Baptist
9. Trade or calling..... Clerk
10. Name of next-of-kin..... Mrs. Watson Bishop
11. Relationship of next-of-kin..... Mother
12. Address of next-of-kin..... 264 College St., Port Arthur Ontario  
Canada.
13. Whether at present a member of the Active Militia ~~In the Naval Service~~
14. Particulars of previous military or naval service, if any..... None
15. Medical Examination under Military Service Act:—  
(a) Place Port Arthur Ontario Date Jan 3rd. 1918 (c) Category All



## DECLARATION OF RECRUIT

I, Howard Ashley Bishop, do solemnly declare that the above particulars refer to me, and are true.

*Howard Ashley Bishop* (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age..... 21 yrs..... 8 mths.  
 Height..... 6 ft..... 1/2 ins.  
 Chest measurement } fully expanded..... 37 1/2 ins.  
                               } range of expansion..... 31 ins.  
 Complexion..... Medium  
 Eyes..... Grey  
 Hair..... Brown

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

*H. A. Outman* Major  
O. C. "H" Coy. 1st. Depot. Battalion, Depot Btln.  
O. C. Manitoba Regiment,  
Manitoba Regt.

Place Port Arthur Ontario Date Jan. 3rd. 1918.

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'y. 1st. Depot Battrn.M.C.

(2) Regimental Number..... 2885338

(3) Full Name of Soldier..... Howard Ashley Bishop

(4) Place of Birth..... Hantsport Nova Scotia Canada.

(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?.....Yes......

If so, state name and address Watson Bishop, 264 College St. Port Arthur  
Ontario Canada.

(10) Is your Mother alive?.....Yes......

If so, state name and address Anne Bishop, 264 College St. Port Arthur  
Ontario Canada.

(11) If your Mother is a widow.....No......

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?.....Confederation Life.....

Have you made arrangements for payment of your Insurance premium...No......

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

H. H. Outan.....Major  
O. C. "H" Coy. 1st. Depot. Battalion.  
Manitoba Regiment.  
Officer Commanding.

Date.....January 3rd, 1918......

OCT 29 1917

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 Bishop Christian name Howard Ashley  
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule  
3. Consecutive number on schedule of men reporting for service (if he appears on it)  
4. Address (including street and number, if any) 264 College St. PORT ARTHUR, ONT.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 12th day of October 1917, by the undersigned medical board sitting at PORT ARTHUR, ONT.

5. Age as stated 21 Years 8 Months. 6. Apparent age 27 Years — Months  
7. Height 6 Feet 0 1/2 Inches. 8. Weight 163 Pounds. 20/20  
9. Chest measurement { Minimum 32 1/2 Ins. 10. Complexion Medium { Eyes Grey  
Maximum 37 3/4 Ins. { Hair Brown  
11. Physical development Good { Good  
Fair  
Poor 12. Smallpox marks  
13. Number of vaccination marks { Right arm  
Left arm 14. When vaccinated last 1908  
15. Distinctive marks and marks indicating congenital peculiarities or previous disease

16. Slight defects but not sufficient to cause rejection Slight prominence found in region of thyroid  
The man denies having had { Rheumatism We find no evidence of past { Rheumatism  
Tuberculosis Tuberculosis  
Syphilis Syphilis no goitre found  
(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 A4

J. E. Maitland Richard Cap President.  
Member. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.	<u>5-1-18</u>		<u>Gr Brown</u> M.O.
		M.O.	<u>12-1-18</u>		<u>Gr Brown</u> M.O.
		M.O.	<u>12-1-18</u>		<u>Gr Brown</u> M.O.

Joined 3 day of Jan 1918 at Port Arthur

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>1st. Debat</u>	<u>2383338</u>		<u>3-1-18</u>
Transferred to.....	<u>Bat M.R</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.)

350M.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. 1st Depot Batta. M.R.

Regimental No. 2383338, Rank. pte Name. Bishop, Howard Ashley  
C. E. F.

Enlisted (a) 3-1-18. Terms of Service (a) war. Service reckons from (a) 3-1-18.

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

Extended. Re-engaged. Qualification (b) Mil - Naval 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				
<u>12-4-22</u>		<u>District Record Office</u>	<u>M.D. 10</u>		
<u>3-1-18</u>		<u>D.O.F. 1st D.B.M. Rgt.</u>			
<u>18-1-18</u>		<u>S.O.S. Casualties -</u>			
		<u>Enlisted in the R.N.C.V.R.</u>			
		<u>Co. 18-18. Para 199</u>		<u>D/18/1/18.</u>	



H. H. H. & G. M. G.  
O.C. No. 10 DET. GEN. LIST.  
12/4/1922

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]





\*Name Bishop Howard Ashley Rank Pte Regtl. No. 283328

Original unit 1st B.M. Lt Present unit N. or S. Age 21 Religion Baptist Fyle Depot 44 B - 2845 Ref. H.Q. \_\_\_\_\_

Port, ship, and date of arrival \_\_\_\_\_

Next of kin Mrs Watson Bishop (mother)

Address on leave 264 Colledge St Port Arthur Ont

Address on discharge \_\_\_\_\_

Transportation issued Yes No Date \_\_\_\_\_ Character on discharge \_\_\_\_\_

Previous occupation blank Date and place of enlistment 2-1-18 Port Arthur Ont

Diagnosis \_\_\_\_\_ Date of Medical Boards \_\_\_\_\_

Date.	Remarks.	Pt. 2 Order No.
18-1-18	lost	
	Casualties R.O. 18-18 Para 199 NY 18-1-18	
	Enlisted in the R.N.C.V.R	

\*—Name will be given in full; surname first. obtained from Records available [OVER]

12-4-22



SURNAME. *Bishop*  
CHRISTIAN NAMES *Howard Ashley*  
REGL. No. *2383338* RANK *Pte.*  
UNIT *Man. Regt. 1<sup>st</sup> Lpo. Bn.*  
FORMER CORPS *Nil.*

CARD NO. *✓*

FOLL.

NEXT OF KIN.

NAMES IN FULL *Bishop, Mrs. Watson*  
RELATIONSHIP TO SOLDIER *Mother*  
ADDRESS *264 College St. Port Arthur Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada Hantsport, N.S.* DATE *Feb. 16<sup>th</sup> 1896*  
PLACE OF ATTESTATION *Port Arthur Ont.* DATE *Jan. 3<sup>rd</sup> 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