ORIGINAL

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931518

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ATTESTATION PAPER.

No.

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

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	WRIGHT
1a. What are your Christian names?	Willoughby James
1b. What is your present address?	45 McDougal St., Windsor, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Windsor, Essex Co., Ontario
3. What is the name of your next-of kin?	Mrs Cora Wright
4. What is the address of your next-of-kin?	45 McDougal St., Windsor, Ont.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	December 14th, 1894
6 What is your Trade or Calling?	Chauffeur
7 Are you married?	No
8 Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Willoughby James Wright, 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.

Willoughby Wright (Signature of Recruit)

Date September 8th 1916 J C Munton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Willoughby James Wright, 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.

Willoughby Wright (Signature of Recruit)

Date September 8th 1916 J C Munton (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Windsor, Ont. this 8th day of September 1916

J C Munton (Signature of Justice)

Notary Public

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

6
10
22

Description of Willoughby James Wright on Enlistment.

Apparent Age 21 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 10 ins.

Chest measurement:
- Girth when fully expanded 39 ins.
- Range of expansion 3 ins.

Complexion Dark

Eyes Black

Hair Black

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).

~~Yes~~ one on back leftside near hip + one on chin

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 September 8th 1916 [signature]

Place Windsor, Ont. Major ~~Captain A.M.C.~~ 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:—

APPROVED

[signature] CAPT. & R.O.

CERTIFICATE OF OFFICER COMMANDING UNIT.

Willoughby James Wright 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.

C. W. Reis Capt (Signature of Officer)

Date Oct 23rd 1916

DESERTERS
& DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

Name WRIGHT. WILLOUGHBY. JAMES.

Regt. No. 931518 Rank Pte.

Corps #2. Const. Bn.

S O S 19-2-17.

Proceedings of Court of Inquiry or on men reported Missing on Active Service 3

Attestation Papers 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms 1

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M. D. B. 259-3
M. D. W. 100-1
Index C -1

35849

BOX 10613

1
2 20
2 20
7 20
1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—835.

REG. NO. 931518 NAME (SURNAME FIRST) Wright W. J.

RANK Sgt. CORPS No 2. Con. Bellu

AGE 22 SERVICE 4/12

NAME OF HOSPITAL Military PLACE London

DATE OF ADMISSION 8. 12. 16.

DISEASE Syphilis.

DISCHARGE 6. 2. 17.

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS

SURNAME. Wright,

CHRISTIAN NAMES Willoughby James.

REGL. No. 931518. RANK Gt.

UNIT No. 2. Construction. Bn.

FORMER CORPS Nil.

CARD No. 78,

FOLL.

NEXT OF KIN.

NAMES IN FULL Wright, Mrs. Cora.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 45. McDougal St. Windsor Ont.

S,

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Windsor, Ont. DATE Dec. 14th, 1894.

PLACE OF ATTESTATION Windsor, Ont. DATE Sept. 8th, 1916.

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

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

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Chauffeur RELIGION Methodist

DESCRIPTION.

APPARENT AGE 21. YEARS 9. MONTHS

HEIGHT 5. FEET 11. INCHES

CHEST MEASUREMENT 38. INCHES EXPANSION 3. INCHES

COMPLEXION Dark EYES Black HAIR Black

DISTINGUISHING MARKS One — on back near hip left side. One — on chin.

MEDICAL EXAMINATION. PLACE Windsor, Ont. DATE Sept 8th, 1916

Present Address 415 McDougal St. Windsor, Ont.

No. 1518 RANK Pte NAME Wright. Willoughby. James

T. O. S. 8-9-16 UNIT No 2. Construction Battalion

D.O. 30 19-9-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916	1916			
Sept 8	Sept. 30	n.		
Oct.		n.	Prom. Cpl. 1-10-16.	D.O. 56. 19-10-16.
Nov.		"		
Dec.		"		
1917	Jan 1917	"		
Feb.		n	A W L since 19-2-17.	Mar. paylist.
Mar 1.	Mar 19.	n	Dec dis. by C of I. 19-3-17	D.O 66. 19-3-17

a/c not closed

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~~ No 2 Construction Batt C.E.F.

