

ORIGINAL 921276

ATTESTATION PAPER.

No.

NO. 2 CONSTRUCTION BATTALION C.E.F. CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname? Gans
1a. What are your Christian names? Young Joe
1b. What is your present address? Winnipeg
2. In what Town, Township or Parish, and in what Country were you born? Chatham Ontario
3. What is the name of your next-of-kin? Mrs M E Henderson
4. What is the address of your next-of-kin? 1414 Grant Street N.D. U.S.A
4a. What is the relationship of your next-of-kin? Mother
5. What is the date of your birth? 17th June 1896
6. What is your Trade or Calling? Pipe Fitter
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? No
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Young Joe Gans, do solemnly declare that the above are answers made by me to the above questions and that they 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.

Date Sept 16th 1916 (Signature of Recruit) Young Joe Gans (Signature of Witness) G.P. Gorman

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Young Joe Gans, 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.

Date Sept 16th 1916 (Signature of Recruit) Young Joe Gans (Signature of Witness) G.P. Gorman

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 Winnipeg this 18th day of Sept 1916 (Signature of Justice) P.B. Stalwell

Description of Joe Lam on Enlistment.

Apparent Age 20 years — months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5¹ ft 5-1/2" ins.

Chest measurement { Girth when fully expanded. 36 1/2" ins.
 Range of expansion 2 1/2" ins.

Complexion Black

Eyes ||

Hair ||

Religious denominations { Church of England
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
 (Denomination to be stated.)

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 OCT 23 1916 191 .

Place Luss

W. Grant
Leif Coull
 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.

Joe Lam 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.

C. H. Reis Capt (Signature of Officer)

Date OCT 23 1916 191 .

OCT 23 1916

REGIMENTAL DOCUMENTS

NAME *Gans, Young Joe (Pfc)*

REGT. NO. *931276*

UNIT *#2 Const Bn.* H. Q. FILE NO.

CONTENTS

DATE RECEIVED

(S)
TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

03212

DISCHARGE

Category

Demob

DESERTION

(H)

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

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)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

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)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

