TRIPLICATE

ATTESTATION PAPER.

~~ORIGINAL~~

No. Triplicate

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. 439827.

(ANSWERS.)

1. What is your name? Norman Fleet
2. In what Town, Township or Parish, and in what Country were you born? Manchester England
3. What is the name of your next-of kin? Mrs S. T. Cooke
4. What is the address of your next-of-kin? 162 Brent St, Port Arthur Ont
5. What is the date of your birth? January 7th 1892
6. What is your Trade or Calling? Clerk
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? Inoculated N.F. Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? No
    If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

Norman Fleet (Signature of Man.)

E. Field (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Fleet, Norman, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Norman Fleet (Signature of Recruit)

Date Sept. 25th 1915. E. Field (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fleet, Norman, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Norman Fleet (Signature of Recruit)

Date Sept. 25th 1915. E. Field (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at P. Arthur this 25 day of Sept. 1915

A. W. Hay L'al (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

A. W. Hay L'al (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-79-841.

Description of Norman Fleet on Enlistment

Approximate Age 23 years 8 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 9 ins.
Chest measurement. Girth when fully expanded	35½ ins.
Chest measurement. Range of expansion	3 ins.
Complexion	Fair
Eyes	Gray.
Hair	Sandy.
Religious denominations. Church of England	Yes.
Presbyterian	
Methodist	
Baptist or Congregationalist	
Other Protestants (Denomination to be stated.)	
Roman Catholic	
Jewish	

Distinctive marks, and marks indicating peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has [illegible] before, he will, unless the man acknowledges to [illegible] service, attach a slip to that effect, for the information of the Approving Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.

Date Sept. 25th 1915. W. McCullough

Place Pt. Arthur Ont. Capt. A.M.C.

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Norman Fleet having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

A. W. Hayes (Signature of Officer)

Date Sept. 25th 1915.

BP 27.9.18.

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

Attestation Papers.....1/3

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.....1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A.2B 122-1
A.2B 178-1
Leave card
pay card

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

~~DISCHARGE~~ DOCUMENTS

R. O. No.....

H. Q. No.....

Name FLEET. NORMAN.

Regt. No. 439827 Rank Pte.

Corps 52nd Can. Bn.

Killed in Action 6.10.1

09153

09153

1R122

2
15 29
15 29
11-29

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 52nd Can: Bass.

Regimental No. 439827 Rank Pte Name ~~Flees~~ Fleet N.

Enlisted (a) 25.9.15 Terms of Service (a) Mobilization Service reckons from (a) 25.9.15

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)

Report Date	Report From whom received	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.
		Landed in France		21:2:16	
		EMBARKED FOR FRANCE.		20 2 16	13144. C.Y. 1844. Q.M.G.2.
20/5/16	O.C. 52 B.	Shrap 2 Chest		20/5/16	Letter #60 #24/5/16
22/5/16	#1 Cdn Gen.	S.W. Cheek l. adm.	22/5/16 #1 Gen.		W3034 #356
26/5/16	"	" tfs	#6 Conv Dep	26/5/16	W3034
21/5/16	10 CFA	" " adm	10 CFA	20/5/6	a36 #69 3/6/16
		tf	3 CFA	21/5/16	
4/6/16	CBD	Left for Unit	Fld	4/6/16	UR #72 8/6/16
27/5/16	3 CFA	S.W. Cheek adm	3 CFA	20/5/16	a36 #74 10/6/16
		tfs	17 CCS		
31/5/16	CBD	Taken on stgh	CBD	31/5/16	UR #75 12/6/16
26/5/16	17 CCS	GSW cheek L. adm	17 CCS	20/5/16	a36 #75
		tfs	18 A.T.	21/5/16	
10/6/16	O.C. 52nd	Joined Unit	Fld	7/6/16	B213

29/7/16 O.C.52nd Bn.Confirmed as L/Cpl.18/2/16.Letter Pt.11 D.O.7/8/16.

(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				
14.10.16	O.6 52B.	Killed in action		6.10.16	B213 Pt II S.O. #47 d/23 10/16
					B Johnston ..... Lieutenant for Lt Col. A.A.G.
18.2.16	52 Bn.	To be L/Cpl	Bramshott.	18.2.16	Pt II O.45.
7.8.16	"	Conf. in App. L/Cpl	Field	18.2.16	" 21
					L E Candy ..... LIEUT: FOR LT: COL: I/C RECORDS. C.O.M.F.

V
R—122.

