~~Duplicate~~ Original

FORESTRY DEPOT C.E.F.
VANCOUVER, B. C.

ATTESTATION PAPER.

No. 220485-83

Folio.

Ex. B.C.R.M.R.A. CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... CRAWFORD.
1a. What are your Christian names? ... CHARLES. COURT.
1b. What is your present address? ... 671 Jackson St Seattle Washington U.S.A.
2. In what Town, Township or Parish, and in what Country were you born? ... St Catherines, Ontario. Canada.
3. What is the name of your next-of kin? ... Mrs Maria Crawford.
4. What is the address of your next-of-kin? ... Bon Accord, Alberta, Canada
4a. What is the relationship of your next-of-kin? ... Mother.
5. What is the date of your birth? ... May 29th 1879
6. What is your Trade or Calling? ... Logger.
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 naval or 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.
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, Charles, Court, Crawford, 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.

Charles Court Crawford (Signature of Recruit)

Date 9th January. 1918 . J. Dawson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Charles, Court, 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.

Charles Court Crawford (Signature of Recruit)

Date 9th January, 1918 . J. Dawson (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 VICTORIA, B. C. this ninth day of January 1918.

... (~~Signature of Justice~~ attesting Officer)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Charles, Court, Crawford, on Enlistment.

Apparent Age 31 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 4½ ins.

Chest measurement.
- Girth when fully expanded 34½ ins.
- Range of expansion 1½ ins.

Complexion Med Dark

Eyes Grey

Hair Brown

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

Vision R: D 20/20 L: D 20/20
Hearing R N L N

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* B2 for the Canadian Over-Seas Expeditionary Force.

MOBILIZATION CENTRE VICTORIA

Date 9th January 191 8 J Grant Capt C.A.M.C.

Place VICTORIA, B. C. Member

Member 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.

Charles Court 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.

(Signature of Officer)

Major

Date Jan 19th 1918

FORESTRY DEPOT C.E.F.
VANCOUVER, B. C.

REGIMENTAL DOCUMENTS

1-8-19

NAME CRAWFORD CHARLES COURT Pte. REGT. NO. 2204583 UNIT C.A.C. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE DY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				43487	
2	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	C.A.P.R. 5009A					
3	C.P.3					
1	Misc.					
1	[illegible]					
1	[illegible]					

Deceased 5-12-51

W. 2503
100M-11-18
1772-39-1377

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

This is to Certify that No. 2204383 (Rank) Pte

Name (in full) CRAWFORD Charles Court enlisted in

the C F C

CANADIAN EXPEDITIONARY FORCE at Victoria on the 9th

day of January 1918

He served in U K C F C

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age	40 yrs 2 months	Marks or Scars	
Height	5' 7½"		Nil
Complexion	Med Dark		
Eyes	Grey		
Hair	Brown		

C C Crawford
Signature of Soldier

Date of Discharge

14th July 1919

V H Meldrum
Issuing Officer

Captain
O.C. DISPERSAL STATION 'T'
Rank

Date 14th July 1919

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.

M.F.W. 39.
75M —2- 9.
H. Q. 1772—39—882.

(P. T. O.)

WAR SERVICE BADGE CLASS "C"

No. 93914 ISSUED

1.—That discharge certificate must be carried when wearing uniform;

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing; and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

P. 880.

21226

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Service - 1 yr.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Charles Court. 2. Surname Crawford

3. Rank Pte. 4. Original Unit C.F.C. 5. Reg. No. 2204583

6. Address, in full, to which future payments of gratuity are to be forwarded.
Scandanavian American Bank.
Seattle Wash. U.S.A.

7. Date of enlistment in the C.E.F. 9 Jan 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. 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? Not applicable

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 unit 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. 1 Year. 5 months.
Canada 2 months. C.F.C.
England 1 yr. 3 months. C.F.C. 11 D Coy
France Nil

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.? No

5434. Wt. /30P. 50,0.0(8). 2.19. S.O., F.Rd.

Ham.

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 No

20. Have you been issued with a War Service Badge? If so what class?

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? NO

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge (b) Reason for discharge

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 in which you served at the front, and dates of such service with that unit

Questions 12, 13, 14, 20, 24, 25, 26 and 27 are unanswered.

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: Charles Court Crawford

Place of Residence: C.P.O. Seattle Wash U.S.A.

Declared before me at: SMITH'S LAWN, SUNNINGDALE, BERKS, ENG.

