

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

# DISCHARGE DOCUMENTS

23573

R. O. No. ....

H. Q. No. ....

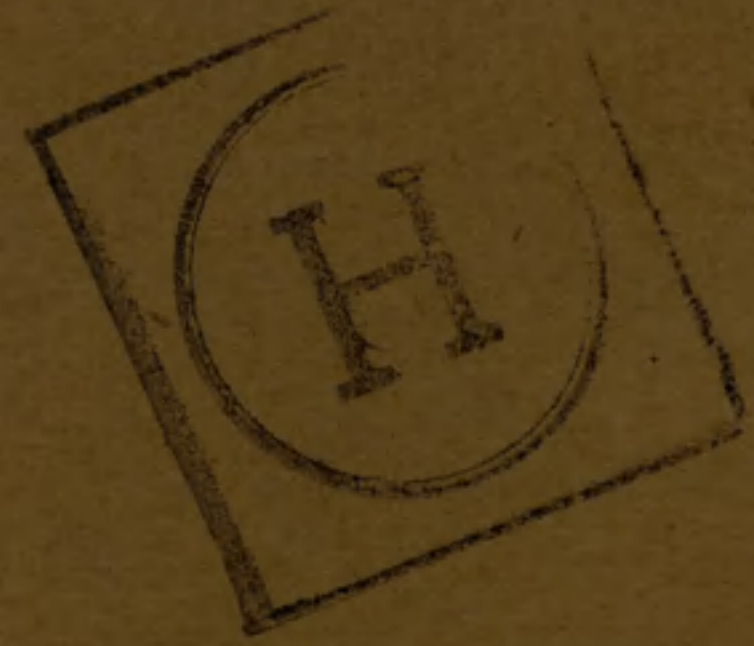
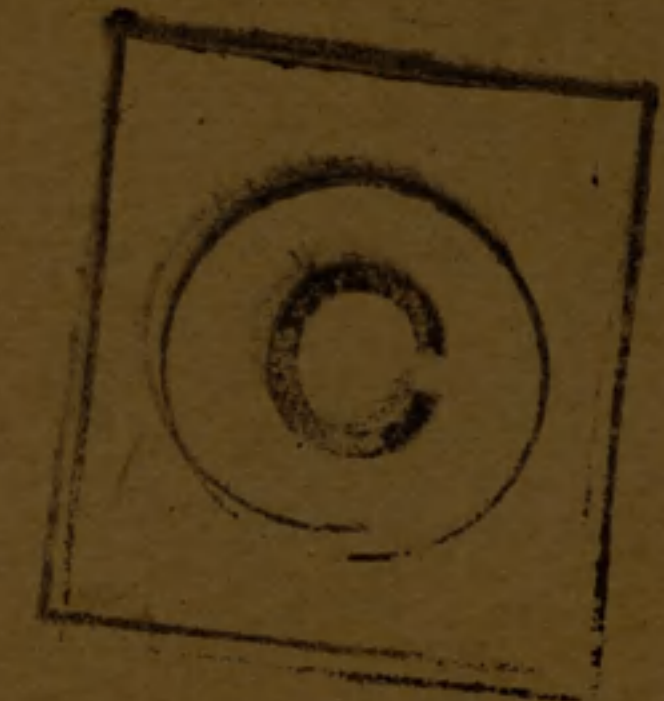


