ORIGINAL

1st DEPOT BN. 1st QUEBEC REG'T.

B.C.MR. 239.

ATTESTATION PAPER.

No. 3082182

J.S.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

F

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — WILSON
1a. What are your Christian names? — James Ernest
1b. What is your present address? — 396, Remington St, Bridgeport, Conn. U.S. A.
2. In what Town, Township or Parish, and in what Country were you born? — Sheffield, England
3. What is the name of your next-of kin? — John Gleve Wilson
4. What is the address of your next-of-kin? — 396, Remington St, Bridgeport, Conn. U.S.A.
4a. What is the relationship of your next-of-kin? — Father
5. What is the date of your birth? — 5th February. 1898.
6. What is your Trade or Calling? — Smallware polisher
7. Are you married? — Single
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes
9. Do you now belong to the Active Militia? or Naval Service — No
10. Have you ever served in any Military Force? If so, state particulars of former Service. — No xxx J E W
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? — Not applicable
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? — Not applicable

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, WILSON, James Ernest, 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 Ernest Wilson (Signature of Recruit)

Date 21st February 1918. Louis Bergeau (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, WILSON, James Ernest, 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 Ernest Wilson (Signature of Recruit)

Date 21st February 1918. Louis Bergeau (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 Montreal, P.Q. this 21st day of February 1918.

[illegible] Capt (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 WILSON, James Ernest on Enlistment.

Apparent Age 20 years ..... 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 ..... 33 ..... ins.
- Range of expansion ..... 3 ..... ins.

Complexion Medium

Eyes Blue

Hair Dk Brown

Religious denominations.
- Church of England .....
- Presbyterian .....
- Methodist ..... XXXXXXX .....
- 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).

R. D. =	30
L. D. =	30
R. EAR	ok
L. EAR	

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.

MOBILIZATION CENTRE M. D. No. 4 FEB 22 1918 MONTREAL, P.Q.

Declared FIT by MEDICAL BOARD MOBILIZATION CENTRE, M. D. #4

Date ..... 191 .....

Place ....

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:—

"A" Fit for General Service

CERTIFICATE OF OFFICER COMMANDING UNIT.

WILSON, James Ernest 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.

M. A. Pichette Lieut.-Col. (Signature of Officer)
Commanding 1st Depot Bn. 1st Quebec Regt.

Date 21st February 191 8.

14-4-19 Pte.

REGIMENTAL DOCUMENTS

NAME WILSON James Ernest REGT. NO. 3082182 UNIT 1st Bn 1st C.I.R H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				
1	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)				
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)				
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
1	DENTAL HISTORY SHEET (M.F.B. 465)				
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
1	MEDICAL EXAMINATION (M.F.W. 129)				
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)				
	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)				
	PARTICULARS OF CHARACTER (A.F.W. 3226)				
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				
5	Prize.				
1	M4W67				
1	4R149				
1	Concard				
1	R122				

27338

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

42-7.
4-7
6-7
1.

W 2589
100M-11-18
1772-30-1917

13-12-21
And

H. Q. Reference 649-W-24870

No. 308 2182 Rank Spr. Unit

Surname WILSON

Christian names JAMES ERNEST

Kindly forward Medals, to which I am entitled by reason of my service in .....
(Theatre of War)

with .....
(Unit with which served in Theatre of War)

No. 241

Street Winchester Av.

Town New Haven

County Conn. USA

.....
(Signature)

*(WRITE IN BLOCK LETTERS AND IN INK)

O. H. M. S.

POSTAGE
FREE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

200M.-4-21.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

Number 3082/82 Rank Pte

Surname WILSON

Christian Name James Ernest

Unit 1st Can Rly Trps Theatre of War France

Date of Service 9/7/18

Remarks

Latest Address 97 Montgomery St
Malden
N. Y.
U. S. A.

Roll No. B. Page 3679.

NAME

REGT. No.

