## PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

ORIGINAL

(Class)							
1. Surname Cadmore							
2. Christian name Cevil Richard							
3. Present address Box#1 manon Sash							
4. Military Service Act letter and number. 6 453432							
5. Date of birth 37th Oct 1894.							
6. Place of birth							
7. Married, widower or single							
8. Religion. Holereal movement							
9. Trade or calling Jarren							
10. Name of next-of-kin. My Harriette Gidnore							
11. Relationship of next-of-kin							
12. Address of next-of-kin want, fch							
13. Whether at present a member of the Active Militia.							
14. Particulars of previous military or naval service, if any							
15. Medical Examination under Military Service Act:—							
(a) Place Weyburn (b) Date 30 th hry/ 5(c) Category a 2							
DECLARATION OF RECRUIT  I, Cecil Richard Cudment, do solemnly declare that the above particulars refer to me, and are true.  Signature of Recruit)							
DESCRIPTION ON CALLING UP							
Apparent age 3 yrs mths.  Height 5 ft 10- ins.  Chest fully expanded 39 ins.  range of expansion 3 ins.  Complexion Marks indicating congential peculiarities or previous disease.							
Hair OO OF War.							
Place Reguardash Date May The Regt.  M. F. W. 133. 500 M8-17. 1772 - 39-1158.							

CAN

## PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT. 1917

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16. Modical Examinación audica Ablugas Service Act