Name *Clarkson, James*

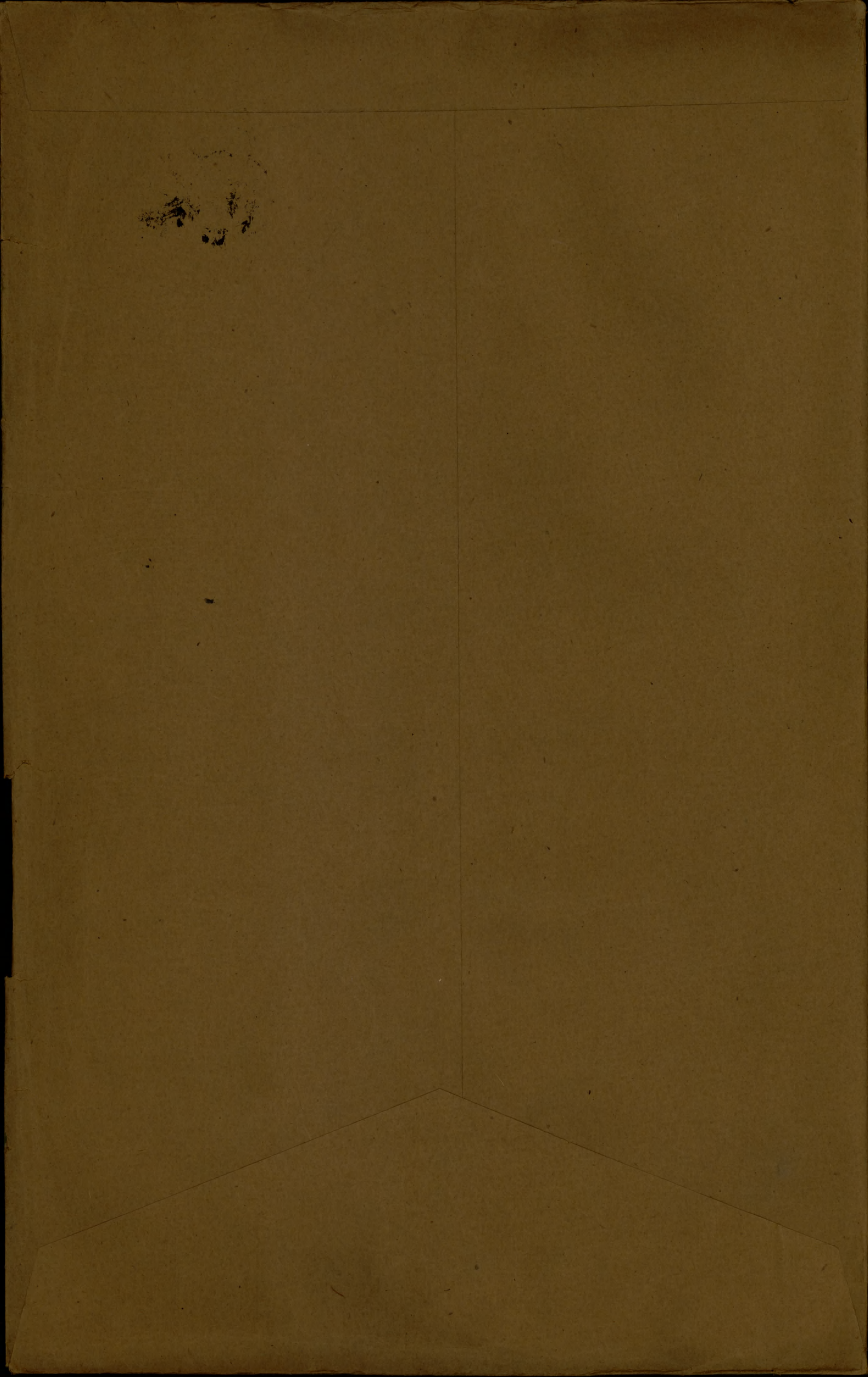
Regt. No. *1099435* Rank *Private*

Corps *256<sup>th</sup> Rly. Const. Bn.*

*Medically unfit.*



*James A. Clarkson*



1099435

ORIGINAL

1

# ATTESTATION PAPER.

No. 1099435

256th Battln.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname?..... C L A R K S O N
- 1a. What are your Christian names?..... James,
- 1b. What is your present address?..... #829 King St. West., Toronto, Canada.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Yorkshire, England.
- 3. What is the name of your next-of kin?..... Sarah Clarkson,
- 4. What is the address of your next-of-kin?..... #829 King St. West., Toronto, Canada.
- 4a. What is the relationship of your next-of-kin?..... Wife.
- 5. What is the date of your birth?..... May 21st, 1869.
- 6. What is your Trade or Calling?..... Miner.
- 7. Are you married?..... Married.
- 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, James Clarkson, 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.

..... James Clarkson (Signature of Recruit)  
Date..... February 9th, 1917. ..... M. Moore (Signature of Witness)

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

I, James Clarkson, 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.

