

12

M. D.

Depot Battalion

1st Depot Battn. Sask. Regt.

Regiment

Regtl. No.

259996

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

ORIGINAL

(Class 1.)

1. Surname Cudmore
 2. Christian name Cecil Richard
 3. Present address Box #1 Manor Sask.
 4. Military Service Act letter and number 6 453432
 5. Date of birth 27th Oct 1894
 6. Place of birth Crystal City Man
 (town, township or county and country)
 7. Married, widower or single Single
 8. Religion Holiness movement
 9. Trade or calling Farmer
 10. Name of next-of-kin Mrs Harriette Cudmore
 11. Relationship of next-of-kin mother
 12. Address of next-of-kin Manor Sask
 13. Whether at present a member of the Active Militia No
 14. Particulars of previous military or naval service, if any nil
 15. Medical Examination under Military Service Act:—
 (a) Place Weyburn (b) Date 30th Nov/18 (c) Category A2

DECLARATION OF RECRUIT

I, Cecil Richard Cudmore, do solemnly declare that the above particulars refer to me, and are true.

Cecil Richard Cudmore (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 23 yrs. 1 mths.
 Height 5 ft. 10 ins.
 Chest } fully expanded 39 ins.
 measurement } range of expansion 3 ins.
 Complexion Medium
 Eyes Grey
 Hair Light Brown

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

T. J. Brimie Major
for O. C. Depot Btl.
Amr Regt.
 Place Regina Sask. Date May 7th/19

Regt. No.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

ORIGINAL

Class

1. Surname	
2. Christian name	
3. Present address	
4. Military service and number	
5. Date of birth	
6. Place of birth	
7. Marital status or single	
8. Religion	
9. Trade or profession	
10. Name of next of kin	
11. Relationship of next of kin	
12. Address of next of kin	
13. Whether at present a member of the Indian Militia	
14. Particulars of previous military or naval service, if any	
15. Medical Examination under Military Service Act	
(a) Place	
(b) Date	
(c) Category	

DECLARATION OF RECRUIT

I, the undersigned, do hereby declare that the above particulars are true and correct.

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Age	
Height	
Weight	
Measurements	
Complexion	
Build	
Hair	
Distinctive marks, and marks indicating congenital peculiarities or previous disease	

Report Made

By

Date

Place

M. A. No.

Page

REGIMENTAL DOCUMENTS

NAME CUDMORE CECIL RICHARD REGT. NO. 254996 UNIT _____

H. Q. FILE NO. _____

CONTENTS

14-7-19

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

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)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