## DECEARATION OF RECRUIT

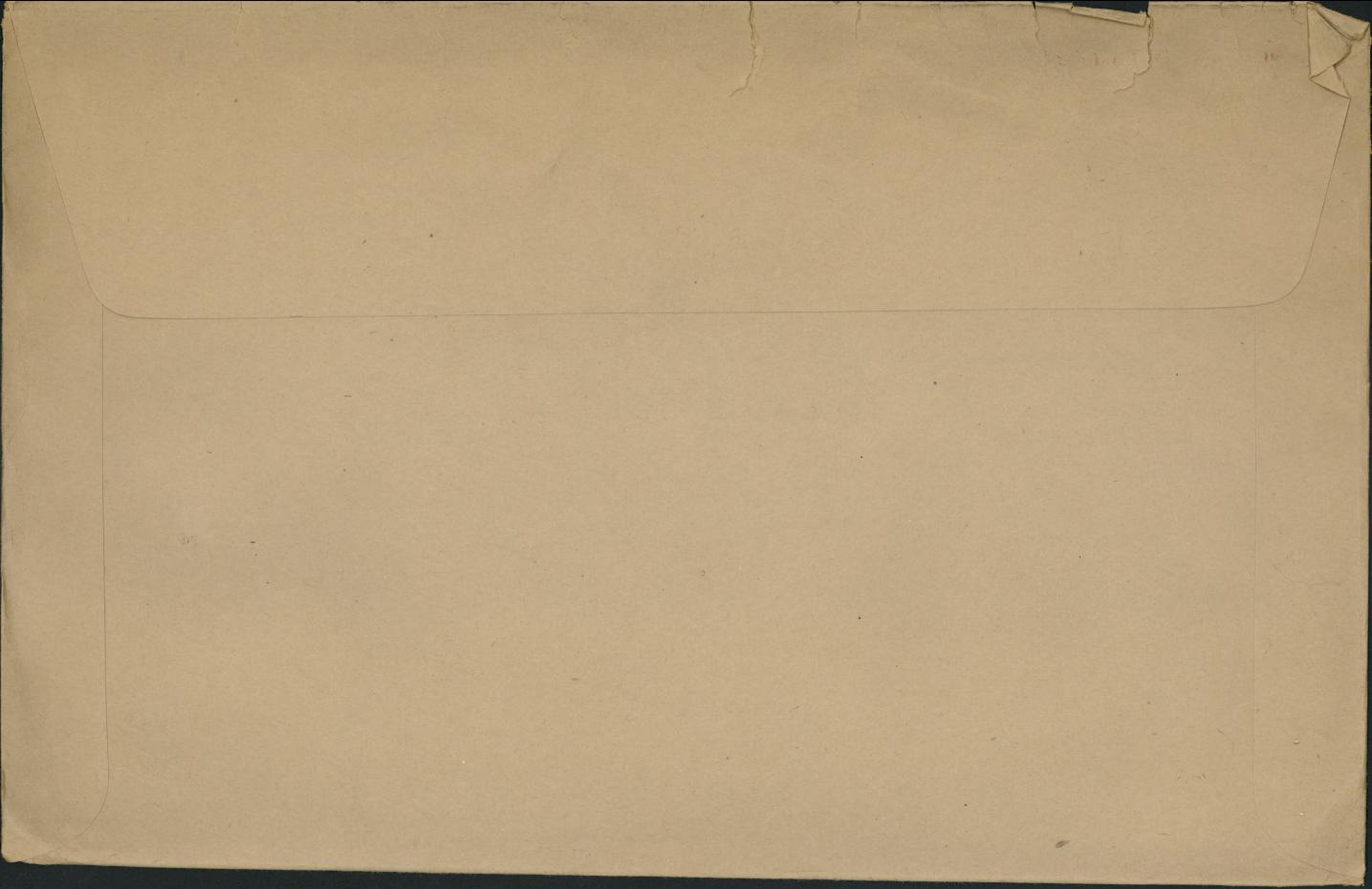
Regiment

## DESCRIPTION ON CALLING UP

s, dipliared verselled

REGIMENTAL DOCUMENTS

NAME CUDINORE CECIL RICHARD RIGT. NO. 254996 UNIT H. Q. FILE NO. CONTENTS 14-7-19 M. F. W. 2505 DATE RECEIVED TO WHOM FORWARDED DATE FORWARDED NON-EFFECTIVE BY REFERENCE DEATH ATTESTATION PAPER (M.F.W. 23, 133, or 51) CASUALTY FORM (M.F.W. 54 or A.F.B. 103) Category 47907 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) DISCHARGE DENTAL HISTORY SHEET (M.F.B. 465) Category 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) DESERTION 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)



## Casualty Form—Active Service.

		2 4 (	Unit, Regiment or Corps. IST De		o D.			
			7996 Rank Krivale Nam  Nam  Nam  Nam  Nam  Nam  Nam  Nam	ne level	Me	Dand Judmore		
		promotion to			N	rical position on		
	pre	sent rank	to lance rank	nt }	hely	of N. C. Os.		
	Extende	ed	Re-engaged	Qualification (b	)	ruei		
		Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks taken from Army Form B. 213,		
	Date	From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Army Form A. 36, or other official documents		
			Embarked Disembarked	Montreal Liverpool	38.7.18 15.8.18			
UG 2 2	21918	Taken o	n the Strength of the 18th Ca			918 PART II. PAILY ORDERS No. 234		
SEP 1	9 1918	p.c. 15th RES. Bil.	STRUCK OFF STRENGTH TO Em 9 D  Leaford	BRAMSHOTTS	EP 1 619	18 262 262 262 15 18 RESERVE BATTALION.		
24.9	1.18	Com.	Taken on Strength,	SEAFORD.	17.9.18	Depot Order Pt. II No. 250		
1.190	.M.G.I		s. to CEF in Canala	SEAFORD	26-19	ASST. ADJT. C.M.G.D.		
				6 19				

<sup>(</sup>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 re-		THE TRANSPORT	Remarks		
Date	From whom received	ported on Army Form B. 213, Army Form A 36; or in other official documents. The authority to be quoted in each case	Place	Date	taken from A. 36, or other official documents		
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		REGINA	DISPERS	AL AR	EA "O"		
		REGINA T.O.S. R.O.	1420(10	0.178	Para 10.43		
		S.O.S. R.O.					
		MEDICALLY UNFIT	lim	rour	ande.		
	M. T. T. T. S.			your	LIEUT."		

## CANADIAN EXPEDITIONARY FORCE DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2599	96 (Rank) Private						
Name (in full) Cecil Richard Cudmore enlisted in							
the lst. Depot Battalion Sask	. Regt.						
CANADIAN EXPEDITIONARY FORCE atRegin	a, Sask. on the 7th.						
day of 19 18.							
HE served in	FNGLAND						
	Demobilization.						
and is now discharged from the service b	Medical Unfituess.						
THE DESCRIPTION OF THIS SOLDIER on t	he Date below is as follows:						
Age 24 Years	Marks or Scars						
Height Me 5' 10"	Mole right upper arm						
Complexion Medium							
Eyes Grey							
Hair Light Brown							
S: (	All 31 . M.						
Signature of Soldier.	M. Machina						
Date of Discharge	Issuing Officer.						
(ST UIN 26 1019							
JUN 26 1019  District No.	RankMAJOR						
District D	Date19						

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.

