6

ATTESTATION PAPER.

No. 445607

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? ..... Bert McDougall Crawford
2. In what Town, Township or Parish, and in what Country were you born? ..... Scotch Settlement N B
3. What is the name of your next-of kin? ..... Wm F Crawford (Father)
4. What is the address of your next-of-kin? ..... Scotch Settlement N B
5. What is the date of your birth? ..... July 28th 1896
6. What is your Trade or Calling? ..... Farmer
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

Bert McD Crawford (Signature of Man.)

H T Fowler (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Bert McDougall Crawford, 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.

Bert McD Crawford (Signature of Recruit)

Date Sept 1st 1915 H T Fowler (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Bert McDougall Crawford, 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.

Bert McD Crawford (Signature of Recruit)

Date Sept 1st 1915 H T Fowler (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 Sussex, N B this 1st day of Sept 1915

A J Brooks JP (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

A J Brooks Lieut (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of Bert McDougall Crawford on Enlistment.

Apparent Age 19 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7½ ins.

Chest measurement:
- Girth when fully expanded 35½ ins.
- Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Religious denominations:
- Church of England
- Presbyterian Yes.
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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).

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 Sept 1st 1915. J. A. Burnett

Place Sussex, N B

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.

Bert McDougall Crawford 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.

A. J. Brooks Lieut (Signature of Officer)
O.C. Depot Co.

Date Sept 1st 1915

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.....

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.....1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M.B.259-1
pay card-1

M. F. W. 62.
25m.—11-15.
H. Q. 1772-39-935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Crawford Bert: McDougall

Regt. No. 44569 Rank Private

Corps 53rd Infantry C.E.F.

Deserter.
Mr Scott.
29-10-20

43467

H

No. 445607 RANK Pte. NAME Crawford, B. M. D.

T. O. S. UNIT 55th Battalion C.E.F.

M. D. 6.

PAID FROM 1915	PAID TO 1915	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Aug. 30	Sept. 2	M.	Trans. to Val. 2.9.15	Sept. paylist
Sept. 3	Sept. 30	M.		
O.S. (no account)		M.	Deserter	GO of 15.10.15
			no account M.	

UNIT SAILED
OCT 30 1915

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 55th Battalion

Regimental No. 445607 Rank Rte Name Crawford, Bert - McDougall

Enlisted (a) 1-9-15 Terms of Service (a) C.E.F. D of War Service reckons from (a) 1-9-15

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				
15-10-15	55th Bn.	S O S. Deserter by C of I held 13-10-15 A.W.L from. 16-9-15.	Valcartier Camp.	16-9-15	D.O. # 168.

D. Pitchie

Capt for DJR

(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				

C

MEDICAL HISTORY SHEET.

Surname Crawford *Christian Name* Bert McDougall

Examined { on 1st day of Sept 1916 / at Sussex N.B.

Birthplace { City or Town Scotch Settlement / County N.B.

Apparent age 19 — 1

Trade or occupation Farmer

Height 5 Feet 7½ Inches.

Weight Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 35½ inches.

Physical development

Small-Pox Marks

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

Approved by J. N. Burnett

Rank M.O

Date	Fit or Unfit	Examined for Re-engagement,
		M.O
		M.O.
		M.O
		M.O.
		M.O.
		M.O.
		M.O.

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

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

Enlisted on ..... *day of* ..... *191* ..... *at* .....

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	55th Batt. CEF	445607		
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.

100M.—5-15.
H. Q. 1772-39-439

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

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				