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1/2

B.C.R.M.

Irish.
ORIGINAL

ATTESTATION PAPER.

Canadian Engineers, C.E.F.

No. 2012039

Folio. 286

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... B R O W N.
- 1a. What are your Christian names?..... Jack.
- 1b. What is your present address?..... Y.M.C.A. Hotel, Chicago, Ill., U.S.A.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Little Bray, Wicklow, Ireland.
- 3. What is the name of your next-of-kin?..... Mrs Ongela Brown.
- 4. What is the address of your next-of-kin?..... 2609 Sarah St, St Louis, Mo., U.S.A.
- 4a. What is the relationship of your next-of-kin?..... Wife. *Friend*
- 5. What is the date of your birth?..... September 14th, 1881.
- 6. What is your Trade or Calling?..... Clerk.
- 7. Are you married?..... Married. *Separated*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
- 9. Do you now belong to the Active Militia?..... No. (Pte)
- 10. Have you ever served in any ^{Naval or} Military Force?..... Yes. 5th Irish Fusiliers for 14 mos.
- 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? ..
- 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?.....

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Jack Brown, 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.

Date August 26th, 1918 191

Jack Brown (Signature of Recruit)
B. Gill (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Jack Brown, 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.*

Date August 26th, 1918 191

Jack Brown (Signature of Recruit)
B. Gill (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 Toronto, Canada, this 26th day of August, 1918 191

Magistrate (Signature of Justice)

Description of Jack Brown. on Enlistment.

Apparent Age.....36 years 11 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height.....5 ft. 11 ins.

Chest measurement { Girth when fully expanded.....37 ins.
 Range of expansion.....3 1/2 ins.

Nil.

Complexion.....Hair, Ruddy

Eyes.....Blue.

Hair.....Brown.

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....Moth.
 Baptist or Congregationalist.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
 (Denomination to be stated.)

Hearing. Normal. V-R.20/40.
 L.20/30. Nose & throat, Normal

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit. for the **Canadian Over-Seas Expeditionary Force.**

Date.....August 26th, 1918. 191 . U.S. Maxwell. M.O.

Place.....Chicago. Ill., U.S.A. J.C. Ghose. M.O.
J.B. Willoughby. M.O. 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:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Jack Brown.

.....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.

[Signature] (Signature of Officer)

Date.....SEP 3 1918 191 .

CAPTAIN G. R. [Signature]
 ENGINEERS REQUIRING DEPT TORONTO, O

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

2012039

Spr.

This is to Certify that No. _____ (Rank) _____

BROWN, JACK

Name (in full) _____ enlisted in

C.E.

the _____

CANADIAN EXPEDITIONARY FORCE at **Toronto, Ont.** on the **26th**

day of **August** **18,** 19

HE served in **Siberia**

and is now discharged from the service by reason of **"DEMOBLIZATION"**

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

Age **37 yrs. 8 mths.**

Height **5 ft. 11 in.**

Complexion **Ruddy**

Eyes **Blue**

Hair **Brown**

J. Brown
Signature of Soldier

Marks or Scars **Nil.**

Date of Discharge **May 15, 1919**

For Rank

O. C. No. 2 District Depot.

Signed at **Hamilton, Ontario.** this **15th** day of **May** 19 **19**

in Military District No.

2 NO. 2

MAY 15 1919

File Reference No.

DISTRICT DEPOT.

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.

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.

DENTAL HISTORY SHEET

M.F.B. 200M-1-17 1772-39-950

CANADIAN ARMY DENTAL CORPS

DISTRICT

NAME OF SOLDIER

REGIMENT

RANK

No.

