DECEASED

~~DISCHARGE~~ DOCUMENTS

41406

R. O. No.

H. Q. No.

Name BROOKS ALBERT. EDWARD

Regt. No. 3131552 Rank Pte

Corps 1st Depot Bn

Died 3-2-18

S

C

H

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

MFW 67 — 2

Dental 1

Small Papers

(1)

3-25

25-25

18—26

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

MX. 18-12-W
x

M. D. ..... Depot Battalion TRIPLICATE 1st Depot Battn., W. O. R. Regiment

Regtl. No. 313155 V

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

1. Surname: Brooks.
2. Christian name: Albert Edward.
3. Present address: II7 Julia St, Sarnia, Ont.
4. Military Service Act letter and number: 744495 AC.
5. Date of birth: Febuary, I2th, I896.
6. Place of birth (town, township or county and country): Huntsville, Ont.
7. Married, widower or single: Single.
8. Religion: Presbyterian.
9. Trade or calling: Farmer.
10. Name of next-of-kin: Frederick. Brooks.
11. Relationship of next-of-kin: Father.
12. Address of next-of-kin: II7 Julia, St, Sarnia, Ont.
13. Whether at present a member of the Active Militia: NO.
14. Particulars of previous military or naval service, if any: None.
15. Medical Examination under Military Service Act:—

(a) Place: Sarnia, Ont. (b) Date: 9-I0-I7. (c) Category: A-2.

DECLARATION OF RECRUIT

I, Albert Edward Brooks., do solemnly declare that the above particulars refer to me, and are true.

January 9th, 1918.

Albert Edward Brooks (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 2I yrs. 8 mths.

Height: 6 ft. I. ins.

Chest measurement: fully expanded: 35. ins.; range of expansion: 3I ½ ins.

Complexion: Ruddy.

Eyes: Blue.

Hair: Light.

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

Weak left foot.

RIGHT EYE D 40/20 LEFT EYE D 40/20

HEARING F Normal. I0 Ft.

H. L. Mulligan

O. C. 1st Depot Battalion, W. O. R. Depot Btln.

Regt.

Place: London Ont. Date: JAN 9 - 1918

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

MEDICAL CASE-HISTORY SHEET.

Hospital: Camb. Station: London

No. 313182 Rank: Pte. Name: A. E. Brooks Age: 21

Unit: W.O. Regt. Service: 2/8 r

Date of Admission: 18.1.18 Date of Discharge:

Diagnosis: Pneumonia

Date of Origin: January 17 Place of Origin:

Cause of Illness or Injury:

Farmer. single

Family - negative

Previous - laid up for 3 weeks with what he says was rheumatism affected right leg & right arm only 11 years ago.

History of Present Illness or Injury.

(Is Illness or Injury result of Service?)

Reported to W.O.R. on Jan. 9th - caught cold the first night - trouble first in head, then developed sore throat, headache, aching in chest, neck & arms, loss of appetite, severe cough with strenuous tenacious sputum: numerous sweats: chill yesterday 20th & one day before.

Condition on Admission.

Dullness & breath sounds lower lobe rt. side. Fremitus rich over area below & outside of nipple - ? pneumonic breathing. Dullness & breath sounds two ins outside rt. nipple. Heart - normal - rest of lungs normal DS -

21.1.18. Left lung normal - Rt lower lobe normal. Dullness right lower, breath sounds greatly diminished - Bronchial breathing higher up behind near angle of scapula with transmission of whispered voice. No friction rub this am.

Treatment.

℞ Vin ipecac - 3.i.
Vin antimonialis 3ii.
Syp Scillae 3iii
3iii

Sig 3ss q.q.h. DS

℞ Sinapism over rt. lower chest DS

℞ Pil Cathartic Co iii at bed time DS

15156

24.1.18 Blood pressure systolic 122 by the pulse J.R.K.

28.1.18 Expiratory spasm throughout chest JSR

26.1.18 Brighter this am.: less cyanosis, pulse better quality - resting easier JSR

29.1.18 - Somewhat better. Left axilla. Breathing - pulse up JSR

Condition on Discharge from Hospital.

