ATTESTATION PAPER.

No. 2 CONSTRUCTION, B'n. C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 931646

Folio. ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Williams,
1a. What are your Christian names?	Clinton
1b. What is your present address?	Hoffman Hotel, Detroit, Michigan
2. In what Town, Township or Parish, and in what Country were you born?	St. Louis, Mo., U S A
3. What is the name of your next-of kin?	S. J. McCarty
4. What is the address of your next-of-kin?	905 ~~Xxxxxx~~ Hurkimer St., Houston, Texas
4a. What is the relationship of your next-of-kin?	Cousin
5. What is the date of your birth?	March 25th, 1894
6. What is your Trade or Calling?	Machinist
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Clinton Williams, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Clifton Williams (Signature of Recruit)

Date Nov 29th 1916. J C Murton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Clinton Williams, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Clinton Williams (Signature of Recruit)

Date Nov 29th 1916. J C Murton (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Windsor, Ont this 29th day of November 1916.

James G Chryne (Signature of Justice)

M. F. W. 23.
400M.—1 -15.
H. Q. 1772-39-841

noted 19/4/17 DG

Description of Clinton Williams on Enlistment.

Apparent Age 22 years 8 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 ins.

Chest measurement.
- Girth when fully expanded 37-1/2 ins.
- Range of expansion 2-1/2 ins.

Complexion Dark

Eyes Brown

Hair Black

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist ~~or Congregationalist~~ Yes
- Roman Catholic
- Jewish
- Other denominations (Denomination to be stated.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date Nov. 29th 1916.

Place Windsor, Ont.

H. Fuller
Capt. [illegible]
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Clifton Williams. having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

D. H. Sutherland Lt. (Signature of Officer)

O. Comd'g No. 2 Construction Battalion, C. E. E.

Date Dec 5/16 191 .

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

H. F. W. 67-2

1 Index Cond-

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No. X 4

Name Williams, Clinton.

Regt. No. 931646 Rank Private

Corps # Construction Battalion. C. E. F.

[redacted]

Med Unfit

39 — 1
17 — 1
9 — 1

REG. NO. 931646. NAME (SURNAME FIRST) Williams, C.

RANK Pte CORPS No 2. Con. Batt.

AGE 22. SERVICE —

NAME OF HOSPITAL Military PLACE London

DATE OF ADMISSION 4. 1. 17.

DISEASE Susp. D.P. Chills.

DISCHARGE 24. 1. 17.

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS

649W7916.

SURNAME. Williams.

CHRISTIAN NAMES Clinton

REGL. No. 931646. RANK Pte.

UNIT No. 2. Construction. Bn.

FORMER CORPS Nil.

CARD No. V

S.O.S. FOLL. D/S

5-3-17. V

NEXT OF KIN.

NAMES IN FULL Mc Carthy. S. J.

RELATIONSHIP TO SOLDIER Cousin

ADDRESS 905 Harkimer St., Houston. Texas. U.S.A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH U.S.A. St. Louis. Mo. DATE Mar. 25th 1894.

PLACE OF ATTESTATION Windsor, Ont. DATE Nov. 29th 1916

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Machinist RELIGION Baptist

DESCRIPTION.

APPARENT AGE 22 YEARS 8 MONTHS

HEIGHT 5 FEET 5 INCHES

CHEST MEASUREMENT 37 1/2. INCHES EXPANSION 2 1/2. INCHES

COMPLEXION Dark. EYES Brown. HAIR Black.

DISTINGUISHING MARKS Not Stated.

MEDICAL EXAMINATION. PLACE Windsor. Ont DATE Nov. 29th 1916.

Present Address. Hoffman Hotel. Detroit Mich. U.S.A

No. 931646 RANK Pte. NAME Williams. Clinton

T. O. S. 29-11-16 UNIT No 2. Construction Battalion
D.O. 95. 8.12.16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Nov. 29	Dec 31	✓		
1917 Jan	1917	"		
	Feb.	✓		
Mar 1	Mar 5	✓	Disch'gd. (M. N.) 5-3-17	D.O. 55. 5-3-17
			a/c closed by payment. C.	

a & B.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

B

V

Number 931684 Rank Pte Spec

Surname WILLIAMS

Christian Name Coleman

Unit C.O.R.C.C. Theatre of War France.