TOTAL TOTAL STATE " I substitute the second . . .

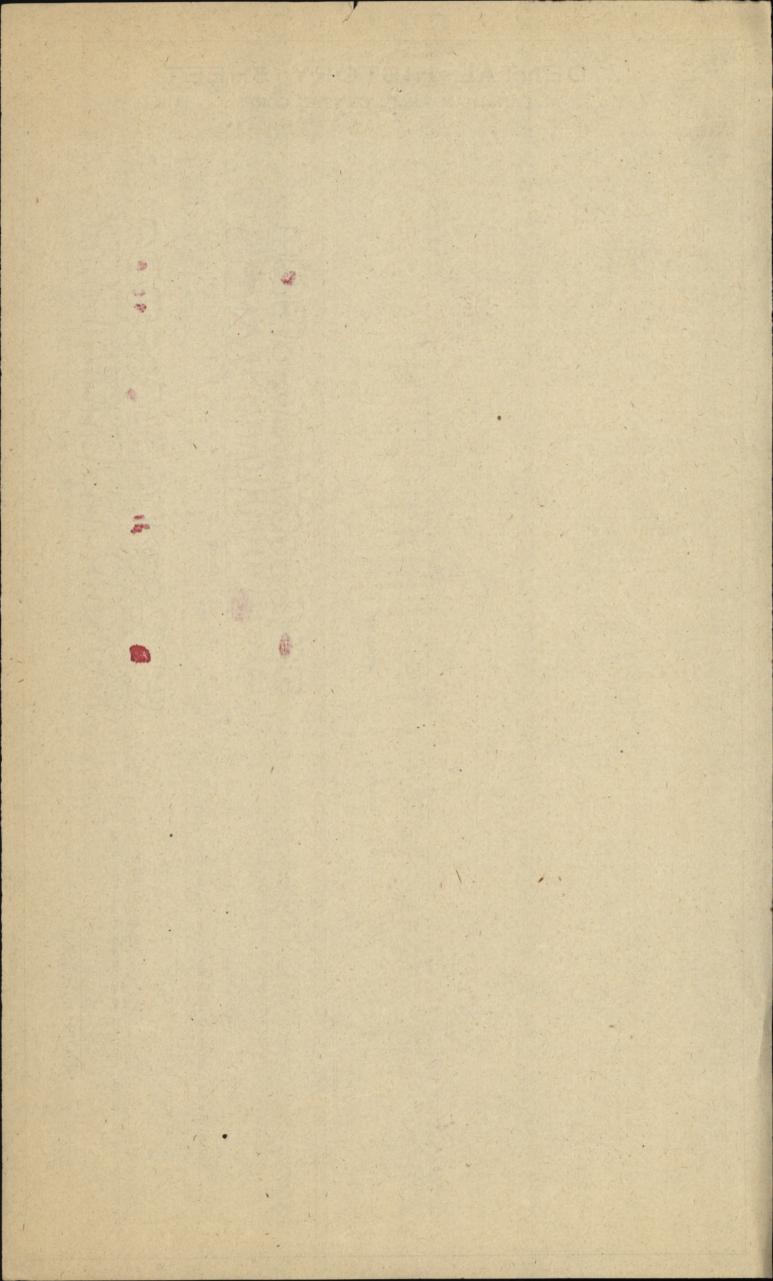
CORPS



### INSTRUCTIONS

- 1. On examination the condition of patient's mouth to be marked on diagram in red ink.
- 2. On first line of report record of same to be made in red ink. Only such entries to be made on this sheet as will show:
  - 1. Condition on examination (in red).
  - 2. Condition on leaving Canada.
  - 3. Condition on discharge.

