No. 3

DUPLICATE No. 3

1st Depot Bn., E.O. Regt., C.E.F.

M. D. Depot Battalion Regiment

Regtl. No. 3060739

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1.)

1. Surname: Crawford
2. Christian name: John Wood
3. Present address: Madoc, Ont.
4. Military Service Act letter and number: PC 918115
5. Date of birth: Feby. 18th, 1894.
6. Place of birth (town, township or county and country): Madoc, Ont.
7. Married, widower or single: Single
8. Religion: C. of E.
9. Trade or calling: Machinist and Auto Repairer
10. Name of next-of-kin: Mrs. Sarah Crawford, ~~Ont.~~
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: Madoc, Ont.
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None
15. Medical Examination under Military Service Act:—

(a) Place: Belleville, Ont. (b) Date: Oct. 17th, 1917. (c) Category: A-2

DECLARATION OF RECRUIT

I, John Crawford Wood, do solemnly declare that the above particulars refer to me, and are true.

John Wood Crawford (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 23 yrs. 8 mths.

Height: 5 ft. 4½ ins.

Chest measurement: fully expanded 35 ins.; range of expansion 3 ins.

Complexion: Dark

Eyes: Brown

Hair: Black

Distinctive marks, and marks indicating congential peculiarities or previous disease.

None

Weight 123 lbs.

R. Smart Lt. Col.

O.C. 1st Depot Bn., E.O. Regt., C.E.F.

O. C. Depot Btln.

Regt.

Place: Barriefield, Ont. Date: August 1st, 1918.

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

3-2-19

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.....

Compulsory Stoppages.....

Casualty Forms.....1.....

Proceedings on discharge.....1.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....1.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....1.....

ATB 122 — 1

MTW 171 — 1

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name CRAWFORD. JOHN

Regt. No 3060739 Rank PTE

Corps 1st DEPOT BN. EOR

43690

C

DEMOB'N

H

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

M. F. W. 54. (A. F. B. 195.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Bn., E O. Regt, C. E. F.

Regimental No. 3060739 Rank Pte Name Crawford John Wood

Enlisted (a) 1/8/18 Terms of Service (a) C.E.F. Service reckons from (a) 1/8/18

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) Machinist & auto Repairer

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				
		Discharged Bn.O. 365 ON DEMOBILIZATION.	L. Blakes. Lieut. Capt. & Adjt. 1st Depot Bn., E.O. Regt., C.E.F.		

(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				

876 3060734

M.S.A. 15.

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 John
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule PC 918115
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Madoc, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 17 day of Oct. 1917, by the undersigned medical board sitting at Belleville

5. Age as stated 23 Years 8 Months. 6. Apparent age 23 Years Months
7. Height 5 Feet 4 1/2 Inches. 8. Weight 123 Pounds.
9. Chest measurement { Minimum 32 Ins. / Maximum 35 Ins. } 10. Complexion dark { Eyes brown / Hair black }
11. Physical development good { Good / Fair / Poor } 12. Smallpox marks 0
13. Number of vaccination marks { Right arm 0 / Left arm 1 } 14. When vaccinated last young
15. Distinctive marks and marks indicating congenital peculiarities or previous disease none
16. Slight defects but not sufficient to cause rejection slight varicocele

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 A2

A. E. MacCall Major President.
R. W. Bennett Capt. Member. W. J. Johnson Capt. Member.

Signature of Man Arthur Langford

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

Joined 1st day of August 1918 at Barriefield Camp

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Bn., E. O. Regt., C. E. F.			
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Barriefield	Aug 1/18.		Att. [illegible]

EX. CERT. Ckd. by [illegible] FEB 4 1918

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.

Surname Crawford Christian Name J. Jess

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				

M. F. W. 71.—500M.—5-16.
1772—39—961.

NAME CRAWFORD, ~~James~~ Jing Wood

REGIMENTAL NO. 3060739 RANK Pte.

ENLISTED AT PROMOTIONS, &c. AND DATE

DATE 1-8-18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Mrs Sarah Crawford, RELATIONSHIP Mother

ADDRESS OF Madoc, Ont.

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II, D. O.		REMARKS IF IN HOSPITAL, NOTE NAME &c.
	No	Date	

(1)

Procedure on discharging from the C.E.F., Soldiers called up under the Military Service Act, 1917, who, on Demobilization, were on unexpired Leave of Absence without pay.

P.C. 2865 of Nov. 20, 1918.

THIS FORM MUST BE RETURNED INTACT AND NO PART DESTROYED.

BELLEVILLE

DEC 17 1918 19....

TO:—

Regimental No. 3060739

Pte. John W. Crawford

Madoc, Ont

Regimental No. 3060739

Serial No. PC.918115

1. You are directed to report on or before JAN 7 1919 for the purpose of being discharged from the Canadian Expeditionary Force.

2. This will be carried out by your reporting in person to your Depot at BELLEVILLE. Transportation to the Depot is enclosed herewith, and return transportation will be furnished to you after your discharge.

3. OR, as an alternative, you may execute, before a Notary Public, Commissioner of Oaths or Justice of the Peace, the release hereunder and forward same, on or before the said date, in the envelope enclosed for that purpose, together with the unused Transportation Certificate. A receipt for the release will be returned to you and will be equivalent to a Certificate of Discharge.

4. Should you fail to report in person or forward the release mentioned, within the time aforesaid, you will be declared a deserter and be subject to Military Law.

L. Hader Lieut.

~~Capt.~~ & Adjt. Rank

1st Depot Bn., E.O. Regt., C.E.F.

for the O.C. .....Depot Bn. .....Regt.

RELEASE.