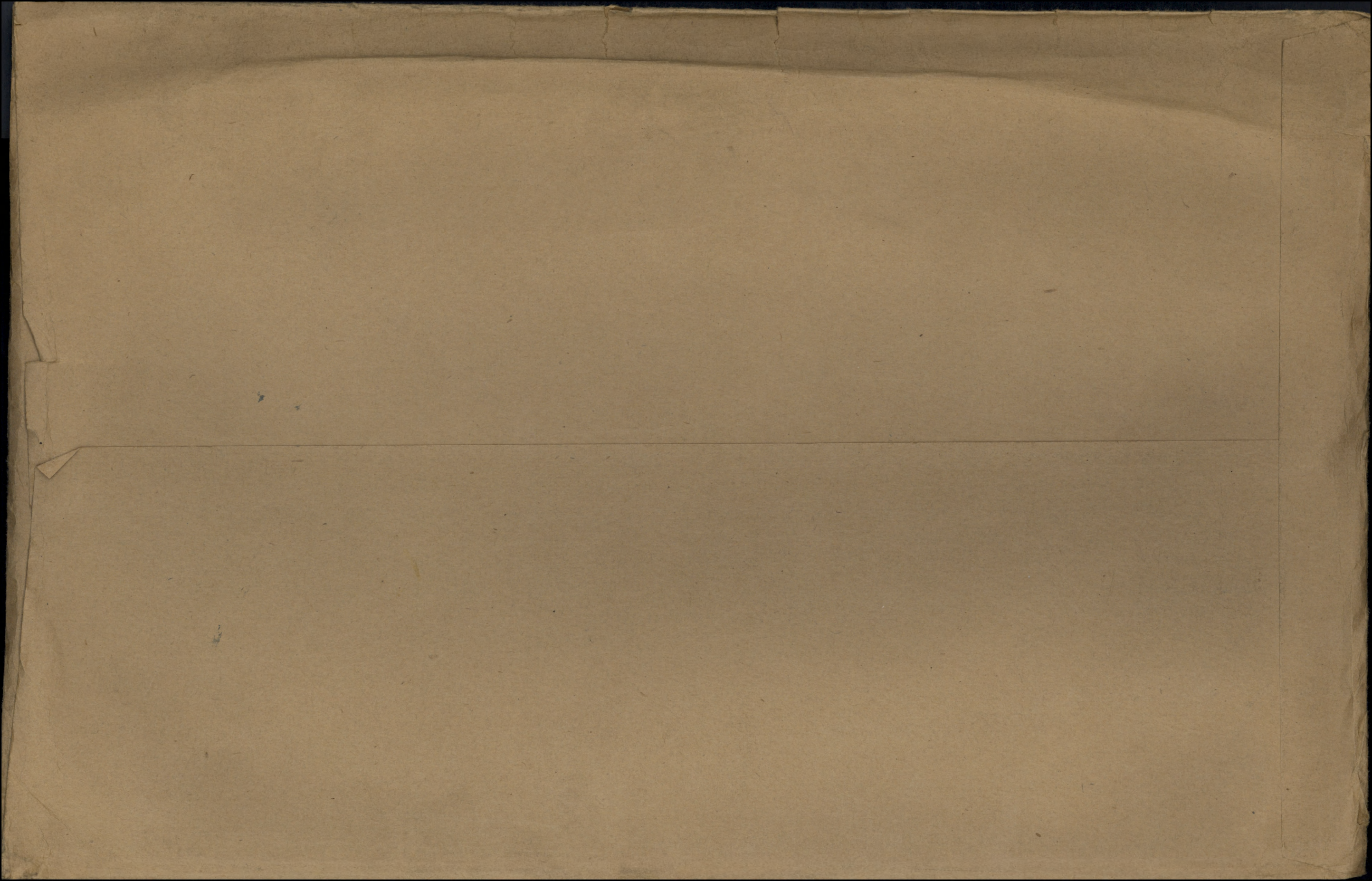
1 Q.F.W. W3997

1 M.F.W. 192

1 C.O.D.C. 5009A

14-29
21-2
33-2

1



P. 550
MARRIED OR SINGLE

5

PLACE OF BIRTH *B Hatham Ont*

NAME AND ADDRESS OF NEXT OF KIN *Lt. H. E. Henderson
1414 Bell Ave, Grand Forks, D.D.*

RELATIONSHIP OF NEXT OF KIN *Friend*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS						
	No. OF DAYS	RATE	AMOUNT \$ c.	No. OF DAYS	RATE	AMOUNT \$ c.	No. OF DAYS	RATE	AMOUNT \$ c.				1	2	3	4			
													No.	DATE	No.	DATE	No.	DATE	No.
										12 65	12 65								
											33 00								
											34 10								
											33 00								
											34 10								
											34 10								
											33 -								
											201 30								
											12 65	213 95							
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. RED. ENG.	ALLGE.							
Sep	bal		86						119 62										
Oct.	P.P.		34 10	D.N.A.R 436 30 ⁹ / ₁₇	9 73				10 133 99										
			34 10		9 73				10 133 99										

* Strike out whichever inapplicable

ASSIGNED PAY.	ENGLAND CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME
EFFECTIVE DATE:- 1-12-17		EFFECTIVE DATE:-		NUME
AMOUNT:- 20 ⁰⁰		AMOUNT:-		

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 Lee Henderson (friend)
1414 Bell Ave, Grand Forks N.D. U.S.A.

85 Feb 21 11/19

MR 161 17/17
2nd c.c.c.s

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
4/11/18	B	Canal	17				
9/1/18	6611	Can	4 66				
18/10/18	3576	B.R.D.G.	9 43				
			14 39				

PARTICULARS OF RENDERING NON-EFFECTIVE: B.P. Bal 58.42
R.P.6 " 39.03 Transferred to