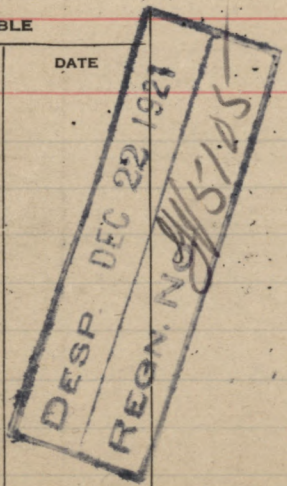
RANK AND UNIT

NEXT OF KIN

CABLE

No. | DATE

NATURE OF CASUALTY



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

NAME Wilson J. E.

RANK AND CORPS Pte

REGT'L. No. 3082182

H. Q. FILE No 649

FOLLOWS

No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 289	46 cas clg Stat-	5-8-18	Debility
a 291	Discharged	9-8-18	

M.D.2

CARD NO. 4

SURNAME. Wilson

CHRISTIAN NAMES James Ernest,

REGL. No. 3082182 RANK Pte

UNIT ~~1st Que Regt. 1st Dpo Bn~~ 2 Dist Dpo.

FOREMOST CORPS Nil

~~SOS. 31-3-19 Demob~~

FOLL. ~~DD 870 28-3-19 2 BD~~

T.O.S. Feb 25 19 18

D.O. Part II No. 56

NEXT OF KIN.

NAMES IN FULL Wilson John Cleve,

RELATIONSHIP TO SOLDIER Father,

ADDRESS ~~396 Remington St., Bridgeport~~ 97 S. Montgomery St., St. U.S.A.

S.A.A.D. 12/11/18 Walden, Orange Co. N.Y. U.S.A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Sheffield DATE Feb. 5th 1898.

PLACE OF ATTESTATION Montreal, P.Q. DATE Feb 21st 1918.

G/S 25-3-18 1040/10

B/C. 1-3-19 276/56 Spr.

L. L. 25989. M. & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Form R. 149.

Name WILSON James Ernest Rank Spr Reg. No. 3082182

Unit 1st CRT

Next of Kin John Glover Wilson 396 Remington St. Bridgeport Conn USA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5.8.18	Sick 46 C.C. Stn	Debility		A.289		34435
9-8	To duty	-do-		A.291		34581

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

D.M.S. 1300-50M-21-11 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
WILSON	J.E.	3082182

RANK	UNIT	CO.	TROOP	BATTY
Spr.	CRT 1			

HOSPITAL: 46 CCS

DATE OF ADMISSION: 5-8-18

1. HOSP.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

1. Debility

2.

3.

DISPOSITION: C.L. 12-8-18 A289-2

14.8.18 A 291

DATE: 14.8.18.

REMARKS

A.M.D. 2 Dept.
Boh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

*Name L/J. WILSON, James Ernest Rank Spr Regtl. No. 3082182.

Fyle Depot 24-Wi-530

Original unit Present unit C.R.T. M. or S. Age 20 Religion Meth Ref. H.Q.

Port, ship and date of arrival Halifax Belgic 2-3-19.

Next of kin Father, John G Wilson 396 Remington St. Bridgeport Conn USA

Address on leave Same

Address on discharge Walden N.Y U.S.A.

Transportation issued Yes ~~No~~ Date 31-3-19 Bridgeport USA. Character on discharge

Previous occupation Smallware Publisher Date and place of enlistment Montreal Feb 21/18.

Diagnosis Demobilization Date of Medical Boards 27-3-19

Date.	Remarks.	Pt. 2 Order No.
	TOS 23-2-19 postedto CASCO (EXCAMP)2-3-19	
	leave with subsfrom 6-3-19to20-3-19	67
	Granted Subs from 20-3-19 to 24-3-19	81
31-3-19	SOS DISCHARGED "DEMOB'N" ENTITLED TO W.S.M.	87

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

(over)

Date	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) WILSON J E

REGIMENT 1ST C R T RANK Cpl No. 308218

Date of Examination in England 31/1/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 12-18-19-30-
2. EXTRACTIONS 5-
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

CANADIAN ARMY DENTAL CORPS Passed 31/1/19

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

Signature of Dental Officer K. Berry Capt

D.M S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

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

Rank Spr. Surname Wilson Christian Name James Ernest

Unit or Corps 1st C.R.T. (If a soldier) Regtl. No. 3082182

Born at Sheffield, England on, date 5th Feb 1898

Signature (for identification) J E Wilson

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. none

Weight 127 lbs.