2012039



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	Pyrrhoec	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
1918										4											
Sept 16										4											Di. CH. Temporal 3 Incomplete.
" 16										4											Di. CH. Temporal 3 Incomplete. 12, 13, 14, 15 to be extracted.
										2, 3, 4, 5											
<p>Discharge Exam. At Hamilton, Ont. Date 12/5/19</p> <p>Certificate issued for <i>dentist for</i></p> <p><i>conducting</i></p>																					

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

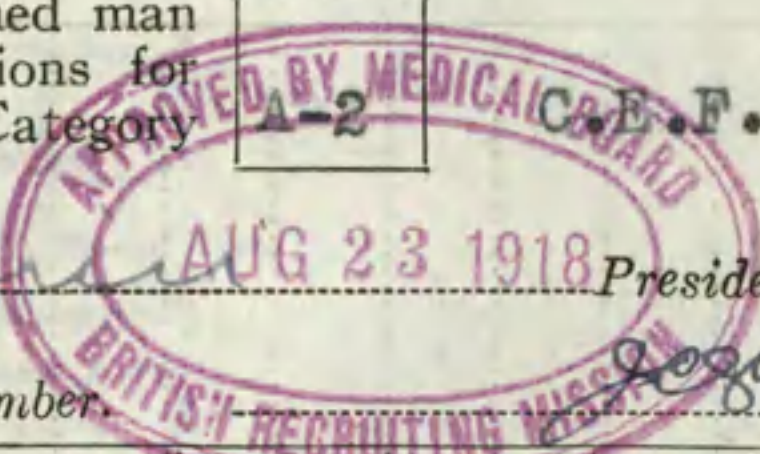
1. Surname Brown Christian name Jack
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
 3. Consecutive number on schedule of men reporting for service (if he appears on it).....
 4. Address (including street and number, if any)..... Y. M. C. A. --- Chicago, Illinois

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd day of August 1918, by the undersigned medical board sitting at Chicago, Illinois

5. Age as stated 37 Years 11 Months. 6. Apparent age 37 Years..... Months
 7. Height 5 Feet 6 1/2 Inches. 8. Weight 153 Pounds.
 9. Chest measurement { Minimum 33 1/2 Ins. 10. Complexion Ruddy { Eyes Blue
 { Maximum 37 Ins. { Hair Brown
 11. Physical development Good { Good Fair Poor 12. Smallpox marks nil
 13. Number of vaccination marks { Right arm 2 14. When vaccinated last childhood
 { Left arm 0
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease nil

16. Slight defects but not sufficient to cause rejection In grown toe nail right great toe
 The man denies having had { Rheumatism Typhoid fever 1916 Rheumatism
 { Tuberculosis We find no evidence of past { Tuberculosis
 { Syphilis { Syphilis vision 20/40
 (Strike out disease admitted or suspected.)

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



W. Macpherson Member. Capt. C.A.M. C. Member.
 President. W. Macpherson

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/9/18</u>		<u>Sp. Porter Cpt M.O.</u>	<u>28/8/18</u>		<u>Sp. Porter Cpt M.O.</u>
		<u>M.O.</u>	<u>3/9/18</u>		<u>M.O.</u>
		<u>M.O.</u>	<u>9/9/18</u>		<u>M.O.</u>

Joined 26th day of August 1918 at Toronto.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>Can Engineers.</u>	<u>2012039</u>		
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Brookville</u>	<u>25/9/18</u>	<u>nil</u>	<u>A2 R. Walker</u>
<u>Hamilton</u>	<u>12-5-19</u>	<u>nil</u>	<u>A2 R. Walker Cpt.</u>

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

Signature of Man

DEPARTMENT OF MILITIA AND DEFENCE.
 CERTIFIED PARTICULARS AGREE WITH
 DOCUMENTS
WAR SERVICE GRATUITY.

[Handwritten signature]

OTTAWA, CANADA. **DISCHARGE 2**

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *Jack* 2. Surname *Brown*
3. Rank *Spr* 4. Original Unit *16th Coy C.E.F.* 5. Reg. No. *2012039*
6. Address, in full, to which future payments of gratuity are to be forwarded
C/o Bank of Commerce Toronto.
7. Date of enlistment in the C.E.F. *26th Aug 1918*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ✓
9. Relationship of such dependent ✓
10. Present address, in full, of such dependent ✓
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.....
no
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid
20. Have you been issued with a War Service Badge? If so, what class? *A.*
21. Have you, during the present war, served in the Imperial Forces? *no*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled .. *no*
- 23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England *no*
 (b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F. *No* If not, give:— (a) Date of discharge
MAY 15 1919 (b) Reason for discharge *Demobil*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....
 (b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *John Brown*
 Place of Residence: *40 Bank of Commerce, Toronto*
Hamilton
 Declared before me at:
 This *12th* day of *May* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths.

