

448925

889914

SIN/NAS

CARDON

Surname/Nom

HENRI

Given names/Prenoms

CANADIAN FORCES  
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE  
ENVELOPPE DES DOSSIERS DU PERSONNEL

1505

"CONTENTS CONFIDENTIAL"

"CONTENU CONFIDENTIEL"

COMPONENT  
ÉLÉMENT

CEF



read  
written  
4/2/15/14

# ATTESTATION PAPER.

No. 441

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Caron Henri*
2. In what Town, Township or Parish, and in what Country were you born?..... *Sandy Bay*
3. What is the name of your next-of-kin?..... *(M) Caron Pierre*
4. What is the address of your next-of-kin?..... *Sandy Bay*
5. What is the date of your birth?..... *18 Mar 1893*
6. What is your Trade or Calling?..... *Charretier*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *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*

*Henri Caron* (Signature of Man).  
*E. L. M. M. M.* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Henri Caron*, do solemnly declare that the above answers made by me to the above questions 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.

*Henri Caron* (Signature of Recruit)  
 Date *Oct 23*, 1914. *E. L. M. M. M.* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Henri Caron*, 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.

*Henri Caron* (Signature of Recruit)  
 Date *Oct 23*, 1914. *E. L. M. M. M.* (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 *Moncton* this *23* day of *Oct* 1914.

*J. H. J. J.* (Signature of Justice)  
 I certify that the above is a true copy of the Attestation of the above-named Recruit.  
*J. H. J. J.* (Approving Officer)

Colonel

Description of Henri Curran on Enlistment.

Apparent Age 20 years ..... 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. 6 1/2 ins.

Chest measurement { Girth when fully expanded ..... 34 ins.  
 Range of expansion ..... 3 1/2 ins.

Complexion Dark .....

Eyes Blue .....

Hair Bluish .....

Religious denominations. { Church of England .....  
 Presbyterian .....  
 Wesleyan .....  
 Baptist or Congregationalist .....  
 Other Protestants .....  
 (Denomination to be stated.)  
 Roman Catholic R.C. .....  
 Jewish .....

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 Oct 23rd ..... 1914.

Place Montreal .....

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.

Henri Curran ..... 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.

J. A. Jones ..... (Signature of Officer)

Date NOV 27 1914 ..... 1914.

Colonel

No. 441.

RANK Pte

NAME Caron. Henri

T.O.S. 22/10/14  
Nov payroll

UNIT 22<sup>nd</sup> Battalion (French Canadian)

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Oct 23	1914. Oct 31	—		
Nov Dec 1	Dec 21	—		
		—	dischgd Dec 21/14 (no reason)	FD 39d / 21-12-14

UNIT SAILED  
MAY 20 1915

acc closed by payment



No 448923 RANK  
448925 (Jan)

