RR ORIGINAL

M.S.A.

No. 2 M.D. First Depot Battalion 2nd. C.O.R. Regiment

Regtl. No. 3112474

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

1. Surname: Davidson
2. Christian name: Hillyard
3. Present address: Masehow, Sask.
4. Military Service Act letter and number: 495159 L.6.
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth: Oct. 29th., 1887
6. Place of birth (town, township or county and country): Belfontain Ont.
7. Married, widower or single: Single
8. Religion: Baptist
9. Trade or calling: Farmer Labourer
10. Name of next-of-kin: Mr. Isaac Davidson
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Bellfontain, 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: Swift Current (b) Date: 27th. Oct./17 (c) Category: A2.

DECLARATION OF RECRUIT

I, Hillyard Davidson, do solemnly declare that the above particulars refer to me, and are true.

Hillyard Davidson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 29 yrs. 11 mths.

Height: 5 ft. 9 1/4 ins.

Chest measurement: fully expanded 34 1/2 ins.; range of expansion 2 1/2 ins.

Complexion: Fair

Eyes: Blue

Hair: Fair

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

Vac. nil.
Mole 2" above & 1" within rt. nipple.

A. McTavan. Major
O.C. 1st DEPOT BN., 2nd C.O.R. Depot Btln.

Regt.

Place: Hamilton, Ont. Date: 22nd. October 1918.

M. F. W. 133.
500M.—5-18.
1772—39—1158.

DAVIDSON HILLYARD 3112474 2 D CGR 03999

DEMOB

CASE HISTORY SHEET.

Stationary Hospital. Exhibition Camp Toronto Station.

No. 3112474 Rank Private Name Davidson, M. Age 31

Unit 2nd CGR Completed years of service Where and how long 6/52 Canada

Date of admission Dec 3/18 Date of discharge Dec. 16/18.

Diagnosis Influenza Place of origin In Service

CONDITION ON ADMISSION AND PROGRESS OF CASE Complaint: - Had a headache for two days - felt poorly - no appetite - Has a cough which has lingered for past two months - Sputum is glary and has many grey particles in it. Cough is dry harsh and frequent.

Respiratory System: a few dry Bronchial rales on left side otherwise nothing discovered - there is quite a depression of Fossae (Clavicular) specially on left side

Circulatory System - Pulse rapid but fairly strong - No valvular disturbance noted No enlargement of heart - no sclerosis.

alimentary System Teeth good - Tongue coated

N.M. System Normal

G.U. System Normal

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Negative? - Sister died c̄ abscess of Lungs. Otherwise negative. (over)

TREATMENT (Especially any specific or special form.) Routine Laxative. Cal grs ii Mag SO_4 ʒ 55 Dovers Powder grs x̄ Hot Lemonade Spb. Frumenti ʒ 55.

CONDITION ON DISCHARGE, (and disposal made of case.) Discharged to unit condition improved Recommend 8 days sick leave.

Date Dec 16/18

H. O. Jones Lieut
Medical Officer i/c case.

M. F. B. 313a.
200M. - 5-18.
1772-39-439.

B12726

Dec 4 – Some B. tinged Sputum in night. Transferred today to East Ward – Sputum shows much liquid clear, frothy, and scattered throughout are several clumps of greyish ~~wh~~ white deposits.

Dec 6 – Improving – still in bed – Feels well appetite much better.

Sputum examin. LB negative

Bacterium micrococci fibrous tissue.

Dec 9 – up yesterday and today in Blues

13.12.18. Brought to Center Ward – Convalescing.

[illegible]

CLINICAL CHART.

