17-152-23

DEP'T MILITIA & DEFENCE
MAY 10 1918
H. Q. 2353411
CANADA

COPY

10 M. D. 1st Depot Battalion Manitoba Regiment

Regtl. No.

# PARTICULARS OF RECRUIT

## DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname Dick
2. Christian name Paul
3. Present address Squaw Bay, Fort William, Ontario, Canada.
4. Military Service Act letter and number 697730 T.C.
5. Date of birth August 16th 1895
6. Place of birth (town, township or county and country) Indian Mission, Fort William, Ontario, Canada
7. Married, widower or single Single
8. Religion Methodist Roman Catholic
9. Trade or calling Fisherman
10. Name of next-of-kin John Dick
11. Relationship of next-of-kin Father
12. Address of next-of-kin Squaw Bay, Fort William, Ontario, Canada.
13. Whether at present a member of the Active Militia No. HAA
14. Particulars of previous military or naval service, if any None.
15. Medical Examination under Military Service Act:—

(a) Place Port Arthur, Ont. (b) Date 9-11-17 (c) Category All.

## DECLARATION OF RECRUIT

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

Paul Dick (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age 22 yrs. 3 mths.

Height 5 ft. 6 ins.

Chest measurement: fully expanded 36 ins.; range of expansion 2½ ins.

Complexion Dark

Eyes Brown

Hair Black

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

Nil

H A Arthur Major

O. C. "H" Coy. 1st. Depot. Battalion, Manitoba Regiment

O. C. 1st Depot Btln.

Manitoba Regt.

Place Port Arthur Ontario. Date January, 3rd, 1918

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

MADE IN CANADA

m F 16-5-18 ~~Incomp~~

S

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet ..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

m F W 113-2
m F W 67-1
m. F. W. 192-1

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

m X 10/2/21

R. O. No. .....

H. Q. No. .....

H

Name Dick Paul

Regt. No. 2383411 Rank Pte

Corps 1st Depot Bn.

15632

Battalion C.E.F.

Deceased 1-5-13

H

18-29
18-29
26 29
1

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.

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(1) Name of Overseas Unit which Soldier joins "H" Company.
1st Depot Battalion, Manitoba Regiment.

(2) Regimental Number 2383411

(3) Full Name of Soldier Paul Dick

(4) Place of Birth Indian Mission,
Fort William, Ontario,
Canada.

(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?

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

5 M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address John Dick, Squaw Bay, Fort William, Ontario Canada

(10) Is your Mother alive? Yes.

If so, state name and address Josephine Dick, Squaw Bay, Fort William, Ontario, Canada.

(11) If your Mother is a widow

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.

H H Arthur Major
O. C. "H" Coy. 1st. Depot. Battalion,
Manitoba Regiment,
*Officer Commanding.*

Date January, 3rd. 1918

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.

mx
10/2/21 mj

Unit, Regiment or Corps H Coy. 1st Depot Batt'n M. R.

Regimental No. 2383411 Rank Private Name Deich, Paul

Enlisted (a) 3-1-18 Terms of Service (a) War & 6 Months C. E. F. Service reckons from (a) 3-1-18

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) Civil — Fisherman, Military — None

| 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 #5 Draft. 1st Depot Batt'n. M. R. | | 10-4-18 | |

(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 | | | | |

SURNAME. Dick

CHRISTIAN NAMES Paul

REGL. NO. 2383411 RANK Pte.

UNIT Man. Regt 1st Dpo Bn.

FORMER CORPS Nil

CARD NO. ✓

S.O.S. Dec 1-5-18. 5

Auth: Pt. II 18. 2-5-18.
#5 Dist. Depot

NEXT OF KIN.

NAMES IN FULL Dick, John

RELATIONSHIP TO SOLDIER Father.

ADDRESS Squaw Bay, Fort William Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Fort William Ont. DATE Aug. 16th. 1895.

PLACE OF ATTESTATION Port Arthur Ont. DATE Jan. 3rd. 1918.

L. L. 25989. 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

H. Q. 649-D-12557.

DICK, Pte. Paul, #2383411, 1st Depot Bn. Man. Regt.

#5

Med & D (Father) Mr. John Dick,
Squaw Bay,
Fort William, Ont.

P & S (Father) Mr. John Dick,
Address as above.

Ser# 806980

Mem Cross (Mother) Mrs. Josephine Dick,
Address as above.

Not elig. for star.
" " " V.M.
" " " B.V.M.

48017

B
P.J.O.

762

M 45-5-47 FEB 17 1921

M x redesp. 25.8.21 - x 2677

Scroll rel'd 9.3.22
Plague 9.3.22

Scroll Desp. FEB 10 1922 Reg. No. 263750

Plague Desp. FEB 15 1922 Reg. No. P29702

Scroll re-desp. 17-2-23 B. 2449.
Plague re-desp. 17-2-23. E. 1048.

M x Rel'd 23/3/21 Unclaimed

*Name Dick Paul Rank Pte Regtl. No. 2383411

Original unit 1st Dep Bn. man Reg. Present unit Cas. Unit ~~M~~ or S. Age 33 Religion R. C. Ref. H.Q. Fyle Depot

Port, ship, and date of arrival

Next of kin John Dick (Father) Squaw Bay Fort Wm Ont.

