3186410.

6 M. D. Ist. Depot Battalion Nova Scotia Regiment

Regtl. No. 3186410.

PARTICULARS OF RECRUIT

ORIGINAL

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class one)

1. Surname Withrow.
2. Christian name Reginald Uniacke .
3. Present address South Uniacke, Hants Co., N.S.
4. Military Service Act letter and number 642837 GC. Con No.473
5. Date of birth December 14th.1889.
6. Place of birth Rawdon Hants Co., N.S.
   (town, township or county and country)
7. Married, widower or single Single
8. Religion Presbyterian
9. Trade or calling Farmer.
10. Name of next-of-kin Mrs Mary Withrow.
11. Relationship of next-of-kin Mother
12. Address of next-of-kin South Uniacke, Hants Co., N.S.
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any No.
15. Medical Examination under Military Service Act:—
    (a) Place Halifax N.S. (b) Date 5-8-18 (c) Category ALL.

DECLARATION OF RECRUIT

I, Reginald Uniacke Withrow., do solemnly declare that the above particulars refer to me, and are true.

Reginald U. Withrow. (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 29 yrs. 7 mths.

Height 5 ft. 11¾ ins.

Chest measurement: fully expanded 40 ins.; range of expansion 3 ins.

Complexion Fresh

Eyes Blue

Hair Brown

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

Top middle finger right hand off.

J. A. Crowley Capt

for O. C. 125 Depot Btln.

N.S. Regt.

Place Halifax N.S. Date 5-8-18.

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

6 1st. Nova Scotia

one

Withrow.

Reginald Unacke .

South Unacke,Hants Co.,N.S.

642827 GC. Con No.473

December 14th.1889.

Rawdon Hants Co,N.S.

Single

Presbyterian

Farmer.

Mrs Mary Withrow,

Mother

South Unacke, Hants Co.,N.S.

No.

No.

Halifax N.S. 5-8-18 ALL.

Reginald Unacke Withrow.

29 7

5 112

40

3

Fresh

Blue

Brown

Top middle finger right hand off.

Halifax N.S. Date 5-8-18.

J P H. 18-2-19

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

M F W 39a 1
M F 3 465 1
1 Index Card

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name WITHROW, REGINALD UNIACKE.

Regt. No. 3186410 Rank Gnr

Corps O/S Sect "Siege" 6th Artillery Depot

Demobe

30475

H

M. F. W. 71—500M.—5-18.
1772—39—961.

NAME Withrow, Reginald Uniacke

REGIMENTAL NO. 3186410 RANK Gunner

ENLISTED AT Halifax N.S. PROMOTIONS, &c. AND DATE

DATE 6-8-18

IF SERVED PREVIOUSLY, STATE UNIT, &c. No.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Mary Withrow RELATIONSHIP Mother

ADDRESS OF South Uniacke, Hants Co. N.S.

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
T.O.S.	255	12-9-18	
~~S.O.S.~~	~~186~~	~~24-12-18~~	Demobilization.
S.O.S.	193	31-12-18	" "

H. Q.

M. D. No. 6.

Surname Withrow.

T. O. S. Aug. 5th 1918.

Christian names Reginald Unwacke

D. O. Pt. II 234 of 24-8-18.

Regtl. No. 318644 Rank Pte

S. O. S. 31-12- 1918

Unit N. S. Regt. 1st D. Co. B.W.

Reason Demob

Auth. D.O. 1937 31-12-18 #6 Art. Appr.

Next of kin Withrow, Mrs. Mary Relationship Mother

Address South Uniacke, Hants Co. N.S.

Also notify:

BORN—Place Canada Dawson Y.T. Date Dec. 14th 1889

ATTESTED—Place Halifax N.S. Date Aug. 5th 1918

O/S

R/C

W. 22—100M-7-18. 1772-39-839.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3186410 (Rank) Gunner

Name (in full) Withrow, Reginald Uniacke. enlisted in

the 10th.Halifax Siege Battery, C.G.A. C.E.F.

CANADIAN EXPEDITIONARY FORCE at Halifax N.S. on the 5th,

day of August 1918

HE served in Overseas Section "Siege"6th.Art'y Depot.

and is now discharged from the service by reason of Demobilization.

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

Age 29 Yrs.