This 6th day of June 19 19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

Questions 12.13.14.20.24.25.26.&27 are unanswered

P. G. Ferguson Mayor

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

Form R 122.
8750—15M—25-4-17.

TW. Rank Name CRAWFORD. Charles Court. Reg'l No. 2204583.

Unit 6 For Dft Brockville If in perm. Corps, What Unit? Married or Single Single,

Place and Date of Enlistment Victoria.B.C. 9th Jan 1918. Place of Birth St Catherines Ont.

Name and Address, Next-of-Kin Mrs Maria Crawford.
Bon Accord.Alberta. Relationship Mother.

Assigned Pay Monthly $ Payable to
Relationship

Separation Allowance $ Payable to
Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England		4-3-18	S/S MEGANTIC
6.3.18	C.F.C.B.D.	T.O.S. from Canada.	B. Sdale.	4.3.18	P.E.T.O. 56
2.4.18	" "	S.O.S. to Unit 55.	B "	1.4.18	" S.O. 79.
10.4.18	" Unit 55.	T.O.S. from B.Depot.	Pt Stirling	2.4.18	" S.O. 1
7-6-19	B.D.C.B.C	T.O.S from 55 Unit	" S'dale	5-6-19	— 158.
4-7-19	R. Wing	S.O.S. to Can. S.L.97	" Witley	2-7-19	— 73.
			97 T	2-7-19	
26-6-19	C.F.C.B.D.	S.O.S. to C.C.C. Witley P.R.D.C.	" S'dale	26-6-19	- 174.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

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 FORESTRY DEPOT C.E.F. VANCOUVER, B.C.

Regimental No 2204583 Rank Pte Name Crawford Charles Court-

C. E. F.

Enlisted (a) 9-1-18. Terms of Service (a) C.E.F. D.S.W. Service reckons from (a) 9-1-18

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) Military Civil Labour

Report: Date	Report: From whom received	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
		Embarked on H.M.T Megantic	Halifax	20-2-18	
		Disembarked.	Liverpool	4-3-18	
6-3-18	O.C.C.H.	T.O.S. BASE DEPOT C.F.C. SUNNINGDALE	4-3-18		PT. II. DO. NO 56 C.F.C.
		On draft from Canada.			
2-4-18	O.C. 6th B.	S.O.S. on posting to Co 110, Dist 55 BASE DEPOT C.F.C. SUNNINGDALE	1-4-18 Hillwaeth		PT. II. DO. NO 79 Major O.C. C.F.C.
5-4-18	O.C. B. Depot	T.O.S. of 55 Dist 6th B. at 110 Coy from B. Depot Sunningdale	Sterling	2-4-18	2/O Pte 1-4-18 d/10-4-18 Capt & Adjt
5-6-19	O.C. 55 Dist., C.F.C.	T.O.S. of 55 District C.F.C., at 110 Company Sterling to Base Depot C.F.C.		5-6-19	Pt. II D.O. No. 32 d/6-6-19 Capt for DEPT. & ADJUTANT, FOR O.C. DISTRICT 55 C.F.C.

REMBK'D SOUTHAMPTON 27 7 19

(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				
		7.6.19 O.C. C.F.C. T.O.S. Base Depot, C.F.C. from 110 Co. draft 55	Sunningdale	5.6.19	Pt. 11. D.O. 158
26/6/19	O.C. C.F.C.	SOS Base Depot C.F.C. on Transfer to ~~M D~~ R Wing CANADIAN CAMP, RHYL. Witley	S'DALE	26/6/19	PT II D.O 177 P. Blakeney Lt. for O.C.
5-6-19	R Wing	T.O.S	WITLEY	5-6-19	DO # 45
"	"	SOS - C.F.C.	C C F C	1-7-19	

P. D. Marshall Lieut
OFFICER i/c RECORDS
R. WING C.C.C.,
WITLEY.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2204383 (Rank) Pte

Name (in full) CRAWFORD Charles Court enlisted in

the CFC

CANADIAN EXPEDITIONARY FORCE at Victoria on the 9th

day of January 1918

HE served in W/R CFC

and is now discharged from the service by reason of Demobilization.

~~Medical Unfitness~~.

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

Age 40 yrs 2 months

Height 5' 4 1/4"

Complexion Med Dark

Eyes Grey

Hair Brown

C. C. Crawford

Signature of Soldier.

Marks or Scars Nil.

V. A. Macsean

Issuing Officer.

Captain

O.C. DISPERSAL STATION 'T'

Rank

Date of Discharge

14th July 1919

Date 14th July 1919

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.