Know all men by these presents that I, the undersigned, having sustained no disability from injuries received or illness contracted on Active Service or Duty, do hereby release, discharge and forever acquit His Majesty the King, in the right of his Government of Canada, of and from all rights of compensation, claims and demands which I have or may have for or in respect of any disability arising from injuries received or illness contracted on Active Service or on duty in or connected with the Military Forces of Canada.

WITNESS my hand and seal this 23rd day of December 1918.

Signed, sealed and delivered in the presence of

Denis Gillin

Notary Public, Commissioner for Oaths or Justice of the Peace.

John W. Crawford

Regt. No. 3060739

Unit 1st Depot Bn

M.F.B. 218B (Demob.)
1077-D.P.-40M-11-18.
1772-39-173.

Received 29-1-19

M.F.B.
(Den

NOT TO BE FILLED IN BY THE SOLDIER.

Receipt for M.F.B. 218B (Demob.)

Having received release, pursuant to Notice of Order to report for discharge, Number 3060739

Name CRAWFORD, John Wood of the First Depot

Battalion Eastern Ontario Regiment is hereby struck off the strength of the Canadian Expeditionary Force.

R W Smart Lt.-Col.
Rank
O. C. 1st Depot Bn., E. O. Regt., C. E. F.

Authority Part II. Order

For the O.C. ..... Depot Bn. ..... Regt.

No. 365 of 31/2/18.

M.F.B. 218B (Demob.) DATED AT Belleville, Ontario this First day of January 191 9.

LIST OF DISCHARGE DOCUMENTS.

Particulars of Recruit	M.F.W. 133
Field Conduct Sheet	M.F.W. 178 or A.F.B. 122
Casualty Form	M.F.W. 54 or A.F.B. 103
Last Pay Certificate	M.F.W. 44
Certificate that Missing Documents are Unobtainable.	
Medical History Sheet	M.F.B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227
Dental History Sheet	M.F.B. 465
Medical Report	M.F.W. 129
Regimental Conduct Sheet	M.F.B. 263
Company Conduct Sheet	M.F.B. 263a

NOT TO BE FILLED IN BY THE SOLDIER.

Receipt for M.F.B. 218B (Demob.)

Having received release, pursuant to Notice of Order to report for discharge, Number 3060739

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R W Smart Lt.-Col.
Rank
O. C. 1st Depot Bn., E. O. Regt., C. E. F.

For the O.C. ..... Depot Bn. ..... Regt.

Authority Part II. Order

No. 365 of 31/2/18.

M.F.B. 218B (Demob.)

DATED AT Belleville, Ontario this First day of January 191 9.

38/-/-

Dec.1918.

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. 3060739 Rank Pte Name Crawford, J.W.

Corps 1st Depot Bn., E.O. Regt., C.E.F. who was* discharged

On Dec.30th 1918., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Dec.1st 1918., to Dec.30th 1918., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month		
Advances by Cheques } No.			Regt'l. Pay days at $ c.		
Advances by Cheques } No.			Field Allow. days at $ c.		
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No.			Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total			Total		

*Give particulars.

A monthly stoppage of $ nil (†) has (‡) been paid on account of Assigned Pay for the month of 191... and Sep'n Allce. for month of 191... (to) Assignee

(Address) On Indefinite Leave.

(†) 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.

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

REMARKS:—

State (1) date of enlistment Aug.1st.1918.

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

(3) cause of discharge authority R.O.1357

(4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date Dec.31st.1918.

Place Belleville Ont.

J M Thomson Capt.
Paymaster.

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

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

K

No. .....

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 188 189 and 191, Financial Instructions, C.E.F., 1916).

Supersedes No. ..... Rank ..... Name .....

Corps 1st Depot Bn. R.C.R. O.E.F. who was ..... Discharged

On ..... 191.. No. .....

"Insert "Discharged" or "Transferred"

The following is a statement of the accounts of the above named from ..... 191.. to ..... 191.. the date of transfer or discharge.

Dr.		Cr.	
Bal. Due from previous month		Balance Cr. from previous month	
Advances: No.		Regt'l Pay ..... days at $	
Deposits: No.		Field Allow. ..... days at $	
Assigned Pay and Sep'n Allow. No.		Separation Allowance (Monthly)	
Other charges		Other Allowances	
Payment on transfer or discharge No.		Other Credits	
Balance Cr. to be paid by this new unit		Bal. Dr. (to be deducted by new unit)	
Total		Total	

"Give particulars.

A monthly stoppage of $ ..... (1) has ..... (1) been paid on account of Assigned

Pay for the month of ..... 191.. (2a) Arrears

and Sep'n Allow. for month of ..... 191..

(2b) Arrears

Gr. Indefinite Leave

(1) Insert amount to be assigned, whether it has been paid or not.
(2a) Line "Not" if amount has not been paid for period of account.

On Transfer of an Officer.

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

NOTES.

(1) Date of enlistment ..... 191..

(2) If married and if Separation Allowance Card has been submitted ..... 20.

(3) Cause of discharge ..... authority .....

(4) Individuality for item 5c .....

N.B. Separation Allowance and Assigned Pay Card and Under Card (M.E.W. 71) are to be enclosed with original last Pay Certificate on transfer.

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

Date ..... 191..

Place .....

Paymaster.

N.B. For purpose of transfer, this form is to be made out in triplicate. Original copy to paymaster of new unit. Duplicate to Director of Accounts, Ottawa for transmission to Paymaster, the pay list at the end of the month, and triplicate for retention as a record.

For purpose of discharge it is to be made out in duplicate. Original copy to accompany discharge papers, duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man is discharged or unfit to bring home Pay Certificate Pay, Pay Certificate will be made out in quadruplicate. The original and one Pay Certificate will be retained with other documents to Paymaster Pay Directorate Pay and triplicate with his discharge documents.

M.E.W. 44.