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS
Mar.	Balance fwd.			
Apr	P. Pay	33 -		Ass Pay R 40057458. C 7C 29/3. ✓ 157. 17 Res. 4/3. ✓ 159 C 7C 30/3 a.R 266 22/4 C 7C June Dhall B7. 3/4/18. B. di S' Dale
May	P. Pay	33 - 34 10		Ass Pay AR 407. 9/18 C 7C June AR 421. 20/5 - 1 -
June	P. Pay	34 10 33 =		Ass Pay AR 708 7/6 C 7C ✓ 870 27/6 ✓
July	P. Pay	33 34 10		Canal AR 948. 10/7. C 7C AR 1092 25/7 C 7C
Aug	P. Pay	34 10 34 10		Canal AR 1255. 10/8 C 7C AR 1482. 25/8 ✓
Sep	P. Pay	33 33		Canal AR 1672. 5/9 C 7C AR 1876 24/9 ✓

251

COMPILED BY: *[Signature]*
CHECKED BY: *[Signature]*

E

ENGLAND CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- GANS Young Joe.							
-12-17	EFFECTIVE DATE:-		NUMBER:- 931276							
10 ⁰⁰	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT								
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.		AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT						
				<i>Plt</i>						
<i>Lee Henderson (Friend)</i> <i>100 Grand Forks N.D. U.S.A.</i>		UNIT AND TRANSFERS								
		ORIGINAL UNIT:- <i>2nd Const Bn</i>								
		DATE ACCOUNT FIRST OPENED:- <i>1-4-17</i>								
		AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO					
					<i>NSRD</i>					
		<i>20 1-4-18 1-4-18 2nd Const Bn</i>								
FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK		<i>Canada Section</i>								
UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT					
<i>Inc</i>	<i>4 66</i>									
<i>BRDg</i>	<i>9 73</i>									
	<i>14 39</i>									
DAILY RATES OF PAY AND ALLOWANCES										
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE	ALL'CE					
	<i>1⁰⁰</i>	<i>10⁰</i>								
REASONS OF RENDERING NON-EFFECTIVE:-										
<i>Bal 58.47</i> <i>R.P.B. " 39.03</i> <i>Transferred to Canada Auth & R 161 888 17.12.18</i>										
PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Balance fwd.</i>								<i>11 08</i>	<i>40</i>	
<i>P. Pay</i>	<i>33 -</i>		<i>Ass Pay</i>				<i>20 -</i>			
			<i>R 40057458. C7C 29/3.</i>	<i>45</i>						
			<i>✓ 157. 17 Res. 4/3.</i>	<i>9 08</i>						
			<i>✓ 159 C7C 30/3</i>	<i>14 84</i>						
			<i>u R 266 22/4 C7C fura</i>	<i>3 57</i>						
			<i>Dnall B7. 3/4/18. B. d. S' Dale</i>	<i>4 87</i>				<i>127 40</i>		
<i>P. Pay</i>	<i>33 -</i>		<i>Ass Pay</i>				<i>20 -</i>			
	<i>34 10</i>		<i>u R 407. 9/18 C7C fura</i>	<i>3 57</i>						
			<i>u R 421. 20/5 - 1 -</i>	<i>3 57</i>				<i>823 40</i>		
<i>P. Pay</i>	<i>34 10</i>		<i>Ass Pay</i>				<i>20 -</i>			
	<i>33 =</i>		<i>u R 708 7/6 C7C 5</i>	<i>3 57</i>					<i>40</i>	
			<i>✓ 870 27/6 ✓</i>	<i>3 57</i>				<i>14 09</i>		
	<i>23</i>			<i>7 14</i>			<i>20</i>			
<i>P. Pay</i>	<i>34 10</i>		<i>Canal</i>				<i>20</i>			
			<i>u R 948. 10/7. C7C 5</i>	<i>3 57</i>						
			<i>u R 1092 25/7 C7C 5</i>	<i>3 57</i>				<i>87 05 40</i>		
	<i>34 10</i>			<i>7 14</i>			<i>20</i>			
<i>P. Pay</i>	<i>34 10</i>		<i>Canal</i>				<i>20</i>			
			<i>u R 1255. 10/8 C7C 5</i>	<i>3 57</i>						
			<i>u R 1482. 25/8 ✓</i>	<i>3 57</i>				<i>28 01 40</i>		
	<i>34 10</i>			<i>7 14</i>			<i>20</i>			
<i>P. Pay</i>	<i>33</i>		<i>Canal</i>				<i>20</i>			
			<i>u R 1672. 5/9 C7C 5</i>	<i>3 57</i>						
			<i>u R 1876 24/9 ✓</i>	<i>3 57</i>				<i>33 87 40</i>		<i>2/2 pay</i>
	<i>33</i>			<i>7 14</i>			<i>20</i>			