Height 5 ft. 5 ins.

2. **NUTRITION AND DIATHESIS?** good

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

3. **NERVOUS SYSTEM?** normal

4. **RESPIRATORY SYSTEM.** normal

5. **HEART?**

Abnormal Sounds? none

Abnormal Size? no

Pulse Rate? 70 Intermittence or irregularity? none

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** normal

8. **GENITO-URINARY SYSTEM?**

Urinalysis—S.G.? 1016 Reaction? acid Albumen? none Sugar? none

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

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

Examined at Ripon

Date 27 JAN 1919

Signed D E Wiley Capt M.O.

Signed T. S. Tupper, capt M.O

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER Wilson James E.

REGIMENT Rpr. RANK

No. 3058182

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 for									DENTALLY FIT										
Date MAR 27 1919																							
																					Hasemple Major		

F.B. 465.
DM.—6-18.
1772-39-950.

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

A2

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. 3082182 Rank Spr. Surname WILSON
(Give name in full) James Ernest

Unit or Corps 2nd R.D. Birthplace Sheffield Eng.

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

1. **GENERAL DESCRIPTION:**

Physique Fair Weight 174 lbs. Height 5 ft. 5 in. Color of Eyes Blue

Nutrition Fair

Pulse 78 Good

Condition of arteries

Vision Rt. D30 Left D30

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
1 Scar inner side right knee.

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
Varicocele
Varicose veins
Hemorrhoids
goitre
Urine negative

APPROVED
Mar 28 1919
J. R. Chrestan 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.....(Canada)

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.

Signautre .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Exhibition (Canada)

Date Mar 27-19 Signed W E Brown Capt 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 G. E. Wilson

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

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

M.F.W. 139.
1033 (D.P.) 500M-11-18.
1772-39-1142.

[OVER]

ORIGINAL

ORIGINAL

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 Ernest

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule B.C.M.R.

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) 396 Remington St., Bridgeport Conn. USA

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 22 day of February 1918 ~~1917~~, by the undersigned medical board sitting at Montreal

5. Age as stated 20 Years Months. 6. Apparent age Years Months

7. Height 5 Feet 3 Inches. 8. Weight 117 Pounds.

9. Chest measurement { Minimum 30 Ins. Maximum 33 Ins. } 10. Complexion Med. { Eyes Blue Hair D.Brown }

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

13. Number of vaccination marks { Right arm Left arm 2 } 14. When vaccinated last

MOBILIZATION CENTRE No. 1 MD. No. FEB 22 1918 MONTREAL, P.Q.

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 A2

R. D. = 30
L. D. = 30
R. EAR 4
L. EAR

H. Anbury Maj President.

Arm Arthur Capt Member. Edwards Capt Member.

Signature of Man

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.	25.2.18		J.A. Jamie Capt M.O.
MAR 15 1918		F H Coone M.O.	MAR -4 1918		M.O.
		M.O.	MAR 11 1918		J.A. Jamie Capt M.O.

Joined 21st day of February 1918 at Montreal

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st DEPOT BN. 1st QUEBEC REG'T.			
Transferred to.....	1st B.C.R.Y.	3082182		9-7-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
MONTREAL Bramshott	19-3-18 13.4.18 28-6-18	ncd A2 Under age rejected	F H Coone Capt Be kept to be raised again when fully developed FOR PRESIDENT, MEDICAL BOARD Capt.

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.

Exhibition Qua 27-9 A C Brown Capt

Surname GREENWOOD Christian Name James Ernest

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				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3082182 (Rank) Pte.

Name (in full) WILSON, James Ernest enlisted in

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

CANADIAN EXPEDITIONARY FORCE at Montreal P.Q. on the 21st.

day of Feb. 19 18

HE served in England and France.

and is now discharged from the service by reason of DEMOBILISATION

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

Age 21

Height 5' 6"

Complexion Med.

Eyes Blue

Hair Dk. Brown

Marks or Scars Vacc scars left arm

James Ernest Wilson
Signature of Soldier

H Sargeant
Issuing Officer

For O.C. No. 2 District Depot.
Rank

Appointment

Date of Discharge March 31st. 1919

Signed at Toronto, Ont. this 31st. day of March 19 19

in Military District No. 2

File Reference No.