Plé

NAME Baron Henri

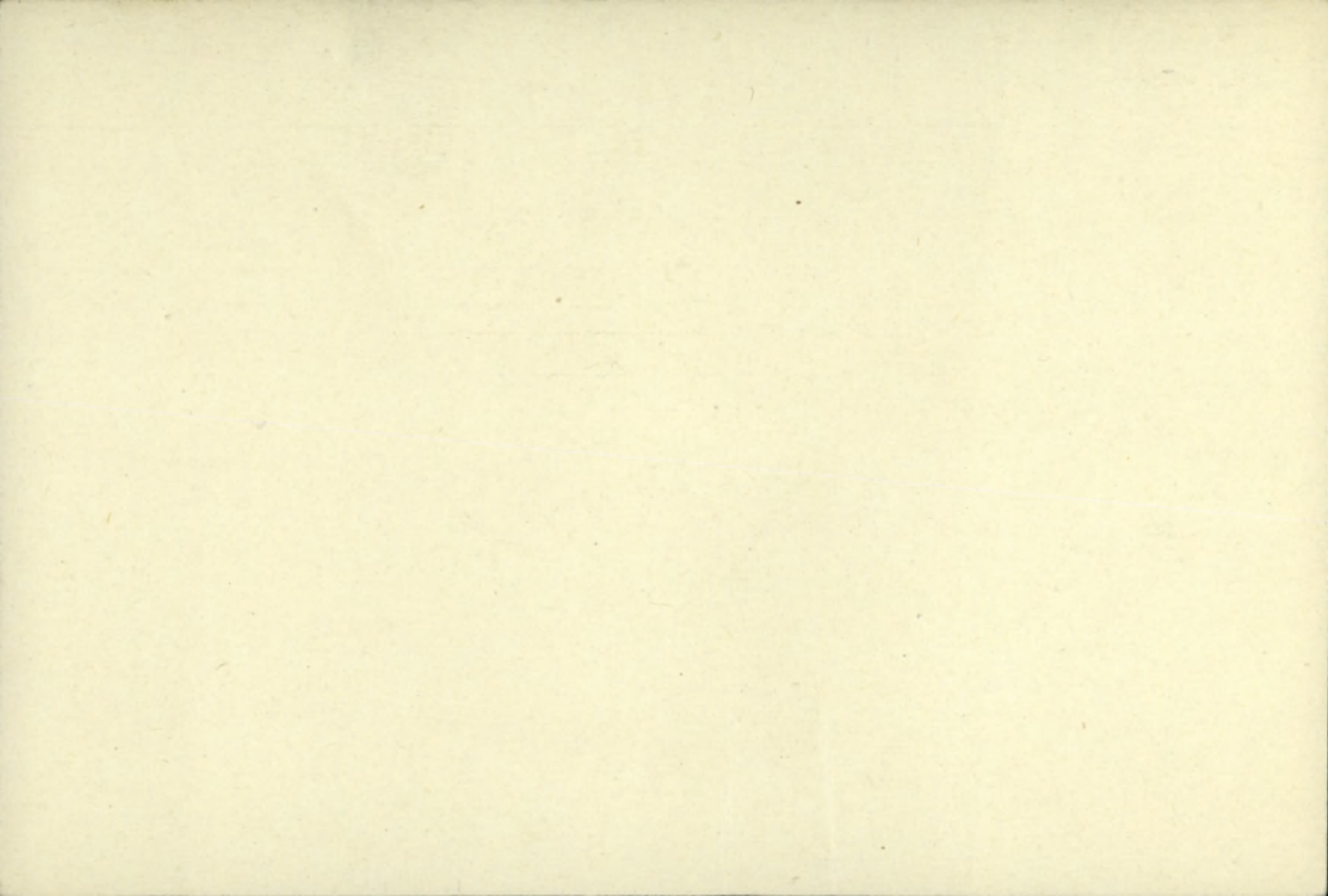
T.O.S. 20/12/15

UNIT 57th Battalion C.E.F.

D.O. 142 of 20/12/15

M. D. J. Val

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Dec 20 1915	Dec 31 1915	✓		
1916	1916			
Jan.		✓	Pro. Corporal. 12/1/15	D.O. 8 of 12/1/15
Feb.		✓	Pro Sergeant. 24/2/16	D.O. 45 of 24/2/16
Mar.		✓		
Apr.		n	also 10 days pay	D.O. 8/6-4-16
May 1	May 16	n	S.O. 16/5/16	<del>D.O. 125</del> UNIT SAILED
				JUN 2 1916
			to be carried forward "n"	