NUMBER

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DE
Oct.		34 10		Cap.				20	33 87	
				AR 2250 - 12/10/18 - C.F.C.S.	3 73					
		34 10		AR 2320 - 26/10/18 - "	3 73			20	40 51	
				Cap	7 46			20		
Nov		33		AR 2685 - C.F.C.S. - 11/11/18	3 73					
				AR 2903 - " - 26/11/18	13 06			20	36 72	
				AR 6611 - C.F.C.S. - 10/12/18	4 66					
Dec		34 10						20	50 82	
3/21/18	Int on Deferred pay	2 60							52 22	
		69 70							53 42	
		69 70		AR 3576 - BRDG - 18/12/18	9 73				39 03	
				AR 675 - Kin DR - 20/1/19 (L.P.C.S.)	31 18			40	34 16	
					4 87					

NAME

CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
34 10		bal.				20	33 87 10		
		AR 250 - 12/10/18 - C.F.C.S.	3 73						
34 10		AR 2320 - 26/10/18 - "	3 73				40 51		
		CAS ✓	7 46			20			
		AR 2685 - C.F.C.S. - 11/11/18	3 73						
33		AR 2903 - " - 26/11/18	13 06			20	36 72		
		AR 6611 - C.F.C.S. - 10/12/18	4 66						
34 10						20	50 82		
2 60							52 22		
69 70							53 42		
69 70		AR 3576 - BRDG - 18/12/18	9 73				39 03		
		AR 675 - Kin BR - 20/1/19 (L.P.C.S.)	31 18			40	34 16		
			4 87						

Young Joe. Pte.

Name **Gans,**

Rank

Reg. No. **931276**

Unit

26th. Res. Bn.

Next of Kin

U.S.A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27-5-17.	Mil.	Bramshott.	V.D.G.	62.		
<i>13 6 17</i>	<i>Dischg at War Hosp</i>	<i>do</i>	<i>do</i>	<i>622</i>		

No 93/276.

RANK

Pte.

NAME

Gans, Joe.

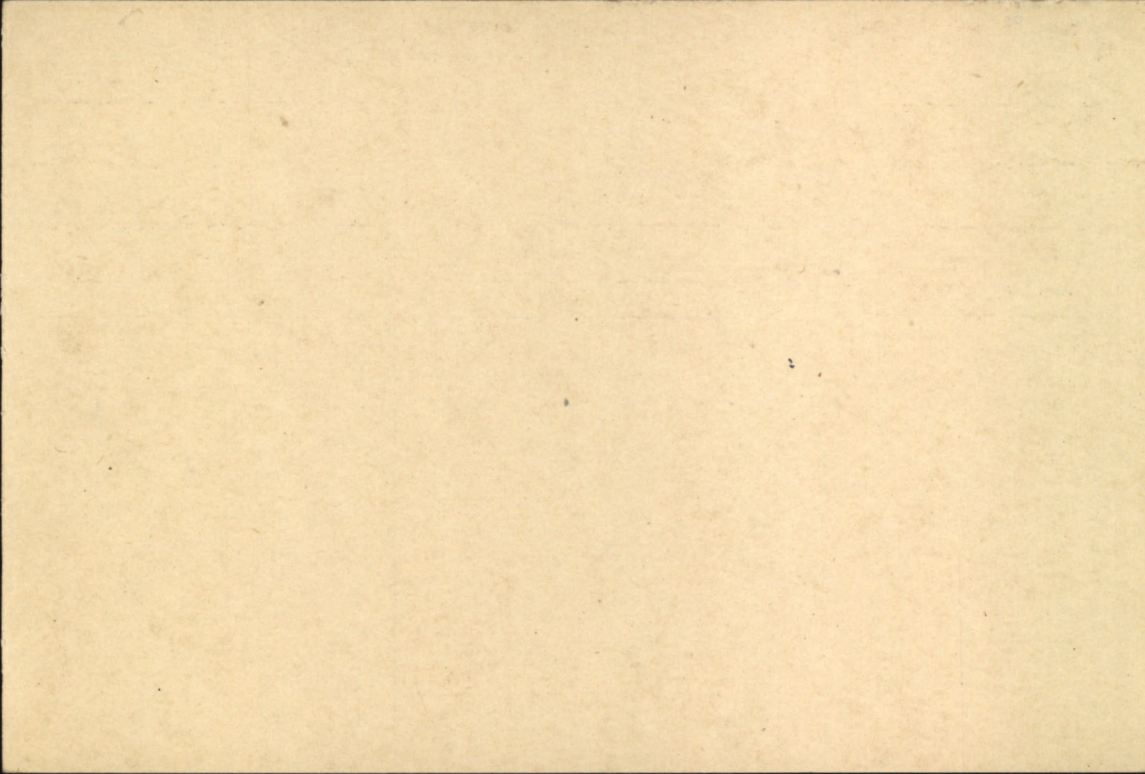
T. O. S.