Rank ~~Pte.~~ L/C. Name FLEET, Norman Reg'l No. 439827

Unit 52nd Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Pt. Arthur Sept. 25th 1915. Place of Birth Manchester, Eng.

Name and Address, Next-of-Kin S. T. Cooke,

162, Brent St. Port Arthur, Ont. Canada Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/F R B No 9
File R L
Category Kin A

Discharge, Date and Place Reason 25-7-893. Character 16

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	K.A. B.R. REMARKS Taken from Official Documents
		Arrived in England		3 DEC 1915	
18.2.16.	Ch 52nd Batt.	To be Lce Corporal.	Bramshott.	18.2.16.	Pt II Or no 45. 18.2.16.
				20-2-16	NR
29.5.16	"	Embarked for France. Adm No 1 CANADIAN GENERAL HOSP.	ETAPLES	22.5.16	CLA. 66. G.S.W. Cheek
31.5.16	"	Tfr No 6 CONVALESCENT DEPOT	"	26.5.16	" 68. "
14.6.16	"	Dis No 6 CONVALESCENT DEPOT	~~BOULOGNE~~ Etaples.	11.6.16	" 80. "
7.8.16	"	Conf in Appt. Lce Corporal.	Field.	18.2.16	Pt II O 21.
23.10.16	"	Killed in Action	"	6.10.16	" 47.
27.10.16	"	" " "	"	6.10.16	CLA 182 K.A.

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				

ORIGINAL.

~~439827~~

Fleet

MEDICAL HISTORY SHEET.

439827

Surname Fleet *Christian Name* N.

Examined { on 25 day of Sept 1915
at ~~Pte~~ Port Arthur

Birthplace { City or Town Manchester
County Eng.

Apparent age 23

Trade or occupation Clerk

Height 5 Feet 9 Inches.

Weight 163 Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 38½ inches.

Physical development Good

Small-Pox Marks —

Vaccination Marks { Arm Right. Left.
Number 3

When Vaccinated last 1915

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Approved by W. McCullough

Rank Capt A.M.C. M.O

Date	Fit or Unfit	Examined for Re-engagement,
		M.O
		M.O.
		M.O
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
1915	Good	W. McCullough M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
1/10 '15	Good	W. McCullough M.O.
12/10 "	"	M.O.
22/10 "	"	M.O.

Enlisted on 25 *day of* Sept 1915 *at* Port Arthur

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	52nd B.B.	439827		25 Sept '15
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B.—This sheet 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.

100m.—5-15.
H. Q. 1772-39-439

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				

P-56

Rank Pte. Name FLEET, Norman Reg'l No. 439827

Unit 52nd Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Pt. Arthur Sept. 25th 1915. Place of Birth Manchester, Eng.

Name and Address, Next-of-Kin S. T. Cooke,

162, Brent St. Port Arthur, Ont. Canada Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Kin A 6/10/16 Reason CLA 182 27/10/16 Character

PAY OFFICE, N. E. BRANCH NOV 16 1916 CANADIAN CONTINGENTS

Date From 1915	Date To	PAY No. of Days	PAY Rate	PAY Amo	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	Balance	Remarks, Casualties, etc.
Dec 1	Dec 31	31	1.00	31 00	31	10	3 10	c 10 00	44 10	39 86		17 03 17 03			34 06	10 04	Clothing Credit
1916 Jan. 1	Jan 31	31	1.00	31 00	31	10	3 10		34 10	132 181		14 60 9 73			24 33	19 81	
Feb 1	29	29	1.00	29 00	29	.10	2 90		31 90			9 92			9 92	41 79	
Mar 1	31	31	-	31 -	31	.	3 10		34 10	77 229	DSS	2 61 2 61			5 22	70 67	
				122 00	1		12 20	10 00	144 20			73 53			73 53	70 67	

122

Checked GWW

JUN 13 1916 Account rendered

BALANCE TRANSFERRED TO NEW LEDGER

Settled

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

D.M.S. 1300.

Surname: Fleet.

Christian Name or Names: A.

Reg. No. 439827.

Rank: L/Cpl.

Unit: 52nd Batt.

Co.

Troop

Batty.

Hospital

Date of Admission

Transferred #1 Can Gen Etaples. Hosp. 22.5.16

#6 Con Depot Etaples Hosp. 26.5.16

Hosp.

Hosp.

Diagnosis G.S.W. Cheek.

