

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

ORIGINAL

1. Surname Embery
2. Christian name Leslie
3. Present address Keewatin, P.O., Ontario, Canada.
4. Military Service Act letter and number 693606 TC
5. Date of birth Aug. 8, 1893.
6. Place of birth Wells, Somerset County, England.
7. Married, widower or single Single
8. Religion Methodist
9. Trade or calling Miller
10. Name of next-of-kin Mrs. Mary Embery
11. Relationship of next-of-kin Mother
12. Address of next-of-kin 43 Talbot St., Rishton, Near Blackburn, Lancashire County, England. L. E.
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 Leslie Embery (b) Date Oct. 11, 1917. (c) Category A.II.

DECLARATION OF RECRUIT

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

Leslie Embery (Signature of Recruit)

DESCRIPTION ON CALLING UP

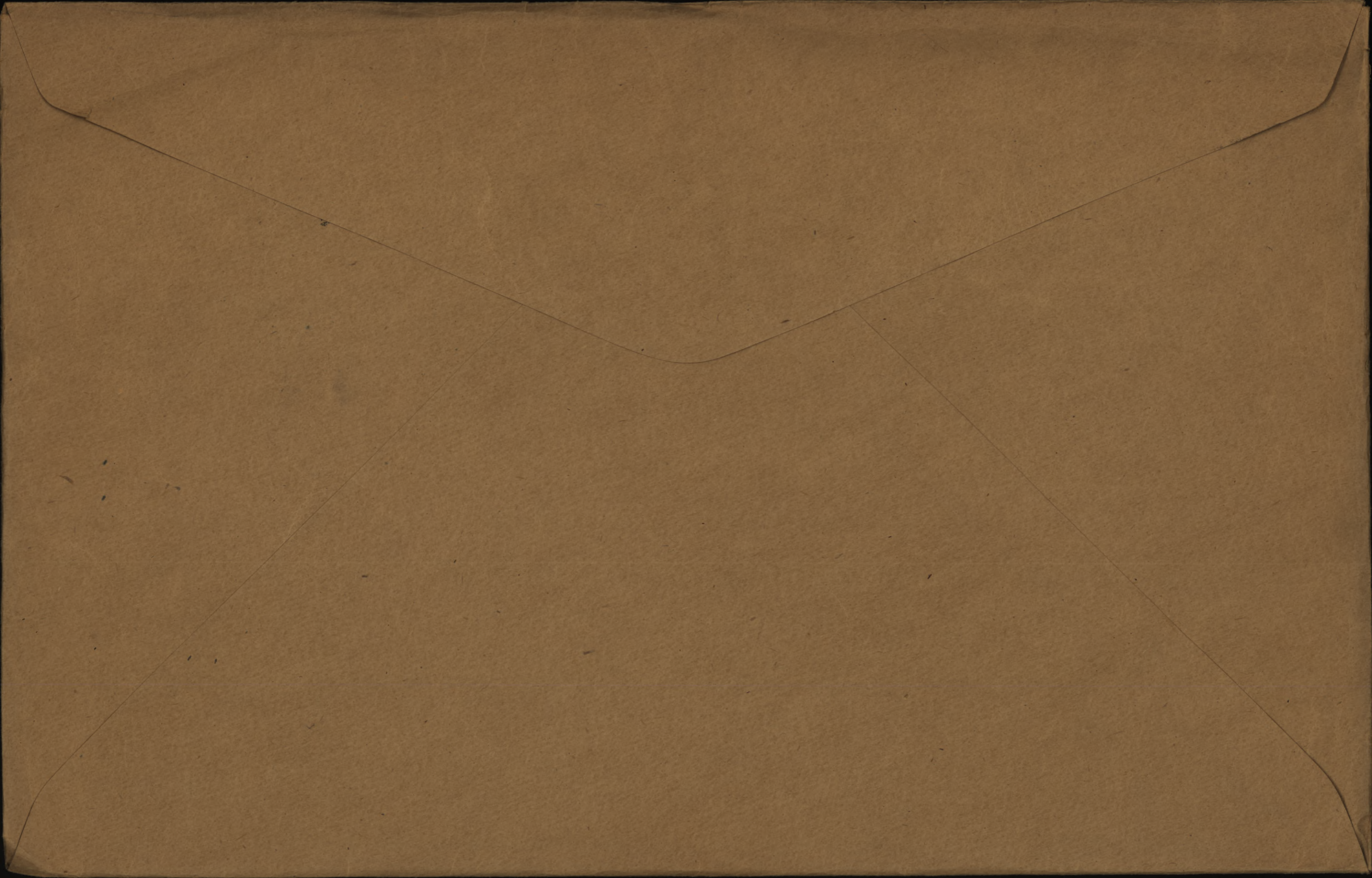
Apparent age 24 yrs. 2 mths.
Height 5 ft. 6 1/2 ins.
Chest measurement } fully expanded 34 ins.
range of expansion 2 ins.
Complexion Fair
Eyes Brown
Hair Brown