CD3

Passcard

DEATH

Category

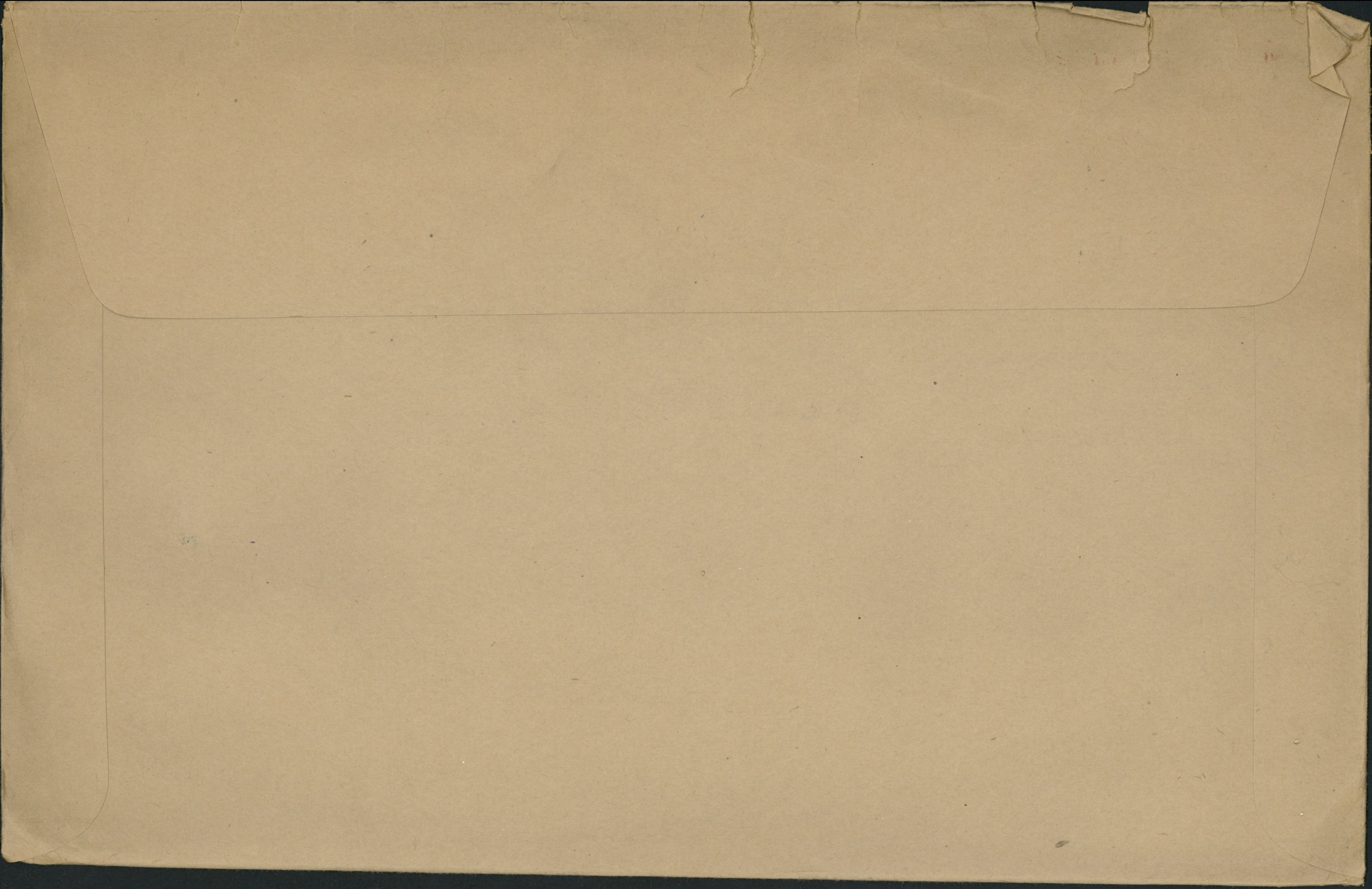
47607

DISCHARGE

Category

Demol

DESERTION



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. 1st Depot Battn. Sask. Regt.

Regimental No. 259996 Rank Private Name Cecil Richard Cadmore

Enlisted (a) 7 May 18 Terms of Service (a) DURATION OF WAR Service reckons from (a) 7 May 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) Army

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				
		Embarked Disembarked	Montreal Liverpool	28.7.18 15.8.18	
AUG 22 1918		Taken on the Strength of the 15th Can Res Battn. BRAMSHOTT.		5 AUG 1918	PART II. DAILY ORDERS No. 234
SEP 19 1918	D.C. 15th RES. BATT.	STRUCK OFF STRENGTH TO <u>CM 90</u> <u>Seaford</u>	BRAMSHOTT	SEP 16 1918	PART II. DAILY ORDERS No. 262 <u>C. W. Hollister</u> 15th RESERVE BATTALION.
24.9.18	Com. C.M.G.D.	Taken on Strength,	SEAFORD.	17.9.18	Depot Order Pt. II No. 256
10.6.19	C.M.G.D.	S.O.S. to <u>CEZ in Canada</u>	SEAFORD	7.6.19	D.O. PT. II. No. 135 <u>Edmund</u> Lieut. ASST. ADJT. C.M.G.D.
		Embd <u>S'hamton-Aq'la-14</u> 6 '19 Debkd <u>Halifax</u> 20 6 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.]

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 259996 (Rank) Private
 Name (in full) Cecil Richard Gudmore enlisted in
 the 1st. Depot Battalion Sask. Regt.
 CANADIAN EXPEDITIONARY FORCE at Regina, Sask. on the 7th.
 day of May 19 18.

HE served in C. H. G. D. ENGLAND
 Demobilization.
 and is now discharged from the service by reason of Medical Unfitness.

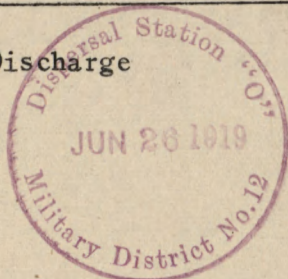
THE DESCRIPTION OF THIS SOLDIER on the Date below is as follows:

Age 24 Years
 Height Me 5' 10"
 Complexion Medium
 Eyes Grey
 Hair Light Brown

Marks or Scars Mole right upper arm

Signature of Soldier.

Date of Discharge



Issuing Officer.

Rank MAJOR

Date 19....

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.

U.S. ARMY EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY THAT
[Name] [Rank] [Regiment]
[Service Number] [Date]
[Location]

has been honorably discharged
from the service of the
United States Army
on the [Date] at [Location]

and is entitled to the
benefits of the
United States Army
[Signature]

[Signature]
[Rank] [Regiment]
[Service Number] [Date]
[Location]

[Signature]
[Rank] [Regiment]
[Service Number] [Date]
[Location]

[Signature]
[Rank] [Regiment]
[Service Number] [Date]
[Location]

ORIGINAL DEC 4 - 1917

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 Cudmore Christian name Cecil Richard

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 6453432

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) Cannington Manor, Sask.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 30 day of Nov 1917, by the undersigned medical board sitting at Weyburn, Sask.

