(E) Soldier's Card made

ORIGINAL

ATTESTATION PAPER.

No. 303132 9

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Wilson
1a. What are your Christian names?	James Arthur
1b. What is your present address?	Trenton Ontario
2. In what Town, Township or Parish, and in what Country were you born?	Nth Dakota U.S.A.
3. What is the name of your next-of kin?	~~Wilson~~ Wilson
4. What is the address of your next-of-kin?	~~Not Known~~ Miss Jean MacDonald 134 Delaware Ave Toronto. (Friend)
4a. What is the relationship of your next-of-kin?	~~Brother~~
5. What is the date of your birth?	Aug 2nd 1881
6. What is your Trade or Calling?	Rancher
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	None
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	None

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Arthur Wilson, 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.

James Arthur Wilson (Signature of Recruit)

Date 3rd Dec 1917. WJ Lewis Pte (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Arthur Wilson, 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.

James Arthur Wilson (Signature of Recruit)

Date 3rd Dec 1917. WJ Lewis Pte (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 Trenton Ont this 3rd day of December 1917.

T. A. [illegible] J.P. (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of James Arthur Wilson on Enlistment.

Apparent Age 36 years 0 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 2½ ins.

Chest measurement.
- Girth when fully expanded 39 ins.
- Range of expansion 4½ ins.

Complexion Fair

Eyes Gray.

Hair Fair

Religious denominations.
- Church of England
- Presbyterian
- Methodist Yes
- Baptist or Congregationalist
- 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).

Nil

Eyes R 20/20
L 20/20
Hearing R normal
L normal

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 Dec 3 191 7

Place Trenton Ont

H. B. Cronk Capt. A.M.C.
Medd. Officer.
Blakelee Capt. R.A.M.C.

*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.

James Arthur Wilson 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.

John Southam Lt.-Col. (Signature of Officer)
O. C. 1st Depot Bn., 1st C. O. R.

Date DEC - 4 1917. 191

ATh 31/3/11

O. H. M. S.

REGIMENTAL DOCUMENTS

WILSON JAMES. Arthur 303229 UNIT 1/1 Cdn R.

NON-EFFECTIVE BY..... CATEGORY..... Demob

CONTENTS

- ATTESTATION PAPER (M. F. W. 23, 133 OR 51)
- CASUALTY FORM (M. F. W. 54 OR A. F. B. 103)
- TRAINING HISTORY SHEET (M. F. W. 113)
- FIELD CONDUCT SHEET (M.F.W. 178 OR A.F.B. 122)
- REGT. CONDUCT SHEET (M.F.B. 263 OR A.F.B. 121)
- COMPANY CONDUCT SHEET (M.F.B. 263A OR A.F.B. 121)
- MEDICAL HISTORY SHEET (M.F.B. 313 OR A.F.B. 178)
- DENTAL HISTORY SHEET (M. F. B. 465)
- MEDICAL REPORT (M. F. B. 227 OR A. F. B. 179)
- MEDICAL EXAMINATION (M. F. W. 129)
- TRANSFER CLOTHING STATEMENT (M. F.
- PROCEEDINGS, COURT OF INQUIRY (M. F.
- DECLARATION, COURT OF INQUIRY (M. F. B.
- LAST PAY CERTIFICATE (M. F. W. 44)
- PROCEEDINGS ON DISCHARGE (M. F. W. 218 OR A. F.
- PARTICULARS OF CHARACTER (A. F. W. 3226)
- COPY OF PARCHMENT DISCHARGE CERTIFICATE (M. F. W. 3
- DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 56
- UNIT INDEX CARD (M. F. W. 71 OR 192)

ATW 3997
Cens 1375 1 Medical Card
SSC 132

M. F. B. 270.
850M-5-18
H. Q. 1772-39-67

CADC 5709A
AG 10434

27314

1917
1951
34

NAME. Wilson James Arthur | RANK. Pte. | REC. FILE. 8/2 SOSDiv 22-2-19 2 Sandb 200-8-12 20-2-19 " 200

No. 3031329. | C.O.R. (12th Bn.)

1st Dpo. Bn. | CORPS. | M.D. FILE.

ENLISTMENT, PLACE. Trenton. Ont. DATE. Dec. 3rd 1917.