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

nil

H. P. Ashton Major
O. C. "H" Coy. 1st. Depot. Battalion
Manitoba Regiment Depot Btl.
Regt.

Place Port Arthur, Ontario, Canada Date April 22, 1918.



KR Rank

Name EMBERY, Leslie. ✓

Reg'l No. 2383839. ✓

65th Dft Ist Bn MAN. Reg. If in perm. Corps, }
Unit What Unit? }

Married or Single Single. ✓

Place and Date of Enlistment Port Arthur. April 22nd 1918. Place of Birth Wells, Somerset

County, England. ✓

Name and Address, Next-of-Kin Mrs. Mary Embery. ✓

43 Talbot St. Rishton, Nr. Blackburn, Lancashire. County Relationship Mother. ✓

Eng.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

N.E. R.R. No. 18191
File No.
Category O. R. C. 20.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents
Date.	From whom received.				
			Embarked City of Vienna	28. 6. 18	
			Re-embarked Thangwa	10. 7. 18	
			Arrived in England.	22. 7. 18	
19-8-18	18 th Res	IOS from Canada	Pte Seaford	22-7-18	Proc. 231.
21-8-18	—	on Com. Trenhan Pond, Segreg Camp	Pte —	10-8-18	Proc. 233.
23-9-18	—	leaves on Com to Seg Area	Squad	20-9-18	266
18-11-18	—	SO Sto 52 nd Bn Spec	Pte —	16-11-18	Proc. 322. 52 B. 112. 29 th 18.
19 3 19 52ND BN PROC, TO ENGLAND			TO. 2-19. D O. 9		

15 3 19 52BN PROC TO CANADA 17 3 19 D O 19

SIL NO 41 & DISP AREA, L

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.

65th Dift. Unit, Regiment of Corps H^o Coy's 1st. Depot Battalion, M.R. Man: Regt.

Regimental No. 2383839 Rank Pte. Name Embery Leslie
C. E. F.

Enlisted (a) 22-4-18 Terms of Service (a) Period of War Service reckons from (a) April 22, 1918.

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. Civil Miller Military Nil

Extended Re-engaged Qualification (b)

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				
19.8.18		Transferred to overseas draft ^{#65} 2/6/18 Certified Major O. C. "H" Coy. 1st. Depot. Battalion, Manitoba Regiment.	Montreal	6-7-18	Embarked London 22-7-18 Pt, 2.D.O. 231
19.8.18	O.C. 18th Res. En	Taken on Strength on arrival from CANADA	SEAFORD.	22.7.18	
18-11-18	"	Drafted to 52nd Bn	"	18-11-18	PT 200 3W. L.P. Pumbley Capt. a/Adj. 18th, Can. Res. En
21.8.18	18th Res	o/com Frencham Pond Seagoon	Seaford.	10-8-18	PT II. 233
23.9.18	"	beases com	"	20-9-18	266. L.P. Lieut

CERTIFIED CORRECT
 3 NOV 1918
 CIVIL RECORDS, LONDON

(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.

War Service Badge
 Class "A" No. 74082

M.F.C.
 2022606/2 Res. En.

2383839 Pte. Embury L.

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				

18-11-18.	C.I.B.D.	Rfct.-T.O.S. 52nd Can. Inf. Bn.		17-11-18.	N/R. Pt. 11
20-11-18.	"	To CCRC.	Fld.	20-11-18.	112 d29-11-18.
"	CCRC.	Joined.	"	"	N/R.
"	"	To Unit	"	"	"
14.12.18	"	Jd. "	"	14.12.18	"
28.12.18	52nd Bn.		"	24.12.18	B213.
O.C. Cdn. S.O.S. for demobilisation to C.E.C. Cons. Cmp. Le Havre		<i>M.P. Depot Seaford Proceeded to England</i>		N/R. Pt. 2.0/5 8/19 10-2-19	

ba...
 Lieut. for Lt. Col A.A.G.
 Cdn. Sect. G.H.Q.