76		Dat	te	ılgam	porary Filling G. P.	ent	itment itrescent Pulp	t Filling	Cap	italization	rhœa	thetic Porcela	racting	DE	NTU	RES	d Clasp	1 Filling	CRO	OWNS	ige Work	OPERATOR	tary District	REMARKS
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R	Condition on first Examination	Juli	423	36	8							2/10.	16.10						30.			Capt Schwieling	12.	Oav /15.18.31.
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# ORIGINAL DEC 4-1917 MILITARY SERVICE ACT, 1917. MEDICAL HISTORY SHEET.

iMPORTANT.—If the margor comparison of a report for servi- medical history sheet (which will be on application to any Postmaster i master to a Registrar or Deputy R	a's name does not appear upo te, or, although having made to handed to him) must be atta in Canada, or be sent by him agistrar under the Military S	on the schedule of men report one, he does not know the ached by him to a report for after he has noted upon it to service Act. In any event to	ting for service, of e number, he will r service or claim ne number on the he duplicate medi	or if he has not mede an application be instructed that the copy of this for exemption which he may make receipt he obtained from the Post- ical history sheet will be sent by the forward it direct to a Pegistrar or	
1110/0	00 04 0	/	ecil 1	formard it direct to a negistrar or	
Surname		aption according to P	ostmaster's	6453432	7
3. Consecutive number on		orting for service (if	he appears		de
4. Address (including street and number, if any)			n. S	Park.	h
	/	Control of the Contro	ve named ma	an as ascertained by the	7
medical examination		day of	ov S	1917, by the	9
92	al board sitting at  YearsMont	1	23		7
5	eet / Inches		110	Years Months Pounds.	3
9. Chest measurement \{ \bigg\} M	inimum 36 Ins.	10. Complexion		0.	N Ruc
11. Physical development.	Good	Good Fair 12	2. Smallpox m	arksl	3
13. Number of vaccination i	narks Right arm		en vaccinated la	ast Skeldhron	an S
15. Distinctive marks and m		d peculiarities or previo	us disease		of Man
		7			ıre
16. Slight defects but not sur		ra	( )		nati
The man denies having had	Rheumatism Tuberculosis We Syphilis	find no evidence of pas	t { Rheumatis Tuberculos Syphilis	m sis	Signature of
(Strike out disease adr	nitted or suspected.)		n 20	pn 20	01
in accordance with the	ed the above name c. E. F. Regulation	ons for All	20	10 20	
medical examinations, a	nd he is placed in Ca	ategory / / / /	earmy A	ris Tr	
HE English	Mem	han S	President	101.	
Date Result	VACCINATIONS	Date Res	ult ANTI-T	YPHOID INOCULATIONS, ETC.	
4/1/47-	est 1. A-	4/1/16	2	A COMMITTING DIO.	
12/7/18 +		M.O. 25/5/8 7	( st	M.O.	
		M.O. 3/5/18 +	1	M.O. M.O.	
7	.//	311018	) ]	N1.0.	
Joined	CORPS	REG'TL NUMBER	HABITS	legua	
			HABITS	DATE	
Joined on enlistment	IshDehol But	259996		1 7/5/18	# 1
Transferred to	th Canadian Res.	Batto		1 5 AUG 1818	11/4
EXAMIN	NED OR DISCH	ARGED BY A	MEDICAL	BOARD.	
STATION	DATE	DISEASE		RESULT	
				Secretary Control	

DATES OF 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. Date of Arrival Number of Signature of Admission into Hospital Discharge from Hospital. STATION. at the DISEASE. days in Medical Station. Hospital. Officer. Day Month Year Day Month Year Christian Name. Surname

1.1

## 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.

MANUAL PROPERTY.		
No	259996 Rank 1/12	Surname CUBMORE
	, and the second	(Given name in full)
		Cell Tuchard .
TT	it or Corps OMXO.	Cristallo to be
<u>—</u>	it or Corps	Birthplace . Cryptal Cally Mais
	(Examination of Officer or Other Rank (str	ipped) to be made by one Medical Officer.)
I.	GENERAL DESCRIPTION:	
	Physique ood Weight 200 lbs.	Height. 5.ft 10 in. Colour of Eyes 200
		Heightitzin. Colour of Eyes
	Nutrition Sand	Tankicak
	Pulse 7 2	Identification marks, scars, or deformities. (Give cause and date of origin).
	Condition of arteries	
		male K. Willem
	Vision Rt. Left	
	Hearing (conversational voice) Rt. Z.Ift.	<b>"一个人,我们是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们</b>
	Loft 4 ( ft	<b>《陈成》,张扬《陈成》的《张扬·</b>
		8
Opi	nion as to general health and physical condition	2000
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	te may be sufficient in certain cases.)
	Nervous System	System. MCardio-Vascular System
	Special Senses 22 Integumentary	System . Respiratory System
	Disturbance of MentalityMuscular System	Digestive System
	Osseous and Joint System Any other gener	ral condition
3.	If the answer to any part of Section 2 above is "N	Yes," here give full particulars, with cause and date
	of origin; and also a description of the present	

800

## EXAMINATIONS

THIS SECTION FOR USE OVERSEAS-
Date
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 Lo.R. buddnow  (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.
(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.)