Date of Service 17-5-17

Remarks

Latest Address Ferriday P.O. Louisiana U.S.A.

B

Roll No. Page 3789

NAME REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772-39-893.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F.,1916).

Regimental No. 931646 Rank Pte Name Clinton Williams

Corps # 2 Construction Battn. CEF who was* Discharged

On March 5th 1917 191 , to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-3-17 191 , to 5-3-17 191 , the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month	3	50	Bal. Cr. from prev. month	10	00
Advances by Cheques No.			Regt'l Pay 5 days at $ 1 00 c	5	00
Advances by Cheques No.			Field Allow. 5 days at $ 10 c		50
Assigned Pay No.			Other Allowances*		
Other Charges*					
Payment on transfer or discharge No. 7151	12	00	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	15	50	Total	15	50

*Give Particulars.

A monthly stoppage of $ nil (†) has (‡) been paid on account of Assigned Pay for the 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 Nov. 29th 1916

(2) if married and if a Separation Allowance Card has been submitted no.

(3) cause of discharge and authority Medically Unfit 1D 30-W&197 3-2-1917

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date March 5th 1917

Place Truro N.S.

Captain
Paymaster # 2 Construction Battn. CEF

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

CANADIAN CONTINGENT EXPEDITIONARY FORCE

ORIGINAL

To be made out in duplicate. H.Q. 54-21-23-53

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.

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(1) Name of Overseas Unit which Soldier joins #2 Construction Battalion, C E F

(2) Regimental Number 931646

(3) Full Name of Soldier Clinton Williams

(4) Place of Birth St. Louis, Mo., U S A

(5) Are you married, or not ? No

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

(b) Present Postal Address

(7) Are you a widower ? No

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... NO .....

If so, state name and address .....

(10) Is your Mother alive ?..... NO .....

If so, state name and address.....

.....

(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 ?..... NO .....

If so, in what Company ?.....

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

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

D H Sutherland ... L'T. COL.
O. Comd'g No. 2 Construction Battalion, C. E. E.
Officer Commanding.

Date Dec. 5th. 1916.

ORIGINAL

ORIGINAL 931646

MEDICAL HISTORY SHEET.

Surname Williams *Christian Name* Clinton

Examined { on 29th day of Nov 1916 / at Windsor, Ont

Birthplace { City or Town St. Louis / County Mo. U S A

Apparent age 22 yrs 8 mos

Trade or occupation Machinist

Height 5 Feet 5 Inches.

Weight ..... Lbs.

Chest measurement { Minimum 35 inches. / Maximum expansion 37-1/2 inches.

Physical development GOOD

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number 1

When Vaccinated last Childhood

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection

R E 20/20 LE 20/20

Approved by [signature]

Rank Capt A M C M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 29th *day of* November 1916 *at* Windsor, Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#2 Construction Bn CEF	931646		29/11/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Windsor, Ont.	30/11/16.	on enlistment	Fit D S Stewart Capt.

[signature] Major, A. M. C. [signature] Capt., A. M. C.

N. B.—This sheet 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.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname Williams Christian Name Clinton

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
London		4	1	17	24	1	17	Syphilis Epilepsy	21	S/p. Examined by Standing Medical Board. Recommended for discharge from Army.	J. L. Sparks.

MEDICAL HISTORY OF AN INVALID

Military District No. 1
JAN 30 1917
I. D. 30.W.197
DEPT MILITIA & DEFENCE
APR 17 1917
H.Q. CANADA

1. Station. London, Ont.
2. Regiment or Corps. No. 2 Construction
3. Regimental No. and Rank. 931646 Pte.
4. Name. Clinton C. Williams.
5. Age last Birthday. 22
6. Enlisted on Nov. 1916.
   at Windsor, Ont.
7. Former Trade or Occupation. Machinists Helper.