BIRTH
DISCHARGE, PLACE. U.S.A. North Dakota. DATE. Aug. 2nd 1881.

REASON.

T. O. S. Dec. 4. 19.17

ADDRESS ON DISCHARGE. D.O. Part II No 3. 3/1/18

DOCUMENTS.

NEXT OF KIN ADDRESS Wilson, William RELATIONSHIP Brother.
Not Known.

Also Notify:- MacDonald, Miss Jean (Friend)
134. Delaware Ave. Toronto. Ont.

O/S. 9-6-18 1272/19.

R/C. 25-1-19. 23.8/68 2

L. L 20496—M. & D. 7908—100m.

CHARGED OUT			RETURNED		CHARGED OUT			RETURNED	
TO	DATE	BY	RECEIVED BY	DATE	TO	DATE	BY	RECEIVED BY	DATE

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
303329.	Pte.	Wilson		
	2nd Div.	Christian Names (1) James (2) Arthur (3)	Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Trenton	30/4/17	1st COR	M.	1/3 25.1.18	5
Province: Ont	Age on 37	Date 21-6-18.		Vaccination 1.5.18.	

On Command	Hospital	Permanent Cadre Date taken on	Employed as
Date Proceeding	Date Admitted		

Record of Overseas Service:	Profession or Trade (Civil)
	Rancher
Reason for Return:	Transferred or Posted to C. Coy Date 5.9.18

Married or Single Single

Address of Next of Kin Brother Geo Wilson Marion. N.D. USA

Country

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.
	3-9-18	7-9-18	F.W.
	8.24.10.18	11.29.10.18	1/2 F

A.G. 10434

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
156	3-7-18	SJ			
179	29-7-18	SD			
CERB 62	31-7-18	S.I.			
95	7.9.18	[illegible]			
BO. 99	12-9-18	[illegible]			
BO. 163	26-11-18	C.			
BO. 165	28-11-18	C.			

TRAINING.

Weeks of Training.

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

a.E.B.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

B

Number 3031329 Rank Pte

Surname WILSON

Christian Name James Arthur

Unit C.O.R. Theatre of War England

Date of Service 21-6-18

Remarks S/o Can Legion

New Westminster B.C.

Latest Address Moosejaw G.P.O.

~~20/9/42~~ Sask

Roll No. A

Page 35-9

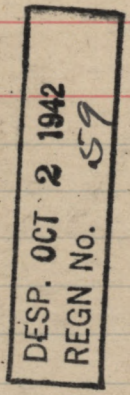
NAME

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.

*Name L. WILSON James Arthur Rank Spr. Regtl. No. 3031329

Fyle Depot 24 Wi 398

Original unit Present unit 1st CERB M. or S. Age 37 Religion Meth Ref. H.Q.

Port, ship and date of arrival Halifax Aquitania 25-1-19

Next of kin Friend Miss Jean MacDonald 134 Delaware Ave. Toronto.

Address on leave same

Address on discharge Moosejaw G.P.O. Sask.

Transportation issued Yes/No Date 22-2-19 Character on discharge

Previous occupation Rancher Moosejaw, Sask. Date and place of enlistment Dec. 3-17 Trenton Ont.

Diagnosis DEMOBIN Date of Medical Boards 13-2-19

Date.	Remarks.	Pt. 2 Order No.
T.O.S. 18-1-19	Posted to Cas Co (Ex. Camp) 25-1-19	
	Leave & Subs from 30-1-19 to 14-2-19	32
22-2-19	SOS DISCHGD. "DEMOB'N" ENTITLED TO WSG	51

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

(over)

Date.	Remarks	[redacted]. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

Form R 122.
10287—65M—28-7-17.

CR. Rank Name WILSON, James Arthur. Reg'l No. 3031329.

Unit 44th Dft 1st Bn 1st C,O,R If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Trenton, Ont. Dec. 3rd. 1917 Place of Birth N. Dakota, USA.

