Duplicate

12 M. D. First Depot Battalion Sask. Regiment

Regtl. No. 256738

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname Dickson
2. Christian name Leonard, ~~Sask.~~ Almer
3. Present address Liberty, Sask.
4. Military Service Act letter and number L.G. 407180
5. Date of birth 7th Sept. 1892
6. Place of birth Veevil, Ont.
   (town, township or county and country)
7. Married, widower or single Single
8. Religion Latter Day Saints,
9. Trade or calling Farm Hand
10. Name of next-of-kin James Dickson
11. Relationship of next-of-kin Father
12. Address of next-of-kin Liberty, Sask.
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any No.
15. Medical Examination under Military Service Act:—

    (a) Place Regina, Sask. (b) Date 20th, Nov. 1917. (c) Category A. 2.

DECLARATION OF RECRUIT

I, Leonard Almer Dickson, do solemnly declare that the above particulars refer to me, and are true.

Leonard Almer Dickson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 25 yrs. 2 mths.

Height 5 ft. 5½ ins.

Chest measurement: fully expanded 38 ins.; range of expansion 4 ins.

Complexion Fair

Eyes Blue

Hair Dark.

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

Nil

J. E. Powers Capt. Lt. Col.

for O. C. First Depot Btln.

Sask. Regt.

Place Regina, Sask. Date January 5th, 1918.

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

1

C.E.F.

DICKSON LEONARD A. 256738 1 D.B.S.R. 16339

DEMOB.

H

#117 NOV 22 1917 #573

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

20- 68 O K

25-6738

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 Dickson Christian name Leonard

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule LB407180

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

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

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 20th. day of November 1917, by the undersigned medical board sitting at Regina

5. Age as stated ~~5~~ 25 Years 2 ~~5½~~ Months. 6. Apparent age 25 ~~5~~ Years 2 Months

7. Height 5 Feet 5½ Inches. 8. Weight 140 Pounds.

9. Chest measurement { Minimum 34 Ins. Maximum 38 Ins. } 10. Complexion Fair { Eyes Blue Hair Dark }

11. Physical development. Fair { Good Fair Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm Left arm } 14. When vaccinated last Nil

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

Vision and hearing normal

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 A2

Capt. President.

Capt. Member. Capt. Member.

No. 6 Ckd. to Schedule by J. Hodges

Signature of Man Leonard R. Dickson

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
5/1/18	—	M.O.	5/1/18	+	M.O.
22/1/18	+	Denis Dunny M.O.	22/1/18	+	Denis Dunny M.O.
		M.O.	28/1/18	+	M.O.

Joined fifth day of January 1918 at Regina

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st. Depot Batt. Sask. Regt.	256738		5/1/18
Transferred to.....				

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.

Surname Dixon Christian Name Leonard

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 12

NAME OF SOLDIER Graham J. A.

REGIMENT 1st D.B.S.B. RANK Pte. No. 256738

M.F.B. 465.
150M.—1-18.
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.

	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	1919																						Can '12
	July	10	1/19																		Capt Caldwell	12	

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. 256738 Rank Pte Surname Dickson
(Given name in full) Leonard

Unit or Corps 12th D.B.S.R. Birthplace Yeovil. Ont.

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

1. GENERAL DESCRIPTION:

Physique good Weight 140 lbs. Height 5 ft. 5½ in. Colour of Eyes blue

Nutrition good

Pulse 72

Condition of arteries Good

Vision Rt 20/20 Left 20/30

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

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.

(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 Moose Jaw (Canada)

Date Feb 10th 1919 Signed J. R. Slack Capt. 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 L. A. Dickson

(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.

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. 156738 Rank Pte. Name Dickson L. A.

Corps pt D B S R who was* S O S

On FEB 10 1919 191..., to Dischga.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from .....191...

to FEB 10 1919 ....191...., 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 10 days at $1 c	10	
No.			Field Allow. 10 days at $ c 10	1	
Assigned Pay and Sep'n All'ce No.			Separation Allowances* (Monthly)		
Other charges 7 days H.C. @ 1.10	7	70	Other Allowances*		
Payment on transfer or discharge No. 209/408	3	30	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	11		Total	11	

*Give particulars.

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

Pay for the month of .....191....
and Sep'n All'ce. for month of .....191.... (to) Assignee .....

(Address) Nil

(†) 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

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

REMARKS:—

State (1) date of enlistment .....

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

(3) cause of discharge.....authority .....

(4) authority for transfer S. O. S. 10-2-19 Derno. D. O. 41

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 FEB 10 1919

Place Moose Jaw, Sask.