8. General remarks on his :—
   (a) Conduct.
   (b) Habits.
   (c) Temperance.
   (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date. Jan. 22nd. 1917.

9. Service.

	Years.	Days.	PERIODS. From.	PERIODS. To.
No. 2 Construction			Nov. 1916	Jan. 22nd. 1917.

10. (a) Disease or disability. (1) Epilepsy (2) Syphilis.
    (b) Date of origin. (1) Infancy (2) Sept. 5th. 1916.
    (c) Place of origin. (1) Unknown. (2) Detroit Mich.
    (d) Cause. (1) Hereditary (2) Infection.

11. Present Condition. (Most Important).
(To include full description of present disabling condition or conditions.)

(1) On January 20th. 1917 observed in Epileptic convulsion. Duration one to two minutes. Patient says he has had about two convulsions per week since childhood.

(2) Healed sore on penus. Glands left side neck enlarged and tender with scars marking points of previous discharge of pus. Wasserman test; Jan. 17th. 1917 strongly positive four plus.

12. (a) Is the disability the result of service or climate? (1-2) No.
    (b) Has it been aggravated by intemperance, vice or misconduct? (1) No. (2) Yes.

mold 2-5-17

M. F. B. 227.
150 M—5-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Oval scar one inch by one half inch right Gluteal region. Linear saar 1" long right groin. Oval scar 1" by ½" anterior surface right forearm near inner border. and four inches above wrist joint. Two scars one inch long left side neck.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? (1-2) Not applicable.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. (1-2) Not applicable.

14. Treatment (1-2) Military Hospital London, Ont.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? (1-2) No.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? (1) Permanent.
(2) Permanent unless treated.
Forty days of Diarsenol treatment.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. (1-2) Not more than at time of enlistment.

18. State if for discharge on account of unfitness for Service. Yes. For discharge.

G. L. Sparks, Capt. C. M. C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion. Yes.

10.

11.

12.

15.

16.

17.

18 Is he unfit for Military Service. Yes.

Recommendations : Discharge.

Signatures :—

T. J. McNally Capt. A.M.C. President.

L. Hebert Capt. A.M.C.

Members.

F. H. Sutherland Capt. A.M.C.

Station. London, Ont.

Date. Jan., 22nd. 1917.

Date. 27-1-17

C. C. Bell Major
Asst. Director of Medical Services.

Approved.

Date. 30/1/17

Scott Cameron Capt.
Director-General of Medical Services.

Militia Form B. 227.

150 m—5-16.
H. Q. 1772—30—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.

Administrative Medical Officer.

(At Station or Hospital where finally disposed of.)

Station and Hospital ..... Arrived from .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision.

This space to be for numbers.

DEPT MILITIA & DEFENCE
APR 13 1917
H.Q. CANADA

Proceedings on Discharge.

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

No. 931646

Rank Private

Name Clinton Williams
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) #2 Construction Battalion, C E F

Date of Discharge March 5th.1917.

Place of Discharge Windsor, Ont.,

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years 10 months.
Height 5 feet 5 inches.
Complexion Colored
Eyes Brown
Hair Black
Trade Machinist
Intended place of residence (To be given as fully as practicable.) Kansas City, Mo., U. S. A.

Descriptive Marks

2. The above-named man is discharged in consequence of 59-W-441

Syphilis

(M.U.)

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.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Good

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.)

Machinist

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113.

(OVER)

JB

note 19/4/17. DC

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

No

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

6. Medals and Decorations None

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) Windsor. Ont. Lieut-Col.

(Date) March 5th.1917. *Commanding* #2 Const.Batt'n.C.E.F.

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) Windsor, Ont Clinton Williams (*Signature of Soldier.*)

(Date) March 5th.1917. ~~[illegible]~~ 1917 Matthew Howard Sgt (*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) Windsor. Ont. D. H. Sutherland

(*Signature*) Lieut-Col.

(Date) March 5th.1917. #2 Construction Battalion C.E.F.

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.)

Clinton. Williams

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.
Copies of Convictions, by C. P.	in MS.
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."

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

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.)

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.