Height 5' 11¾"

Complexion Fresh

Eyes Blue

Hair Brown

Marks or Scars

Top of middle finger right hand off.

R. U. Withrow
Signature of Soldier

Issuing Officer

Major.
Rank

Date of Discharge 31-12-18

Overseas Section "Siege"6th.Art'y Depot.
Appointment

Signed at Halifax N.S. this 31st day of December 1918

in Military District No. 6

File Reference No.

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
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 3186410 (Rank) Gunner Name Withrow, Reginald Uniacke.

Unit Overseas Section "Siege" 6th. Artillery Depot.

Address on Discharge South Uniacks, Hants Co. N.S.

Character and Conduct Very good

Former Occupation Farmer

Special Qualifications of Value in Civil Life

Medals and Decorations None

Remarks

Signed at Halifax N.S. this 31st. day of December 1918

E B Cloud Major.
Name of Officer

Overseas Section "Siege" 6th. Artillery Depot.

Rank

Appointment

M.S.A. 15.

ORIGINAL

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 Lockhow Christian name Reginald.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 6 2837 GL
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) South Uniacke Hants Co N.S.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 5 day of August 1918 by the undersigned medical board sitting at Halifax NS

5. Age as stated 29 Years 7 Months.
6. Apparent age 29 Years 7 Months
7. Height 5 Feet 11 3/4 Inches.
8. Weight 173 3/4 Pounds.
9. Chest measurement { Minimum 37 Ins. / Maximum 40 Ins.
10. Complexion Fresh { Eyes Blue / Hair Brown
11. Physical development good { Good / Fair / Poor
12. Smallpox marks nil
13. Number of vaccination marks { Right arm nil / Left arm nil
14. When vaccinated last never
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Tip middle finger rt hand off.
16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis (Strike out disease admitted or suspected.)

We find no evidence of past { Rheumatism / Tuberculosis / Syphilis

Vision R 20/20 L 20/20

Hearing Normal.

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 II

A A Jeffers Lt Col AMC President.

R T Osborne Capt Member. Member.

Signature of Man Reginald Lockhow

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.	21-9-18		M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 5th day of August 1918 at Halifax NS

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Halifax NS	5/8/18		category A 2

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.

Surname Withrow Christian Name Reginald Lincoln

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				

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 31864 10 Rank Gunner Surname Withrow
(Given name in full) Reginald Umaiah

Overseas Section "Siege" 6th Artillery Res. Unit or Corps ..... Birthplace Rosedale Toronto Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 5 ft. 11 3/4 in. Colour of Eyes Blue

Nutrition Good

Pulse 80

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Nil

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

(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 Halifax.....(Canada)

Date Dec 23rd 1918 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 R. W. Wilkinson.....

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

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

[OVER]

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

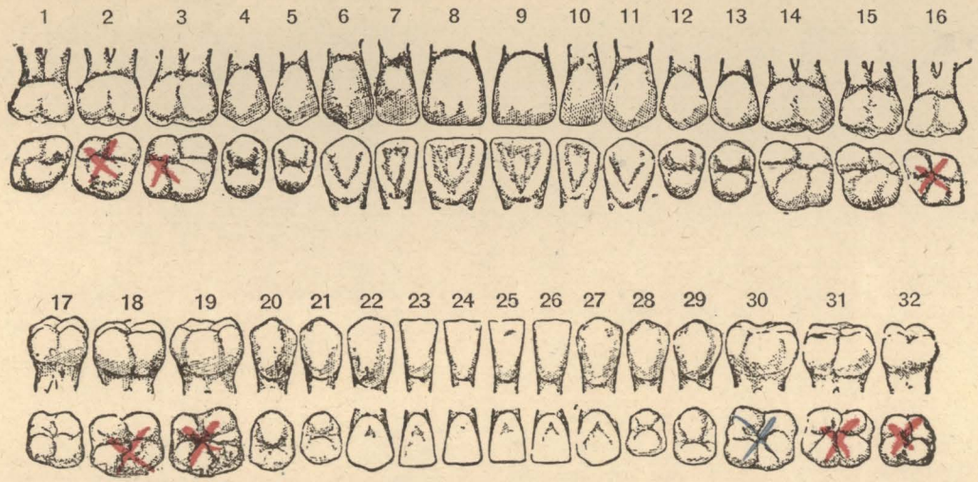
District 6

No. 316440

Name of Soldier Matthews, P.W.