L.L.

No. 2 DISTRICT DEPOT
MAR 31 1919
TORONTO

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

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

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

M.D. 2

M.F.W. 44.
1133 (D.P. 250M-12-16.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE No. 56

Regimental No. 308.2182 Rank Spr. Name Wilson J.E. (Surname first)

Unit No. 2 District Depot who was* DISCHARGED

On Mch 31 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Mch 1 to Mch 31 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month	5-46	
Regimental Pay 31 days at $ 1 c. 10		34-10
Field Allowance ... days at $ ... c.		
Separation Allowance		
Clothing Allowance		35-
Post Discharge Pay		70-
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. 161139	133-64	
Total	139-10	139-10

*Give particulars. F.C.B.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT				Signature of Officer Making Payment.
			Dr.		Cr.		
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

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

(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

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer)

(19) Pivotal-man (*f*) (Date)

(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. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

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

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

(A) Report: Date.	(A) Report: From whom received	(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
			Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No._____. Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part 11 Order No: 55 6/3/19 for Commanding_____ Wing, Kinmel Park Camp.			

SL-1V1 FEB 23/19
1 HFX MAR 2 10
H M T ✠ BELGIC

FEB 23 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 87

Nothing to be written in this margin.

W C Cahill
Lieut.
For O. C. No. 2 District Dep.

31/3/19
For
O.C. No. 2 District Depot.

S.O.S. (Discharged) No. 2 District Depot
Part II, D.O. No. 87
A Sergeant

F.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps 6th Draft 1st DEPOT BN. 1st QUEBEC REG'T.

Regimental No. 3082182 Rank Private Name WILSON James Ernest

C. E. F.

Enlisted (a) 21-2-18 Terms of Service (a) Duration of CEF Service reckons from (a) 21-2-18

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) Smallware Polisher

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
		Embarked Canada		24-3-18	K. M. S. Scandinavian
		Arrived England		3-4-18	
17. 4-18	23rd Res Br.	Taken on Strength	Bramshott.	4-4-18	Pt II Co. 107
23. 4. 18	23rd Res. Bn.	POSTED TO 1st. QUE. REG. DEPOT. Coy B1	"	24. 4. 18	D.P. II. O. No. 114. Lieut W. A. Chalmers for O.C. 23rd. Can. Res. Bn.
24. 4-18	Q.R.D.	TAKEN ON STRENGTH Quebec Regt'l Depot, shewn on command to 2nd C.C.D.	Bshott	24.4.18 Pt. II. D.O.	101. 25-4-18. Geo. Duckett Lt QUEBEC REGT'L. DEPOT
26. 4. 18	2nd C.C.D.	Attached to 2nd C.C.D	Bramshott	24.4.18	Pt. II No. 2

(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				
14 JUN 1918	OC. 2nd CCD	Ceases to be attached to 2nd C. C. D. on return to Quebec Res. Depot	Bromshott	13 JUN 1918	Pt. 2 D. O. No. 140 D Turner Lieut for OC. 2nd CCD.
14.6.18	C.R.D.	Ceases to be shewn on command to 2nd C.C.D. & is detailed to Depot Co.	B'shott	13.6.18	✓ Pt. 2 D.O. 148.
17.6.18	Que. Regt'l. Depot.	TRANSFERRED To Canadian Ry. Troops, Purfleet	Pt.	18.6.18	✓ D.O. 148. 18.6.18. C W Lavers Lieut for O/C QUEBEC REGT'L. DEPOT.
10.7.18	R.T. Depot	Taken on Strength.	Purfleet	~~18.6.18~~ ✓	~~Pt. 2~~ 168
10/7/18	C.R.T. Depot	S.O.S. on proceeding O/S. to 1st Bn. CRT.	Purfleet.	9/7/18	✓ Part 11 D.O.189. J Goode Lieut for Adjt. Canadian Railway Troops Depot.
10.7.18	Cy. B.D.	T.O.S. 1st Bn CRT. as reinforcr from C.R.T.D.	Purfleet.	10.7.18	N.R. 303 Pt. 0. 66 of July 1918.
13.7.18	-	Left Cy. B.D. for unit		13.7.18.	N.R. 1304
20.7.18	1 CRT.	Reptd for duty	Unit	13.7.18	B213
5.8.18	46 CCS.	Debility Adm	46 CCS.	5.8.18	A36/G7257
8.8.18	✓	✓ To	duty	9.8.18	A36/G7613
10.8.18	1 CRT.	✓ To	46 CCS.	5-8-18	B213
17.8.18	✓	Rejd from Hfx	Unit	9.8.18	B213
13-1-19.	C.R.T.D.	Leave to Eng. Austrich to C.R.T.D. 14-1-19. Witley for Demob.			NR. 1305-4 of 1919. Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