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Fisherman Date and place of enlistment Port Arthur 3/1/18

Diagnosis Date of Medical Boards

| Date. | Remarks. | Pt. 2 Order No. |
|---|---|---|
| 18-4-18 | J.O.S. & posted to Hosp. Section | 1 |
| 1-5-18 | Died of Pneumonia (Mil. Hospital, Quebec) | 15. |
| | | |

*—Name will be given in full; surname first.

LOCAL CARD

Noted Cas Sec AS 4 14-5-18

(over)

DEPT. MILITIA & DEFENCE MAY 10 1918 H.Q. 649 D - 2557 CANADA

| Date. | Remarks. | Pt. 2 Order No. |
| --- | --- | --- |
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M.F.W. 192.
60M-3-18 (D.P.) 353.
1772-39-1243.

17-152-23

# MILITARY SERVICE ACT, 1917.

# MEDICAL HISTORY SHEET.

A II

**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 Dock Christian name Paul
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 697730 TC
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Mission Bay, Fort William, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 9 day of Nov. 1917, by the undersigned medical board sitting at Port Arthur, Ont.

5. Age as stated 22 Years 3 Months. 6. Apparent age 23 Years Months
7. Height 5 Feet 6 Inches. 8. Weight 139 Pounds.
9. Chest measurement { Minimum 33½ Ins. / Maximum 36 Ins. } 10. Complexion Dark { Eyes Brown / Hair Black }
11. Physical development Good { Good / Fair / Poor } 12. Smallpox marks
13. Number of vaccination marks { Right arm / Left arm 1 } 14. When vaccinated last childhood
15. Distinctive marks and marks indicating congenital peculiarities or previous disease
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 A 2

17. (a) Vision R. 20/15 L. 20/16
(b) Hearing. R. N L. N

Sgt. J. Picard President.

Sgt. J E Martin Member. Sgt. R. M Boyd Member.

| Date | Result | Vaccinations | Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|---|---|---|
| 2-2-18 | | J I Pratt M.O. | 5-1-18 | | Gw Brown M.O. |
| | | M.O. | 12-1-18 | | Gw Brown M.O. |
| | | M.O. | 26-1-18 | | Gw Brown M.O. |

Joined 3 day of Jany 1918 at Port Arthur

| | Corps | Reg'tl Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | 1st Depot Batt MR | 2383411 | | 3-1-18 |
| Transferred to | #5 Draft 1st Depot Batt MR. | | | 10-4-18 |

## 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.

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

Signature of Man

Christian Name.....

Surname.....

| 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. 41
100M-1-18.
1772-39-889.

D277

Name Pte. Dick. Paul.

Regimental No. 2383411

Unit 1st. D. B. Man. Reg.

Date of enlistment 3-1-18.

Place of " Mil.

Married (yes or no) Not Mentioned

Amount of pay assigned monthly $ Nil.

To whom payable Nil.

Name and address of next-of-kin Nil.

Nil.

Date and place discharged 1-5-18. Quebec.

Reason for discharge "Died"

Character on discharge Mil. Hosp.

| 1918 | Date From | Date To | PAY No. of Days | PAY Rate | PAY Amount | Field Allowance No. of Days | Field Allowance Rate | Field Allowance Amount | Other Credits | Total Credits | Voucher No. | Voucher Date | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | St. 12-4-18. Ho. 107 |
| April. | 11-4-18 | 31-5-18 | 51 | 1.00 | 51.00 | 51 | 10 | 5.10 | 10.25 | 66.35 | | | | | | | C.F. 66.35 |
| | | | | | | | | | | | | | | | | | Died. Mil. Hos. 1-5-18 |
| | | | | | 51.00 | | | 5.10 | 10.25 | 66.35 | | | | | (C.F. 66.35) | | |

C.F. 66.35

Cr. 66.35

"Died" (1-5-18)

Cr. Transfered To Ottawa.

JHB

M. F. W. 41
100M-1-18.
1772-39-839.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

| Date | | PAY | | | Field Allowance | | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| From | To | No. of Days | Rate | Amount | No. of Days | Rate | Amount | | | No. | Date | | | | | |

5. D. No. 17-1-32

MILITARY DISTRICT No. 5 CENTRAL REGISTRY

DEP'T MILITIA & DEFENCE MAY 7 1918 H. Q. MAY 4 1918 OTTAWA

* N. B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Military Hospital Quebec

on the 1/5/18

by order of A D M S

for the purpose of reporting on the cause of death of No 2383400 Pte Dick, Paul, 1st Depot Battalion

aag

1

PRESIDENT.

Capt E A Robertson

MEMBERS.

Capt J A Key

~~Capt Nelson~~

Lieut J R Gobeil

The Board having assembled pursuant to order, proceed to

report that Pte Paul Dick died at 5 AM 1/5/18 from Acute Pulmonary Tuberculosis following Pleuro Pneumonia.

E A Robertson Capt

J. A. Key Capt.

J. R. Gobeil Lieut

Approved

[signature]

Lt. Colonel, A. M. C.

A. D. M. S., M. D. No. 5

M. F. B. 303.

150M.—7-16.

H. Q. 1772—39—133.

5-16