..... James Clarkson (Signature of Recruit)  
Date..... February 9th, 1917. ..... M. Moore (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 9th day of February, 1917. 191 .

..... M. Moore (Signature of Justice)

1099435

noted  
1-4-17  
M.M.

**Description of James Clarkson, on Enlistment.**

Apparent Age.....47.....years .....8.....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. 4 1/2 ins.

Chest measurement { Girth when fully expanded..... 36 1/2 ins.  
 Range of expansion..... 2 1/2 ins.

Complexion..... Fresh  
 Eyes..... Brown  
 Hair..... Grey

Scar above L. eye.  
Scars on right hand.

Religious denominations { Church of Engl...... C. of E.  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic.....  
 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..... Feb. 9/17. 191 7 E. R. Traubsh

Place..... Toronto, Can. H Medical Officer.  
Toronto Recruiting Depot.

\*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  
E. R. Traubsh M.O.  
 PRESIDENT

**CERTIFICATE OF OFFICER COMMANDING UNIT.**

James Clarkson,.....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.

W. W. Linnell (Signature of Officer)  
Lt. Col

Date..... 9/2/17.....191 7

# MEDICAL HISTORY SHEET

Surname Clarkson Christian Name James

Examined { on 9th day of February, 1917.  
 at Toronto, Canada.

Approved by E. R. Frankish

Birthplace { City or Town \_\_\_\_\_  
 County Yorkshire, England.

Rank LT M.O.  
Toronto Recruiting Depot.

Apparent age 47 Yrs. 8 Months.

Trade or occupation Miner.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		DECLARED FIT BY MEDICAL BOARD
		TORONTO RECRUITING DEPOT
		<u>W. M. D. Shand</u>
		M.O. PRESIDENT

Height 5 feet 4 $\frac{1}{4}$  Inches

Weight 140 $\frac{3}{4}$  lbs.

Chest measurement { Minimum 34 inches  
 Maximum expansion 36 $\frac{1}{2}$  inches

Physical development Good.

Small-pox Marks Nil

Vaccination Marks { Arm Right 1 Left \_\_\_\_\_  
 Number 1

When Vaccinated last Childhood.

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection  
R eye D 60 L. D. (Not shown)

Enlisted on 9th day of February, 1917 191 at Toronto, Canada.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>256th Battln.</u>	<u>1099435</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.



# 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. 1099435 Rank Private Name as. Clarkson  
 Corps 256th Battalion who was\* Discharged "Medically Unfit"  
 On March 17th., 1917 1917, to \_\_\_\_\_  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from March 1st 1917,  
 to March 17th., 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	2	20
Advances by Cheques } No. <u>2157</u>		5	Regt'l Pay <u>17</u> days at \$ <u>1</u> c	17	
Assigned Pay No.			Field Allow. <u>17</u> days at \$ <u>10</u> c	1	70
Other Charges*			Other Allowances*		
Payment on transfer or discharge No. <u>2710</u>	15	90	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
<b>Total</b>	<b>20</b>	<b>90</b>	<b>Total</b>	<b>20</b>	<b>90</b>

\*Give Particulars.

A monthly stoppage of \$ 20.00 (†) has not (‡) been paid on account of Assigned Pay for the month of March 1917 to (Assignee) Sarah Clarkson  
 (Address) 928 King St., W. Toronto.