CERTIFIED CORRECT. 16 JUL 1918 CAN. REGIMENTS, LONDON.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I. Part I.

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

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P./Co (3490)

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

(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

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

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

(Signature of Posting Officer

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

(24) Miscellaneous entries:—

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

No. 82182 Pte Wilson A.E.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	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.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer.
27-1-19	ARD (CRT)	To and posted to Depot Group		1-1-19	Do 19	
3-2-19	ARD	S.O. 8 to M.D. No 2		3-2-19	Do 425	

R. E. Appelen
LT. O.I/c RECORDS
ALBERTA REGIMENTAL DEPOT.

4 FEB 1919

Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. _____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No. 39 15/2/19

E.R. Tillett Lt
for Commanding 2 Wing
Kinmel Park Camp.

Nothing to be written in this margin.

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.

---

(1) Name of Overseas Unit which Soldier joins 1st DEPOT BN. 1st QUEBEC REG'T.

(2) Regimental Number 3082182

(3) Full Name of Soldier WILSON James Ernest

(4) Place of Birt h Seffield Eng

(5) Are you married, or not ? Single

(6) If married, state,
(a) Full name of your wife Not Applicable

(b) Present Postal Address Not Applicable

(7) Are you a widower ? Not Applicable

(8) Have you any children ? Not Applicable

If so, give number of boys and girls Not Applicable

Also their names and ages Not Applicable

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address John Gleve Wilson, 396 Remington St. Bridgeport, Conn. USA

(10) Is your Mother alive? No

If so, state name and address Not Applicable

(11) If your Mother is a widow Not Applicable

Are you her sole support, or not? Not Applicable

(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.

Not Applicable

(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.

Not Applicable

(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.

Not Applicable

(15) Are you insured? Yes

If so, in what Company? Prudential Life Ins. Co

Have you made arrangements for payment of your Insurance premium Yes

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

M. A. Riché Lieut.-Col.
Commanding 1st Depot Bn. 1st Quebec Regt.
Officer Commanding.

Date Feb. 21st 1918

Form R 122.
2353—100M—9-12-16.

ET.

Rank 6th Dft 1st Br QUE Name WILSON, James Ernest Reg'l No. 3082182

Unit If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Montreal. February 21st. 1918 Place of Birth Sheffield. England.

Name and Address, Next-of-Kin John Gleve Wilson,

396, Remington St, Bridgeport. Conn. U.S.A. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. 10309
File R.L.
Category Can O R

H. W. V., Ld.—9546-16.

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.
C.		Arrived in England		3-4-18	S/S SCANDINAVIAN
17-4-18	23 Res	T.O.S.	Bkhtd	4-4-18	Do 107.
24-4-18	"	S.O.S. to C.R.D.		24-4-18	Do 114
25-4-18	C.R.D.	T.O.S. from 23 Res + on Com 2 ccd		24-4-18	Do, 101. Do 98. 2 ccd
14-6-18	"	Ceases on Com 2 ccd.		13-6-18	Do 145.
18-6-18	"	S.O.S. to Can Rlwy Troops	Dkg.	18-6-18	Do 148. S.O.S. C.R.T. D. 18/6/18 P.H. II. 168 18/6/18
10-7-18	Dep C.R.T.	T.O.S. from 1st C.R.T.	Spr. Purfleet	9-7-18	P.H. II. 187 P.H. II. 66 1st C.R.T. 23/7/18
20-1-19	1st C.R.T. Alberta.	Posted to C.R.T.D.	" Aeild	14-1-19	-1-4 MDCD No 2. d/ 18.2.19.
3.2.19.	Rgl. Dep.	S.O.S. to M.D.W.2. Rhyl	" Ripon	3.2.19	-1-25
27-1-19	"	T.O.S. from 1st C.R.T.	" "	19-1-19	Do 19