(c) In France

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

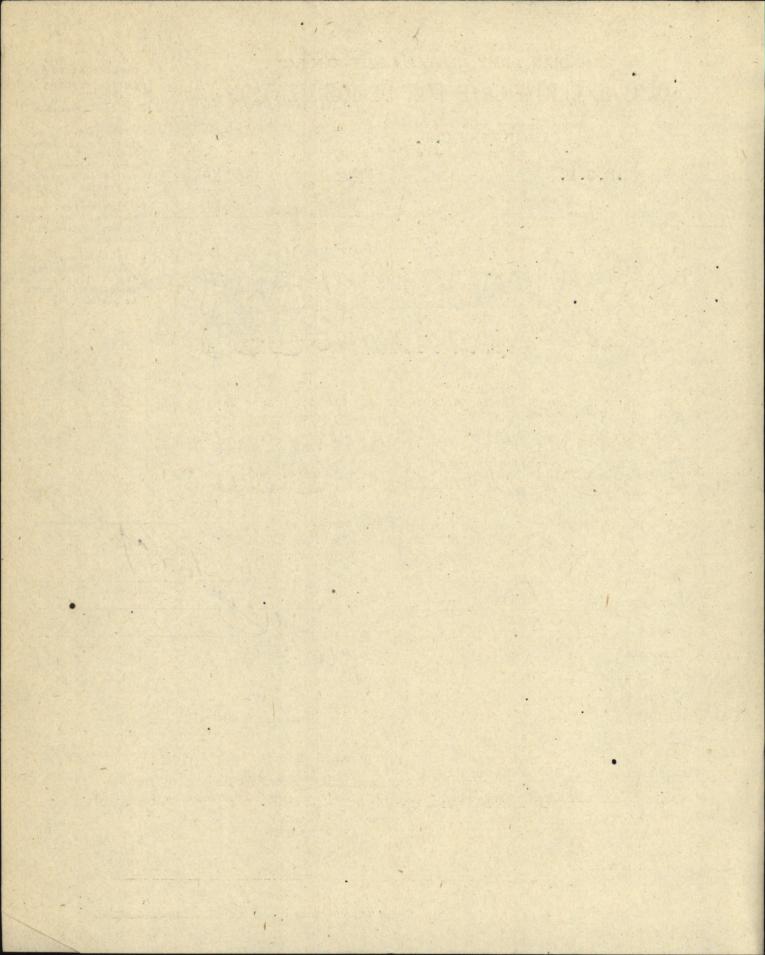
DENTAL CERTIFICATE FOR DEMOBILIZATION Canadian Printing and Stationery Services, Lendon CUDMORE C. R. NAME OF SOLDIER (Bleck Letters) No. 269996 PTE. REGIMENT C.M.G.D. RANK or France. Date of Examination in England 23 Date of Examination in France. concerned. 11 12 13 14 In reference to be stated PRESENT DENTAL REQUIREMENTS 1. FILLINGS 2. EXTRACTIONS 3. CROWNS 4. DENTURES (a) Full Upper (b) Part Upper (c) Full Lower (d) Part Lower No HAS HE EVER REFUSED DENTAL TREATMENT? 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

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the k me of Demobils. zation in England

Figures as per chart will be used to designate teeth

Partial Dentuces the numbers of teeth thereon wil'



SaskRe	RANK. Pt. TRECSFILE. 7. 1918  NO. 25 9996.  DATE. May 7 db. 1918  Talk. DATE. Oct. 27th. 1894.
DISCHARGE, PLACE, Canada Lorys	etal bity. DATE. Oct. 27th. 1894.
REASON.	man. Sldd 6-6-14 Demle
	201780f 27-6-19 12010
ADDRESS ON DISCHARGE,	
DO	OCUMENTS.
	RELATIONSHIP mother.
NEXT OF KIN budmore mrs	
ADDRESS manor. Sask.	
0/5.29-7-18 135-1	351 351
L. L. 20496—M. & D. 7908—100m.	· On R/6.20-6-19. 165

CHARG	SED OUT		RETUR	RNED	CHARG	GED OUT	RETURNED		
то	DATE	BY	RECEIVED BY	DATE	то	DATE	ВУ	RECEIVED	DATE
								7	
									-

Morrain - and a state of
Number 2 3 999 6 Rank
Surname CUDMORE
Christian Name Cecel Richard
Units S.R. Theatre of War Ingland
Date of Service 15-8-18
Remarks
Latest Address Mano Jack
(400) Parkman
Roll No a Page 4165 Sask
200m6-21.M.