Died 5.10 am Feb 3rd 1918. JSR

P.M. Showed old heart condition, some hypertrophy & mitral valvular lesion - Left lung smaller & contracted with fluid slightly purulent, in pleural cavity: also some pus around bronchi. Right lung - unresolved pneumonia of lower lobes & pleural involvement

J. Ross Capt. AMC

Medical Officer i/c Case.

Date: Feb 4. 1918.

M. F. B. 313a.
30M—9-16.
39-439.

38405

MEDICAL CASE-HISTORY SHEET.

Hospital. A.M.C. Station. Queenspark.
Regtl. No. 3131557 Name. Pte Brook A.E.
Unit. 1st W.O.R. Service. I.W.R.
Date of Admission. 17-1-18 Date of Discharge.
Diagnosis. Bronchitis
Date of Origin. 15-1-18. Place of Origin. barracks

Cause of Illness or Injury :

History of present Illness or Injury.
Is illness or injury result of service.

18-1-18 Sore throat - cough & expectoration. fine rhonchi
bronchial rales over chest.

Condition on Admission.

19-1-18 - Chill & pain in right side
20-1-18 - Dullness over right lower lobe.
diminished breath sounds

Treatment. Rx gargle of pot chlor & iron - bloody expectoration -

Rx. Mist expectorans
3 ÷ every 2 hrs.

Rx Aspirin gr V
every 4 hrs

Condition on discharge from Hospital :

Medical Officer i.c of Case.

Date.

C
38404

B Coy

17

MEDICAL HISTORY SHEET

No Card
AR 466

Surname Brookes *Christian Name* Edward

Examined { on 9th day of Oct 191 / at Sarnia Ont

Birthplace { City or Town 117 Julia St / County Sarnia Ont

Apparent age 21-6

Trade or occupation Laborer

Height 6 feet 1 Inches

Weight 171 lbs.

Chest measurement { Minimum 31½ inches / Maximum expansion 35 inches

Physical development Good

Small-pox Marks

Vaccination Marks { Arm Right Left / Number

When Vaccinated last

(*a*) Marks indicating congential peculiarities or previous disease

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

EYES R 20/40 L 20/40
EARS 21+ 10

Approved by

Rank 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	
4-1-18		J Moore	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
4-1-18			M.O.
9-1-18		J Moore	M.O.
14-1-18			M.O.

Edward Brooks

Enlisted on 9th day of January 191 8 at London Ontario

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	1st Depot Battl	3131552		9-1-18
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
London Ont.	9 X 17	J Mc Parsing	17
Lowestoft	JAN 19 1918		
W T Quinlow Capt. A. M. C. Pres.		Sol Shnell Capt. A. M. C.	On Attestation considered. Bil Cancellis on fact. F E Chapman Capt. A. M. C.

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

M. F. B. 313.

300M.—1-17.
H. Q. 1772-39-439.

Surname ..... Christian Name .....

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				
London		17	1	18	3	2	18	Pneumonia	18	Taken sick about 15th Admitted Instk 17th Temp 102°:96:20. Transferred AMC Hosp 20th 104°:104:36. Def. signs pleuropneum lower right lung. Marked Expiratory spasm than severe course c̄ great dyspnoea. Temp normal evening 26th followed by irreg. fever rob Contd till End. Heart action failed at last Died 5 10 am	J. Rossbapt [illegible]

M.S.A. 15.

Duplicate. B Coy

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 Brooker Christian name Edward.

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) 117 Julia St. Sarnia Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 9 day of Oct. 1917, by the undersigned medical board sitting at Sarnia

5. Age as stated 21 Years 6 Months. 6. Apparent age 21 Years 6 Months

7. Height 6 Feet 1 Inches. 8. Weight 176 Pounds.

9. Chest measurement { Minimum 31½ Ins. / Maximum 35 Ins. } 10. Complexion ..... { Eyes ..... / Hair ..... }

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 Weak left foot.

The man denies having had { Rheumatism / Tuberculosis / Syphilis } (Strike out disease admitted or suspected.) We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

	R.	L.
Eyes	20/40	20/40
Ears	21+	10

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.]

President.

Member. Member.

Signature of Man Edward Brooker

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
4-1-18		[illegible] M.O.	4-1-18		[illegible] M.O.
		M.O.	9-1-18		M.O.
		M.O.	14-1-18		M.O.