S.O.S. OMFC. to CEF daily orders Part 2. 19. 15 MAR 1919

Blanchard Lieut for Lieut.-Col.,
 O.C. 52nd Canadian Infantry Battalion.

EMBARKEED S S OLYMPIC

3 THAMPTON 17-3-19

A.S. Blanchard
 Capt. Staff
 Adjutant, No. 8 Trans-Atlantic Conducting Staff

14-3-19 T.O.S. Dispersal Station #L 2094 Pa 2

and Dispersed 31-3-19 .. do .. 3

Blanchard Lieut.
 for O. C. 10 District Depot.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge.
Class 'A' N^o 74082

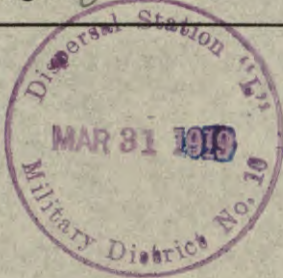
THIS IS TO CERTIFY that No. 2383839 (Rank) Pte
 Name (in full) EMBERY, Leslie enlisted in
 the 1st Depot Battalion M.C.R.
 CANADIAN EXPEDITIONARY FORCE at Port Arthur on the 27th 22nd
 day of April 1918
 HE served in 52nd Battalion M.C.R.
 and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age <u>25</u>	Marks or Scars <u>Tattoo right</u>
Height <u>5'6 1/2"</u>	<u>fore arm</u>
Complexion <u>Fair</u>	
Eyes <u>Brown</u>	
Hair <u>Brown</u>	
<u>L. Embery.</u>	
Signature of Soldier	

[Signature]
 Issuing Officer
Serjt
 Rank

Date of Discharge



Date March 31st 1919

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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____

Name (in full) _____

CANADIAN EXPEDITIONARY FORCE at _____

HM served in _____

and is now discharged from the service by reason of _____

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

Mark or scars _____

Height _____

Complexion _____

Eyes _____

Hair _____

Signature of Soldier _____

Date of Discharge _____

Issuing Officer _____

Rank _____

N.B. - As no duplicate of this Certificate will be issued, any portion thereof same is requested to forward in an unopened envelope to the Secretary, Military Branch, Ottawa, Canada.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

ORIGINAL

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.

Ord. to Schedule by

1. Surname Cumber Christian name Leslie
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 693606-28
 3. Consecutive number on schedule of men reporting for service (if he appears on it) 31
 4. Address (including street and number, if any) Belevation

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11 day of Oct 1917, by the undersigned medical board sitting at Belevation

No. 9

5. Age as stated 24 Years 4 Months. 6. Apparent age _____ Years _____ Months
 7. Height 5 Feet 6 1/2 Inches. 8. Weight 133 Pounds.
 9. Chest measurement { Minimum 32 Ins. 10. Complexion Fair { Eyes Brown
 { Maximum 2 Ins. { Hair Brown
 11. Physical development. { Good
 { Fair
 { Poor 12. Smallpox marks _____
 13. Number of vaccination marks { Right arm _____
 { Left arm 3 14. When vaccinated last Childhood
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

Signature of Man Leslie Cumber

16. Slight defects but not sufficient to cause rejection _____
 The man denies having had { Rheumatism We find no evidence of past { Rheumatism
 { Tuberculosis { Tuberculosis
 { Syphilis { 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

W. G. Lee Capt President.
W. M. Carr Capt Member.
W. G. Lee Capt Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
11-5-18		<u>Mr Brown</u> M.O.	27-4-18		<u>Mr Brown</u> M.O.
		M.O.	4-5-19		<u>Mr Brown</u> M.O.
		M.O.	11-5-18		<u>Mr Brown</u> M.O.

Joined 22nd day of April 1918 at Port Arthur, Ontario, Canada.

CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment <u>"H" Co'y 1st. Depot Battalion</u>	<u>2383839</u>		<u>April 22, 1918.</u>
Transferred to..... { <u>M.R. 18th Can Reserve Battalion,</u>			<u>JUL '2 1918</u>
{ <u>Overseas Draft #65</u>			<u>15-6-18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD. 18-11-18

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.

