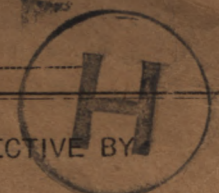


REGIMENTAL DOCUMENTS

NAME **WARD WARREN**

REGT. NO. **3256047**

UNIT **138th** H. Q. FILE NO.



9

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

1 TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

1 LAST PAY CERTIFICATE (M.F.W. 44)

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

1 PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)



DEATH

Category

DISCHARGE

Category

Demol.

DESERTION

06255

1 Dent Cert.

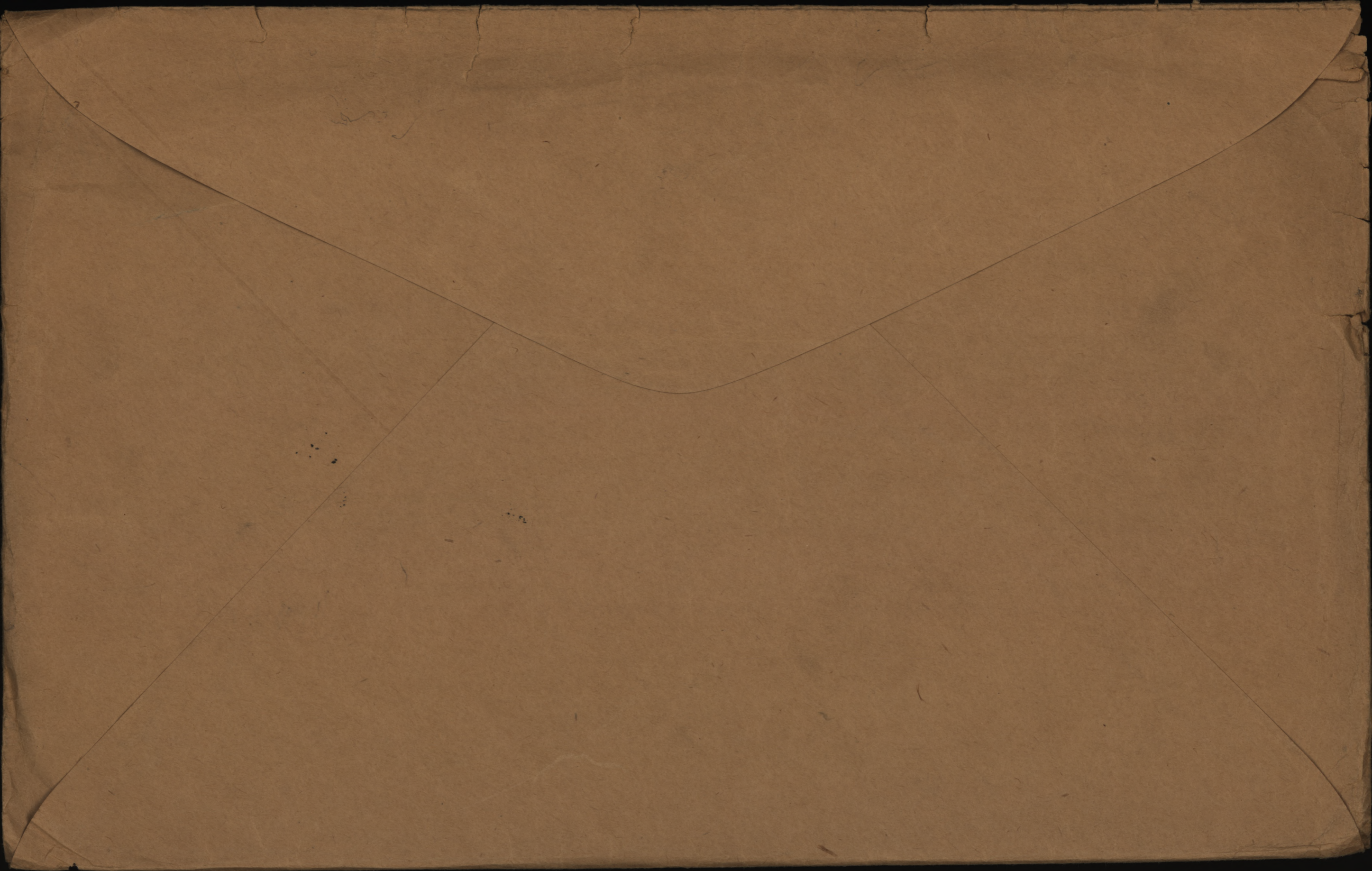
2 CP 3

1 1149

1 R 122

1 M 3122

2
21-3
16-3
3-3
2



A-11.

18

~~VB~~

Number 3256047

Rank

Pte

Surname WARD

Christian Name Warren

Units N.B.R. Theatre of War England

Date of Service 15-8-18

Remarks

Latest Address Bathurst N.B.

Roll No. a Page 2834

200m-2-21.M.

BOOK NO. 31. M.

Patent Address

Remarks

Date of Service

Units

Original Name

Theatre

REC'D JUN 27 1922
 JUN 27 1922
 JUN 27 1922

7074
now in stock
14 1/25

Page

NAME *Ward W*

REGT. No. *3256047*

RANK AND UNIT *Pte*

13. Res. Bn

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

5939

REMARKS

C 379.

g. ban. gen. ^{Park} Kimmel

31-1-19

Influenza. NB Reg

C 386.