Name and Address, Next-of-Kin Miss Jean MacDonald,

134 Delaware Ave., Toronto, Ont., Canada. Relationship Friend.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 6288
File R.L.
Category CAN.OR

Report. Date.	Report. 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	21-6-18 S/S CASSANDRA		
3-7-18	12th Res.	SOS from Canada	Witley a/c/l amended by 12 Res 00224 d 20/9/18	21.6.18	156
29.7.18	✓	S.OS to C.E.T.D Seaford	" "	29.7.18	178 ICER B 62 d 31/7/18
12-9-18	✓	Reverts to ranks	Witley "	21-6-18	214
24.12.18	I.C.E.R.B.	On Kinmel Park M.D. No 2	Re. Seaford	24.12.18	" 189
29.1.19	"	Ceases on command to Kinmel Pk			
		9 S.O.S to Canada	Dvl. "	18.1.19	24 (M D 2)

1800 Wt

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.					

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3031329 (Rank) Spr.

Name (in full) WILSON James Arthur enlisted in

the 1st. Depot Bn. 1st. C.O.R.

CANADIAN EXPEDITIONARY FORCE at Trenton on the 3rd.

day of December 19 17

HE served in England

and is now discharged from the service by reason of Demobilization

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

Age 27

Height 5'7½"

Complexion Fair

Eyes Grey

Hair Fair

Marks or Scars

Vacc. scars on left arm.

J A Wilson

Signature of Soldier

J.S.Beemer

Issuing Officer

O.C. No. 2 District Depot

Rank

Appointment

Date of Discharge Feb. 22nd. 1919

Signed at Toronto. Ont. this 22nd. day of February 19

in Military District No. 2.

File Reference No.

No. 2
FEB 22 1919
DISTRICT DEPOT

JB.

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.

M. F. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

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

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

M.S.A. 15.

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 WILSON, Christian name James Arthur,

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)... Trenton, Ont.,

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 3rd day of December, 1917, by the undersigned medical board sitting at Trenton, Ont.

5. Age as stated 36 Years 0 Months. 6. Apparent age 36 Years 0 Months

7. Height 5 Feet 7½ Inches. 8. Weight ..... Pounds.

9. Chest measurement { Minimum 39 Ins. / Maximum 43½ Ins. } 10. Complexion Fair { Eyes Gray / Hair Fair }

11. Physical development..... { Good / Fair / Poor } 12. Smallpox marks.....

13. Number of vaccination marks { Right arm..... / Left arm..... } 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.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category [A 2]

Eyes, R. 20/20
L. 20/20
Hearing, R. Normal.
L. Normal.

.....President.

.....Member. .....Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
8/1/18	Good	R B Kennedy Lieut M.O.	2/1/18		M.O.
		M.O.	8/1/18	R B Kennedy Lieut	M.O.
		M.O.	15/1/18		M.O.

Joined .....day of .....191 ..... at .....

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	2 Res C.E.T.D.			
Transferred to.....		3630329		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Seaford	8-10-18	Nil	A fit for overseas Cat PRESIDENT, STANDING MEDICAL BOARD,
Eth. Camp	Jan 13/19	Nil,	A2 C.T.P. Garbutt Lieut.

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

Christian Name

Surname

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER Nelson Leo A

RANK Gnr. No. 301329

REGIMENT

M.F.B. 465.
200m.—6-18.
1772-39-950.

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.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																						
Discharge Exam. At Exhibition Camp			Certificate Issued																			
Date FEB 13 1919																						
							Dentally + M															
																				Hasemple Major		

M.F.B. 465.
200m.—6-18.
1772-39-950.

CASE HISTORY SHEET.

No. 3031329 Rank Cpl. Name ~~Watson~~ Wilson. J.A. Age 36

Unit 1st B. 1st C.O.R. Completed years of service (Where and how long)

Date of admission Mar. 18-18. Date of discharge April 1/18 APR - 1 1918

Diagnosis Tonsilitis. Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaints: Sore throat Duration one week

Findings 100.2 P 84 R 22.

Both tonsils enlarged. Exudate from crypts.

Chest reg. Heart reg (20) T 99 Condition unproved.

(21) Improved (22) Improved. T. 98 3/5 (23) Improved throat

still sore. Both tonsils still enlarged. (27) Appetite good.

(28) T. normal feels fine

(30) Spots on ~~at~~ tonsil. Some general redness

31st Cond. improved

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT Carbolic. Throat irrigation & painting T. D. Gargle 3 times

(Especially any specific or special form.) Mist Dob Dil 2 i 4 hr x

CONDITION ON DISCHARGE, Recommended fit for duty.

(and disposal made of case.)

Date

W Ledward Capt

Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

G 2940 0

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's case.)

