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..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit..... 1

Last Pay Certificate..... 1

1 index card

M. F. W. 62.
50M.-9-16.
H. Q. 1772-20-935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Brown, William Walter

Regt. No. 513921 Rank Pte.

Corps No. 2. C. A. S. C. Training Depot. C.E.F.

Medically Unfit

46257

For Construction only

ORIGINAL

No. 513921

ATTESTATION PAPER.

~~No. 2 Overseas A.S.C. Training Depôt, C.E.F.~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Brown
1a. What are your Christian names? William Walter
1b. What is your present address? 37 Kresden Row. Halifax Canada
2. In what Town, Township or Parish, and in what Country were you born? Halifax Canada
3. What is the name of your next-of kin? Mrs Mary Brown
4. What is the address of your next-of-kin? 37 Kresden Row
4a. What is the relationship of your next-of-kin? Mother
5. What is the date of your birth? 31st October 1890
6. What is your Trade or Calling? Seamster
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? No
If so, state particulars of former Service.
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, Wm. W. 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.

Wm. W. Brown (Signature of Recruit)

Date Feby 7th 1917. Laurie Colborne (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wm. W. 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.

Wm. W. Brown (Signature of Recruit)

Date Feby 7th 1917. Laurie Colborne (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 Halifax this 7 day of Feb 1917.

T. W. E. Smith (Signature of Justice)

A Justice of the peace in and for the City & County of Halifax, N. S.

M. F. W. 23.
600M.—2-15.
H. Q. 1772-39 841.

Description of William W. Brown on Enlistment.

Apparent Age 26 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 38 ins.
Range of expansion 4 ins.

Complexion Ruddy

Eyes Blue

Hair Brown

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic yes
- 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).

second off of left hand

Weight 140 lbs.

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 7 - 2 - 1917. B. F. Johnson

Place Halifax N.S. Capt 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:—

DECLARED FIT BY MEDICAL BOARD
TORONTO RECRUITING DEPOT

A. Wadson Lt
for

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Walter 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.

Wade Wilson Lt (Signature of Officer)

Date FEB 15 1917 191 .

Officer Commanding
No.2 Overseas A.S.C. Training Depot, C.E.F.

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. 513921 Rank Pte. Name Brown, W.W.

Corps No. 2, O.S. A.S.C.T.D. who was* Discharged.

On 8/3/17 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/3/17 191..., to 8/3/17 191..., the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10	00
Advances by Cheques } No.			Regt'l Pay 8 days at $1 60	8	00
Advances by Cheques } No.			Field Allow. 8 days at $ 10		80
Assigned Pay No.			Other Allowances*		
Other Charges* Messing		25			
Other Charges* Laundry		25	Other Credits*		
Payment on transfer or discharge No.	18	30			
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	18	80	Total	18	80

*Give Particulars.

A monthly stoppage of $ Nil (†) has ..... (‡) been paid on account of Assigned Pay for the month of March 1917 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.

Outfit Allowance of $ ..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment 7/2/17

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge and authority D.O. 67, Medically Unfit.

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date .....

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date March 15th, 1917.

Place Ex. Camp, Toronto, Ont. W. E. Pearson Capt.
Paymaster
No. 2 O.S. A.S.C.T.D. C.E.F.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

No. 2 Overseas A.S.C. Training Depôt, C.E.F.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Brown Christian Name William Walter

Examined on 7th day of Feby 1917 at Halifax

Approved by B. F. Johnson Capt. A.M.S. M.O.

Canada

Canada Rank

Birthplace City or Town Halifax County Nova Scotia

Apparent age 27 years

Trade or occupation Steamfitter

Height 5 Feet 6 Inches.

Weight 140 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 38 inches.

Physical development Good.

Small-Pox Marks Nil

Vaccination Marks Arm ~~Right.~~ Left. Number One

When Vaccinated last 1907

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	Examined for Re-engagement.
		DECLARED FIT BY MEDICAL BOARD TORONTO RECRUITING DEPOT A. Thomson Lt Col. M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

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

Enlisted on 7th day of February 1917 at Halifax NS

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	No. 2 Overseas A.S.C. Training Depôt, C.E.F.	513921		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

400M.—1-16.
H. Q. 1772-39-439.

Surname Brown Christian Name William Walter

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				

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.

No. 2 Overseas A.S.C. Training Depot, C.E.F.

Unit, Regiment or Corps .....

Regimental No. 513921 Rank Pte Name Brown, William Walter

DURATION OF WAR

Enlisted (a) Feb 7/17 Terms of Service (a) AND 6 MONTHS. Service reckons from (a) Feb 7/17

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) Learner

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				

SURNAME. Brown (649-73-12829)

S.O.S. CARD NO. Dis 8/3/17. 2

FOLL.

CHRISTIAN NAMES William Walter

REGL. No. 513921 RANK Pte.

UNIT C.A.S.C. (T.D. No 2)

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Brown Mrs. Mary

RELATIONSHIP TO SOLDIER Mother

ADDRESS 37 Dresden Row, Halifax N.S.