Discharged

1[?]2-2-19

"

Name ^{P6} wards. W. R. Folio Reg. 13 Cam Pers.

Rank Reg. No. 3256047. Compy. m. d. 2.

Age 26. Service 12/12. Rel. Pers.

Disease Influenza.

Admitted 30-1-19. From Pines Camp 11

Ward 14.

Transferred To

Discharged 12-2-19. To unit m. d. lat of 11.

AFW. 3118. 1237.

AFW. 3243 & 3243a Medical History Sheet & other Documents.

To

3243 Files 12/2/19

From

To
~~off~~ to m. D. a. 31-1-19.

From

To

1237 Files 12/2/19

From

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

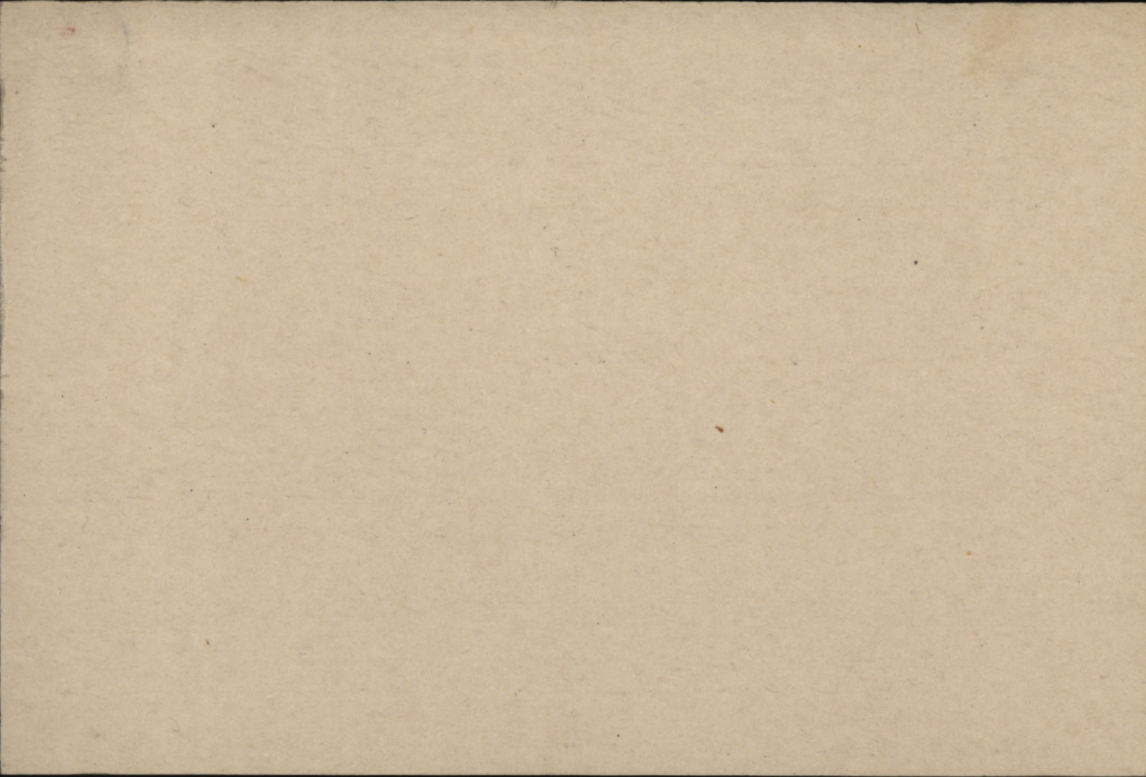
9 12,

Surname Ward H. Q.
 Christian names Warren M. D. No. 7
 Regtl. No. 325-6047 Rank Plt T. O. S. Jan 23 19 18
 Unit N.B. Regt. 1st Dep. Bn D. O. Pt. II 22 of 22-1-18
 Reason Dismiss S. O. S. 15-7- 19 19
 Auth 11.11.199 of 18 7/19 210R

Next of kin Ward James Relationship Father
 Address South Tatamagouche N.B. Also notify:

BORN—Place Canada South Tatamagouche N.B. Date Oct 27 1892
 ATTESTED—Place St John N.B. Date Jan 23 1918
 O/S 3/8/18 1365 R/C 12-7-19 37/1 pte
15

22



5939

Surname

Christian Name or Names

Reg. No.

WARD.

W.

3256047.

Rank

Unit

Pte.

NB.13R.

Cas. List.

9.C.G.H.Kinmel Park.

31-1-19.

5-2-19⁹C379.

Influenza. *al*

17-2-19⁹C386.

Dis

10³-2-19

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London

Cas. List.

5939

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 Bn., N. B. Regt.,Regimental No. 3,256,047 Rank Pte. Name Ward, Warren

C. E. F.

Enlisted (a) 23/1/18. Terms of Service (a) Duration of War Service reckons from (a) 23/1/18.