A.F.B. 103 CHECKED 5 JUL. 1918

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.				
7.3.19	MD 2	SOS to Canada	Rhyl Dpo	22.2.19	Pt II 56.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/9/18	EFFECTIVE DATE:-
AMOUNT:- 15 00	AMOUNT:-

NAME:- WILSON James Ernest

NUMBER:- 3082182

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
LPC		Pte

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.

30/7/18.

John E. Wilson
16 Seeley Street.
Father. Walden N.York U.S.A.
~~Stoppea 1.2.19~~

ARD 23 ✓
Ripon
MD ✓

UNIT AND TRANSFERS

ORIGINAL UNIT:- #6 Dft 1/1 Dur Reg ✓

DATE ACCOUNT FIRST OPENED:- 1/4/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			23 Res
	1/7/18	22/7/18	C.R.T.D.

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
~~3/4/19~~		3 M Chgrs 1/8	~~40~~				
~~14/4/19~~		Two 50	~~9 33~~				
~~22/4/19~~		£3/-/-	~~14 60~~				
			24 33				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

P Dur to Canada 23/2. Ripon 28/11/19 Ripon MM2 Lea Bal 102 24 LPC 1/8 41

PARTICULARS OF RENDERING NON-EFFECTIVE:- D/C. 1/2/19. MF 23/2.

M.D.2.

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal from Canada								37 90		
Apl	P. P.	33 -		AR 59. Derbshot 9/4/18.	14 87				66 03		
				AR 686 2nd CCD 29/4/18.	14 84				51 19	15	
		33 -			19 71						
May.		34 10		AR 892 2 CCD 14/5/18	24 57				60 72		
				AR 1397 do 28/5/18	24 57				36 15	1/30	
		34 10			49 14						
June		33		AR 1667 2 CCD 10/6/18	24 57				44 58		
				Q 4005 9. 14. 6. 18.	3 70				40 88		
				AR 535 CRTD 27/6/18	29 20				11 68	45	
		33			57 47						
July	P. P.	34 10		2 dys F.P. #2, + 2 dys Reg 2/0 184 7/7/18. 6 P.P.P.	—	2 40	4	4			
				938. 14/7/18. (2) CCBD	4 46						
				481. 20/7. (5). C.R.T.	89 2				2800 60		
		34 10			1338	440					
Aug	do	34 10		653. 28/8. (22) "	89 2		4	4	5318.75.		
		34 10			89 2						
Sept	do.	33 00		C. a. F. Sept.	—		4	15			
				748. 20/9 (9). "	89 2				6226 75.	Agreed 15/11/18	
		33			89 2			15			
Oct	do	34 10		Can.	—			15	81,36		
				874. 28/10 (37). "	93 3				72,03		
		34 10			93 3			15			
Nov.	do	33		Can.	—			15	9,03		
				1007 24/11 (29) "	1866						
Dec	"	34 10		Can. P.	—			15			
				1189. 22/12 (60) "	933						
	Total	67 10		Total	2799			30			

COMPILED BY.....
CHECKED BY.....

NUMBER 308182 RANK NAME

Month	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
31/10	Bal. forward.			✓					7 2 08		
Nov. to Dec	Paid	6 7 10		Paid	27 99			30			
Jan.	✓	3 4 10		C. & P.	✓			15	100 74		
	Int on Def'd Pay	2 5 0		✓	27 99			45	102 74		
				13/1 13/11/19 1 CR 3	10 9 33				2 6 34		
				8 of 34 Acct 27/1	39 14 60				78 40		
				JOR 3064 8666 CR 4 2/1	44 - 11				4 8 40		
					2 4 34						
				BOS 27/2/19 £2 23 ARR							

This space to be for numbers.

War Service Badge
Applied for
Issued

Proceedings on Discharge.

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

L.L.