M.F.B. 39A.

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 Forestry Corps

Regimental No. 2204583 Rank Pte Name Crawford Charles Court.

C. E. F.

Enlisted (a) 9.1.18 Terms of Service (a) D of W. Service reckons from (a) 9.1.18.

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) .....

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				
		T.O.S, No 11 D, D, 2July 19 S, O, S. CEF July 14-19 T Area No 11 dd DO 198 July 17-19			

H. L. Hook Lieut
For O.C. District Depot, A1

(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				

FORESTRY DEPOT C.E.F.
VANCOUVER, B. C.

ORIGINAL
2204583

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 Crawford Christian name Charles, Court.

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) 671 Jackson St Seattle Washington U.S.A.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the ninth day of January 1918 by the undersigned medical board sitting at VICTORIA, B. C.

5. Age as stated 38 Years 7 Months. 6. Apparent age 38 Years 7 Months

7. Height 5 Feet 4½ Inches. 8. Weight 136 Pounds.

9. Chest measurement { Minimum 33 Ins. / Maximum 34½ Ins. } 10. Complexion Med Dark { Eyes Grey / Hair Brown }

11. Physical development. Good { Good / Fair / Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm X / Left arm 2 } 14. When vaccinated last Childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease

History of occasional catarrh of ears.

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(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 Age B2

17. (a) Vision R. 20/20 L. 20/20

(b) Hearing. R. N L. N

J. Grant Crawford President.

Member. W. Hoonicff Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
15-1-18		M. F. D. Graham M.O.	15-1-18		M. F. D. Graham M.O.
		M.O.	23-1-18		M. F. D. Graham M.O.
		M.O.	12/2/18		M.O.

Joined ninth day of January 1918 at VICTORIA, B. C.

FORESTRY DEPOT C.E.F.
VANCOUVER, B. C.

	Corps	Regtl Number	Habits	Date
Joined on enlistment				
Transferred to FORESTRY DEPOT Brockville, Ont.		2204583		9-1-18 1-2-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Vancouver BC	15-1-18	B2	
Brockville	13/2/18		
Summerdale	7-3-18	A	

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.

M. F. B. 313.
300M.—10-17.
1772-39-439.

Signature of Man

Christian Name CHARLES, COURT.

Surname CRAWFORD

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

C.A.D.C. 5009A

3 U.O.C.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

NAME OF SOLDIER (Block Letters) CRAWFORD. F. C C

REGIMENT C. F. C. RANK PTE. No. 2204583.

Date of Examination in England 12-6-44 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS None
2. EXTRACTIONS None
3. CROWNS None
4. DENTURES Yes
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower } None
   - (d) Part Lower

For A. D. D. S., M. D. No. 11

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada
- (b) In England yes
- (c) In France

Signature of Dental Officer J. A. Lent capt

Corr.

Number 220583 Rank Pte.

Surname CRAWFORD

Christian Name Charles Court

Units C.F.C. Theatre of War U.K. N.G.

Date of Service 4.8.18.

Remarks

Latest Address ~~Not available 1 Dec. 21.~~
G.P.O. Seattle
Wash
U.S.A.

Roll No. 2 Page 4880

200m.-6-21.M.

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

OSPITAL AS AN ADMISSION

WHERE FROM)

IT IN CATEGORY

INVALID

WHERE TO)

DITIONS DIAGNOSED

ADDRESS

HOSPITAL STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

No. 22145-83 RANK Cte NAME Crawford C C

~~T.O.S.~~ Trans from UNIT Rly. Construction & Forestry Depot.
Forestry Depot M.D. 11
Vancouver B.C. 1-2-18
(D.O. 43 of 12-2-18)

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Jan 8	Feb 15	R	Proc o/s	D.O. 45 of 19-2-18

SURNAME. Crawford

CHRISTIAN NAMES Charles Court

REGL. No. 2204583 RANK Pte

UNIT Forestry Dpo (M D 11)

FORMER CORPS Inf

IV. CARD NO. V

SOS Dis 14-7-19
DO 1980 F.O.L. 17-7-19
Demob 11.22

NEXT OF KIN.

NAMES IN FULL Crawford Mrs Marie

RELATIONSHIP TO SOLDIER Mother

ADDRESS Bon Accord, Alta.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada St. Catharines Ont. DATE May 29th 1879.

PLACE OF ATTESTATION Victoria B.C. DATE Jan 9th 1918.