INSTRUCTIONS

1. On examination the specimen should be mounted on a slide in the center of the field.

2. On the line of vision, a small amount of water should be added.

Only such entries to be made on this sheet as will show

3. Condition on first examination.

4. Condition on last examination.

BRITISH
MUSEUM
NATURAL HISTORY

BRITISH MUSEUM
NATURAL HISTORY

BRITISH MUSEUM
NATURAL HISTORY

No.	Species	Locality	Collector	Date	Sex	Age	Color	Measurements	Remarks
1									
2									
3									
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BRITISH MUSEUM
NATURAL HISTORY
DEPARTMENT OF ZOOLOGY
LONDON

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) EMBERY, L.
 REGIMENT 52nd Bata RANK Pte No. 2385839
 Date of Examination in England _____ Date of Examination in France 6/1/19

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will 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

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
 - (c) In France
- NO.

Signature of Dental Officer [Handwritten Signature]

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. 2383839 Rank P.T.F. Surname ^{E.M.} BERY
 (Given name in full)
Leslie
 Unit or Corps 52nd Battr. M.A. Birthplace England

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

1. GENERAL DESCRIPTION: Estimated
 Physique good Weight 130 lbs. Height 5 ft. 10 in. Colour of Eyes brown
 Nutrition good
 Pulse 80 regular
 Condition of arteries soft
 Vision Rt. 4/12 Left 4/12
 Hearing (conversational voice) Rt. 2 ft.
 Left 2 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
Vase marks childhood
Tattoo mark Rt forearm
(closophards heart) -

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.

None

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Prunnett (Overseas)

Date 2-1-2-19 Signed J. Michael 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 Leslie Embury

(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.

Signature

(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.)

WDM

689.

FORM OF WILL.

I, Leslie Embery (Name in full)

Regimental Number 2383839 serving in "H" Co'y 1st. Depot Batt'n M.R. of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

<u>Nil</u>	} Name and Address of person or persons to whom it is to go.
<u>Nil</u>	
<u>Nil</u>	

absolutely, and my personal estate I bequeath to

<u>Mrs. Mary Embery, 43 Talbot St., Rishton,</u>	} Name and Address of person or persons to receive personal estate* (See note).
<u>Near Blackburn, Lancashire County, England.</u>	

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 22nd day of April A. D. 1918

Leslie Embery. Signature of Soldier.

*N.B.—Personal estate includes ~~pay, effects, money in bank, insurance policy in fact~~ everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Albert Housineau
 Address of Witness "H" Coy 1st Depot Batt'n M.R.
 Occupation of Witness Soldier

Signature of Second Witness W. H. H. H.
 Address of Witness H Coy 1st Depot Batt'n M.R.
 Occupation of Witness Soldier

FORM OF WILL

I, _____ of the County of _____ State of _____ do hereby certify that I am of sound mind and memory and am not under any legal disability and I am not married and I have no children and I have no other persons whom I desire to take care of and I desire to dispose of my property as hereinafter expressed.

Name and Address of Person to whom I desire to give my property

Name and Address of Person to whom I desire to give my property

IMPROVED NOTE

I hereby give, devise and bequeath all and singular the real and personal property which I own at the time of my decease unto the person named above in this will to have and to hold unto the said person, his heirs and assigns forever.

I hereby certify that I am of sound mind and memory and am not under any legal disability and I am not married and I have no children and I have no other persons whom I desire to take care of and I desire to dispose of my property as hereinafter expressed.

not eligible for W.M. France 16-11-18

Number

2383839

Rank

ptt
~~10~~

Surname

EMIBERY

Christian Name

Reverie

Units

M.R.

Theatre of War

England.

Date of Service

22-7-18.

Remarks

Latest Address

*Keewatin P.O.
Ont.*

Roll No.

A Page 3/19

200m.-2-21.M.

DATE

HISTORY

CASUALTY BRANCH

(FILES)

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

HISTORY

DATE

SURNAME.

Embery

10 CARD NO.

CHRISTIAN NAMES

Leslie

DO94-4-479, 1050.
FOLL.
SOS Demol 31-3-19

REGL. NO.

2383839

RANK

Pte.

UNIT

Man. Regt. 1st Depo. Bn.