(*To be pasted into Case Book opposite Patient's Case.*)

Exhibition Canada

orps 2nd CGR *Hospital Station*

No. 3112474 *Rank and Name* Pte. DAVIDSON, H. *Age* 31 *Service* 6/52 Canada B-12

Disease Influenza *Date of Admission* Dec3/18 *Date of Discharge* Dec.16/18 *Result* Improved *Case Book* *Folio*

Dates of Observation	3	4	5	5			6			7			8	9	10	11	12	13	14	15
Days of Disease	1	2	3	4			4						6	7	8	9	10	11	12	13
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m. 4 Am	TIME a.m. p.m. 8 Am	TIME a.m. p.m. 12 noon	TIME a.m. p.m. 4 P.m.	TIME a.m. p.m. 8 P.m.	TIME a.m. p.m. 12 P.m.	TIME a.m. p.m. 4 Am	TIME a.m. p.m. 8 Am	TIME a.m. p.m. 12 noon	TIME a.m. p.m. 4 pm	TIME a.m. p.m. 8 P.m.	TIME a.m. p.m. 12 noon	TIME a.m. p.m. 4 pm	TIME a.m. p.m. 8 P.m.	TIME a.m. p.m. 12 noon	TIME a.m. p.m. 4 pm	TIME a.m. p.m.	TIME a.m. p.m.
107°																				
106°																				
105°																				
104°																				
103°																				
102°																				
101°																				
100°																				
99°																				
98°																				
97°																				
Pulse per Minute	90	96	80	60	82	100	90	82	54	80	86	78	84	54	56	52	58	54	76	66
Respirations per Minute	20	20	22	22	20	18	20	20	20	18	20	22	24	18	18	18	18	18	18	20
Motions																				

Dates of Observation	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
Days of Disease	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°																				
106°																				
105°																				
104°																				
103°																				
102°																				
101°																				
100°																				
99°																				
98°																				
97°																				
Pulse per Minute	66	58	60	66	67	70		80												
Respirations per Minute	16	18	18	18	20	20	18		18											
Motions																				

B12726

M. F. B. 288.

25M—2-18.

H. Q. 1772-39-513.

Signature H. O. Jones Lieut *In charge of case.*

M. S. A.

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

M. F. W. 54. (A. F. B. 103)
500M.—9-16
H. Q. 1772-39-9.0.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1st DEPOT BN., 2nd C. O. R.

Regimental No. 3117474 Rank Pte. Name Davidson, Hillyard.

Enlisted (a) 22-10-18 Terms of Service (a) During War & 6 months after C. E. F. Service reckons from (a) 22-10-18

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) Farm Laborer

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				
		Transferred to Can Gar Regt. From 1st Depot Batt'n, 2nd C.O.R.		2/12/18	
3-4-19	2nd Det. C.G.R.	S.O.S. on discharge R.O. 1328 "DEMOBILIZATION"	Toronto,	4-4-19	Part 11 D.O. 93

C. P. Stocking Lieut.
O. I. C. Records, 2nd Det., Can. Gar. 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 dutie.

[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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Davidson Killyard

REGIMENT 1st DEPOT BN., 2nd C.O.R. RANK Private

DISTRICT #2

No. 3112474

M.S.A.

M.F.B. 465.
200M.—6-18.
1772-39-950.

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.

To Fill. 3. 5.
To Ext. 14.

Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	12														7 8 9 10						
Nov. 1/18			Missing	1.	18.	19.	30.	31.	16.										Lonergan		

Discharge Exam.
At Exhibition Camp
Date MAR 29 1919

Certificate issued for Not entitled to treatment

H. Semple
Major

M.S.A. 15.

OCT. 29 1917 ORIGINAL

3112474 RECEIVED JUL 22 1918

Rtd. to Schedule by 785

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 Davidson Christian name Hilliard Hear

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 495159

3. Consecutive number on schedule of men reporting for service (if he appears on it) Lib. 65 Gull Lake

4. Address (including street and number, if any) Mossbow Sask Con. 486

Referred to PMR

256/324

65/486

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 27 day of Oct 1917, by the undersigned medical board sitting at Swift Current Sask