A. Mackley Capt.

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

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. 2012039 Rank Spv Surname Brown
(Given name in full)

Unit or Corps 2 D D Birthplace Summerside Terrace, Dublin

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

1. GENERAL DESCRIPTION:

Physique Good Weight 154 lbs. Height 5 ft. 10 in. Colour of Eyes Blue
 Nutrition Good
 Pulse 72
 Condition of arteries Good
 Vision Rt 20/30 Left 20/40
 Hearing (conversational voice) Rt. 21 ft.
 Left 4 ft.

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

2 wacs. right arm.
Scar. thumb left
hand. 1919 accidental. (Siberia.)

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 indication. Lymnaea haemorrhoids
Sarcose skin's Sarcocoele or Galtie
Typhoid fever 1915 no existing disability
Fit A₂

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.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 *Hamilton*.....(Canada)

Date *12-5-19* Signed *R.P. Walker 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 *Jack Brown*

(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.)

APPROVED
MAY 13 1919
J.P. Chestnut Capt.
For A.D.M.S., M.D. 2

[OVER]

C.E.F. (SIBERIA) RECORD SHEET

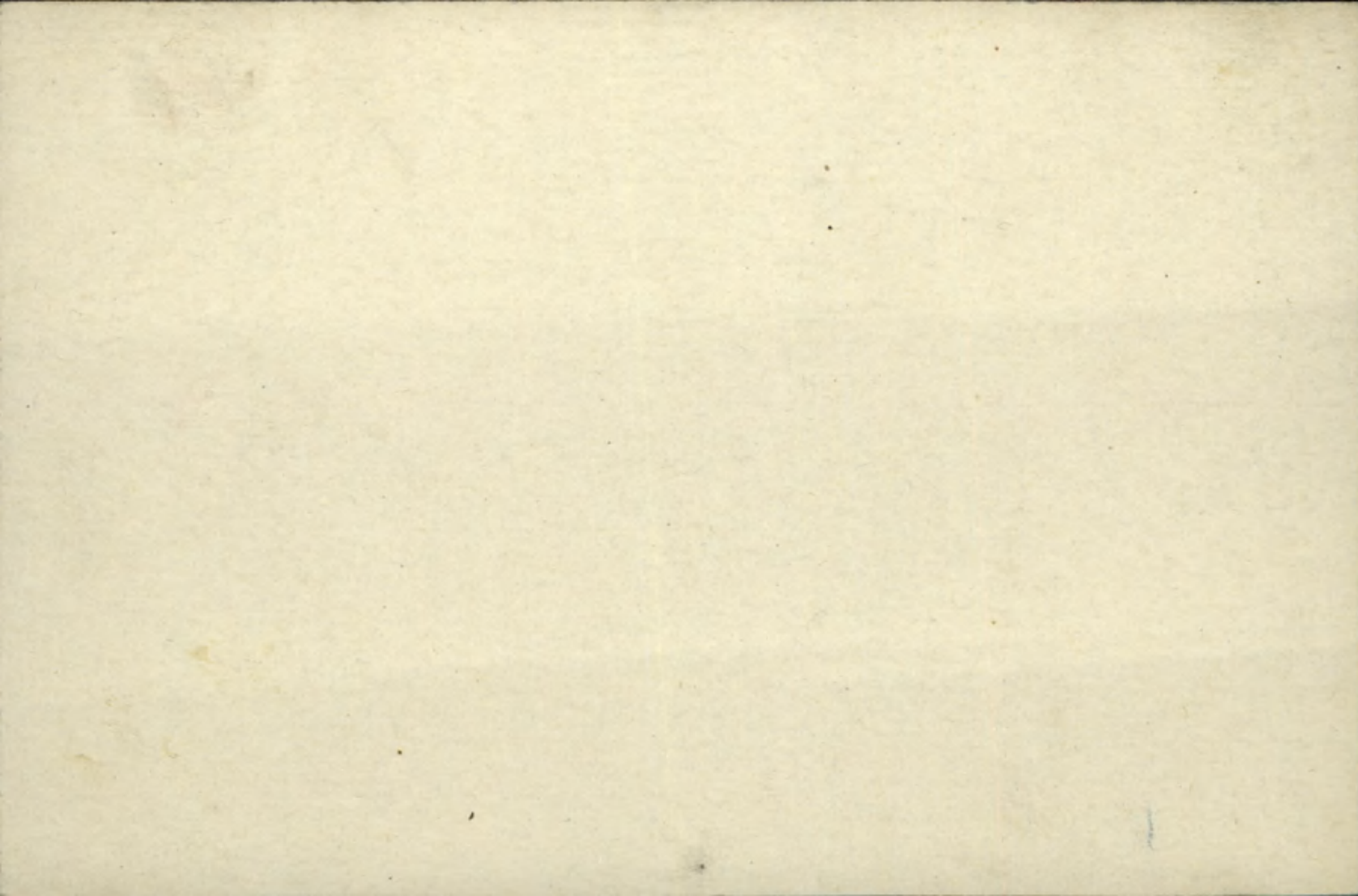
M.F.W. 2581 (25M-9-18).
1772-33-1368.
L.L. Job 48477.