5. Age as stated 23 Years 1 Months. 6. Apparent age 23 Years 1 Months

7. Height 5 Feet 10 Inches. 8. Weight 160 Pounds.

9. Chest measurement { Minimum 36 Ins. Maximum 39 Ins. 10. Complexion Medium { Eyes Grey Hair Brown

11. Physical development Good { Good Fair Poor 12. Smallpox marks ml

13. Number of vaccination marks { Right arm 1 Left arm 1 14. When vaccinated last Childhood

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

16. Slight defects but not sufficient to cause rejection Nil

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 A II R.D. 20 20 LD 20 Hearing R. 15 L 15

W. J. Whitham President. H. E. Eggleston Member. A. C. Allen Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
8/5/18	-	<u>Shank</u> M.O.	8/5/18	+	<u>Shank</u> M.O.
12/7/18	+	M.O.	22/5/18	+	<u>Shank</u> M.O.
		M.O.	31/5/18	+	<u>Shank</u> M.O.

Joined 7 day of May 1918 at Regina

Corps	Reg'tl Number	Habits	Date
<u>1st Depot Bn</u>	<u>259996</u>		<u>7/5/18</u>
<u>10th Canadian Res. Bn</u>			<u>15 AUG 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

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.

Signature of Man Cecil Richard Cudmore

No. 8

Ckd. to Schedule by

Surname *Cudmore* Christian Name *Cecil Richard*

[illegible]

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

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. 259996 Rank Pte Surname CUDMORE
(Given name in full) Cecil Richard
Unit or Corps PMWD Birthplace Crystal City, Mass
(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

I. GENERAL DESCRIPTION:

Physique Good Weight 200⁰⁰ lbs. Height 5 ft. 10 in. Colour of Eyes Green
Nutrition Good
Pulse 72
Condition of arteries Normal
Vision Rt. no Left no
Hearing (conversational voice) Rt. 2.1 ft.
Left 2 ft.

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

Mole R. W. Arm

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 No Cardio-Vascular System No
Special Senses No Integumentary System No Respiratory System No
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.

No

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Belmont.....(Overseas)

Date 14.5.19..... Signed [Signature].....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 X. L. R. Badmore.....

(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]

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

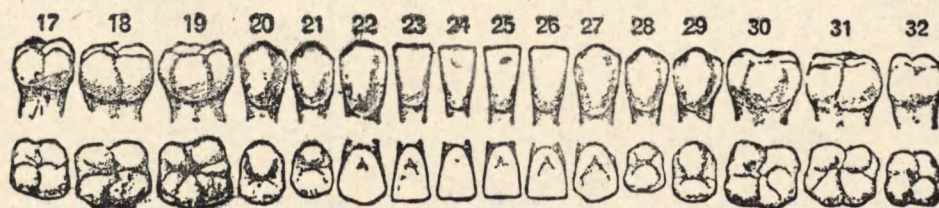
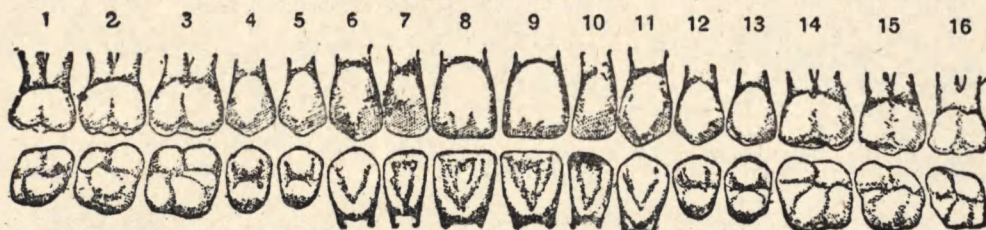
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) CUDMORE C. R.

REGIMENT C. M. G. D. RANK PTE. No. 269996

Date of Examination in England 23 MAY 1919 Date of Examination in France _____



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3

2. EXTRACTIONS _____

3. CROWNS _____

4. DENTURES _____

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

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

(c) In France

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

Signature of Dental Officer

E. W. M. Denton Capt.

NAME.

*Cudmore,
Cecil, Richard.*

RANK.

Pte

REC. FILE.

May 7. 1918

No.

259996.

CORPS.

*1st
Spo Bn.*D.O. Part II No. *126.*

H. Q. FILE.

ENLISTMENT, PLACE.

Regina Sask.

DATE.

May 7th. 1918.

BIRTH

DISCHARGE, PLACE,

Canada Crystal City.

DATE.

Oct. 27th. 1894.

REASON.

*man.**SD 26-6-19 Demb
SD 178 of 27-6-19
120 R*

ADDRESS ON DISCHARGE.

DOCUMENTS.

RELATIONSHIP

mother.