5. Age as stated 29 Years 11 Months. 6. Apparent age 29 Years Months

7. Height 5 Feet 9½ Inches. 8. Weight 156 Pounds.

9. Chest measurement { Minimum 32 Ins. Maximum 34½ Ins.

10. Complexion fair { Eyes blue Hair fair

11. Physical development { Good Fair Poor

12. Smallpox marks none

13. Number of vaccination marks { Right arm Left arm none

14. When vaccinated last none

15. Distinctive marks and marks indicating congenital peculiarities or previous disease mole 2 in above & 1 in. within Rt nipple

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We find no evidence of past { Rheumatism Tuberculosis Syphilis

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

D. W. Lochan President.

C. H. Cantlon Member. Mitchell Member.

Signature of Man

Rtd. to Schedule by No. 6 R. Baker

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
24-10-18		H. McNally M.O.	24-10-18		H. McNally M.O.
		M.O.	30-10-18		H. McNally M.O.
		M.O.			M.O.

TABH-2

Joined 22nd day of October 1918 at Hamilton Ont.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st D.A.H. Bn. 2nd Coy	3112474		
Transferred to	C of R			2/12/18

C. A. FOR FILES JUL 30 1918 DEPT. B.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Hamilton	24/10/18		A-2
Re Camp	28/3/19		Fit for G

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 Christian Name

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

HOME SERVICE DEMOBILIZATION BOARD.

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. 3112474. Rank Pte. Surname DAVIDSON.
(Given name in full) Hillyard.

Unit or Corps 2nd C.G.R. Birthplace Belfountain Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 139 lbs. Height 5 ft. 8½ in. Colour of Eyes Blue.

Nutrition Good

Pulse 74

Condition of arteries Good

Vision Rt. D 20 Left D 30

Hearing (conversational voice) Rt. 30 ft.

Left 30 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Mole above R nipple

Opinion as to general health and physical condition — Fit

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 Sytem 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.

APPROVED
MAR 31 1919
J. R. Christian CAPT.
FOR A. D. M. S. M. D. 2

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Ex.Camp.Toronto. (Canada)

Date March 29th. 1919. 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. N. Davidson

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

2nd Detachment
APR 4 1919
2nd Det., C. G. R., C. E. F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

M.S.A.

This is to Certify that No. 3112474 (Rank) Private.

Name (in full) DAVIDSON, Hillyard. enlisted in

the 1st Depot Battalion, 2nd Central Ontario Regiment.

CANADIAN EXPEDITIONARY FORCE at Hamilton, Ont on the 22nd

day of October 1918.

HE served in ....CANADA.....

and is now discharged from the service by reason of

"DEMOBILIZATION"

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

Age	30 Years 5 Months.	Marks or Scars	NIL
Height	5 Feet 9¼ Inches.		
Complexion	Fair		
Eyes	Blue		
Hair	Fair		

Hillyard Davidson
Signature of Soldier

Issuing Officer
Major
O. C. 2nd Det., Can. Garr. Regt., C. E. F.

Rank

Appointment

Date of Discharge April 4th, 1919.

Signed at Toronto, Ont this 4th day of April 1919.

in Military District No. 2.

File Reference No.

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. 39a.
250m —6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

On demobilization the particulars called for on the back of this certificate will not be completed.

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

B1272 6

LEDGER NO. 8328 SERIAL NO.

REG. NUMBER 311 2474 NAME Davidson H.

RANK Pte CORPS 2nd C.G.R.

AGE 31 SERVICE 6/52 Can.

NAME OF HOSPITAL Stationary Hospital PLACE Exhibition Comp, Toronto

DATE OF ADMISSION 3-12-18

DISEASE Influenza

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 16-12-18 IN CATEGORY

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

P. T. O.

REMARKS:

H. Q. .....

M. D. No. 2

Surname Davidson. T. O. S. Oct 22nd 1918

Christian names Hillyard D. O. Pt. II 296 of 23-10-18

Regtl. No. 3112474 Rank Pte. S. O. S. April 4th 1919

Unit 2nd Cen Ont. Regt. 1st. Dpo/B Reason Dis. Demob. 3-4-19

Auth. D.O. 93 ex 2nd Dep. C.G.R.