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) Farming

| 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 DISSEMBARKED | HALIFAX LIVERPOOL | 1-8-18 16-8-18 | H.M.T. NANKIN |
| 19-8-18 | 00 13th Res. Bn | T.O.S. 13th Res Bn on arrival from Canada. | Bremshott | 16-8-18 | B.O. 105, Pt 2. |
| 5-4-19 | 00 13th Res. Bn | Ceases to be shown on Command to Can. Segregation Camp, Rhyl, and is S.O.S. on transfer to M.D.C. Wing No. 2, Kinnel Park, Rhyl. | Ripon | 17-12-18 | B.O. 79, Pt 2. |

W. J. ...
W. J. ...
 Captain & Adjutant.
 13th Canadian Reserve 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.]

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| 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 | | | | |
| | | NO 15-5 SOS m 02 | | | KPC. 1/7/19 |
| | | " 92 TOS 01 3 | | | " 2/7/19 |
| | | " 98 SOS <u>Comada</u> | | | " 7/7/19 |

*Weyman
Pheni*

Embark RMS-Carmania
Liverpool 5.7.19

HP Sully Capt & A/Lt

RECEIVED

STATION 26012/VL/19

RECEIVED

RECEIVED

RECEIVED

Copy replacing Original

SERVICE AND CASUALTY FORM (Part I):

Army Form B.103-I.
Part I.

| | | |
|--|------------------------------|----------------|
| (1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) | (2) Regiment or Corps | (3) Regtl. No. |
| (4) Surname <i>Ward</i> | <i>W/pt 64 of W. A. Reg.</i> | <i>3256047</i> |
| (5) Christian Names <i>Warren</i> | | |
| (6) Army Form, number of, Attestation } Form or Record of Service paper } | | |
| (7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918) | | |
| (8) Date of birth as stated on enlistment | | |
| (9) (a) | | |

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

Initials and Rank of
an Officer.

| (15) Category | Date | Medical Authority | Initials and Rank of an Officer | (16) Record of Occupation in Civil life (<i>vide</i> 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) | (Place) | | |
| (19) Pivotal-man (f) | (Date) | | (Signature of Posting Officer) |
| (20) Qualifications (g) | or (21) Corps trade and rate | | |
| (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. 4:0 of 1917). (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, Shoeing-smith, &c.

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

Nothing to be written in this margin.

Forms/B. 103/3

(6 28 19) W10416—P2151 100,000 3/19 HWV(R)460

5939

| (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, reduction, reversion, casualty, &c. | (F) Remarks, and initials and rank of an officer |
|---------------|---------------------------|---|---|-----------------------------|---|---|
| Date | From whom received | | | | | |
| 19.9.18 | 13 th Reg | 145 | Arrived in England S. S. Duxbury T.O.S. | Bishopton | 16.9.18 | |
| 21.12.18 | --- | 301 | In com. S.C. Rhyll for duty as clerk | Witley | 16.12.18 | |
| 5.4.19 | --- | 79 | Captain in com. S.O.S. to M.D.C.W. Rhyll | Ripon | 17.12.18 | |
| 14.2.19 | 2 M.D.C.W. No. 2 Rhyll | 38 | T.O.S. of prom. cadre | Rhyll | 19.1.19 | |

Certified true copy of Record sheet.

D.C. Cochrane & Capot
FOR LT. COL. I/C RECORDS, G.O.M.F.

Nothing to be written in this margin.

JUL 5 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D 199
 JUL 15 1919 S.O.S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D 199

W.C. Roberts
Lieut.
For O. C. No. 2 District Depot.

5939

Form R 122.
0287-65M-28-7-17.

LC

Rank *LC* Name *WARD WARREN* Reg'l No. *256047*
 Unit *A 64 3 B Rgt* If in perm. Corps, }
 What Unit? } Married or Single *Single*
 Place and Date of Enlistment *St. John N.B. Jan/23/18* Place of Birth *N.B.*
 Name and Address, Next-of-Kin *Mrs James Ward*
South Tetegouche N.B. Relationship *Mother*
 Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N.E. R.B. No. *5708*
 File No. *[Signature]*
 Category

Discharge, Date and Place Reason Character

| Report. | | 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 |
|--------------------|----------------------------|--|---------------------|--------------------|--|
| Date. | From whom received. | | | | |
| <i>19 AUG 1918</i> | <i>13th Reg</i> | <i>Arrived in England..</i> | <i>15 AUG 1918</i> | <i>H.M.T.</i> | <i>Nankin</i> |
| | | <i>Taken on strength</i> | <i>Ot. Berkhott</i> | <i>16 AUG 1918</i> | <i>Pt 100 195.</i> |
| <i>21.12.18</i> | <i>- " -</i> | <i>On loan 22. Rlyl for duty as Cook</i> | <i>St. Melby</i> | <i>16.12.18</i> | <i>P=0 301</i> |
| <i>5.4.19</i> | <i>- " -</i> | <i>Leaves on loan. SO S to M.D.C.W. Rlyl</i> | <i>Rypon</i> | <i>17.12.18</i> | <i>- 79</i> |
| <i>14.2.19</i> | <i>2nd M.D.C.W. Rlyl</i> | <i>T.O.S. of former Cadre</i> | <i>Rlyl</i> | <i>19.1.19</i> | <i>- 38.</i> |
| <i>4.7.19</i> | <i>5th M.D.C.W.</i> | <i>T.O.S. from 2 M.D.C.W.</i> | <i>- " -</i> | <i>2.7.19</i> | <i>- 94</i> |
| <i>7.7.19</i> | <i>- " -</i> | <i>SO S to Canada</i> | <i>Rlyl</i> | <i>5.7.19</i> | <i>- 96</i> |
| | | <i>Dist Area - I.</i> | | | |
| | | <i>To Canada 93-I-76</i> | | <i>5-7.19</i> | |