	DATE AND PLACE OF ORIGIN
	*DUE TO SERVICE *NOT DUE TO SERVICE
	*NOT DUE TO SERVICE
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HOSPITAL	STATION
	ROSS OUT CONDITION NOT APPLICABLE.
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	No. of the Control of

	Rank		Name C	UDMORE	CECIL RIC	HARD	Reg'l No. 25-9996	
	Unit	106 Half	SaskRegi	If in perm. Corps What Unit?			arried or Single Single	
		e and Date of	Enlistment	Regina	may 7/18	Place of	Birth Crystallerty Man	V
7.88	Nam	e and Addres	ss, Next-of-Kin	Mars H	ersiette Ca	udmi	are of	
	1/1		Sask				Mother	
		gned Pay Mo		Payable		7		
						tionship	N/E. R.B. Nº13/57	
	Sepa	ration Allow:	ance\$	Payable	to	Pto	FILO R.L.	
						tionship	Category	
	Discl	harge, Date a	nd Place		Reason		Character	
	H. W. V., Ld.—9546							
	Repor	rt. From whom	casualties, etc.,	ns, reductions, transfers, luring active service.	Place.	Date.	REMARKS Taken from Official Documents.	
	Date.	received.	The authority to	be quoted in each case.				
			1.1.	09 / /	1 E AUG 1018	Olm 9	9	
	00 0			England				
	22.0.	16 15 R	es 1.0,8	FROM anac	la Bramshot	t 16, 8	13 Pt.II O 2 4	
	19.9.18	ıŧ	5.08 K C.M	GC. Seaford	The "	16.9.18	VES62 & *256 /24 9-18.	
			85-	0-196	6 9/1	4-6	-19	
	16.6.19	Chico	50510	Canada	The Seaf	14 6.19	Plas62 & *256/24 9-18. -19 Pla 139.	
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Rep		Record of promotions, reductions, transfers,			REMARKS	
Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service.  The authority to be quoted in each case.	Place.	Date.	Taken from Official Documents.	
				, /		
				•		•
No. of Concession, Name of Street, or other Designation, or other						

ENGLAND OR SEPARATION ASSIGNED ENGLAND OR NAME: CUDMORE Clee Richard CANADA. CANADA. ALLOWANCE EFFECTIVE EFFECTIVE NUMBER:-259996 DATE: PARTICULARS OF RANK OR APPOINTMENT AMOUNT :-AMOUNT :-NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYER OF A.P. IS THE SAME AS PAYER OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE. EFFECTIVE RANK OR APPOINTMENT AUG - 1 1918 UNIT AND TRANSFERS ORIGINAL UNIT: - 106 Aft. 1st S. R. A DATE ACCOUNT FIRST OPENED: 1 - 8- 180 DATE DATE LEDGER UNIT TRANSFERRED TO 1-16.18 256- 24-9-18. 21-10. EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK AMOUNT PAYMENT OF A.R UNIT PAID BY AMOUNT DATE OF NUMBER UNIT PAID BY DAILY RATES OF PAY AND ALLOWANCES P.F.A. SUBSICE F.A. 16 10 LP6Bally 13833 15/Baller 167 53 PARTICULARS OF RENDERING NON-EFFECTIVE: Transferred & Canada 16/19 Ref 9890 26/5/19 Cmayo Scapal to Seaford 29/5/19 mas 12 DR 2. DR. 3. DR. 4. BALANCE DEFERRED PARTICULARS CR. 2. PARTICULARS 2960 a. R. 8. 20/8/18 Bourley Camp 15 3883 aR 668 2/9/18 CIR 4503 26.4.18 @ meis 4 87 Oct-4 87 1 4241 20.9.18 04005 4707 3/10/18 1 Housewife 4 87 36 4 93 96 36 CR 5300 26.10.18 CR 5546 13.11.18 4 87 nov et 807 V 1 6170 28.11.18 34 Dec 48 67 4 139 15 Febr 9 73 30 80 4 87 7196 31.1.19 met 9 73 7605 17.2.19 9.73 1 7817 27-2-19 " 8023 8/3/19 48 67 116 8353 21/3/19 4 87 8760 64 90 ar 330 15/4/19 9 73 1 1016 16/5/19 OUECKED BY..... 9 73 33 -34 10 Intronded pay 341 167 53 19 46