NEXT OF KIN

ADDRESS

*Cudmore Mrs Harriet
manor. Sask.**D/S. 29-7-18 1351
6**12 R/b. 20-6-19 351
165
Pte*

CHARGED OUT

RETURNED

CHARGED OUT

RETURNED

TO

DATE

BY

RECEIVED
BY

DATE

TO

DATE

BY

RECEIVED
BY

DATE

Norm
Haw
Number

259994

Rank

PLT
B

Surname

CUDMORE

Christian Name

Cecil Richard

Units

S.R.

Theatre of War

England

Date of Service

15-8-18

Remarks

Latest Address

~~Manor Sash~~
(~~Y.P.O.~~) Parkman
Sash

Roll No.

A page 4165-

200m.-6-21.M.

* DUE TO SERVICE
* NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

MIT

IN CATEGORY

INVALID

WHERE TO)

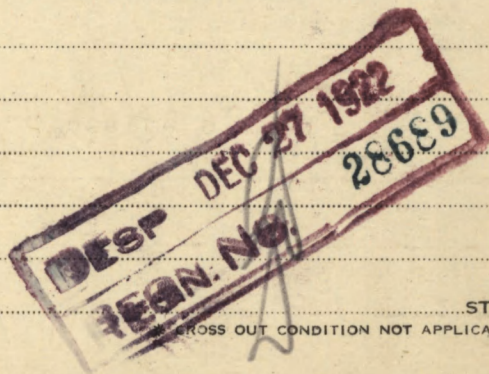
CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

CROSS OUT CONDITION NOT APPLICABLE.



(OVER

Rank _____ Name *CUDMORE CECIL RICHARD* Reg'l No. *25-9996*
 Unit *106th Aft Sash Regt* If in perm. Corps, }
 What Unit? } Married or Single *Single*
 Place and Date of Enlistment *Regina May 7/18* Place of Birth *Crystal City Man*
 Name and Address, Next-of-Kin *Mrs Harriette Cudmore*
Manor Sash Relationship *Mother*

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

Relationship

N/E. R.B. No. *13157*
 File R.L. *OP CAN*
 Category

Discharge, Date and Place

Reason

Character

H. W. V., Ld.-9546-16.

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.				
		<i>Arrived in England</i>	<i>15 AUG 1918</i>	<i>AMT</i>	<i>Cassandra</i>
<i>22.8.18</i>	<i>15 Res</i>	<i>T.O.S FROM Canada</i>	<i>Bramshott</i>	<i>16, 8 13</i>	<i>Pt.II O 234</i>
<i>19.9.18</i>	<i>"</i>	<i>SOS to C.M.G.C. Seaford Pt</i>	<i>"</i>	<i>16.9.18</i>	<i>Pt 262 & 256/24 9.15</i>
		<i>85-0-196</i>		<i>14-6-19</i>	
<i>16.6.19</i>	<i>CMCD</i>	<i>SOS to Canada</i>	<i>Pt Seafd</i>	<i>14.6.19</i>	<i>Pt II. 139.</i>

Man

[illegible]

[illegible]

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)



pa-0

1. No.	259996		
2. Rank.	Private		
3. Name.	Cudmore, Cecil Richard		
4. Unit.			
5. Date of Discharge	REGINA SASK. JUN 26 1919		Place
6. Reason for Discharge	Demobilization		
7. Authority.	R.O. 1420 (D.D.O. 178 Para 10.43)		
8. Proposed Residence after Discharge	Manor, Sask.		
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.? <u>b.R. Cudmore</u> Signature of Soldier.		
10.	CONFIRMATION. The discharge of the above named man is hereby confirmed. Place <u>Manor, Sask.</u> Date <u>JUN 26 1919</u> <u>[Signature]</u> Signature <u>MAJOR</u> (O. C. Discharging Unit.)		

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 (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.F.B. 103).
14. War Service Grantee (Form M.F.W. 2595).
15. Salary Documents.

Group 26
 Checked by No. 26
 Date 15 June 1919

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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 *Basil Richard* 2. Surname *Cudmore*
3. Rank *Plt.* 4. Original Unit *1st Bn. 1st Sask. Bn.* 5. Reg. No. *259996*
6. Address, in full, to which future payments of gratuity are to be forwarded
Manor Sask. Canada
7. Date of enlistment in the C.E.F. *7th May 1918.*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *None*
9. Relationship of such dependent *None*
10. Address, in full, of such dependent *None*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *NO*
- ~~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
Canada 2 months
England 10 months.
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*

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~~

Demobilization

JUN 26 1919

(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.

~~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: C. R. Ludmore

Place of Residence: Manor Sask. Canada

Declared before me at: Shepperton Surrey England.

This 20th day of May 1919

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.

H. J. Phelps Micklethay

2nd. i/c Canadian M.G. Depot.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.