Corps 1st B/1st COR. *Hospital Station* EXHIBITION CAMP HOSPITAL

No. 3031329 *Rank and Name* ~~Wilson~~ Cpl. Watson. J.A. *Age* 36 *Service*

Disease Tonsillitis. *Date of Admission* Mar. 18 *Date of Discharge* April 1/18 *Result* *Case Book* *Folio*

APR 1 1918

Dates of Observation	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Days of Disease	4th	5th													
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°															
106°															
105°															
104°															
103°															
102°															
101°															
100°															
99°															
98°															
97°															
Pulse per Minute	88	78	72	64	60	80	70	78	78	60	62	56			
Respirations per Minute	20	20	20	18	20	20	18	22	18	20	16	16			
Motions															

M. F. B. 238.
50m.—7-18
H. Q. 1772-39-513.

Signature W.E. Ord. Capt A.A.M.S. *In charge of case.*

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

a 2

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. 303/329 Rank Spr. Surname WILSON (Give name in full) James A.

Unit or Corps 2nd D.D. Birthplace Nth Dakota U.S.A.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 149 lbs. Height 5 ft. 7½ in. Colour of Eyes Grey.

Nutrition Good

Pulse regular 72

Condition of arteries Normal

Vision Rt. 20/40 Left 20/40

Hearing (conversational voice) Rt. 21 ft.

Left. 21 ft.

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

2 vacc c cas Lft arm.

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.

No hernia, haemorrhoids, varicocele. Slight varicose veins back Lft. leg. - Prior to enlistment (no service aggravation.

Laryngitis - April 1915 - good recovery.

Urinalysis - Alb. neg. Sug. - neg.

APPROVED

FEB 18 1919

Capt.

FOR A. D. M. S. M. D. 2

(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 E.H.I. Camp Toronto (Canada)

Date 13/2/19 Signed G. T. P. Gabbett Lieut. 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 J. A. Wilson, Spr.

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) WILSON. T.A. MD2.

REGIMENT 1ST. CERB. RANK SAR. No. 30 31329

Date of Examination in England 30/12/18. 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 Fit
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 Yes
- (*b*) In England
- (*c*) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer H. W. Reid Capt

P 820
12474—372M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ENGLAND or ~~CANADA~~.	SEPARATION ALLOWANCE.	* ENGLAND or CANADA.
EFFECTIVE DATE:- 1/1/18.		EFFECTIVE DATE:-	
AMOUNT:- 8/15 pd		AMOUNT:-	

NAME:- WILSON James Arthur (K)

NUMBER:- 3031329

NR

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.

Miss A.K. Cribb
Matron
Whinwell Home.
Stirling, Scot:
Guardian of Adopted daughter.

Stop pd 1/11/18.

~~Stopped off 1.1.19~~

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.B from Can.	1/6/18	Pte Cpl
A0217. 12th Res. 12/9/18	21.6.18	Ldr

Dft HH UNIT AND TRANSFERS

ORIGINAL UNIT:- 1st Depot Bn. 1st C.O.R.

DATE ACCOUNT FIRST OPENED:- 1-6-18.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
13th Res. D.O. 156	21/6/18		12th Cam Res. Bn.
No 62. 31/7/18.	1/8/18.	21/8/18.	1 Engrs Res Bn. (K)
L/C Comp	1/3/19		Town Sec.

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 £ s d	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT £ s d
14/11	295	1st CERBS	9 73				
Cr	Note- Applied for		73 40 ~~22 40~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.B from Can.	1 10	- 10		
A0217. 12th Res. 12/9/18	1 -	10		
		Ledger Bal	41	57

PARTICULARS OF RENDERING NON-EFFECTIVE:- T/Std Can 31.12.18 ~~Auth~~ NR 10 d/14/12/18 Seaford LPC 4 1/3/18