COUNTRY OF BIRTH Canada, Halifax, N.S. DATE Oct. 31st 1890

PLACE OF ATTESTATION Halifax, N.S. DATE Feb. 7th 1917

L. L. 10437. M. & D. 7253. M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Teamster RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 26 YEARS 3 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 4 INCHES

COMPLEXION Ruddy EYES Blue HAIR Brown.

DISTINGUISHING MARKS Second finger off of R. hand.

MEDICAL EXAMINATION. PLACE Halifax, N.S DATE Feb. 7th. 1917

Present Address, 37 Dresden Row, Halifax, N.S.

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. 513921

Rank Private

Name Brown, William Walter

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

Corps (Squadron, Battery or Company) No. 2 Overseas A.S.C. Training Depôt, C.E.F.

Date of Discharge MAR 8 1917

Place of Discharge TORONTO, ONT. Canada.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 26 years 4 months.
Height 5 feet 6 inches.
Complexion Ruddy
Eyes Blue
Hair Brown
Trade Teamster
Intended place of residence (To be given as fully as practicable.) 37 Dresden Row Halifax N. S.

Descriptive Marks

Second finger off left hand.

2. The above-named man is discharged in consequence of being medically unfit.
A.A.G. 34 - Br. - 240.

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.

Exemplary

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.)

Teamster.

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

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) TORONTO, ONT. Canada

(Date) MAR 8 1917

Commanding W de S Wilson Lt
Officer Commanding
No.2 Overseas A.S.C. Training Depot, C.E.F.

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) TORONTO, ONT. Canada W. W. Brown. *(Signature of Soldier.)*

(Date) MAR 8 1917 J.P. Kinnear *(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 30 days.

Total.....years 30 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) TORONTO, ONT. Canada

(Date) MAR 8 1917

(Signature) W de S Wilson Lt
Officer Commanding
No.2 Overseas A.S.C. Training Depot, C.E.F.

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.)

nil

W. W. Brown.

(OVER)

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.

150 m—5-16.
H. Q. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

NEXT OF KIN;- Mrs Mary Brown (Mother.)
ADDRESS;- 37 Dresden Row Halifax.N.S.

Med. Examiner.
R.F.Johnston.Capt.

MEDICAL HISTORY OF AN INVALID.

NAME;- Brown William Walter.
ADDRESS;- Same address.

1. Station. Exhibition Camp.
2. Regiment or Corps. No 2 O.S.,A.S.C.
3. Regimental No. and Rank. 513921. Private.
4. Name. Brown.William Walter.
5. Age last Birthday. 27.
6. Enlisted on Feb 7th.1917. at Halifax.N.S.
7. Former Trade or Occupation. Teamster.

8. General remarks on his :—
(a) Conduct. Good.
(b) Habits. Good.
(c) Temperance. Temperate.
(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

DEPT. MILITIA & DEFENCE
MAR 15 1917
H.Q. CANADA

9. Service.

	Years.	Days.	PERIODS. From.	PERIODS. To.
No 2 O.S.,A.S.C.T.D.			Feb 7/17.	

10. (a) Disease or disability. A. Defective left hand. B. Flat Feet.
(b) Date of origin. A. 10 years ago. B. Not known.
(c) Place of origin. A. Halifax.N.S. B. Not known.
(d) Cause. A. Crushed in Printing Machine. B. Not known.

11. Present Condition. (Most Important).
(To include full description of present disabling condition or conditions.)
A. Second finger of left hand missing. Two parallels scars on back of left hand, which are very tender on pressure. Defective movement and power in first finger.
B. Arches of both feet completely gone. He complains of pains coming on quickly in the region of the arches, when standing or marching.

BOARD OF PENSION COMMISSIONERS FOR CANADA.
MAR 28 1917
CONSIDERED FOR PENSION.

12. (a) Is the disability the result of service or climate? No.
(b) Has it been aggravated by intemperance, vice or misconduct? No.

M. F. B. 227.

150 M—5-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Two parallel scars on back of left hand.
Vaccination scar on upper left arm.
Scar over left malar bone.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

A. Injured previous to enlistment. B. Present before enlistment.
~~Does not apply~~.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Does not apply.

14. Treatment

A & B Nil.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

A & B. No.

16. What is the probable durati n of the disability or of each disabling condition, if more than one contributes?

A & B. Permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions.

A & B present before enlistment.

18. State if for discharge on account of unfitness for Service.

Yes.

Hector C. McAlister Lieut
Medical Officer by whom the case is brought forward.

Board Recd at Board Room at 2 P.M. 2/28/17.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes. Both prior to enlistment

11. Yes

12. Yes

15. Yes. Both conditions not aggravated

16. Yes.

17. Yes

18 Is he unfit for Military Service.

Yes

Recommendations:

That he be discharged as Medically Unfit. (Class 1.)

Signatures :—

H. R. Holmes President. Capt. AMC.

Geo Carleton Capt. AMC.

Members.

W. S. Parney Lieut. AMC.

Station. Exhibition Camp.

Date. Feb. 28/17.

ASST. DIRECTOR MEDICAL SERVICES No MAR 5 1917

Date.

Approved.

Date. 28/3/17

G. S. Fonseca Capt
Asst. Director of Medical Services.

W. Arnold Capt
Director-General of Medical Services.