Joined 9th day of January 1918 at London Ontario

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Battl	3131552		9-1-18.
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Camp	9X17	[illegible]	
Strathcona.	8.11.17	J Cassidy	A
London	Jan 12		B II Callosities on feet
W Galloway Capt	J Walton Capt		G E Chapman 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.

Certified true copy of original

N. M. Ellis Capt. A.D.

Surname ..... Christian Name .....

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		17	1	18	3	2	18	Pneumonia	18	Taken sick about 15th Admitted Ins Pk 17th Temp 102°+: 96: 20. Transferred A.M.C. Hosp 20th. 104°: 104: 36. Definite signs pleuropneumonia lower Right lung. Marked Expiratory spasm: Ran severe Course c̄ great dyspnoea: temp. normal evening of 26th followed by irregular fever Continuing till end. Heart action laboured at end. Died 5 10 am 3rd	J. Moss Capt Kemp

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 1

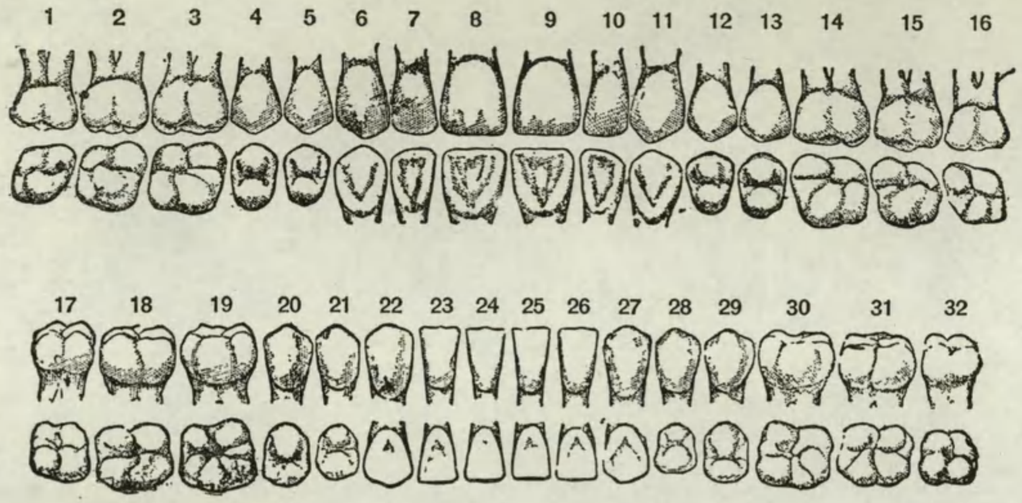
Name of Soldier Brooks A E

Regiment W.O.R. B Coy

Rank Ma

No. 3131552

M.[illegible]465
200[illegible]7
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 Dist.	REMARKS
	1918																					
Condition on first Examination	Jan 15																			Exam. by R. G. McMillan		Cav. Ex. 5.13
											2/5.13									R. G. McMillan		Complete.

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

Original

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 Battn., W. O. R.

(2) Regimental Number 3131557

(3) Full Name of Soldier Brooks Albert Edward

(4) Place of Birth Huntsville Ont

(5) Are you married, or not? No

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

(b) Present Postal Address ✓

(7) Are you a widower? No

(8) Have you any children? ✓

If so, give number of boys and girls ✓

Also their names and ages ✓

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Fredrick Brooks

If so, state name and address 117 Julia St Sarnia Ont

(10) Is your Mother alive?

If so, state name and address Jane Brooks

Same

(11) If your Mother is a widow No.

Are you her sole support, or not? No

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured? Yes

If so, in what Company? Maccabee Lodge -

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.

H. Mulligan Lieut. Colonel
Officer Commanding.
1st Depot Battalion, W. O. R.

Date 11-1-18

FORM OF WILL

DEPT. MILITIA & DEFENCE
FEB 11 1918
H.Q. CANADA

I, Albert Edward Brooks (Name in full)

Regimental Number 313117 serving in 1st Depot Battn., W. O. R.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Nil

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to ~~my~~ my half sister

Mrs Minnie Stewart
RR#1 Orlsprings Ont

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 11 day of Jan A.D. 1918

Albert Edward Brooks Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Geo Mattle

Address of Witness 1st Depot Battn., W. O. R.