PARTICULARS NUMBER RANK PARTICULARS CR. 1. CR. 2. DR. 1 DR. 2 DR. 3. DR. 4. BALANCE DEFERRED SEPARATION MONTH Forward 1287 285 Mrs 167 53

### SHORT FORM.

## PROCEEDINGS ON DISCHARGE.

PROCEEDINGS ON DISCHARGE.
(Demobilization.)
1. No. 259996
2 Rank. Private Embd S'hanton-Aq'in-14 6
3. Name. Cudmore, Cecil Richa Pebk'd HalifAx 20_6 19
4. Unit.
5 Date of Discharge SASK. JUN 2 6 1919 Place
6 Reason for Discharge Demobolization
7. Authority. R.O. J. 4.2.0. (D.D.O. J. 78. Para J.O. 433
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.?
6. R. budmore
Signature of Soldier.
10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.
Date Sun 28 1918
Albahnh
Signature (O. C. Discharging Unit.)

### LIST OF DISCHARGE DOCUMENTS.

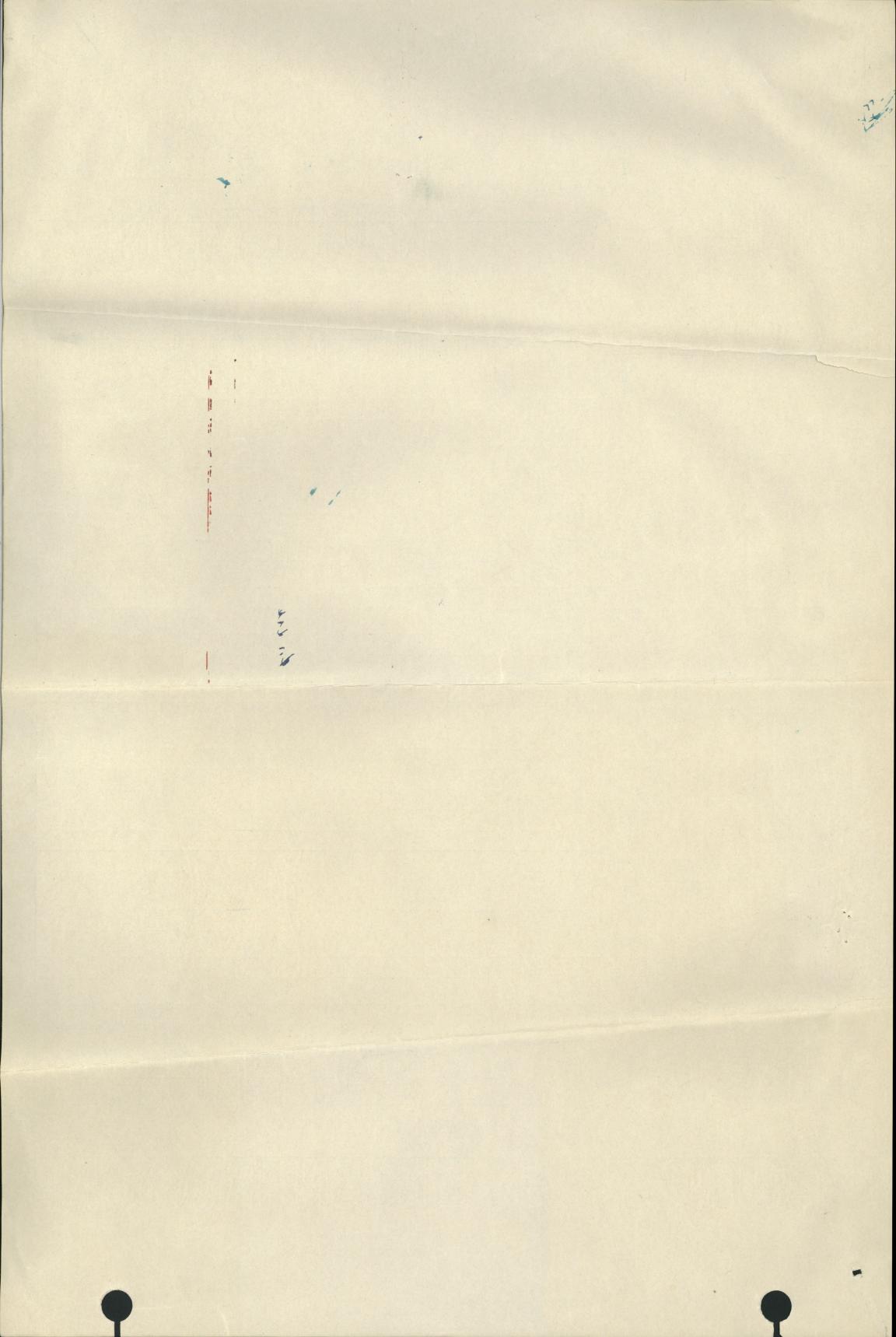
Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History 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. 163).
2. Casualty Form (A.F.B. 103).
8. 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)
(Euclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment | Statement O.M.G. Form (D.O.S. 20. 1. Equipment | Statement Q,M,G. Form (D.O.S. 2), and Clothing | Statement Q,M,G. Form (D.O.S. 2), Least Lay (artificity P. 851).