Regimental No. 931518 Rank pte Name Willoughby James Wright

Enlisted (a) 8-9-16 Terms of Service (a) C. E. F. period of war Service reckons from (a) 8-9-16

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) .....

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
19.10.16	Const. Bn	Promoted Corporal.	Halifax	1.10.16	Pt II DO #56
Mar 1917	"	A.W.O.L. Since 19.2.17 is S.O.S. Deserter by C.J. Ilsed 16/3/17	En Route	~~19.2.17~~ 19.2.17	Mar 1917 Pay list Pt II DO #66 of 19/3/17 amended by after order 10 of 30-11.22

Clyde S. Scott

[illegible]

(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				

5 · 8 931518

931518

MEDICAL HISTORY SHEET.

Surname Wright *Christian Name* Willoughby James

Examined { on 8th day of September 1916 / at Windsor, Ont.

Birthplace { City or Town Windsor, Ont. / County Essex

Apparent age 21 Years 6 Months

Trade or occupation Chauffeur

Height 5 Feet ~~10~~ 7½ Inches.

Weight 175 Lbs.

Chest measurement { Minimum 36 inches. / Maximum expansion 39 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. Yes / Number One

When Vaccinated last 1900

(*a*) Marks indicating congenital peculiarities or previous disease ~~None~~ one cut on back near hip left side - one on chin

(*b*) Slight defects but not sufficient to cause rejection None

Approved by [signature]

Rank Major A.M.C. M.O.

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

Date.	Result.	Vaccinations.
17/2/17		[signature]
		M.O.
		M.O.
		M.O.

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

Enlisted on 8th *day of* September 1916 *at* Windsor, Ont,

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#2 Construction Battalion	931518		Sept. 8th, 1916
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Windsor, Ont. [signature]	FEB 12 1917 Major, A. M. C.	on enlistment [signature] Capt., A. M. C.	Fit [signature] Capt.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname Wright Christian Name Willoughby James

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
London		8	12	16	6	2	17	Syphilis	60	Recovery	G. L. Sparks

VENEREAL DISEASE CASE-SHEET

(Syphilis and local sores)

Reg. No. 931518 Rank Sergt. Name W. J. Wright Unit #2 Const. Btn.

Diagnosis Syphilis Admitted 8/12/16 Discharged 6/2/17.

Medical Officer i/c Case: G. L. Sparks, Capt. A.M.C.

HISTORY.

When and where contracted 31/10/16 Detroit U.S.A.

Date and character of first symptoms 5/12/16 Three small ulcers on mucous membrane lower lip.

Subsequent symptoms Lymphatic Glands palpable.

Present symptoms neg.

Family history of Syphilis none.

DATE	DARK FIELD	WASS.	C. S. F.	TREATMENT	DOSE	REACTION	REMARKS
20/12/16		+++					Scar on Penis showing location of old sore commencing April 5/16 after exposure April 1st. 1916.
27/12/16				Diarsenol	0.3 grm.	neg.	
8/1/17				Diarsenol	0.6 grm.	Slight cramps in abdomen.	
[illegible]/1/17				Diarsenol	0.6 grm.	neg.	
30/1/17				Diarsenol	0.6 grm.	neg.	
[illegible]/12/16 to 30/1/17.				Inunctions Mercury Ointment every other night except day of injection of Diarsenol.			

M. F. W. 100.

500—11-16.
1772—39—1052.

VENEREAL DISEASE CASE-SHEET

(Syphilis and local sores)

Reg. No. ..... Rank ..... Name ..... Unit .....

Diagnosis ..... Admitted ..... Discharged .....

Medical Officer in Charge .....

HISTORY.

When and where contracted .....

Date and character of first symptoms .....

Subsequent symptoms .....

Recent symptoms .....

Family history of Syphilis .....

DATE	DARK FIELD	WASS.	C. S. F.	TREATMENT	BOOK	REACTION	REMARKS