(†) 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. \_\_\_\_\_

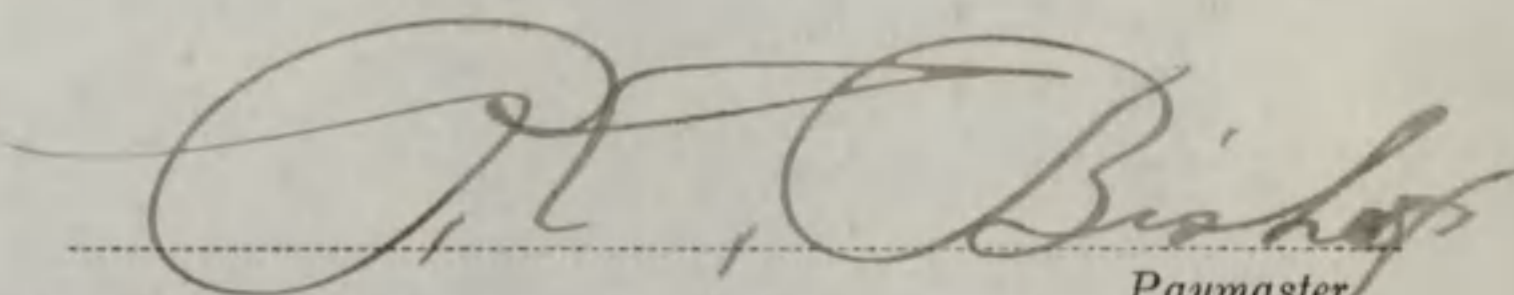
**REMARKS:—**

State (1) date of enlistment 9/2/17  
 (2) if married and if a Separation Allowance Card has been submitted Yes Yes  
 (3) cause of discharge and authority Do 75 A.A.G. 34 CI-117

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 17th., 1917  
 Place Toronto, Ont.

  
 Paymaster

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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

1. Name of the Soldier: ...  
2. Regiment: ...  
3. Service Number: ...  
4. Date of Issue: ...

The following is a statement of the amount of the above named man's pay of ...

STATEMENT OF PAY

1. Pay for ...  
2. Pay for ...  
3. Pay for ...  
4. Pay for ...

5. Pay for ...  
6. Pay for ...  
7. Pay for ...  
8. Pay for ...

9. Pay for ...  
10. Pay for ...  
11. Pay for ...  
12. Pay for ...

13. Pay for ...  
14. Pay for ...  
15. Pay for ...  
16. Pay for ...

17. Pay for ...  
18. Pay for ...  
19. Pay for ...  
20. Pay for ...



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

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

350M.—5-16

H. Q. 1772-89-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps

25th (U.S.) RAILWAY CONSTRUCTION BN. C.E.F.

Regimental No. 1099, 435 Rank Pte. Name Clarkson James

C. E. F.

Enlisted (a) 9/2/17 Terms of Service (a) 1 year 6 mos. Service reckons from (a) 9/2/17

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) Miner

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.



# SEPARATION ALLOWANCE

Sheet No. 2.

*Mrs S. E. Clarkson,*

OVERSEAS CONTINGENTS

PAYMENTS.

*Wife*

Name of Soldier

*Clarkson James*

*Plc.*

*1099435*

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March		P. 36133	34.	34. R Dis. 17/3/17 Spmk 17/3/17 W.B.
April				20
May				Return 8 <sup>00</sup> overpaid cheque
June				22/3/17 Journey
July				
Aug.				Credit slip issued total of
Sept.				16/11/20 JWB
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE..... PBR.....

*W*

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

9-2-17

MILITIA AND DEFENCE

M. F. W. 11.

50m.—6-16.

H. Q. 1772-39-318.

SEPARATION ALLOWANCE

Name Mrs Sarah E. Clarkson.

Name of Soldier Clarkson James

Address 829 King st W  
Toronto

Regtl. No. 1099435

Rank Pte.

Corps 256<sup>th</sup> Ry. Con. Battn.