T. O. S. April 22 1918

FORMER CORPS

Nil.

D.O. Part II No 113

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Embery, Mrs. Mary

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

43 Talbot St, Rishton, Mr. Blackburn,
Lancs. Eng.

COUNTRY OF BIRTH

England, Wells, Somerset Co.,
Port Arthur, Ont.

DATE

Aug. 8th, 1893

PLACE OF ATTESTATION

DATE

Apr. 22nd, 1918

1/2 11-7-18

1316
5

1918 24-3-19 290
179

Pte

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

ASSIGNED PAY ENGLAND OR CANADA SEPARATION ALLOWANCE ENGLAND OR CANADA
 EFFECTIVE DATE: 1.7.18. EFFECTIVE DATE:
 AMOUNT: 1500 AMOUNT:-

NAME: EMBERY Leslie
 NUMBER: 2383839 126

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Mary Embery mother
 43 Turret St. Rishton
 Near Blackburn, Lancs, Eng.

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT
 L96 Can. 15/6/18 Sgt

UNIT AND TRANSFERS

ORIGINAL UNIT: A/65, 1 Det. In. Man Reg
 DATE ACCOUNT FIRST OPENED: 16/6/18

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
3/2	5716	Tald	935				
5/2		Rdw	3407				
16/2	129	B'shth	973				

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T SP'D UNIT TRANSFERRED TO
 18th Res

PARTICULARS OF RENDERING NON-EFFECTIVE: Disch to Can 27/1/19 P.P. 7/16/19 P.P. 1/19/19 P.P. 23206 B'shth Tnd 10 Red Bal. 44.45- L96 D 868

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918									650		
15/6/18	Dis from Can										
Aug	16.6.18 to 31.7.18 P.A.	5060		623672 a.p. July Aug			30				
	P.A.	3410		A.R. 2787 29/7/18 Det. Stenham	487						
				" " 1 A.R. M.R. C.K. Arthur	5						
				" 3647 19/8/18 Det. Stenham	487				4646		
		8470			1474		30				
Aug	P.P.	33		D 22879			15				
				AR 5001 3.9.18 " "	487						
				" 1666 26.9.18 18 Res.	1460				4499		of pay
		33			1947		15				
Oct		3410		D 65339			15				
				AR 1502 9/10 " "	2433				3976		
				✓ 2022 28/10 " "	973				3003		
		3410			2406		15				
Nov		33		L 3.1.8 E12541			15				
Dec		3410		AR 2189 11/11 " "	1460						
Jan		3410		C 44736			15				
				AR 3414 27/11 3000000	1306						
				✓ 3820 9/12 " "	373						
				L 3.1.8 6282			15		5484		
		10120			3139		45				

NUMBER C. 2383839 RANK

Pl.

NAME Cumby L

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Forward.					5484		
Feb		3080		L 3.18 6.1337			15		8564		
				AR 491 3 1/2 - 664206 6	373				4119		
				✓ 471 4 1/2 5232 11	373				4445		
				✓ 4735 18 1/2 ✓ 27	373				5313		
				Cap 54299	1119		15		868		
				CP 25143 5 1/2 hdu 65	3407						
				AR 5116 6 1/2 5232 69	933						
				✓ 139 16 1/2 ✓ 89	973						
				✓ 755 8 1/2 ✓ 136	973						
		3080			7405		30		1241		

5313

LD 17.3196 Can. L 41. M R D

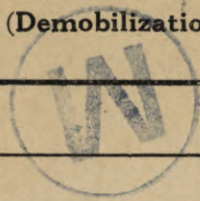
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War Service Badge
Class "A" No. 74082

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

U



1. No. 2383839	
2. Rank. <i>ptc</i>	
3. Name. EMBERY Leslie	
4. Unit. 5 th Band Battalion	
5. Date of Discharge	Place
MAR 31 1919	Port Arthur Ont.
6. Reason for Discharge. Demobilization	
7. Authority. D.O. Sgt	
8. Proposed Residence after Discharge. Redwater 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.?

.....

L. Embery
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....

Date.....

MAR 31 1919 PORT ARTHUR, ONT.

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. 133).
2. Casualty Form (A.F.B. 103).
3. 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)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and clothing } Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851). *+ duplicate*
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group *B*

Checked by No. *[Signature]*

Date *13/3/19*