[signature] Capt. & Paymaster

Moose Jaw Detachment 1st. D. B. S. R. 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.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 256738 (Rank) Private.

Name (in full) Dickson, Leonard Elmer enlisted in

the 1st. DEPOT BATTALION SASK. REGT.

CANADIAN EXPEDITIONARY FORCE at Regina on the 5th

day of January 1919.

HE served in Canada in 1st. DEPOT BATTALION SASK. REGT.

and is now discharged from the service by reason of Demobilization

Auth: C.E.F.R.O. 1328.

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

Age 26 yrs. 5 mths

Height 5 ft 5½ ins

Complexion Fair

Eyes Blue

Hair Dark

Marks or Scars Nil

L. A. Dickson
Signature of Soldier

W. A. Clued
Issuing Officer

Rank

Major
O.C. Moose Jaw Detachment, 1st. Depot Batt'n Sask. Regt.
Appointment

Date of Discharge Feby 10th 1919

Signed at Moose Jaw, Sask. this 10th day of Feby 1919

in Military District No. 12

File Reference No. MJD 186

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
200m.—2-18.
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 .....

.....

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

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

.....
Name of Officer

.....
Rank

.....
Appointment

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 First Depot Battn. Sask. Regt.

Regimental No. 256738 Rank Pte. Name Dickson Leonard Elmer

C. E. F.

Enlisted (a) 5/1/18 Terms of Service (a) ~~C. E. F.~~ MSW Service reckons from (a) 5/1/18

Date of promotion to present rank ..... Date of appointment to lance rank ..... Numerical position on roll of N. C. Os. Farm Hand

Extended ..... Re-engaged ..... Qualification (b) Civil Military Nil

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				
Feb 10th 1919	1st D.B.S.R	S.O.S. on Demobilization C.E.F. R.O. 1328.	Moose Jaw.	10/2/19	[illegible]

Wachied Major
O.C. Moose Jaw Detachment, 1st Depot Batt'n Sask. Regt.

(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				

CARD No. 12

S.O.S. No. 10-2-19.
FOLL. Demob.
auth: Doc. No.

SURNAME. Dickson

CHRISTIAN NAMES Leonard Almer

REGL. No. 256738 RANK Pte.

UNIT Sask. Regt. 1st Dpo. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Dickson, James

RELATIONSHIP TO SOLDIER Father

ADDRESS Liberty, Sask.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Yeovil, Ont. DATE Sept. 7th 1892

PLACE OF ATTESTATION Regina, Sask. DATE Jan. 5th 1918

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

M. F. W. 71—500M.—6 18.
1772—39—951.

NAME Dickson, L. A.

REGIMENTAL NO. 256738 RANK Pte

ENLISTED AT Regina PROMOTIONS, &c. AND DATE

DATE 3. 1. 19.

IF SERVED PREVIOUSLY. STATE UNIT. &c.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Jas Dickson RELATIONSHIP Father

ADDRESS OF Liberty, Sask

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. No.	 DATE	REMARKS IF IN HOSPITAL, NOTE NAME, &c.
Seed 5 PM 7.5.18 Leave. " 17.5.18	186.	5.7.18	
Hl. 530 AM 17.8.18 " 28.9.18	232	20.8.18	
Ex Hl. to 31.10.18	271	28.9.18	
Ex Hl. to 15.11.18	299.	26.10.18	
Rt Hl. 9.2.19.	411	10.2.19	
Sol Dis.	42.	10.2.19.	Demole
Cutts RO	1328		

This space to be for numbers.

Proceedings on Discharge.

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

No. 256738.

Rank Private

Surname Dickson

Christian name Leonard Almer

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

Corps (Squadron, Battery or Company) 1ST DEPOT BATTALION SASK. REGT.

Date of discharge Feb 10th 1919

Place of discharge Moose Jaw, Sask.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 26 years 5 months.

Height 5 feet 5½ inches.

Complexion Fair

Eyes Blue

Hair Dark

Trade Farm hand.

Intended place of residence (To be given as fully as practicable.) Liberty Sask

Descriptive marks

Nil

2. The above-named man is discharged in consequence of Demobilization PO 42.2

Authority for discharge CE 7 RO 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.

(OVER)

Noted Indexed B.S.C.
21-2-19.

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) Moose Jaw, Sask. L. A. Dickson *(Signature of Soldier.)*

(Date) Feb 20th 1919 T. E. Rothwell *(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.

(Place) Moose Jaw, Sask.

(Date) Feby 10th 1919

(Signature) W. A. Chied Major
O.C. Moose Jaw Detachment, 1st Depot Batt'n Sask. Regt.

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

S. A. Dickson

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.