No. 440

RANK

Plt

NAME

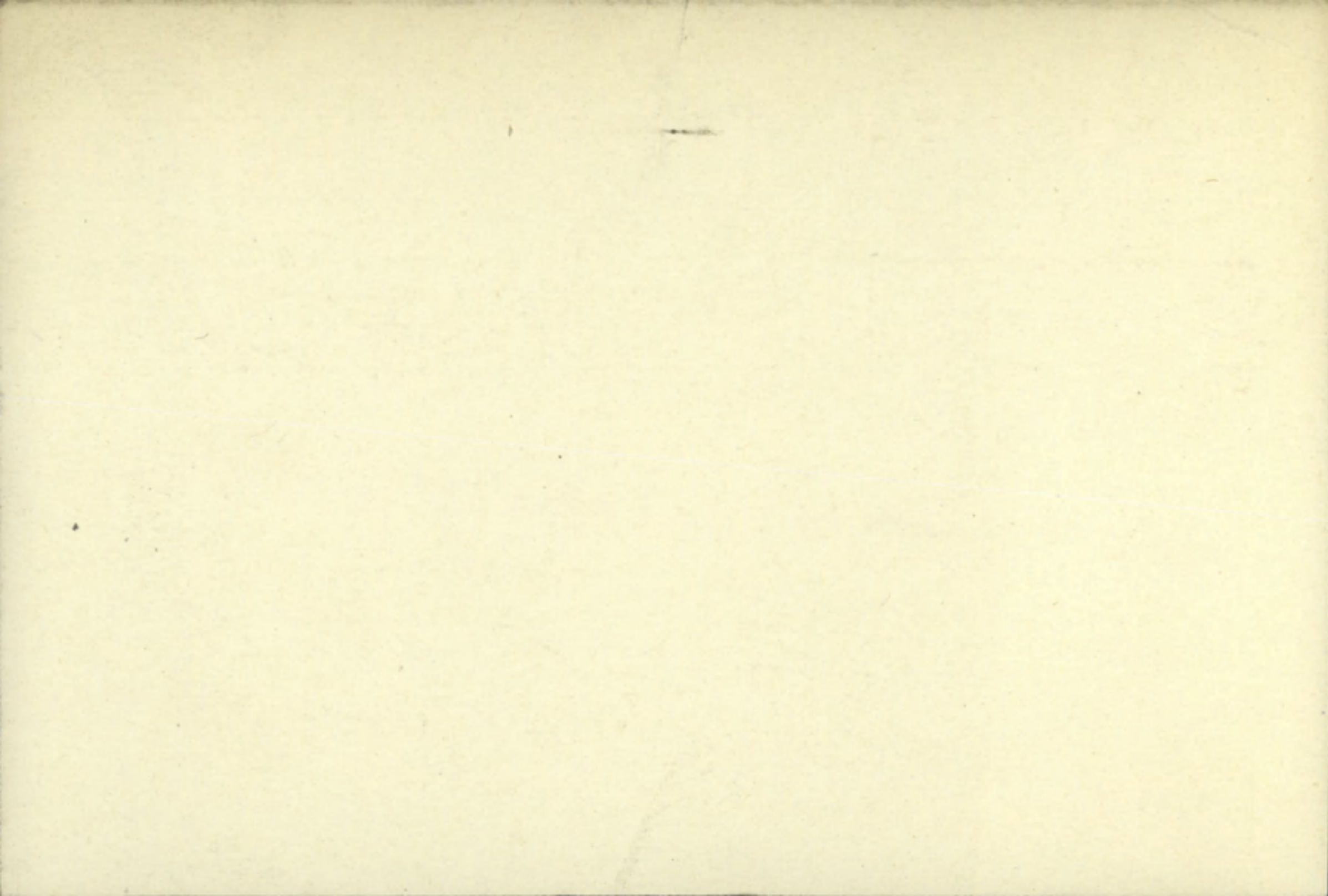
Caron, H.

T. O. S. 7/7/15 (10028 of 1917/15) UNIT 9<sup>th</sup> Regt.

Voltegeurs de Quebec

M. D. 5-

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 July 7	1915 July 31	✓		
	Aug.	✓		
	Sept.	✓	168 hrs. det. 25-9-15.	LO # 38 of 27-9-15.
	Oct.	✓	2 days det.	Oct. Paylist.
	Nov.	✓		
Dec. 1	Dec. 15	✓	14 days det. 6-12-15. Released 15-12-15.	SO. 51 of 11-12-15. SO. 52 of 18-12-15.