Next -of- Kin	Mrs. Ongela Brown, (Friend)		Surname	Brown,
	2609 Sarah St.,		Christian Names	Jack
	St. Louis, Mo., U.S.A.		Regimental No.	2012039
Also Notify			Rank	Spr.
			Unit	16th Fl'd. Co., C.E.
			Place and Date of Enlistment	Toronto, 26-8-18 M.D. 2.
Subsequent changes in Next-of-Kin			NON-EFFECTIVE:	
			(1) Place (1)	M.D. 2.
			(2) Date (2)	15-5-19

Country of Birth	Married or Single on Enlistment	Subsequent Marriage Date	H.Qs. File No.
Little Bray Wicklow, Ireland	Married (Separated).		

Demobilization

Record of Promotions, Reductions, Transfers, Casualties, Reports, &c.	Place	Rank Shewn	Effective Date	Unit	Authority	
					Part II D.O. No., Cas. List, &c.	Dated
Embarked for Overseas "S.S. Emps. of Japan."	Vancouver		OCT 11 1918	16 th Fl'd. Co.		Sailing List.
Evacuated to Canada.	Vlad.		Spr. 21-4-19	"	No 2/10	5-5-19
"S.S. Monteville"						
S.O.S. on Evacuation to Canada	Vlad.		Spr. 21-4-19	"	No. 16	22-4-19.
S.O.S. on Discharge (Demobilization)			Spr. 15-5-19	"	20137	17-5-19.



TRANSFERRED TO C. E. F. (Siberia)

Surname Brown H. Q. 43
 Christian names Jack M. D. No. 32
 Regtl. No. 2012039 Rank Spr T. O. S. Sept 12th 1918
 Unit ~~Cas. Eng. 21st~~ D. O. Pt. II 140 of 13-9-18
 Reason Demob S. O. S. WS 15-5-19
 Auth. NO 137 of 17-5-19
(16th Hld. Dep. 6. E. 2. 29 (Siberia))

Next of kin Brown Mrs. Beata Relationship Friend
 Address 2609 Sarah St
551 Louis, Mo, U.S.A.
 Also notify:

BORN—Place Ireland Date Sept 17th 1881
 ATTESTED—Place Toronto Date Aug 26th 1918
 O/S 11-10-18. Emp. of Japan. R/C 5-5-19²
Spr. 10.

DESP. JUN 18 40

REGN. NO. 621

2012039
Number..... Rank:..... *Sp2* *B*

Surname... *B. BRAWN*..... *✓*

Christian Name... *Jack*.....