UNIT

No. 2. Construction Battalion

M. D. 6

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916	1916			
Sept 18	Sept 30	n		
Oct.		n.		
Nov.		v		
Dec.		v		
1917	Jan 1917	v		
Feb.		n	shown as d/Sept. deprived of lance stripes 17-2-17	Feb. payroll D.O. 47. 22-2-17.
Mar.		n		



NAME

Gans, Y.

RANK AND CORPS

Plt.

REGT'L No.

931276

H. Q. FILE NO. 649.

J.

26th Gen. Res. Bn.

FOLLOWS
No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

62 Can. Mil., Bramskott 27517

V. D. G.

622 Discharged 13-6-17

V. D. G. (N. S.)

Units
649-G-4720
931276 *RR 2537* *Plt.* *10*
Number
Surname *GANS*
Christian Name *Young Joe*
Units *C.F.C* Theatre of War *France*
Date of Service *1-4-18*
2937 S. Dearborn St (1st floor rear) Chicago, Ill. U.S.A.
Remarks *7²/₂₇*
Latest Address *Co Mr George Read*
671 Main Street
Winnipeg
Roll No. *Page 18006*
200m.-2-21.M. *over.*

BESP. JUL 9 1927

REGN. NO. 34335

Name ^{P6} Gans. y. g. Folio Reg. 2 nd Can Cont Bm

Rank Reg. No. 931276. Compy. m. d. 10.

Age 23 Service 36/12 Rel. C of E.

Disease urethritis None Venereal

Admitted 7-1-19 From Lines Camp 5

Ward Cp 10. U. Particulars of Regt. etc asked for by CRO. Passed to Cp 5.

Transferred To

Discharged 20-1-19 To unit Cp. 5.

AFW. 3118. 1237.

AFW. 3243 & 3243a Medical History Sheet & other Documents.

To ep 10.0. 8-1-19

3243 Files 20/1/19

From

To
ep to 10.0.0. 8-1-19.

1 Temp to Ep. 5 20/1/19

From

To

1202 Files 20-1-19

From

SURNAME.

Gans

10

CARD NO. ✓

CHRISTIAN NAMES

Young Joe

S.O.S. 4-3-19
D.O.S. 25-2-19
demol-1080 700

REGL. NO.

931276

RANK

Pte

UNIT

No. 2. Construction

Bn.

FORMER CORPS

nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Henderson, Mrs. M. L.

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

*1233 Second Ave, Milwaukee,
Wis, U.S.A.*

S.A.P. 5-9-18.

COUNTRY OF BIRTH

Canada Chatham

DATE

June 17th 1896

PLACE OF ATTESTATION

Winnipeg, Man.

DATE

Sept. 18th 1916

From Halifax per S.S. "Southland" 28/3/12

MARRIED

SINGLE ^{Yes}

WIDOWER

TRADE OR CALLING

Prize Fighter

RELIGION

not stated.

DESCRIPTION.

APPARENT AGE

20 YEARS

MONTHS

HEIGHT

5 FEET

5 1/2 INCHES

CHEST MEASUREMENT

36 1/2 INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

Black

EYES

Black

HAIR

Black.