CARD NO.

SURNAME *Caron*CHRISTIAN NAMES *Henri*REGL. NO. *441*RANK *Pte.**S.O.S. 21/12/14 Dis. F*UNIT *22nd.**Bn.*FORMER CORPS *nil.*

## NEXT OF KIN.

## CHANGE OF ADDRESS

NAMES IN FULL *Caron, Pierre.*RELATIONSHIP TO SOLDIER *Father*ADDRESS *Sandy Bay, P. I.*COUNTRY OF BIRTH *Canada, Sandy Bay.* DATE *Mar. 18<sup>th</sup>. 1893.*PLACE OF ATTESTATION *Montreal, P. I.* DATE *Oct. 23<sup>rd</sup>. 1914.*

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

No. 889914

RANK

Plé

NAME

Caron Henri

T. O. S. 22-8-16

UNIT

189<sup>th</sup> Battalion

D.O. 200 of 24-8-16

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 aug 22 Sept. 1	1916 aug 31 Sept 17	✓ m	A.W.L. Perfecto 30 days pay	D.O. 226 of 19-9-16

UNIT SAILED

SEP 23 1916





Description of Henri Baron on Enlistment.

Apparent Age.....20 years ..... 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. 6 ins.

*Scars on the right side of the temple.*

Chest measurement { Girth when fully expanded.....37 ins.  
 Range of expansion.....34 ins.

Complexion.....Fair

Eyes.....Blue Gray

Hair.....Brown

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

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 20 December 191 5

*H. Gaboury Capt. M.C.*

Place Quebec

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.

Henri Baron.....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.

*S. H. [Signature]* (Signature of Officer)  
St. John

Date 20/12/15 191 .



ATTESTATION PAPER.  
1896 - B.A.T., F.E.C.  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 889914  
Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.  
(ANSWERS.)

- 1. What is your surname? *Caron*
- 1a. What are your Christian names? *Henri*
- 1b. What is your present address? *Sandy Bay*
- 2. In what Town, Township or Parish, and in what Country were you born? *Sandy Bay*
- 3. What is the name of your next-of-kin? *Pierre Caron*
- 4. What is the address of your next-of-kin? *Sandy Bay*
- 4a. What is the relationship of your next-of-kin? *Pere*
- 5. What is the date of your birth? *18 Mai 1895*
- 6. What is your Trade or Calling? *Commis*
- 7. Are you married? *non*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *oui*
- 9. Do you now belong to the Active Militia? *non*
- 10. Have you ever served in any Military Force? *oui dans le 9<sup>e</sup>me Bat de Quebec*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *oui*
- 12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *oui*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Henri Caron*, 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.

*Henri Caron* (Signature of Recruit)  
*A. B. [illegible]* (Signature of Witness)

Date *22 aout* 1916.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Henri Caron*, 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.

*Henri Caron* (Signature of Recruit)  
*A. B. [illegible]* (Signature of Witness)

Date *22 aout* 1916.

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 *Quebec* this *22* day of *August* 1916.

*Albert Shields* (Signature of Justice)

*Juge de paix*

*Carded 6-2-17*

Description of Henri Caron on Enlistment

Apparent Age 21 years ..... 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. 6 ins.

*Small scar over outer angle of left eye.*

Chest measurement { Girth when fully expanded ..... 35 ins.  
 Range of expansion ..... 2½ ins.

Complexion ..... fair

Eyes ..... Blue

Hair ..... light brown

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

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 22-8 1916

*J. A. Key*  
 Capt. M.C.  
 Medical Officer.

Place Quebec

\*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.

Henri Caron ..... 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.

Date Aug 26<sup>th</sup> 1916  
**VALCARTIER**

*[Signature]* (Signature of Officer)  
 Lt.-Colonel,  
 Q. C. 1880 Battalion, C. F. F. C.