O/B. 24/2/18. 1086/3.

R/B 9-7-19 367/20 Pte.

L. L. 26989 M. & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

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. 204583 RANK Pte NAME Crawford Charles Court

T. O. S. 9-1-18 UNIT Forestry Depot C. E. F.
Pd 14, 14-1-18

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Jan 8	Jan 31	✓	Accep in USA 8-1-18	D014, 14-1-18

FORM OF WILL

I, Charles Court Crawford (Name in full)

Regimental Number 2204583 serving in Forestry Battalion

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Mrs Maria Campbell Crawford
Bondaccord alberta

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Maria Campbell Crawford
Bon Accord
Alberta

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE
This space for the appointment of Executor if necessary.

Spouse to be written

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 14 day of Feb A.D. 1918

Charles Court Crawford Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Maurice Genier

Address of Witness Brockville Barracks

Occupation of Witness Soldier

Signature of Second Witness Ernest Green

Address of Witness Brockville Barracks,

Occupation of Witness Soldier

M. F. W. 82.
300M.-12-16.
1772-39-983.

FORESTRY DEPOT C.E.F.
VANCOUVER, B. C.

DUPLICATE
2204583

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins FORESTRY DEPOT C.E.F. VANCOUVER, B. C.

(2) Regimental Number 2204583

(3) Full Name of Soldier Crawford Charles Court

(4) Place of Birt St Catherines Ont

(5) Are you married, or not ? No

(6) If married, state,
(a) Full name of your wife —

(b) Present Postal Address —

(7) Are you a widower ? No

(8) Have you any children ? No

If so, give number of boys and girls —

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? do not know.

If so, state name and address .....

(10) Is your Mother alive? Yes: Mrs Marie Crawford

If so, state name and address Bon accord

Alberta Canada

(11) If your Mother is a widow Do not know.

Are you her sole support, or not? —

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....

— —

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....

.....

.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

—

.....

(15) Are you insured? No

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium —

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Graves

Officer Commanding. Major

Date Jan 19 1918

FORESTRY DEPT C.E.F.
VANCOUVER, B. C.

P. 550

MARRIED OR SINGLE: Single

PLACE OF BIRTH: St. Catharines Ont.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Maria Crawford.
Bon Accord. Alberta.

RELATIONSHIP OF NEXT OF KIN: Mother.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. 2204583. RANK Private NAME CRAWFORD. Charles Court. 509 ✓

IF IN PERMT. CORPS WHAT UNIT } UNIT C.F.C.Eng

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Victoria B.C.

DATE OF ATTESTATION 9/1/18.

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS				CR. 1	CR. 2			PARTICULARS						DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.														
15 FEB 1918									BALANCE FROM CANADA										26 90												26 90			
Feb 16/18	P.P.	13 days			1.30				B1571 14/3/18 BB						29 20																				
Mar 31	PP				3.10				B1828, 23/2/18 BB						4 84				41 23		21 83														
					48 40										34 04																				

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. OF DAYS	RATE	AMOUNT $ c.	No. OF DAYS	RATE	AMOUNT $ c.	No. OF DAYS	RATE	AMOUNT $ c.				1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	1	2	3	4				CREDIT	DEBIT			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:-	EFFECTIVE DATE:-
AMOUNT:-	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

a/c agreed. 30/9/18 118 45 ×

NAME:- CRAWFORD 49 Chas. Court.

NUMBER:- 2204583

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- CFCDpt.

DATE ACCOUNT FIRST OPENED:- 16/2/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			CFC Emp

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
14/6	1752	CFC	14 6				
18/6	1966	✓	~~12 12~~				
						L&S Bal	77 10
						LPC Bal	205 97

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		
S&L				

PARTICULARS OF RENDERING NON-EFFECTIVE: Disto Can 3/6 Cancl H.R. 10904, 18/6 Sdae NF 11