Unit... *C. E.*..... Theatre of War, *Siberia*.....

Date of Service... *26-10-18*.....

Remarks,.....

Latest Address... ~~*90 Bank of Commerce*~~.....

376 Bleecker St Toronto.....

Roll No. *17/6/40*..... *out-*

B. Page 4 1914

Name Brown, J. Rank Spr. Regtl. No. 2012039

Original unit C.E. Present unit S.E.F. M. or S. Age 37 Religion Meth Fyle Depot Ref. H.Q.

Port, ship and date of arrival Monteagle

Next of kin Mrs. Ongela Brown (wife) 2609 Sarah St. St. Louis Mo. USA

Address on leave Bank of Commerce, Toronto, Ont.

Address on discharge same.

Transportation issued Yes No Date 15-5-19. Character on discharge -----

Previous occupation Clerk Date and place of enlistment Toronto 26-8-18

Diagnosis Good physical good. Date of Medical Boards 13-5-19.

T.O.S. Date	Remarks.	Pt. 2 Order No.
<u>23-4-19</u>	<u>Posted to Casualty Company "J" Hamilton 5-5-19</u>	<u>134</u>
<u>15-5-19</u>	<u>S.O.S. Discharged "Demobilization" entitled to WSG</u>	<u>137</u>

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

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 CANADIAN ENGINEERS, C.E.F.

Regimental No. 2012039 Rank Sapper Name Brown Jack
C. E. F.

Enlisted (a) 26-8-18 Terms of Service (a) Defr. 6 mos after Service reckons from (a) 26-8-18

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) Blank

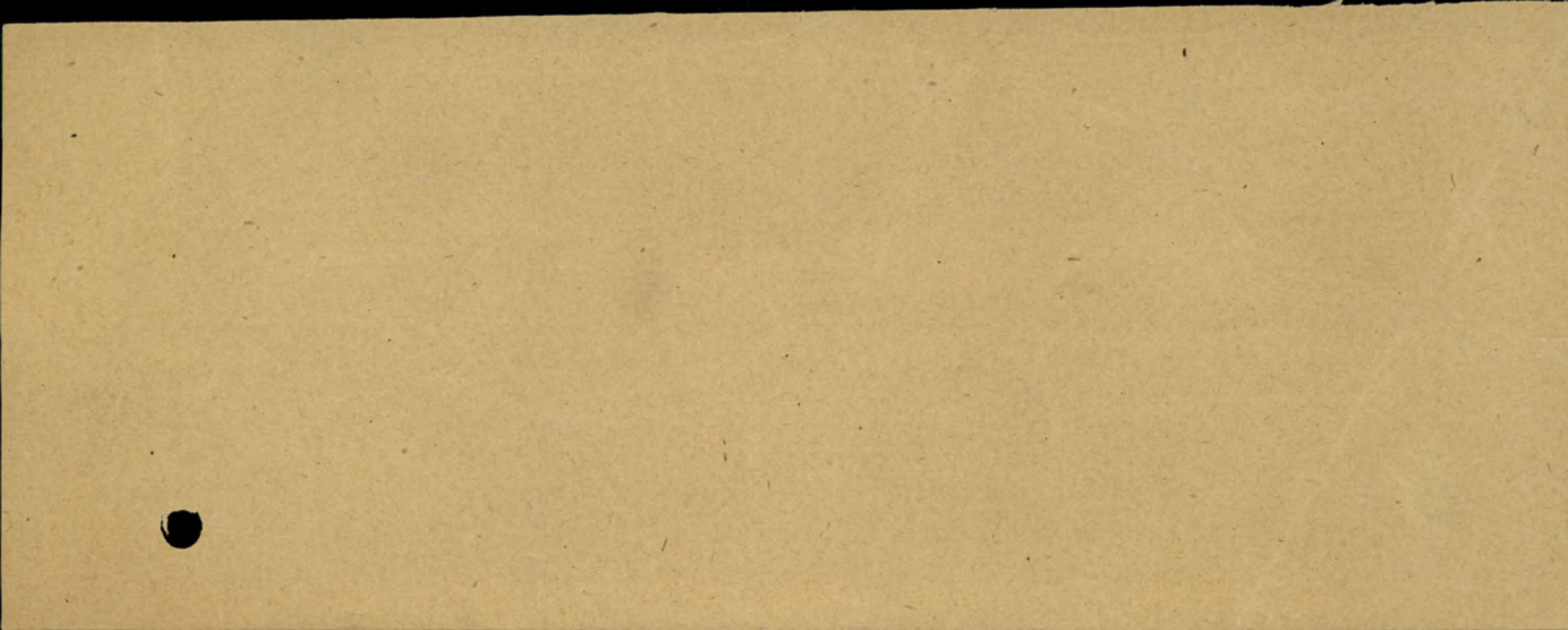
Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
No Entries		Transferred to E.D. Brockville, Ont		12-9-18	
D.O. #255 of 12-9-18					
		Embarked Canada		11-10-18	
		Arrived Siberia		26/10/18	with 16th Co. C.E.
21.10.18	O.C. 16th P.C. C.E.	Disobeying an order Forfeits 3 days pay	RMS Empress of Japan	17.12.18	Pt II Do # 3
12.11.18	—	Neglecting to obey an order Forfeits 2 days pay	Radworstok	8.11.18	Pt II Do # 8
22.11.18	—	(1) Absent without leave from 4.01 pm 17.11.18 to 11.00 pm 17.11.18. (2) Neglect of duty 20.11.18. Forfeits 1 day pay. RW. Forfeits 4 days pay.	— do —		Pt II Do # 11
13.12.18	—	Absent without leave from 8.00 am. to 4.30 pm 10/12/18 Awarded 7 days C.B. Forfeits 1 day pay RW	— do —	10.12.18	Pt II Do # 17