Next of kin Davidson Isaac Relationship Father

Address Belfountain, Ont. Also notify: .....

BORN—Place Canada Belfountain, Ont Date Oct 29th 1887

ATTESTED—Place Hamilton, Ont Date Oct 22nd 1918

O/S ..... R/C .....

W. 22—10 M-7-18. 1772-39-839.

M. F. W. 71—500M.—5-18.
1772—39—961.

NAME Davidson Hilliard.

REGIMENTAL NO. 3112474. RANK Pte.

ENLISTED AT Hamilton Ont. PROMOTIONS, &c. AND DATE

DATE 22-10-18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN Mr. Isaac Davidson RELATIONSHIP father.

ADDRESS OF Bell fontain 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	
T.D.S. 2-12-18	157	4-12-18	
Lhc Demob. 4-4-19	93	3-4-19.	

2nd Det., C. G. R.

AUDITOR | PAYMASTER

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

M. OR S. Single. REGT. No. 3112474. RANK Pte. NAME (IN FULL) DAVIDSON, Hillyard. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN Isaac Davidson, RELATIONSHIP Father,
ADDRESS Bellfontain, Ont.

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE
TO WHOM PAID RELATIONSHIP
ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. IF IN P.F. WHAT UNIT?
PLACE OF ATTESTATION Hamilton, Ont. TRANSFERRED TO DATE AUTHORITY
DATE OF ATTESTATION 22-10-18. TRANSFERRED TO DATE AUTHORITY
ASSIGNED PAY, $ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
ADDRESS
ANY CHANGE IN ASSIGNEE OR ADDRESS
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE
DISCHARGED PLACE DATE REASON 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																																					Imw 102
1-31	31	1.10	34	10			10		34	10	33353				33698		5				18	10			1						24	10			20		
Feby 1-28	28	1.10	30	80			20		50	80	35010				37006		15				19	35			-	75	1 / 4	30 / 40			40	80			10		Forfeited dep for 2035 / 37265 Pte / Imw 102
Mar 1-31	31	1.10	34	10			10		44	10	80576				81177		5				28	10			1						34	10			10		Imw 102
April	4	1.10	4	40	95		10		49	40					82582						49	40									49	40					Due 11/11/19 Do. 93
			103	40	35	00	50	00	188	40							25	00			114	95			2	75	5	70			148	40			40	00	

ACCOUNT CLOSED. NOT SIGNED. RESPONSIBLE OFFICER S.O.S. PRIOR TO H. Q. CIRCULAR No. 102 (LOCAL 120).

ASST. DIRECTOR PAY SERVICES, M.D. No. 2.

60m.-11-18 L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

This space to be for numbers.

Proceedings on Discharge.

RECEIVED RECORD OFFICE APR 10 M.S.A. REFERRED TO ACTION TAKEN

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 3112474

Rank Private.

Surname DAVIDSON

Christian name Hillyard

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 2nd Det., C. G. R., C. E. F.

Date of discharge April 4th, 1919.

Place of discharge TORONTO

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 30 years 5 months.

Height 5 feet 9¼ inches.

Complexion Fair

Eyes Blue

Hair Fair

Trade Farmer Labourer

Intended place of residence (To be given as fully as practicable.) Beaver Lodge Alta.

Descriptive marks

NIL

2. The above-named man is discharged in consequence of

"DEMOBILIZATION"

Authority for discharge R.O. 1328

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.
4-4-

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery*, and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) TORONTO Hildyard Davidson *(Signature of Soldier.)*

(Date) April 4th, 1919. C. P. Stocking Lieut *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

TORONTO

(Place).....

(Signature)..... Major

O. C. 2nd Det., Can. Garr. Regt., C. E. F.

(Date) April 4th, 1919.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

NONE.

Hillyard Davidson

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.