Occupation of Witness Soldier

Signature of Second Witness E Working

Address of Witness 1st Depot Battn., W. O. R.

Occupation of Witness Soldier

M. F. W. 82.
300M.-12-16.
1772-39-983.

81/2/11
4792

Exd
1/2/18

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

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

M.X. - x
18-12-20

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Batt - W.O.R.

Regimental No. 313155 Rank Pte C. E. F. Name Brooks Albert Edward

Enlisted (a) ✓ Terms of Service (a) ✓ Service reckons from (a) JAN 9 - 1918

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				

(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				

N.S.A.

SURNAME. Brooks

CHRISTIAN NAMES Albert Edward

REGL. No. 313552 RANK Pte.

UNIT West Ont. Regt. 1st Res. Bn.

FORMER CORPS Nil.

CARD NO.

FOLL.

NEXT OF KIN.

NAMES IN FULL Brooks, Frederick

RELATIONSHIP TO SOLDIER Father

ADDRESS 117 Julia St., Sarnia, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Huntsville Ont. DATE Feb 12th 1896

PLACE OF ATTESTATION London, Ont. DATE Jan 9th 1918

L. L. 26989 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

38404–38405,

REG. No. 313552 NAME (SURNAME FIRST) Brook, A.E. 38 38

RANK Pte. CORPS 1st W.O.R.

AGE V. SERVICE 1/52.

NAME OF HOSPITAL A. M. C. Mil. PLACE London

DATE OF ADMISSION 17. 1. 18. Read. 18. 1. 18.

DISEASE Bronchitis – Pneumonia

DISCHARGE 3. 2. 18. Died 5.10 a.m.

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

No. 313 1552 RANK Pte. NAME Brooks A. E.

T. O. S. 9/1/18 UNIT 1st Depot Battalion W. O. Regiment
D.O.S of 8/1/18

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1918 Jan. 9	1918 Jan 31	✓		
Feb.		n.	S.O.S. Deceased. 3/2/18.	D.O. 35 of 4/2/18.

a/c not closed n.

649-B-24544. 3131552 Pte. Albert Edward Brooks.
1st. D. Bn., W.O.R.

Medals & Dec. (Half-Sister) Mrs. M. Stewart,
Rural Route #2.
Oil Springs,
Ont.,

Placque & Scroll. (Father) F. J. Brooks, Esq.,
R.R. #4.,
Alvinston., Ont

(Ser. #806600)

Memorial Cross. (Mother) Mrs. Jane Brooks,
Address as above.

not Elig for 1914-15 star
" " " V.M.
" " " B.W.M.

Scroll Desp. MAY 4 - 1921 Reqn. No 2.41552

39886

Plague Desp. SEP 12 1921 Reqn. No P6591.

645

M

G. 38437 DEC 27 1920

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

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.)

No. 3131552

Rank Private

Name Albert Edward Brooks

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

Corps (Squadron, Battery or Company) 1st. Depot Battalion. W.O.R.

Date of Discharge 3-2-18.

Place of Discharge London Ontario.

Military District No. 1
FEB 13 1918
I. D. 30-B-636

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years months.
Height 6 ft feet 1 inches.
Complexion Ruddy
Eyes Blue
Hair Light
Trade Farmer
Intended place of residence (To be given as fully as practicable.) Deceased

Descriptive Marks

Weak left foot.

2. The above-named man is discharged in consequence of DECEASED
Authy. AMC. M-1-81 d/ 3-2-18.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

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

" Good "

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Farmer

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

Pach &c
19.2.18
J.T

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

Nil.

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

6. Medals and Decorations ..... Nil.

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) London Ontario.

(Date) February 3rd. 1918.

W. H. Lewis Capt. Adjt.
for O.C. 1st Depot Battalion, W. O. R.
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.

(Place) London Ontario. ..... (*Signature of Soldier.*)

(Date) February 3rd. 1918. ..... (*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) London Ontario.

(Date) February 3rd. 1918.

(*Signature*) W. H. Lewis Capt. Adjt.
for O.C. 1st Depot Battalion, W. O. R.

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.)

I have received all just demands due me;-

(OVER)