5939

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. 3256047 Rank Pte Surname Ward
(Given name in full)

Unit or Corps 13th Res Bn Birthplace South Teleggeoch N.B.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 168 lbs. Height 5-10 ft. in. Colour of Eyes Brown

Nutrition Good

Pulse 76

Condition of arteries Good

Vision Rt. 9 Left 9

Hearing (conversational voice) Rt. 9 ft.

Left 9 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Nil

Opinion as to general health and physical condition 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 System No 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 No 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.

5939

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Kennel Park (Overseas)

Date 22/5/19 Signed [Signature] 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 [Signature]

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date Signed [Signature] 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 a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Station
and Date.

5939

CASE HISTORY SHEET.

No. 3256047 Rank Private Name Ward, Warren Age 25
 Unit 1st D. Bn. Completed years of service 3/12 Where and how long Canada
 Date of admission Mar. 11th. 18 Date of discharge 16/4/18
 Diagnosis mumps Place of origin St John N.B.

CONDITION ON ADMISSION AND PROGRESS OF CASE

General condition good
 swelling both sides

Ochritis on left side & had
 to be returned 17 days on same
 course

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) neg

TREATMENT

(Especially any specific or special form.) usual

CONDITION ON DISCHARGE

(and disposal made of case.) Not fit for immediate
 duty - 10 days leave
 Recommended

Date April 1. 18

Ralph B. G. Coff
 Medical Officer i/c case.

CASE HISTORY SHEET

Name

Age

Sex

Date of admission

Place of origin

Occupation

Religion

Marital status

Education

Family history

Personal history

Present illness

Course of illness

Examination

Diagnosis

Prognosis

Treatment

Outcome

Remarks

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

5939

MEDICAL CASE-HISTORY SHEET.

HOSPITAL Military STATION St. John. N.B.
 No. 6047 Rank Pte. Name Ward Warren Age 25
 Unit 1st. Depot Battin. Service Canada 5/18
 Date of Admission 11-4-18 Date of Discharge 16-4-18
 Diagnosis Mumps
 Date of Origin _____ Place of Origin St. John. N.B.

CAUSE OF ILLNESS OR INJURY:

HISTORY OF PRESENT ILLNESS OR INJURY.

(Is Illness or Injury result of Service?)

Family History. Negative.

CONDITION ON ADMISSION.

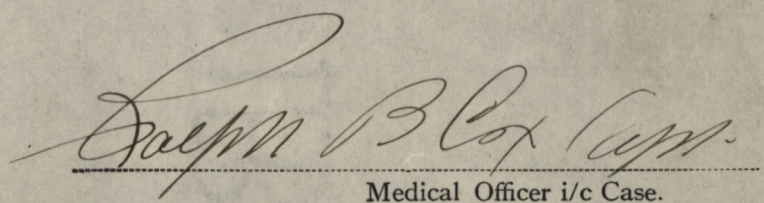
General condition good. Swelling both sides,
Orchitis in left side, and had to be retained 17 days over timelimit.

TREATMENT.

Usual

CONDITION ON DISCHARGE FROM HOSPITAL.

Not fit for immediate service. 10 days leave recommended



 Medical Officer i/c Case.

Date 16-4-18

Q 10043

MEDICAL CASE-HISTORY SHEET

St. Louis, Mo.

History

6047

pre.

Ward

Lat. 36° 52' N

Canada 3/18

11-4-18

10-4-18

Illness

St. Louis, Mo.

Place of Origin

Place of Origin

Case or illness or injury

History or present illness or injury

(is there any family history?)

Negative

Family history

Condition on Admission

General condition good. Swelling both sides

Gonorrhea in left side, and had to be treated 17 days over time.

Treatment

Usual

Condition on Discharge from Hospital

Not fit for immediate service. 10 days leave recommended

Medical Officer in Charge

10-4-18

10-4-18

10-4-18

10-4-18

5939
CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) WARD N. M.D. 2
 REGIMENT 13 Res RANK Plt No. 3256047
 Date of Examination in England 22/5/19 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 31
2. EXTRACTIONS 1
3. CROWNS _____
4. DENTURES _____
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

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 _____
 (c) In France Yes

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer F B Judley
Capt.

5939

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 7

M.F.B. 200M-478 1772-39-460.