448925

448925

MEDICAL HISTORY SHEET.

Surname Baron Christian Name Henri

Examined { on 20 day of Dec 1915 at Juigne  
 Birthplace { City or Town Sandy Bay Rank \_\_\_\_\_ M.O.  
 County Matane

Approved by [Signature]  
 Apparent age 20  
 Trade or occupation Outitane  
 Height 5 Feet 6 Inches  
 Weight \_\_\_\_\_ Lbs.  
 Chest measurement { Minimum 37 inches  
 Maximum expansion 34 inches  
 Physical development Good  
 Small-Pox Marks no

Vaccination Marks { Arm Right Left  
 Number \_\_\_\_\_  
 When Vaccinated last \_\_\_\_\_  
 (a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_  
 Date Result ANTI-TYPHOID INOCULATIONS, ETC.  
Dec 20/15 Good [Signature] M.O.  
23/1/15 Good [Signature] M.O.

Enlisted on 20 day of December 1915 at Juigne

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>57th Bgt.</u>			<u>20/12/15</u>
Transferred to.. ..	<u>C, E, F.</u>			

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.



# MEDICAL HISTORY SHEET

Surname Caron Christian Name Henri

Examined { on <u>22nd</u> day of <u>August</u> 191 <u>6</u> at <u>Quebec</u>	Approved by	
Birthplace { City or Town <u>Sandy Bay</u> County <u>Co. Matane</u>	Rank _____ M.O.	
Apparent age <u>21 Years</u>	Date	EXAMINED FOR RE-ENGAGEMENT
Trade or occupation <u>Commis</u>	Fit or Unfit	M.O.
Height <u>5</u> feet <u>6</u> Inches		M.O.
Weight _____ lbs.		M.O.
Chest measurement { Minimum <u>32 1/2</u> inches Maximum expansion <u>3 1/2</u> inches		M.O.
		M.O.
Physical development _____		M.O.
Small-pox Marks _____		M.O.
Vaccination Marks { Arm Right Left Number _____	Date	VACCINATIONS
	Result	
When Vaccinated last _____		M.O.
(a) Marks indicating congenial peculiarities or previous disease _____		M.O.
		M.O.
(b) Slight defects but not sufficient to cause rejection _____	Date	ANTI-TYPHOID INOCULATIONS, ETC.
	Result	
		M.O.
		M.O.
		M.O.

Enlisted on 22nd day of August 1916 at Quebec

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>139th. Batt.</u>	<u>839914</u>		
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.



Original Not-Available  
Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. 22<sup>nd</sup> Battalion

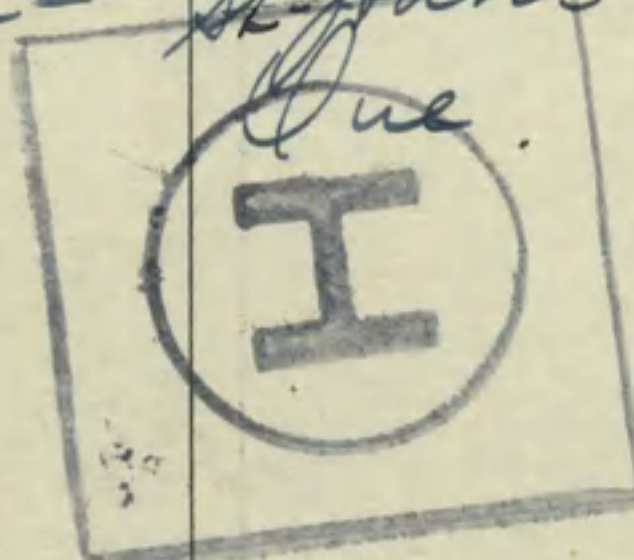
Regimental No. 441 Rank Pvt Name Caron Henri

Enlisted (a) 23-10-14 Terms of Service (a) Of War Service reckons from (a) 23-10-14

