ORIGINAL

M. D. Depot Battalion 1st Depot Battn., W. O. R. Regiment

Regtl. No. 3/35786

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

W.E.N. (Class ONE.)

1. Surname: EDWARDS.
2. Christian name: Ronald.
3. Present address: R. R. No.1., Thorndale, Ont.
4. Military Service Act letter and number: 727832 AC.
5. Date of birth: January 3rd. 1897.
6. Place of birth (town, township or county and country): Oswestry, Shropshire, England.
7. Married, widower or single: Single.
8. Religion: Methodist.
9. Trade or calling: Farmer and Bee-keeper.
10. Name of next-of-kin: Mrs. Ralph Bevan Edwards. ~~Mrs. Ralph Bevan Edwards.~~
11. Relationship of next-of-kin: ~~XXXXX.~~ Mother.
12. Address of next-of-kin: 27 The Crofts, Nantwich, England.
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 London, Ont. (b) Date May 17th. 1918. (c) Category A-2

DECLARATION OF RECRUIT

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

May 17th. 1918. Ronald Edwards (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs. 4 mths.

Height 5 ft. 8 ins.

Chest measurement: fully expanded 34½ ins.; range of expansion 32 ins.

Complexion Medium.

Eyes Grey

Hair D.Brown.

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

little finger left hand amputated

RIGHT EYE D 20/20 LEFT EYE D 20/20

HEARING R. Normal L Normal

John L. Young Lieut. Colonel

O. C. 1st Depot Battalion Depot Btln. W. O. R.

Regt.

Place LONDON, ONT. Date MAY 17 1918

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

M. D. Depot Battalion 15 Ulster Jan'y W. 15 6 Regiment

Regd. No.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

W. C. E. Class ONE.

1. Surname	EDWARDS.
2. Christian name	Ronald.
3. Present address	R. R. No. 1., Thorndale, Ont.
4. Military Service Act letter and number	757532 AC.
5. Date of birth	January 3rd, 1897.
6. Place of birth (town, township or county and country)	Oswestry, Shropshire, England.
7. Married, widower or single	Single.
8. Religion	Methodist.
9. Trade or calling	Farmer and Bee-keeper.
10. Name of next-of-kin	Mrs. Ralph Bevan Edwards. Mr. Ralph Bevan Edwards.
11. Relationship of next-of-kin	Father. Mother.
12. Address of next-of-kin	27 The Crofts, Nantwich, England.
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 London, Ont. (b) Date May 17th, 1918. (c) Category

DECLARATION OF RECRUIT

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

May 17th, 1918. (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	21 yrs.	4 mths.	Distinctive marks and marks indicating congenital peculiarities or previous disease.
Height	5 ft.	8 ins.	
Chest measurement	fully expanded 34 ins.		Little finger left hand amputated
	range of expansion 3 ins.		
Complexion	medium.		
Eyes	Grey		
Hair	Brown.		

HEARING Regional Tribunal

Depot Bn.

Regt.

Place London, Ont. Date May 17th, 1918.

M. F. W. 133.

14-3-19 W.A. Pte

REGIMENTAL DOCUMENTS

NAME EDWARDS RONALD REGT. NO. 3135-786 UNIT 1st D. Btn. W.O.R. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1.	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1.	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)					
1.	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				62802	
1.	DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category
1.	MEDICAL EXAMINATION (M.F.W. 129)					DEMOB
	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
1.	LAST PAY CERTIFICATE (M.F.W. 44)					
1.	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1.	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					

C

H

I

W. 2589
100M-11-18
1772-39-1377

NAME. Edwards Ronald | RANK. Pte. | REC. FILE. 1 ✓

T.O.S. May 17 1918

No.

W.D. Regt. 1st. Dpo. Bn. | CORPS. 3135786. D.O.R. | HQ. FILE. No 126.

ENLISTMENT, PLACE. London, Ont. DATE. May. 17th 1918.

BIRTH DISCHARGE, PLACE, England, Oswestry. Salop. DATE. Jan. 3rd 1897.

REASON. SOS demob. 21-1-19.

OO 21 21-1-19 1/WOR

ADDRESS ON DISCHARGE.

DOCUMENTS.

RELATIONSHIP Mother

NEXT OF KIN Edwards, Mrs Ralph Bevan.

ADDRESS 27. The Crofts, Nantwich. Eng.

L. L. 20496—M. & D. 7908—100m.

CHARGED OUT			RETURNED		CHARGED OUT			RETURNED	
TO	DATE	BY	RECEIVED BY	DATE	TO	DATE	BY	RECEIVED BY	DATE

No. 3135786 RANK Pte. NAME Edwards R.

T. O. S. UNIT

Trans. Jr. N Co. 17-5-18 / St. Depot Battalion W.O. Regt.
D.O. 138 May pay list

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 May 17	1918 May 31	n.		

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3135786 (Rank) Private

Name (in full) Ronald Edwards enlisted in

the 1st Depot Battalion W. O. R.

CANADIAN EXPEDITIONARY FORCE at LONDON, ONT. on the seventeenth

day of May 19 18

HE served in Canada

and is now discharged from the service by reason of Demobilization of

Canadian Expeditionary Forces R.O. 1357.

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

Age 22 years 0 months

Height 5 feet 8 inches

Complexion medium

Eyes grey

Hair dark brown

Marks or Scars NIL

Ronald Edwards
Signature of Soldier

Issuing Officer Major
For O.C. 1st Depot Battalion W. O. R.
Rank

Appointment

Date of Discharge 21-1-19.

Signed at LONDON, ONT. this twenty-first day of January 19 19

in Military District No. One.

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
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 .....

.....

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

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 E D W A R D S. Christian name Ronald.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 727832 AC.