No. 3082182

Rank Pte.

Surname WILSON, James Ernest

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. Q.R.(#2 D.D.).

Date of discharge March 31st. 191 9

Place of discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 years ... months.	Descriptive marks
Height 5' feet 5" inches.	Vacc scars left arm
Complexion Med.	
Eyes Blue	
Hair Dk. Brown	
Trade Polisher	
Intended place of residence (To be given as fully as practicable.)	97 Montgomery St., Walden N.Y. U.S.A.

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

ON GENERAL DEMOBILIZATION

Authority for discharge D.O. D.D. #2 4/11/87

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.

Feb 23. 19

(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 Ernest Wilson *(Signature of Soldier.)*

(Date) March 31st. 1919 H Sargent Cpl *(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.

(Date) March 31st. 1919

(Signature) H Sargent Cpl
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.

(58) Wt. W. 2290—PP1182 6-18 J.F.W. (E3277)

Army Form W3997.

2

Regtl. No. 3082182 Rank Spr

Name Wilson James Ernest
(Christian Names in full) (Surname)

Unit A.R.H. Regt. or Corps C.R.T.

1st Que. Regt

CATEGORY..... NEXT OF KIN Father

REASON FOR RETURN

Medical Board held at..... 19

.....

PLACE OF ENLISTMENT U.S.A

.....

SLD-III FEB 23/19
III HIX MAR 2 10
A M T BELL 10

COVER

FOR

DISCHARGE DOCUMENTS.

CAMPAIGNS, MEDALS & DECORATIONS.....

.....

OCCUPATION Munition Worker

- ✓ Casualty Form AFB 103
- ✓ Medical Board Proceedings
- ✓ Medical History Sheet
- ✓ Attestation Paper
- Field Conduct Sheet
- ✓ Regimental Conduct Sheet
- ✓ Company Conduct Sheet
- ✓ A.O.S. 2
- ✓ Dental Certificate
- ~~MISCELLANEOUS~~

A

Group # 13

31

Form D.M.S. 1394.
7004.—*100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Bramshott. 13 4 1918

No 3082182 Rank Pte Name Wilson J. E.

Local Unit 19 R.D. (Reg) Overseas Unit — Age 20

Examination held at Bramshott.

[1] DISABILITY. ~~Overseas~~—Local (scratch one out). Under developed.

PRESENT CONDITION.

Chest 30 - 32 - Height 5'-4½"
Wt. 115

BOARD RECOMMENDS:— B1 likely to be raised in 6 mths

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty .....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge .....

Signatures:—

Members { Fred Allpress Maj RAMC President.
W. H. L. Ruddle Capt
J. Matthews Capt

APPROVED

Bramshott. 13th Apr. 1917. [illegible] Capt
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19[illegible]

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas—Local
(strike out one)

PRESENT CONDITION.

BOARD RECOMMENDS—

1. Fit for Duty .....

2. Fit for duty after ..... weeks' physical training

3. Fit for Temporary Base Duty ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures:

President.....

Members .....

.....

APPROVED

Dated 1917

For A.D.M.S.

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Bramshott. 13 4 1917.

No 3082182 Rank Pte Name Wilson J. E.

Local Unit 19 R.D. (Reg) Overseas Unit — Age 20

Examination held at Bramshott.

DISABILITY. Overseas—Local (scratch one out). Under developed.

PRESENT CONDITION.

Chest 30 - 32 - Height 5' - 4½"

Wt. 115

BOARD RECOMMENDS:— B2 likely to be raised in 6 mos.

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty .....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge .....

Signatures:—

Members { Fred A. Upjohn Maj RAMC ..... President.
W. H. L. Baillie Capt .....
J. Macalister Capt .....

APPROVED

Bramshott. 13th Apr. 1917. W. MacKay Capt .....

Dated..... For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 1917.

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas—Local
(Record one only).

PRESENT CONDITION.

BOARD RECOMMENDS—

1. Fit for Duty .....

2. Fit for duty after ..... weeks' physical training.

3. Fit for Temporary Base Duty ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures—

..... President.

..... Members.

.....

APPROVED

Dated ..... 1917.

..... For A.D.M.S.