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal fwd								41 23	21 53	
April	PP	33		164, 24/4/18, 110 Co	17 03				57 20	36 50	
		33			17 03						
May	PP	34 10		361, 22/5/18, 110 Co	17 03				74 27	51 50	
		34 10			17 03						
June	PP.	33		507, 20/6/18, 110 Co	17 03				90 24	66 50	
		33			17 03						
July	PP	34 10		758, 17/7/18, 110 Co	17 03				107 31	81 50	
		34 10			17 03						
Aug	P.P.	~~34~~ 10							141 41	96 50	
		34 10			Cl 38 93						
Sep.	✓	33.		M. 1279 26/9/18. ✓	38 93. R				135 48	111 50	×
		33.			38 93.						
Oct	✓	34 10		" 1386 18.10.18 55 Dis 110 Co	17 03				152 55	126 50	
		34 10			17 03						
Nov Dec	✓	67 10		" 1584. 110 Co 15.11.18.	17 03.						
1919				DN 141. ar 948 15/5. C.F 6.	17 03						×
Jan	✓	34 10		1810. 110 Co 17.12.18	26 77				192 92	171 50	
		101 20			60 83						
~~Feb~~	✓	30 80		2022. 110 Co 17.1.19	17 03						
Mch.	✓	34 10		2191. 110 Co 17.2.19	17 03						
				2457 110 Co 14.3.19	17 03				206 73	208 50	
		64 90			51 09						
apl	✓	33 00		97. 110 Co 17.4.19	17 03						
				253. 110 Co 16.5.19	24 33.						
May	✓	34 10							232 47		
		67 10			41 36						

COMPILED BY Dunan

CHECKED BY Woodhall

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
									232 47		
June	P. P.	33		AR 4753. 14/6 BD.	14 60						
	Int On Def Pay	8 63		" 4966 18/6 BZ.	53 53						
		41 63			68 13				205 97		

O.B.S. Examd. 7/11 Chirgy

Private. Charles Court Crawford. Reg. No.220458.

Born. May. 30th. 1879. New York.
Died. December. 5th. 1957. Bremerton. Washington.
Funeral Service held, December. 10th. 1957 at,
Miller-Reynolds Chapel. Bremerton.
Full Military Rites, Ivy Green Cemetery, Bremerton.

O.G. 8
S.G. 31
D.A. T

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2204583

2 Rank. Pte

3. Name. Crawford Charles Court

4. Unit. C F C

5 Date of Discharge 14/7/19 Place Vancouver

6 Reason for Discharge Deceased 5-12-57

DEMOBILIZATION

9-1-18

7. Authority. No 11 dd DO 198 July 17-19

8. Proposed Residence after Discharge c/o P O Seattle Wash U S A

6.7.6.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 39

C C Crawford
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date JUL 14 1919

Dispersal Station "A" Military District No. 11

V H Madeau Capt
Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form Q.C.S. 2.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B
Checked by N. [illegible]
Date 1-7-19

AUDITOR RMy | PAYMASTER

OLYMPIC 7.7.19

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. | REGT. No. 2204583 | RANK Pte | NAME (IN FULL) CRAWFORD C.C. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
English L.P.C. adj	30.6.19	

ORIGINAL UNIT C.E.F. C.F.C. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

CRAWFORD C.C.
SCANDANAVIAN AMERICAN BANK
Seattle, WASH.

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE M.D. 11 | DATE 14.7.19 | REASON W.S.A. | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							205	97	205	97																								205	97	
30.6.19																																			
22.7.19	22	1.10	24	20	35	00			59	20	boat train ck						H 87		500		325	30									335	17	70	00			other cr $335 = clothing
																											8	80			8	80	78	80	Clear		" chgs 8.80 adj 8d unpaid

3

Hastings Park, Vancouver, B.C.

JUL 14 1919

This is to certify that the physical condition of the within named man has not changed since date of Overseas Board herewith attached.

Capt. C.A.M.C.

No. 220453 Rank PTE Surname CRAWFORD.

(Given name in full) FRANK CHAS. COURT

Unit or Corps C.F.C. Birthplace VICTORIA B.C.

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

1. GENERAL DESCRIPTION:

Physique good Weight 135 lbs. Height 5 ft. 5 in. Colour of Eyes blue

Nutrition good

Pulse 70

Condition of arteries good

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

none

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 yes Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System yes

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.

~~yes~~ Tonsillitis
V.D.C.

(If space is insufficient, continue on back of form.)

[OVER]

3

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. 2204583 Rank PTE Surname CRAWFORD

(Given name in full) FRANK CHAS. COURT

Unit or Corps C.F.C. Birthplace VICTORIA B.C.

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

1. GENERAL DESCRIPTION:

Physique good Weight 135 lbs. Height 5 ft. 5 in. Colour of Eyes blue

Nutrition good

Pulse 70

Condition of arteries good

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

none

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 yes Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System yes

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.

~~age~~ Tonsillitis
V.D.C.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Timmy Dale (Overseas)

Date 11/6/19 Signed [illegible] M.O.

Capt C Corps

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 H C Crawford

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... 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 .....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]