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

Killed in Action 6.10.16

DISPOSITION

Date

Dis 11-6-16

CL. 29.5.16 A66

" 31.5.16. A68

14-6-16 A80

27-10-16 @182

REMARKS

A.M.D. 2 Dept.

Bch. of D.G.M.S. O.M.F.C. London

R

EPITOME OF HOSPITAL TREATMENT.

Hospital	Adm.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

R. 149.

Name Fleet Norman *Rank* L/Cpl. *Reg. No.* 439827.

Unit 52nd.Battalion.

R.L. 25-7-893.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
22-5-16.	No.1.Can Gen Hospt.	Etaples.	GSWCheek.	A66.	M 7079.	
26-5-16	No 6 Conv. Depot	Etaples.	" "	A68.		
11-6-16	Discharged			A80.		
6-10-16	Killed in action.			A182.	9/324 26/10.	27/10/16.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

Fleet Roll Shows Fleet

~~FLETT~~, N. orman. 439827 L/CPl. 52nd Bnl 649-F-1228

~~[illegible]~~

Not eligible for 14/15 Star.

MEDALS & DECORATIONS-sister- Mrs.S. ~~T. Cooke~~ Allen,
~~161 Brent St.~~ 3597
~~Brent Park, Port~~
~~Arthur, Ont.~~

419 Bernard St.,
Fort William 17 5/22
Ont.

P & S. " "

Serial No. 793482

MEMORIAL CROSS nil (Mother predeceased - Unmarried)

Scroll Desp. MAR 22 1921 Regn. No. S.R. 15-4-21. 2-30482

Plague Desp. JAN 26 1922 Regn. No. PK 4794

(2)

Plaque rcvd 26.1.22
Plaque redesp 1.6.22 E 425
Scroll redesp 2.6.22 B 1500

217

Number 439827 Rank L. Cpl.

Surname FLEET

Christian Name Norman

Units 52nd. Bn Can Inf Theatre of War France

Date of Service 20.2.16

Remarks

Latest Address Sister Mrs S. Allen '17 5/32
419 Bernard St., Fort William, Ont

Roll No. 2 Page 18363

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

DESP
REGN. NOV 10 1922
NA 20253

M. F. W. 2536
100m.-5-18. 1772-39-1311

No. 39827
439827

RANK Pte.

NAME Fleet, N.

T. O. S. 25-9-15 D.O. 157 UNIT 5 2nd Battalion, C. E. F.
25-9-15.

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1915	1915			
Sept. 25	Sept. 30	✓		
Oct.		✓		
Nov.		✓		
Dec.		n.		

UNIT SAILED

NOV 23 1915

NAME Fleet, Norman (649-F-1228)

RANK & No. Pte. 439827 D

CORPS 52nd. Batt.

ENLISTMENT, PLACE Port Arthur DATE Sept. 25th, 1915. 'S'

FORMER CORPS Nil

COUNTRY OF BIRTH England, Manchester

NEXT OF KIN Cooke, S.

ADDRESS OF NEXT OF KIN 162 Brent St., Port Arthur, Ont.

DISCHARGE, PLACE DATE

Sailed from St John 275/8
Per S.S. California 23/11/15

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011.

H Q. 1772-39-839.

REMARKS:

H. Q. FILE No. 649-

NAME Fleet Norman

REGT'L. No. 439827

RANK AND CORPS Lce Cpl. 52nd Bttn.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
		C.
M7079	27-5-16	Adm. to no 1 Can. Gen. Hosp. Etaples May 22nd. (GSW check)
03729	26-10-16	Killed in action Oct 6/16
AFB2090a	Rouen 23/10/16	(Date rec. 3-3-17) Killed in Action 6/10/16.

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42-50m.-10-15.
H. Q. 1772-59-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 66	No 1 Can Gen. Etaples	22-5-16	G.S.W. Cheek
A 68	No 6 Base Depot Etaples	26-5-16	" " " "
A 80	" " " " "	11-6-16	" " " " Disc
a 182	Rept from Base	6-10-16	Killed in action

Married or Single: Single

Place of Birth: Manchester. England

Name and Address of Next of Kin: S. J. Cooke
162 Brent St. Port Arthur. Ontario

Relationship of Next of Kin:

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

COMPILED BY
CHECKED BY

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Confirmed L/Cpl.	15/2/16	DO 21 7-8-16
Killed in Action	6/10/16	DO 47 23/10/16

Of 182 27/10/16

Admissions to Hospital, &c

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 439827 Rank ~~Pte~~ L/Cpl. Name Fleet Roman