Certified Correct
Adams
Records

Tom Allen
C.E.F.
C.E. ENGINEERS' RECRUITING DEPOT TORONTO, ONT.

(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, Shoering 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				
			Embarked Siberia s/s Montezuma April 21st 1919		<p><i>G. A. G.</i></p> <p>MAJOR D. A. A. G. BASE RECORDS CAN. EXPED. FORCE (SIBERIA)</p>
23-4-19	T.O.S. No. 2 District Depot		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> NO. 2 MAY 15 1919 DISTRICT DEPOT. </div>		<p><i>A. M. B.</i></p> <p>For O. C. No. 2 District Depot.</p>
15-5-19	S.O.S. (Discharged) No. 2 District Depot		Part II, D.O. No. 136		<p><i>W. H. Joerpe</i></p> <p>For O. C. No. 2 District Depot.</p>



List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron Battery Company	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
or Field Conduct Sheet		Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
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	(a) Proceedings on Discharge	
‡Form of Will	" W. 82	(b) Attestation.	
§Only if discharged "Medically unfit."		(c) Medical History Sheet.	
‡Only if man has not been overseas.			

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.

This space to be for numbers.

Proceedings on Discharge.



9.3.43 P

War Service Badge
Class.....
No. 23473 Issued

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

No.	2012039
Rank	Spr.
Surname	BROWN
Christian name	JACK
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	C.E. M.D. #2
Date of discharge	May 15, 1919
Place of discharge	HAMILTON, ONT.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....37.....years.....8.....months.	Descriptive marks Nil.
Height.....5.....feet.....11.....inches.	
Complexion Ruddy	
Eyes Blue	
Hair Brown	
Trade Clerk	
Intended place of residence	Bank of Commerce Toronto
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
DEMOBILIZATION	
Authority for discharge #12292.D.O.#134.	
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.	
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.

JS

(OVER)

E. R. J.

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) Hamilton Ont..... (Signature of Soldier.)

(Date) May 15, 1919..... (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) Hamilton, Ont......

(Signature) Just Young Lt.....

(Date) May 15, 1919.....

For
O. C. No. 2 District Depot.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