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		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				
5-2-15	22 <sup>nd</sup> Bn.	S.O.S. No Consent - of Parents	St John's	21-12-14	H. Q. 16-1-25 Vol 7



Capt.  
fr  
Dj P

(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				



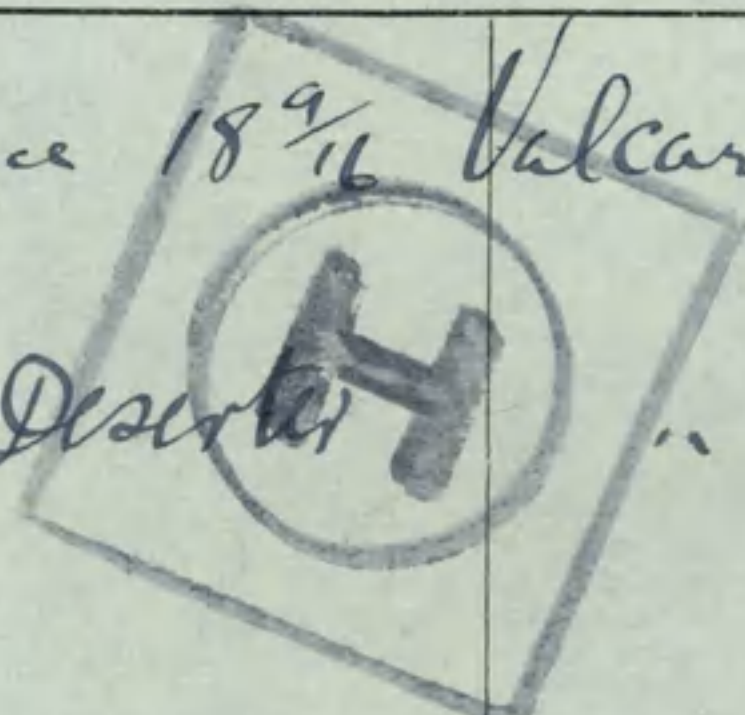
*Original not available*  
 Fill in only.—Unit, Number, Rank and Name.

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

### Casualty Form—Active Service.

Unit, Regiment or Corps *189<sup>th</sup> Battalion*  
 Regimental No. *889914* Rank *Private* Name *Caron Henri*  
 Enlisted (a) *22-8-16* Terms of Service (a) *D of War* Service reckons from (a) *22-8-16*  
 Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to lance rank } roll of N. C. Os. }  
 Extended. Re-engaged. Qualification (b).

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				
<i>19.9.16</i>	<i>189<sup>th</sup> Bn</i>	<i>Abol since 18<sup>9</sup>/<sub>16</sub></i>	<i>Valcartier</i>	<i>18<sup>9</sup>/<sub>16</sub></i>	<i>M<sup>tr</sup> Do</i>
<i>31.5.23</i>	<i>..</i>	<i>SoS as a Deserter</i>	<i>..</i>	<i>18.9.16</i>	<i>After order 45.</i>



*Ablyde*  
*prwh*

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.



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

M. F. W. 54. (A. F. B. 103.)

# Casualty Form—Active Service.

250M.—1-16.

H. Q. 1772-39-920.

Unit, Regiment or Corps 57th Battalion, C. O. E. F.

Regimental No. 448925 Rank Pte Name Caron, Henri

Enlisted (a) 20-12-15 Terms of Service (a) D of War Service reckons from (a) 20-12-15

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		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				
16-5-16	57 <sup>th</sup> Bn.	S.O.S. Desertion by C of I held 16-5-16.	Quebec.	16-5-16	D.O. #128.
28-10-11	57 <sup>th</sup> Bn.	A.W.L. 19-4-16 Pt. II D.O. 128.d/16-5-16. Sel's amended to read. Having been declared by C of I held 16-5-16. Ill. absent fr. 19-4-16. Is. as deserter.	Ottawa	19-4-16	after Order #23.

Cast  
on  
D of W.

(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.

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				