NAME OF SOLDIER: *Ward W. W. W. W.*

REGIMENT: *1st Light Batt*

RANK: *Plt*

No. *3256047*



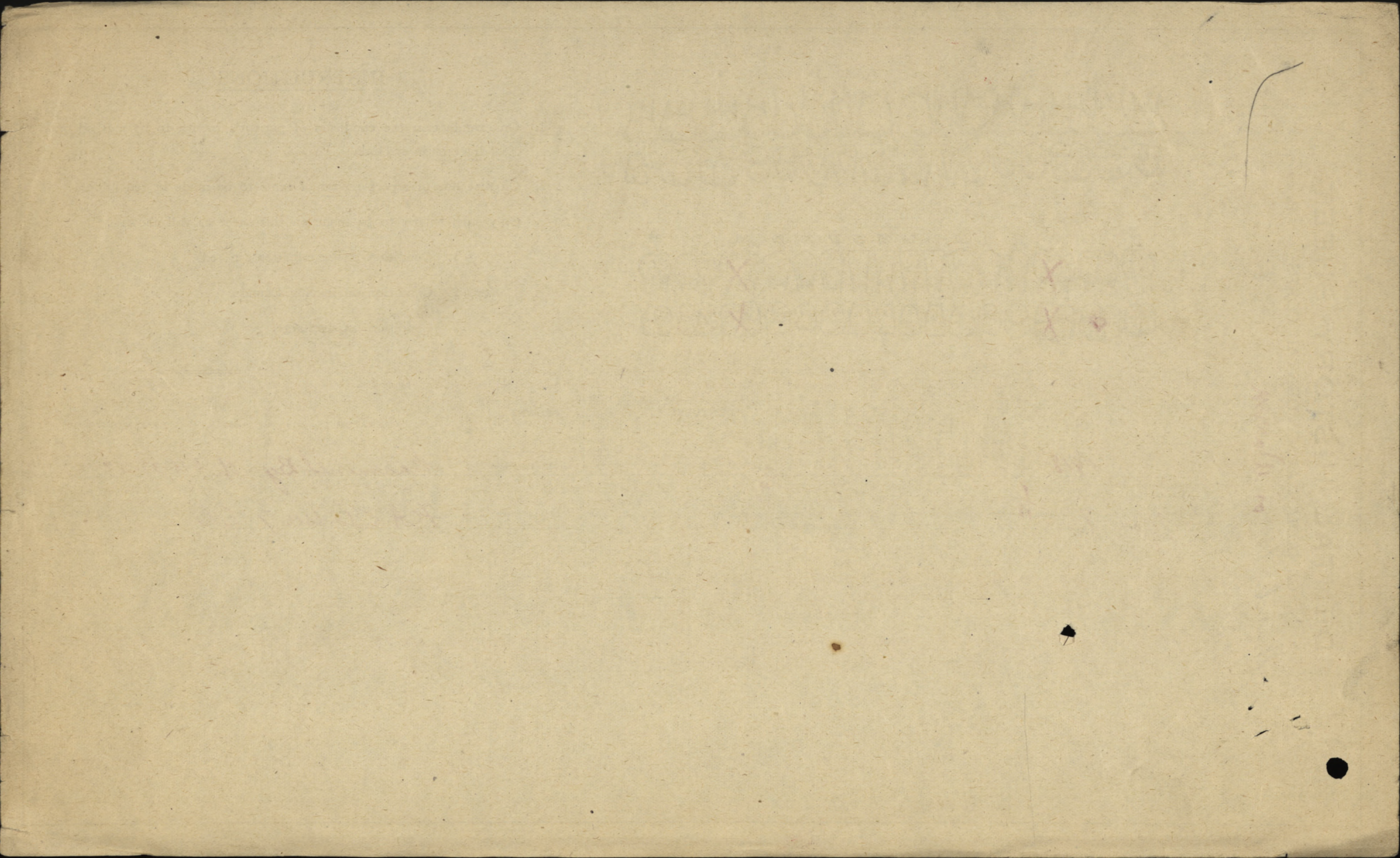
INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

| Condition on first Examination | Date | Amalgam | Temporary Filling (a) G. F. (b) Cement | Cement | Treatment Putrescent Pulp | Root Filling | Pulp Cap | Devitalization | Pyrrhoea | Synthetic Porcelain | Extracting | DENTURES | | | Gold Clasp | Gold Filling | CROWNS | | Bridge Work | OPERATOR | Military District | REMARKS |
|--------------------------------|-------------|-------------|--|--------|------------------------------|--------------|----------|----------------|----------|---------------------|------------------------|----------|---|---|------------|--------------|--------|-----------|-------------|--------------------|-------------------|----------------------|
| | | | | | | | | | | | | U | L | P | | | Gold | Porcelain | | | | |
| <i>27 Jan</i> | <i>1918</i> | | | | | | | | | | <i>29</i> <i>30</i> | | | | | | | | | <i>Examined By</i> | | <i>Op. 316.31.32</i> |
| | <i>7</i> | <i>1/18</i> | | | | | | | | | | | | | | | | | | <i>F.A. Godsoe</i> | <i>7 Est 1.</i> | |



5939

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3256047 (Rank) Private
 Name (in full) Ward Warren enlisted in
 the 46th Draft I.B. Reg.
 CANADIAN EXPEDITIONARY FORCE at St John on the 12th
 day of March 1918
 HE served in 46th Draft I.B. Regiment British Kingdom
 and is now discharged from the service by reason of Demobilization.
Medical Unfitness only

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

Age 26 years
 Height 5 ft 10 ins
 Complexion Medium
 Eyes Brown
 Hair Black

Marks or Scars
None

W Ward
Signature of Soldier

H. J. [Signature] Capt.
Issuing Officer

Date of Discharge
NO. 2 DISTRICT DEPOT
 JUL 15 1919
 TORONTO

No. 2 D. D.