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

4. Address (including street and number, if any) R. R. No.1., Thorndale, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 17th. day of May. 1918. ~~XXX~~7, by the undersigned medical board sitting at London, Ont.

5. Age as stated 21 Years 4 Months. 6. Apparent age 21 Years 4 Months

7. Height 5 Feet 8 Inches. 8. Weight 132 Pounds.

9. Chest measurement { Minimum 32 Ins. / Maximum 34 1/2 Ins. } 10. Complexion Medium. { Eyes Grey / Hair D.Brown }

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

13. Number of vaccination marks { Right arm 4 / Left arm ✓ } 14. When vaccinated last Childhood.

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

Little finger, left hand, amputated.

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 II

RIGHT EYE D 20/20 LEFT EYE D 20/20

HEARING R Normal L Normal

D B Wilson Capt AMC President.

W S Bolesheim Capt Member. Member.

Signature of Man Ronald Edwards

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
2/6/18	Cw Pennecott	Lieut M.O.	2/6/18	Cw Pennecott	M.O.
		M.O.	7/6/18		M.O.
		M.O.	13/6/18		Lieut Cam M.O.

Joined day of MAY 17 1918 191 at LONDON, ONT.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Battalion, W.O.R.	3135786		MAY 17 1918
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
London Ont	21-1-19	W V McIntosh	Capt Cat A II

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.

6

Surname Edwards Christian Name Ronald

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battn., W. O. R.

Regimental No. 3135786 Rank Pte C. E. F. Name EDWARDS Ronald

Enlisted (a) On S.O. Terms of Service (a) ..... Service reckons from (a) 17-5-18

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) Farmer

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				
	London, Ont W. E.	Discharged- 21-1-19. Demobilization of Canadian Expeditionary Forces R.O. 1357 LAST ENTRY MADE.			

Major
For O.C. 1st Depot Battalion W. O. R.

(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				

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. 313586 Rank Pte. Surname Edwards (Given name in full) Ronald

Unit or Corps W.O.R. Birthplace Farnborough Hants Eng.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 132 lbs. Height 5 ft. 8 in. Colour of Eyes Grey

Nutrition Good

Pulse 70

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Pigmented area right elbow

Opinion as to general health and physical condition A.1.

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 Yes. 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.

Amputation of little finger at proximal joint. 17 yrs ago. No disability due to service

(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 London.....(Canada)

Date 21-1-19..... Signed W. V. McEntosh 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 Ronald Edwards

(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

Jan P.L.

6/2

Original

M. D. 1

No. 12

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. 3135786 .....Rank. Pte.....Name. EDWARDS Ronald

Corps.... 1ST DEPOT BATTALION W. O. REGIMENT ..... who was... Discharged R.O.1357

On.....21/1/19.....191...to.....

Insert "discharged" or "transferred"

The following is a statement of the account of the above named from. 21/1/19.....191.....to. 21/1/19..191...., the inclusive date of transfer or discharge.

Dr.	$	¢		$	¢
Bal.dr.from prev.mo.....			Bal.Cr.from prev.mo.....	45	10
Advances by Cheques)No.....			Regt.Pay.1.dys.@ $..1¢....	1	00
)No.....			Fld.Allow.1.dys.@ $...¢..10		10
A.P. and S.A. No....to...			S.A.x(Monthly).....		
Error in bringing bal cr, from Oct P.L. Obs #5 Oct. Other charges.....	31	90	Other Allces.x.....		
Pym't.on trans.or disc.No 15042	14	30	Other Credits.X.....		
Bal.Cr.(to be pd.by new unit			Bal.Dr.(to be deducted by new unit)		
	46	20		46	20
Total.....			Total.....		

x Give particulars.

Kit Clear Class 4

A monthly stoppage of $.Nil(#) has...(##)been pd. on acct. of A.P. (for mo.of.....191...) (and S.A.for mo.of....191...) (to) Assignee..... (Address).....

(#)Insert amount to be assgnd, whether it has been paid or not
(##)Insert "not"if amt. has not been pd.for period of account.

On transfer of an Officer
Outfit Allce.of $....., has been pd.by Paymaster, Military DistrictNo..

REMARKS:-
State(1)date of enlistment.17/5/18.....
(2)if married and if a S.A.Card has been submitted.No. No.....
(3)cause of discharge.DEM.C.E.F.....authority.W.O.R. DO. 21...
(4)authority for transfer.....

NOTE:-
S.A. and A.P.Card and Index Card (M.P.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 Payliss of the Unit.

Date. JAN 22/19

Place. LONDON, ONT.

G. Butler
Captain
Paymaster 1st. Depot Bn. W. O. R., M. D. No. 1

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 1

NAME OF SOLDIER EDWARDS, RONALD

REGIMENT W. O. R. RANK PTE. No. 3135786

M.F.B. 465.
50M.—2-18.
1772-30-950.

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	Pyrrhea	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	MAY 17 1918		1/3								1/8										J. W. Evans	1	Completed MAY 17 1918
	Jan 21/19																				J. W. Evans	1	Completed on discharge

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

Military District No. 1
FEB 15 1919
102-E-4
I M. D. .....

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3135786

2 Rank. Private

3. Name. EDWARDS, Ronald

4. Unit. 1st Depot Battalion W. O. R.

5 Date of Discharge 21-1-19 Place LONDON, ONT.

6 Reason for Discharge Demobilization of Canadian Expeditionary Forces

R. O. 1357

Daily Order No. 21- d/ 21-1-19.

7. Authority.

8. Proposed Residence after Discharge R R 1 Thorndale Ont

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.? 39

Ronald Edwards

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date 21- 1-- 19.

Signature R D Mack Major

(O. C. Discharging Unit.)

For O.C. 1st Depot Battalion W. O. R.

M.F.B. 218a—300M.-11-18—1772-39-113.

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