If in Perm. Corps What Unit | Unit 52nd Bn Transferred to N.E.B. Date 7/10/16 Authority DO 47

Permanent Force Allowances Transferred to Date Authority

Place of Attestation Port Arthur. Ontario Transferred to Date Authority

Date of Attestation Sept 25th 1915 Transferred to Date Authority

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Killed 7/10/16 Reason and Authority Killed in Action 6/10/16 DO 47 23/10/16

Account transferred to Non-Effective Branch (Date) Eff 7/10/16

Account transferred to Officers' Pay Branch (Date)

PAYMASTER'S OFFICE N.E. BRANCH NOV 10 1916 CANADIAN CONTINGENT

PB 8487

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Mar 31	122														144 20															73 53	70 67				
1/4 30/4	30	1 00	30	00	30	10	3	00							33 00			184	30/4						262					262	101 05				
1/5 31/5	31	1	31		31	10	3	10							34 10	225	15/5			3507	C.R.D.			256		426				682	128 33				
1/6 30/6	30	1	30		30		3	00							33 00			280	15/6	3744 387	16/4				256	261				517	156 16				
1/7 31/7	31	1	31		31		3	10							34 10	327	30/6	356	15/7					256	610					866	181 60				
1/8 31/8	31	1 05	32	55	31		3	10						840	44 05	427	31/7	459	15/8					262	261					523	220 42				15/2/16 to 31/7/16 - 168 dys @ 5¢
1/9 30/9	30	1 05	31	50	30		3	00							34 50					10107	25/11/16	DO 13				174				174	253 18				
1/10 6/10	6	1 05	6	30	6			60							6 90	570	30/9							610						610	253 98				Killed in Action 6/10/16 DO 47 Trans to Non Eff 7/10/16
															363 15																					
	311																											Balance transferred to N. E. Branch.			253 98				
N.E.B 1917 Mar														2 62	2 62																256 60				C.E.F. 62 C.E. Sch 549
Aug																									256 60					256 60					To Ottawa for debt 1-7/8 A 31/7

Checked C. W. Williams

Stamp: Auditor's Office 9:62

S.L.S.

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			

No. 439827 Name Fleet N. Sqn., Batty., or Company } D. Corps 52nd O. Bn. Date of enlistment } Sept 25 1915 G.C. Badges } — Service or Proficiency Pay }

Date of last entry in Company Conduct Sheet } Nil No. and date of last drunk } Nil Period not reckoning towards freedom from extra fine } Sheet No. 1 Signature O.C. Company, etc. } Character Good

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Killed				Ko in Actn					

Army Form B. 122

[P.T.O.

S.O. 785. W7436/1545. 2,500M. McC. & Co. Ltd.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

D.T. 439827

DUPLICATE.

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname FLEET *Christian Name* N.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Manchester County England.

Examined ... ... on 25th day of September 1915 at Pt. Arthur

Declared Age ... ... 23 years ____ days.

Trade or occupation ... Clerk.

Height ... ... 5 feet 9 inches.

Weight ... ... 163 lbs.

Chest Measurement: Girth when fully Expanded 35½ inches. Range of Expansion 3 inches.

Physical Development ... Good

Vaccination Marks: Arm ... Right Left; Number ... 3

When Vaccinated ... 1915.

Vision ... ... R.E.—V= L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

(b) Slight defects but not sufficient to cause rejection ... ... (b)

Approved by (*Signature*) W.L.McCullough

(*Rank*) Capt. A.M.C.

Medical Officer.

Enlisted ... ... at Pt. Arthur on 25th day of September 1915

	Corps.	Regtl. No.
Joined on Enlistment ...	52nd O'B.	439827.
Transferred to		

Became non-effective by

on ____ day of ____ 191 .

(*Signature*)

(*Rank*)

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

H. Kennedy Peter Lieut.-Col. In Charge of Records, Canadian Contingent

(5506.) W. 14971/M. 89. 750M. 1/16. C.P. Ltd

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P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in t

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing o future use. I The subsequen will be given i
	Day	Month	Year	Day	Month	Year			

r to the Sick List in the case of Warrant Officers treated in quarters.

	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
1915	Vaccination Good W.L.McCullough
1.10.15	Anti-Typhoid Inoculation Good W.L.McCullough
12.10.15	do. " "
22.10.15	do. " "

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
for the Officer in Charge of Records
Canadian Contingents.