MONTH	PARTICULARS	CR 1 £ s d	CR. 2. £ s d	PARTICULARS	DR. 1 £ s d	DR 2. £ s d	DR. 3. £ s d	DR. 4. £ s d	BALANCE £ s d	DEFERRED £ s d	SEPARATION
31/5/18	Balance from Canada								10 -		
June	Cpl. Pay.	36.		AR. 604. 5/7/18. 12th Res.	4 87						
July	Cpl Pay.	37 20		AR 1565. 26/7/18. do.	4 87						
		73 20			9 74				3/3 46	30 .	
Aug		37 20		1073 18/8/18 1 CERB.	14 60						
				D4005. 23/7/18. 1st E Res Bn. Knife & Table Fork Tordale	1 04						
				1337. 27/8/18. 1 CERB.	4 87						
				1337 ✓ ✓	4 3 80				46 75	1/5	
		37 20			64 31						
Sept	Cpls Pay	36 .		Forfeits 1 days Q ra. by R. W. 10.9.18. overlaying dates from Mon 7/9/18 to 10.25 am 8/9/18. (10 hrs 25)		1 10					
				BO. 99. 12.9.18. 1 CERB. 1549. 12/9/18 1 CERB	9 73						
				1690 25/9/18 ✓ Overcredit Pay as Cpl from 21.6.18 to 30/9/18. 102 days @ 10d. A0217. 12th Res 12/9/18	4 87	10 20			56 45	59	Agreed 27.12.18
		76			14 60	11 30			90 55		
Oct	Spls Pay	34 10		D4005 57. 23/9/18. 1 CERB	67						
				1907. 15/10/18. ✓	9 73						
				2047. 23/10/18. ✓	14 60				65 58	74	Auth. Overpd £300 A.F. 1.1.18.
		34 10			25 00					74	
				£30450.			15 -				
				2390. 18/11/18. ✓	4 87				144 38		
				2727. 26/11/18. ✓	4 87						
				Qlr. £7500. 21/7/18 Lon	58 40						
				2837. 3/11/18.	9 73						
Nov	Cpl Pay.	33		2988. 14/12/18. 1 CERB	9 73				-		
Dec		34 10							39 78		
	Attorney Pay 31/10/18.	17 3							41 51	104	
	Cr Note. 6644. 16/4/18. Chg. £30450. 25.11.18. Ad. 3.1.8. Cancelled.		15 -						46 78		
		68 83	15 -		87 60		15 -				

COMPILED BY: Impressed Clerk

CHECKED BY:

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									46 78.		
	CN. 8227. CK. 55017. 21/4/18. Returned 30/12/19		58 40	King's 13/1/19 Kingsmill Ind.	9 73				95 45		
			58 40		9 73						
				Da S.S. Canada. 13/1/19							
				ICSRB. D024. 29/1/19							

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 2/1/19

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.)

JB.

No. 3031329

Rank Spr.

Surname WILSON James Arthur

Christian name

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

Corps (Squadron, Battery or Company) 1st. Depot Bn. 1st. C.O.R. (2.DD.)

Date of discharge Feb. 22nd. 1919

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 37 years months.

Height 5 feet 7½ inches.

Complexion Fair

Eyes Grey

Hair Fair

Trade Rancher

Intended place of residence (To be given as fully as practicable.) Moosejaw G.P.O. Sask.

Descriptive marks

Vacc. scars on left arm.

2. The above-named man is discharged in consequence of ON GENERAL DEMOBILIZATION

Authority for discharge D.O. D.D. #2. Pt.11 #51

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.

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.)

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) Toronto. Ont. James Arthur Wilson *(Signature of Soldier.)*

(Date) Feb.22nd.1919 H Sargeant- Gr *(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) Toronto Ont.

(Signature) [illegible]

(Date) Feb. 22nd.1919

For
O.C. No. 2 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.)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
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
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
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.

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.

M.D. 2

CANADIAN CONTINGENT EXPEDITIONARY FORCE

No. 56

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. 303129 Rank Spr. Name Wilson Jas

Corps No. 2 District Depot who was* DISCHARGED

On 22-2-19., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from ~~Feb~~ Jan 1 191 9.

to Feb 22 191 9., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	22	28
Advances by Cheques No. 89984	20	-	Regt'l. Pay 23 days at $ 1.00 c.	23	-
Advances by Cheques No. 91467	50	-	Field Allow. 2-3 days at $ c. 1.0	2	30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		80
Other charges			Other Allowances* Clothing	33	
Payment on transfer or discharge No. 32526	131	68	Other Credits* W.S.C.	70	-
Balance Cr. (to be paid by the new unit)	~~131 6~~		Bal. Dr. (to be deducted by new unit)		
Total	231	68	Total	231	68

*Give particulars.