Rank

Date JUL 15 1919 19

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

THIS IS TO CERTIFY that No. 520001 Private

Name (in full) W. J. ...

Rank Private

entered in ...

the ...

of the ...

on the ...

day of ...

at ...

and he was discharged from the service by reason of ...

and he was discharged from the service by reason of ...

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

Age ...

Height ...

Complexion ...

Eyes ...

Hair ...

Signature of Soldier ...

Date of Discharge ...

Rank ...

Signature of Officer ...

It is the duty of the Soldier to sign and return this certificate to the Secretary of the Expeditionary Force, Canada, as soon as he receives it.

LET. B. 201
 H. P. ...

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 Ward Christian name Warren
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 63-3540 FC.
3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
4. Address (including street and number, if any) Smith's Ferry, Gresham, N.B.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 9 day of Nov. 1917, by the undersigned medical board sitting at Bathurst, N.B.

5. Age as stated 25 Years 1 Months. 6. Apparent age 25 Years _____ Months
7. Height 5 Feet 10 Inches. 8. Weight 165 Pounds.
9. Chest measurement { Minimum 34 Ins. 10. Complexion med. { Eyes Brown
Maximum 37 Ins. { Hair Black.
11. Physical development Good. { Good Fair Poor 12. Smallpox marks nil.
13. Number of vaccination marks { Right arm nil
Left arm nil 14. When vaccinated last _____
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.) Vin - R. - 030
U. O. 30

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2
Hearing - normal.

A.C. Loebe President.
Richard Member. Ryden Member.

| Date | Result | VACCINATIONS | Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|---------------|-------------|-------------------|----------------|-------------------|---------------------------------|
| <u>7/2/18</u> | <u>Good</u> | <u>WA Reddick</u> | <u>7/3/18</u> | <u>WA Reddick</u> | <u>M.O.</u> |
| | | | <u>5/7/18</u> | <u>WA Reddick</u> | <u>M.O.</u> |
| | | | <u>17/4/18</u> | <u>WA Reddick</u> | <u>M.O.</u> |

Joined 23rd day of January 1918 at St John, N.B.

| | CORPS | REG'TL NUMBER | HABITS | DATE |
|----------------------|----------------------|----------------|--------|------|
| Joined on enlistment | <u>1st Depot Bn.</u> | <u>3256047</u> | | |
| Transferred to..... | <u>15th Res Bn</u> | | | |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION | DATE | DISEASE | RESULT |
|----------------------|----------------------|---|----------------|
| <u>St John, N.B.</u> | <u>April - 29/18</u> | <u>(nummular) Convalescent D.I.A.H. - 1 month</u> | <u>Cat. D3</u> |
| <u>Sussex N.B.</u> | <u>10/7/18</u> | | <u>A2</u> |
| <u>"</u> | <u>17-7-18</u> | | <u>A2</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 Warren Ward

Inselomely
W

* Strike out wherever inapplicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

EFFECTIVE DATE: 1/8/18. EFFECTIVE DATE: AMOUNT: 20. AMOUNT: -

NAME: WARD Warren
NUMBER: 3256047

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.

James Ward (Father)
South Tatigouche, Gloucester
N.B.
Stop - 1-6-19

| PARTICULARS OF RANK OR APPOINTMENT | | |
|------------------------------------|----------------|---------------------|
| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
| L.P. C. Bann | 18.18 | Pte |

UNIT AND TRANSFERS

ORIGINAL UNIT: 64 Dph 1st Dep Bn N.B. B.

DATE ACCOUNT FIRST OPENED: 1/8/18

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'S F'D | UNIT TRANSFERRED TO |
|-----------|----------------|---------------------------|-----------------------|
| | | | 13 th Res. |

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

| DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT |
|-----------------|----------------|--------------|--------|-----------------|----------------|--------------|--------|
| 14/5/19 | 10598 | MP | 7.30 | | | | |
| 24/5/19 | 11106 | ✓ | 14.60 | 25/6/19 | | | |

DAILY RATES OF PAY AND ALLOWANCES

| AUTHORITY | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE |
|-----------|-----|------|--------|----------------|
| | 1- | 10 | | |