Group. Checked by .10. / Date 15 Jiming

																		6	103	37	Ts.	aegi	uita	nia	- 2	0/6/19. AUDITOR PAYMASTER
	M. OR S.			J	· .	PROM			TIONS AN				CTING	REGT.	No.	2501	990	RANK	18	NAM	ME (IN I	FULL)	cu	7)	1	ORE, C, R.
	NEXT OF K	IN			RELATIONS		ARTICUL	ARS	EFFECTI	VE	AUTH	ORITY		ORIGINA C.E.F	- UNIT	11	De	1n	1		IN P.					LOCK LETTERS SURNAME FIRST)
	ADDRESS								DATE					PLACE C	F			- Km	RANSFE	RRED TO	14				DATE	AUTHORITY
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WITH THIS SOLDIERS
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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 Class The Mary 2. Surname 2. Surname
3.	Rank St. 4. Original Unit / Sah byt Bn 5. Reg. No. 259996
6.	Address, in full, to which future payments of gratuity are to be forwarded
	Maror Sosto, Canada
7.	Date of enlistment in the C.E.F. 7 the May 1918.
8.	Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, im-
	mediately prior to your discharge None
9.	Relationship of such dependent Tone
	Address, in full, of such dependent Nove
- les	and the control of the first and the state of the state o
11.	Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account
	of another soldier?
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?
	Were you on active service only in Canada or the United States? If so, give particulars of unit and
	dates of such service
5.	Give total length of time which you served on active services whether in Canada or Overseas, setting out
	particulars of units on whose strength you served and 2 Months
	the same of the sa
6.	Were you at the time of enlistment a civil employee of the Dominion Government? If so, state
	Department // O
7. 543 623	Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?

10. 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  10. Have you been issued with a War Service Budge? If so what class?  11. Have you can derive the Comment war, served in the Imperial Forces?  12. 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.  12. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?  13. (b) If so, was such reversion in consequence of misconduct or inefficiency?  14. Are you now serving in the C.E.F.).  15. (b) Reason for discharge  16. (c) Any you are payment a mesurer or and in receipt of pay and allowances from any camenan havafor is and forces? If so, give unit and time serve at the roots 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 which you served at the front, and dates of such service with that unit which you served at the front, and dates of such service with that unit which you served at the front, and dates of such service with that unit which you served at the front, and dates of such service with that unit which you served at the front, and dates of such service with that unit.  14. (c) Any you receiving the statement from the Department of Soldiers Civil Re establishment?  15. (d) If so, are you in receipt of full pay and allowances from that Department?  16. (e) Any you receive man and colaration, conscientionally believing it to be true, and knowing that it is of the same force and effect as if gible undependent and in vitue of the Canadian Mod. Depot.  16. (e) Any you consider that the such that the such payment of the payment of the true, and knowing that it is of the such force and feed at it gible undependent of the such payment of the payment of the payment of the pay		Have you had more than one enlistment? If so,		
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