Relation to Soldier

Wife

To what Corps belonging

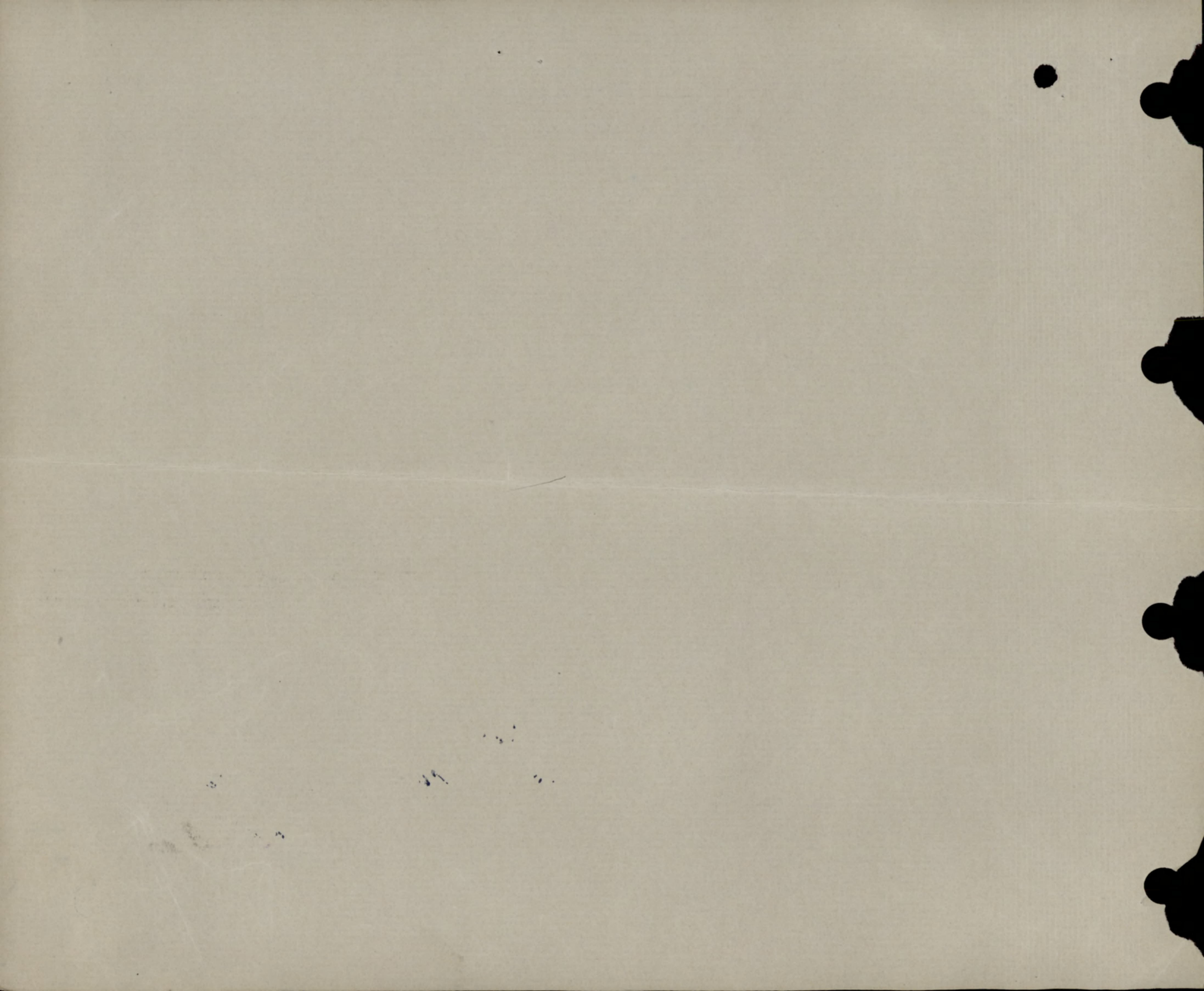
wife, child or mother

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ACCOUNT CLOSED  
DATE..... PER..... W.....



MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

miner

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

47

YEARS

8

MONTHS

HEIGHT

5

FEET

4 <sup>1</sup>/<sub>4</sub>

INCHES

CHEST MEASUREMENT

36 <sup>1</sup>/<sub>2</sub>

INCHES

4

EXPANSION

2 <sup>1</sup>/<sub>2</sub>

INCHES

COMPLEXION

Fresh

EYES

Brown

HAIR

Grey

DISTINGUISHING MARKS

scar above L. eye, scars on right hand.

MEDICAL EXAMINATION.

PLACE

Toronto, Ont.

DATE

Feb. 9<sup>th</sup> 1917

Present address, 829 King St. West, Toronto, Ont.

SURNAME.

Clarkson

CHRISTIAN NAMES

James

REGL. No.

1099 435 RANK Pte.

UNIT

256<sup>th</sup>.

Bn.

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Clarkson, Mrs. Sarah

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

829 King St. West, Toronto,  
Ont.

COUNTRY OF BIRTH

England Yorkshire

DATE

May 21<sup>st</sup> 1869

PLACE OF ATTESTATION

Toronto Ont.

DATE

Feb. 9<sup>th</sup> 1917





No 1099435 RANK Plt.