Test Bal 48.91
2/5/19 126.91

PARTICULARS OF RENDERING NON-EFFECTIVE

| MONTH | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR 1 | DR 2 | DR 3 | DR 4 | BALANCE | DEFERRED | SEPARATION |
|----------|--------------|--------|------|-------------------------|------|-------|------|------|---------|----------|------------|
| 31/7/18 | Bal from Gen | | | | | | | | 44.58 | | |
| Aug | P pay | 34.10 | | 6 a.p. | | | | 20- | 58.65 | | |
| | | 34.10 | | | | | | 20 | | | |
| Sep | | 33- | | 6 a.p. | | | | 20- | | | |
| | | | | AR 1288. Bousley | 3/9 | 4.87 | | | | | |
| | | | | ✓ 2815 | 26/9 | 4.87 | | | 61.91 | | 40 opened |
| | | 33- | | | | | | 20 | | | |
| Oct | | 34.10 | | a.p. | | | | 20 | | | |
| | | | | AR 1977. 14/10 13 Res. | | 4.87 | | | | | |
| | | | | ✓ 2040 28/10 ✓ | | 4.87 | | | 68.27 | | HS |
| | | 34.10 | | | | | | 20 | | | |
| NOV | | 33- | | a.p. | | | | 20 | | | |
| Dec | | 34.10 | | AR 195. 9/11/18 13 Res | | 1.17 | | | | | |
| Jan 1919 | | 34.10 | | AR 2265 24/11 ✓ | | 9.73 | | | | | |
| | | | | a.p. | | | | 20 | | | |
| | | | | AR 2409 28/11 ✓ | | 29.20 | | | | | |
| | | | | ✓ 2580. 9/12 ✓ | | 19.47 | | | | | |
| | | | | a.p. | | | | 20 | 47.90 | | |
| | | 101.20 | | | | 59.57 | | 60 | 64.20 | | |
| Feb | | 20.80 | | AR 897 31/12 Kennell | | 9.73 | | | | | |
| Mar | a.p. | 34.10 | | ✓ 1778. 14/1/19 N.B. B. | | 4.87 | | | | | |
| | | | | AR 2004 14/1/19 Kennell | | 9.73 | | | | | |
| | | | | a.p. 2004 | | | | 20 | | | |
| | | | | AR 3021 27/1 ✓ | | 9.73 | | | 38.74 | | |
| | | 144.90 | | | | 34.06 | | 40 | | | |

5939

M.D.2

Toronto
wife
Larnet.
19-7-71
Presp.

SERVICE GROUP 32.

SHORT FORM.



PROCEEDINGS ON DISCHARGE

(Demobilization.)

OCCUPATIONAL GROUP 1

1. No. 3256047

2. Rank. P1.

3. Name. WARD Warren

4. Unit. NBR - 13 Rev. 64-D

5. Date of Discharge JUL 15 1919 Place TORONTO, ONT.

6. Reason for Discharge. DEMOBILIZATION

7. Authority. No. 2, D.D. Part II, D.O. No. 199

8. Proposed Residence after Discharge. Bathurst New Brunswick.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.?
Warren Ward.
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.

Place. No. 2 DISTRICT DEPOT

Date. JUL 15 1919

TORONTO

Embark RMS-Carmania
Liverpool 5.7.19
pt & 1/16

Signature. H. J. [unclear] Capt.
(O. O. Discharging Unit.)

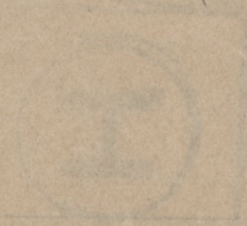
M.D.



PROCEEDINGS ON DISCHARGE
Rehabilitation

TORONTO ONT

DEMONSTRATION



RECOMMENDATIONS TO BE SUBMITTED TO THE COURT

Department of Justice

PROTESTATION

The undersigned, of the above named party, hereby solemnly

DEPARTMENT OF JUSTICE
OTTAWA, CANADA

Department of Justice

LIST OF DISCHARGE DOCUMENTS

| | |
|---------------------------|----------------------------|
| 1. Discharge Certificate | 2. Discharge Certificate |
| 3. Discharge Certificate | 4. Discharge Certificate |
| 5. Discharge Certificate | 6. Discharge Certificate |
| 7. Discharge Certificate | 8. Discharge Certificate |
| 9. Discharge Certificate | 10. Discharge Certificate |
| 11. Discharge Certificate | 12. Discharge Certificate |
| 13. Discharge Certificate | 14. Discharge Certificate |
| 15. Discharge Certificate | 16. Discharge Certificate |
| 17. Discharge Certificate | 18. Discharge Certificate |
| 19. Discharge Certificate | 20. Discharge Certificate |
| 21. Discharge Certificate | 22. Discharge Certificate |
| 23. Discharge Certificate | 24. Discharge Certificate |
| 25. Discharge Certificate | 26. Discharge Certificate |
| 27. Discharge Certificate | 28. Discharge Certificate |
| 29. Discharge Certificate | 30. Discharge Certificate |
| 31. Discharge Certificate | 32. Discharge Certificate |
| 33. Discharge Certificate | 34. Discharge Certificate |
| 35. Discharge Certificate | 36. Discharge Certificate |
| 37. Discharge Certificate | 38. Discharge Certificate |
| 39. Discharge Certificate | 40. Discharge Certificate |
| 41. Discharge Certificate | 42. Discharge Certificate |
| 43. Discharge Certificate | 44. Discharge Certificate |
| 45. Discharge Certificate | 46. Discharge Certificate |
| 47. Discharge Certificate | 48. Discharge Certificate |
| 49. Discharge Certificate | 50. Discharge Certificate |
| 51. Discharge Certificate | 52. Discharge Certificate |
| 53. Discharge Certificate | 54. Discharge Certificate |
| 55. Discharge Certificate | 56. Discharge Certificate |
| 57. Discharge Certificate | 58. Discharge Certificate |
| 59. Discharge Certificate | 60. Discharge Certificate |
| 61. Discharge Certificate | 62. Discharge Certificate |
| 63. Discharge Certificate | 64. Discharge Certificate |
| 65. Discharge Certificate | 66. Discharge Certificate |
| 67. Discharge Certificate | 68. Discharge Certificate |
| 69. Discharge Certificate | 70. Discharge Certificate |
| 71. Discharge Certificate | 72. Discharge Certificate |
| 73. Discharge Certificate | 74. Discharge Certificate |
| 75. Discharge Certificate | 76. Discharge Certificate |
| 77. Discharge Certificate | 78. Discharge Certificate |
| 79. Discharge Certificate | 80. Discharge Certificate |
| 81. Discharge Certificate | 82. Discharge Certificate |
| 83. Discharge Certificate | 84. Discharge Certificate |
| 85. Discharge Certificate | 86. Discharge Certificate |
| 87. Discharge Certificate | 88. Discharge Certificate |
| 89. Discharge Certificate | 90. Discharge Certificate |
| 91. Discharge Certificate | 92. Discharge Certificate |
| 93. Discharge Certificate | 94. Discharge Certificate |
| 95. Discharge Certificate | 96. Discharge Certificate |
| 97. Discharge Certificate | 98. Discharge Certificate |
| 99. Discharge Certificate | 100. Discharge Certificate |