Rank Gnr

Regiment 14th L.B.



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																						Missing:- 2.3.16.17.18.19.31.32
	13-9-18.																			Capt. Blanchard	6.	Extract # 30.
	18-9-18		Prophylaxis								30.									Capt. Blanchard	6	Completed

M.F.B. 465.
200M—9-18.
177?—50.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 3186410 Rank Gunner Name Withrow, R.U.

Corps No. 6 Artillery Depot, C.E.F. who was* Discharged

On 31-12-18 191...., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-18 191....

to 31-12-18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	29	94
Advances by Cheques — No.			Regt'l. Pay 31 days at $ 1 c.	31	00
Advances by Cheques — No.			Field Allow. 31 days at $ c. 10	3	10
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges L.W.O. Pay	35	00	Other Allowances* Cloth. All.	35	00
M.F.C.		46			
Payment on transfer or discharge No.	94	18	Other Credits* Ret. from Furlough 26 days	28	60
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	127	64	Total	127	64

*Give particulars.

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

Pay for the month of ..... 191...
and Sep'n Allce. for month of Nil 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 5-8-18

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

(3) cause of discharge Demobl. authority R.O. 1357

(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 December 31st./18

Place Halifax, N.S. W. H. Cennell Lieut.
for *Paymaster.*
No. 6 Artillery Depot, C.E.F.

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.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3186410

2 Rank. Gunner

3. Name. Withrow, Reginald Uniacke.

4. Unit. Overseas Section "Siege" 6th. Artillery Depot.

5 Date of Discharge 31-12-18 Place Halifax N.S.

6 Reason for Discharge Demobilization

7. Authority. R.O. 1357.

8. Proposed Residence after Discharge South Uniacke, Hants Co. N.S.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 39. Halifax N.S.

R. U. Withrow

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Halifax N.S.

Date December 31st. 1918.

Signature [illegible] Major.

(O. C. Discharging Unit.)

Overseas Section "Siege" 6th. Artillery Depot.

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

~~Attestation Paper, Triplicate~~	~~Militia Form W. 23~~
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
~~Certificate that missing documents are unobtainable~~	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
~~Proceedings of Medical Board~~	~~M.F.B. 227, A.F.B. 179 or A.F.A. 45~~
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
~~Regimental Conduct Sheet~~	~~Militia Form B. 263~~
~~Company Conduct Sheet~~	~~Militia Form B. 263a~~

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Siege Battery CGA.CEF.

Regimental No. 3,86410 Rank Gr Name Withrow, Reginald Uniacke.

Enlisted (a) 5-8-18 Terms of Service (a) War & 6 mos. after C. E. F. Service reckons from (a) 5-8-18

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) (Farmer)

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				
		Transferred to 10th Siege Battery Depot.	Aldershot N.S.	5-8-18.	W. R. Withrow Capt Adjt 1st Depot B'n N. S. Regiment
~~24~~ 31-12-18	6th. Art'y Depot.	S.O.S. On Discharge. (Demobilization)	Halifax N.S.	~~24~~ 31-12-18	D.O. Part II #~~186~~ 193. F. B. Claud Major O. C. Overseas Section "Siege" 6th Artillery Depot

(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				

CASE HISTORY SHEET.

Campbell Hill Hospital. Halifax N.S. Station.

No. ..... Rank Gnr. Name Withrow Reg Age 29

Unit 10th Bty Completed years of service (Where and how long) 4 days C.

Date of admission 8/8/18 Date of discharge 18-9-18

Diagnosis Conjunctivitis Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE Complaint — "sore eye"

Duration three days

Exam — upper lid right uniformly swollen — conjunctival surface intensely reddened. Bulbar conjunctiva not involved. Suggestive of developing chalazion. No discharge for conjunctival sac.

Right eye is in good condition R.V. 20/20 L.V. 20/20

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT Hot compresses q.3h.

(Especially any specific or special form.)

CONDITION ON DISCHARGE, Conjunctivitis — cured. V. 20/20 Both eyes

(and disposal made of case.) Returned to duty

Date ..... H. Courtenay Capt.

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-439.

Campbell Hill Hospital
HALIFAX. N. S.

a-40161
c