"BELGIC" 1-3-19

No. 2 DISTRICT DEPOT W-1690

AUDITOR | PAYMASTER

31

M. OR S. A.

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

REGT. No. 3082182 RANK Spr. NAME (IN FULL) WILSON, J.E. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Mil. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
✓		

ORIGINAL UNIT C. E. F. C.R.T.D. — IF IN P. F. WHAT UNIT? Same

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 21-2-18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ 15 00 — DATE EFFECTIVE 1.4.19.

PAYABLE TO John G. Wilson. — RELATIONSHIP Father — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 97 S. Montgomery St. Walden, Orange Co. U.S.A.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE N/I

DISCHARGED — PLACE Toronto ✓ — DATE 31.3.19. ✓ — REASON demob. — AUTHORITY S.O. 84 — 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																																				
31.1.19 ✓	1	1/0 ✓					78	41 ✓																												
									78 41	Amt	23/1/19						4 87 ✓																			
											"	1/3/19					5 00 ✓																			
											"	1/3/19					30 00 ✓																			
																							30 00 ✓													
																															69 87 ✓		8 54 ✓			
1.2.19 ✓	28	1/0 ✓	30 80 ✓		17 - ✓		8	54 ✓																												
					3 20 ✓		8	44	54 54 ✓		158 93						60 00 ✓														60 00 ✓		5 46 ✓			
March. 31		1/0 ✓	34-10 ✓		35 - ✓		70	- ✓																												
									139-10 ✓		161 35						133-64 ✓								5-46 ✓						139-10 ✓					
122 days ✓		W.S.G.	280 00 ✓						280 00 ✓								W.S.G.																			
																	Mar 31						70 00 ✓						70 00 ✓		210 00 ✓			
																	May 1 - 285614						70 00 ✓						140 00 ✓		140 00 ✓			
																	May 28 377329						70 00 ✓						210 00 ✓		70 00 ✓			
																	June 29 384613						70 00 ✓						280 00 ✓		Closed.			
									280 - ✓								280 - ✓														280 -					

Feb. March. 19. ECW.

T. O. S. 23½ D. O. 62 MWH

SUBS. 12 TO 13½ D. O. 7

Subs 20.3 to 24.3 S.O. 81

1st W. S. G. Paid by #2 D. D.

W. S. G. PAID IN FULL

A.H.R. 74 CAPTAIN

FOR PAYMASTER WAR SERVICE GRATUITY

60m.-11-18. L. L. 51777. 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.	

Date of Enlistment 21-2-18.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

W 12609 Date of Assignment 1st. Sept/18

5-LS-2577 SIK'

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.00			

PARTICULARS OF SEPARATION ALLOWANCE

No. 3082182

Rank Spr Promoted Reverted Discharge

Soldier's Name J.E. Wilson

Battalion 1st. D. Bn. 1st. Quebec Regt.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address Father

1 JOHN G.WILSON,

2 ~~16 SEELEY ST.,~~ ~~WALDEN,N.Y.U.S.A.~~ 15 15.00
% 3082182 SPR J.E.WILSON
FIFTEEN DOLLARS

3

4 (2) 97 S. Montgomery St, Walden Orange Co, N.Y.
13298-5-11-18.

1918 Date	Cheque No.	Amount S/A	Amount A/P	Total	
Sept	Z 55701		15	15	✓
Oct	Z 70791		15	15	✓
Nov	Z 86680		15	15	(2)
Dec	Z 101168		15	15	✓
Jan.	Z 115866		15	15	✓
Feb.	Z 128753		15	15	✓
Mar.	Z 140427		15	15	✓
			105	105	

REMARKS F. 019486-J-332 MR.4-1318

A/c Closed 31-3-19

M.D. #2 Ret'd per Belgic

Date 1/3/19 M.F.W.187: 1/3/19

Clerk K Smith

M.R.O. 62112 Destroy Lend-S. 1/1/19 of MB

AUTHORITY FOR NEW ACC'T. 2M. 24-7-18 Stubbs 6-9-18.

M. F. W. 126.
400M.—7-17—1779 39-1141
L. L. 22520—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M—6-17—1772 39-1141
L. L. 22330—M. & D. 1938.