LIST OF DISCHARGE DOCUMENTS.

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

Group..... A
 Checked by No. 70
 Date 3-7-19

Date of Enlistment 23/1/18

MILITIA AND DEFENCE W-12332

Date of Assignment

Separation and Assigned Pay Branch

1st Aug. 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

RATE OF ASSIGNMENT

| | | | |
|------------------|--|--|--|
| 20 ⁰⁰ | | | |
|------------------|--|--|--|

9219 W 4
jt

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____
 Rank _____ Promoted _____ Reverted _____ Discharge _____
 Soldier's Name _____
 Battalion *1st Depot. Bn. N.B. Regt 441-64*
 Beneficiary _____
 Relationship _____
 Address _____

Name _____
 Address _____
 Change of Address _____
 1 JAMES WARD,
 2 S. TATIGOUCHE,
 GLOU. CO., N.B. 20 20.00
 3 % 3256047 PTE. WARREN WARD
 TWENTY DOLLARS
 4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|------|------------|------------|------------|-------|------------|
| 1918 | | | | | 18799-N-94 |
| Aug | Y 38844 | — | 20 | 20 | |
| Sept | N 45047 | | 20 | 20 | |
| Oct | K 48875 | | 20 | 20 | T |
| Nov | O 60446 | | 20 | 20 | |
| Dec | W 63163 | | 20 | 20 | |
| Jan | N 71777 | | 20 | 20 | |
| Feb | V 77078 | | 20 | 20 | |
| Mar | N 87232 | | 20 | 20 | |
| Apr | J 4831 | | 20 | 20 | |
| May | J 6093 | | 20 | 20 | |
| June | N 11145 | | 20 | 20 | |
| July | K 12732 | | 20 | 20 | |
| | | | 240 | 240 | |

A/c Closed 31/7/19.
 Ret'd per. *Carman*
 Date 12/7/19 M.F.W. 187 26/7/19
 Closed *M. P. 117330*

M. F. W. 128.
400M. 1-17-1972 39-1141
L. L. 22220-M. & D. 7653

AUTHORITY FOR NEW ACCT. } M. H. 7-B-2
 30/8/18
 E. Nash

"CAEMANIA" 13.7.19 W 5036

DISPERSAL "I"

AUDITOR *[Signature]* PAYMASTER *[Signature]*

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

M. OR S. REGT. NO. 3256047 RANK Pte NAME (IN FULL) WARD, W. (BLOCK LETTERS SURNAME FIRST)

IF IN P.F. WHAT UNIT? P.O. West Bathurst NB

ORIGINAL UNIT C.E.F. N.B.R.W.

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ 23/1/18. DATE EFFECTIVE

20th Closed by Ottawa 31-7-19

PAYABLE TO James Ward RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS J.A. Taligouche Glou Co W.B.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Toronto DATE 15.7.19 REASON Det ob AUTHORITY D.O.199 IF ENTITLED TO POST DISCHARGE PAYES

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 | |
| 31-5-19 | | | 2691 | 2691 | | | | 973 | 487 | | | | | | 2691 | Bal P.C. JWB | |
| 20-7-19 | 50 | 1 ¹⁰ | 55 - | 160 - | 14645 | | 54849 | 973 | 5 - | 11758 | 40 - | | | 18691 | | Pay allow 12 days W.B. Ryd. Best train seat chg. generally | |
| | | | | 18691 | | | | | | | | | | 18691 | | | |
| | | | W.S.G. | | | | | | | | | | | | | AMOUNT DUE SOLDIER DEPT NT | |
| 122 days | | | 280 - | 280 - | | | | Aug 12 74690 | | 6450 | | | | 75 50 | 204 50 | W.B. as above | |
| | | | | | | | | Sep 8 1037789 | | 70 | | | | 140 | 140 | 5 days P.A. etc | |
| | | | | | | | | Oct 8 1023392 | | 70 | | | | 210 | 70 | M.110 | |
| | | | | | | | | | | 280 | | | | 280 | 0 | W.S.G. PAID IN FULL | |
| | | | | 280 | | | | | | 204 50 | | | | 75 50 | 280 | 12 days P.A. | |