NAME Clarkson James

T. O. S. 9-2-17  
(NO 430712-2-17)

UNIT 256th Ply. Construction Bn.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Feb. 9 mar 1	1917 Feb. 28 mar 17	✓ H.	Dischgd M. U. 17-3-17	DO 75 of 16-3-17

Ac. Closed by payment @.

## 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.		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.)	
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."

*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.	1099435		
Rank	Private		
Name	Clarkson, James		
<small>Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>			
Corps (Squadron, Battery or Company)	25th Reg Louis Bn.		
Date of Discharge	Mar 17th 1917		
Place of Discharge	Toronto		
<b>1. DESCRIPTION AT THE TIME OF DISCHARGE.</b>			
		Descriptive Marks	
Age.....	47 years.....	10 months.	
Height.....	5 feet.....	4 1/4 inches.	
Complexion	Fair		Scar above left eye.
Eyes	Brown		
Hair	Grey		Scars on right hand.
Trade	None		
Intended place of residence	829 King St West Toronto Ontario		
<small>(To be given as fully as practicable.)</small>			
2. The above-named man is discharged in consequence of <i>being</i> <i>medically unfit</i>			
<small>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.</small>			
3. Conduct and character while in the service have been, according to the records, etc.			
<i>WauLawell</i>			
<small>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:</small>			
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)			

M. F. B. 218.

100m.—6-16.  
H. Q. 1772-33-113

(OVER)

*Sealed 7-4-17 m.m.*

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* ..... *Wm Linnell* .....

(Date) *17/3/17* ..... 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) *Toronto James Clarkson* ..... (Signature of Soldier.)

(Date) *17/3/17 Wm Linnell* ..... (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) *Toronto* .....

(Date) *17/3/17* ..... (Signature) *Wm Linnell* .....

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.)

*no reservations*

*James Clarkson*

Pte. James Clarkson  
England.

Mrs. S.L. Clarkson,  
(mother) Toronto.

MEDICAL HISTORY OF AN INVALID.

1. Station. **Toronto.**
2. Regiment or Corps. **256th(OS) Ry. Cons. Bn.** (a) Conduct. **Good**
3. Regimental No. and Rank. **Private** (b) Habits. **Good**  
**#1099435**
4. Name. **Pte. Clarkson James** (c) Temperance. **Good**
5. Age last Birthday. **47** (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
6. Enlisted on **Feb. 9th**  
at **Toronto, Ontario.**
7. Former Trade or Occupation. **Miner** Date. **March 6th 1917.**

N. 3  
 MILITARY DISTRICT  
 MAR 17 1917  
 34-66-117  
 MILITIA & DEFENCE  
 MAR 26 1917  
 H.Q. CANADA

9. Service. Years. Day **25**

	PERIODS.	
	FROM.	TO.
<b>256th (OS) Battalion C.E.F. Cons.</b>	<b>Feb. 9th/17</b>	<b>March 6th/17</b>

10. (a) Disease or disability. **Overage**
- (b) Date of origin. **Born 1858**
- (c) Place of origin. **England.**
- (d) Cause. **-----**
11. Present Condition. (Most Important). **He appears to be a man 59 or 60 yrs. of age.**  
(To include full description of present disabling condition or conditions.)

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.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

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

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.

150 M-5-16.  
H. Q. 1772-39-117.

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.

OPINION OF THE MEDICAL BOARD.

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

None

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

10. *yes*

11. *yes*

(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?

Not applicable

12. *yes*

15. *yes*

(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.

Not applicable.

16. *yes*

17. *yes*

14. Treatment **None**

18. Is he unfit for Military Service. *yes*

Recommendations :

*That he be discharged on being unduly unfit*

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

Has not been aggravated

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

Permanent.

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

No more than prior to enlistment.

Signatures :—

*H. C. Ferguson Capt* President.

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

Yes

*W. S. By*

Station.

Date.

*Yoroubi  
March 12<sup>th</sup> 1917*

Members.

*D. J. Stewart*

Medical Officer by whom the case is brought forward.

Date.

Approved.

Date.

*15/3/17*

*31/3/17*

*G. S. James Capt*  
Asst. Director of Medical Services.

*W. C. ...*  
Director-General of Medical Services.