A monthly stoppage of $ (†) has been paid on account of Assigned

Pay for the month of 191 and Sep'n Allce. for month of 191 (to) Assignee

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted

(3) cause of discharge Demob. authority O.C. 5-1

(4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date 21-2-19

Place TORONTO, W. Wilson Capt.

Paymaster.

PAYMASTER, No. 2 DISTRICT DEPOT

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

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

M. F. W. 54. (A. F.
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BATTALION

Regimental No. 3031329 Rank Private Name 1st C.O.R. WILSON., James Arthur

C. E. F.

Enlisted (a) 3/12/17 Terms of Service (a) D/W Service reckons from (a) 3rd Dec'r, 1917

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) Rancher

Report Date	Report From whom received	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
		JUN -3 1918			
		Embarked Canada.	21-6-18		A.M.S. [illegible] E G Swaffer Major O.C. Dr. 44
		Arrived England.			
3.7.18	O.C. 12th Res. Bn. C.E.F.	Transferred to 12 Res Bn	Witley.	21.6.18	Part II 156.
29.7.18	O.C. 12th Res. Bn. C.E.F.	Transferred to C.E.T.D. Seaford.	do	29.7.18	Part II 178. Eshway Lieut i/c Records 12th Res. Bn. C.E.F.
2.8.18	1st C.E.R.B.	S.O.S. from 12th Can Res. Battn	Seaford	29.7.18	Part II D.O. 67
29.11.18	1st C.E.R.B.	On Comm Ldv	Seaford	25.11.18	Pt 2 D.O. 163
29.11.18	1st C.E.R.B.	Off Comm Ldv	Seaford	27.11.18	Pt 2 D.O. 165
14.12.18	1st C.E.R.B.	On Comm Kennel Staff	Seaford	14.12.18	Pt 2 D.O. 186

(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				

Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. 27. Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part II Order No: 27

for Commanding Wing.
Kinmel Park Camp.

25 JAN 1919

25 JAN 1919

H.M.T. 'AQUITANIA'
EMBKD. LVP'L. JAN. 18. 1919
DEBKD. HALIFAX. N.S.
JAN. 24. 1919

JAN 18 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT. TORONTO 1919 PART II D.O. 32

22/2/19 S.O.S. (Discharged) No. 2 District Depot
Part II, D.O. No. 37

H. Sergeant Cashier

R. C. Cobbett Lieut.
For O. C. No. 2 District

O. C. Discharge Sections,
No. 2 District Depot

No. 2 DISTRICT DEPOT — AQUITANIA — 25-1-19 — EXHIBITION — W. 1280.

AUDITOR Jm. | PAYMASTER D

22

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

M. OR S. S. | REGT. No. 3031329 | RANK Spr. | NAME (IN FULL) WILSON, J.A.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Complete		

ORIGINAL UNIT C.E.F. 1 Eng. Res. Bn. | IF IN P.F. WHAT UNIT? ~~Moosejaw, G.W.V.A. Sask.~~ (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 3-12-17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ Nil. | DATE EFFECTIVE

PAYABLE TO Nil. | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS c/o G.W.V.A. Moosejaw. Sask

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Toronto. | DATE 22/2/19. | REASON Demob. | AUTHORITY D.O. 51. | IF ENTITLED TO POST DISCHARGE PAY Yes.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																			
31.12.18.	31	1.10	34	10					105	18																									
									105	18	1291-1319.						9	73																	
											B49.						4	87																	
											B449.						5	00																	
											2836.						30	00																	
1.1.19.	31	1.10	34	10	1750		55	58			89984	91469					50	50											49	60			55	58	
Feby	22	1.10	24	20	35	00	70	00	231	68			92526						131	68									231	68					
1 year			280				280										Feb. 22.		70										70		210				1st W.S.G. Paid by #2 D.D.
																	Apr 20 223253.		70	00									140		140				Cheque 223253 Rctd. Redeposited 17.4.19
			70	00			350	00									Apr 18 283284		70	00									210	00	140	00			W.S.G. PAID IN FULL
																	May 16 288843		70										280		70				CAPTAIN
																	16/6/19 381073.		70										350		Closed				O.R. 64.5
			350				350										~~July 14~~		~~70~~										~~14~~						
																			350										350						

60m.-11-18. L. L. 81777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL 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		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	