DISTINGUISHING MARKS

not stated

MEDICAL EXAMINATION.

PLACE

not stated.

DATE

not stated

Present Address: Winnipeg, Man.

*Name Gans, Joe *Y* Rank Pte. Regtl. No. 931276

Original unit 2 Con. Btn. Present unit B. E.F. M. or S. 1 Age 23 Religion..... Fyle Depot..... Ref. H.Q.....

Port, ship, and date of arrival..... S.S. Baltic, Halifax 6.2.19

Next of kin..... Mrs. M. E. Hendirron

Address on leave..... 144 Bell Ave., Grand Forks, N.D. U. S.A.

Address on discharge.....

Transportation issued Yes No Date..... Character on discharge.....

Previous occupation..... Prize Fighter Date and place of enlistment..... Stilvell, Sept. 18/16

Diagnosis..... Date of Medical Boards..... *CPPE* *4527*

Date.	Remarks	Pt. 2 Order No.
29.1.19	r.O.S.#10 D.D. & Posted to Cas. Coy.	D.O. <i>45. Pa 2</i>
	14 days lnding leave with Subs.	

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

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192
150M-6-18.
1772-39-1243.

Surname

Christian Name or Names

Reg. No.

Gans

Y.J.

931276

Rank

Unit

Co.

Troop

Batty.

Pte

26th Res Bn

N.S. Reg. (26)

Hospital

Date of Admission

Bramshott Mil 27-5-17

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis V.D.G. *jl*

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 13-6-17

Date

C.L. 22-6-17 62

" 28-9-17 C 22

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank _____ Name **GANS, Young Joe** Reg'l No. **931276**
 Unit **No 2 Construction Bn** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Winnipeg 16th Sept 16** Place of Birth **Chatham Ont**
 Name and Address, Next-of-Kin **Mrs. M.E. Henderson**
1414, Dell Avenue, Grand Forks, N.D. U.S.A. Relationship **sa**
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

N/E. R.B. No **7053**
 File R.L. _____
 Category **OR GAN**

W.S.

H. W. & V., Ltd.—9546-16.

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.				
<i>Arrived in England. S. S. Southland 7.4.17</i>					
<i>29.9.17</i>	<i>2nd Const Bn</i>	<i>S.O.S. to N.S. R.D. Winnipeg</i>	<i>Winnipeg</i>	<i>17.5.17</i>	<i>PT # 125.</i>
<i>22.5.17</i>	<i>N.S.R.D.</i>	<i>T.O.S. from 2nd C.C. Corps.</i>	<i>Cranslett</i>	<i>22.4.17</i>	<i>PT # 74.</i>
<i>26.2.17</i>	<i>26 Res</i>	<i>Can 26th Res Bn</i>	<i>"</i>	<i>27.5.17</i>	<i>CL. 62. VDG</i>
<i>27.9.17</i>	<i>N.S. Ret Quise</i>	<i>"</i>	<i>"</i>	<i>13.6.17</i>	<i>CE 22 "</i>
<i>18.6.17</i>	<i>N.S.R.D.</i>	<i>Reverts to Perm Grade Pte</i>	<i>"</i>	<i>18.6.17</i>	<i>PT # 101 was. C/P.</i>
<i>4.10.17</i>	<i>"</i>	<i>S.O.S. to 26th Res Bn</i>	<i>"</i>	<i>3.10.17</i>	<i>PT # 206. 26th Res Bn # 235241017</i>
<i>15.10.17</i>	<i>17 res</i>	<i>T.O.S. from 26 res Bn</i>	<i>H. TT</i>	<i>15.10.17</i>	<i>PT # 245 244d. 15.10.17</i>
<i>25.3.18</i>	<i>"</i>	<i>S.S. to Can 105th Corps</i>	<i>"</i>	<i>25.3.18</i>	<i>PT # 73 d/26.3.18</i>
<i>2.4.18</i>	<i>C.F.C. RD</i>	<i>S.O.S. to 2nd Coloured Construction Coy. France.</i>	<i>Adak.</i>	<i>1.4.18</i>	<i>PT # 100. 79</i>
<i>7.10.18</i>	<i>2nd Con Coy</i>	<i>Awarded 1 Qlt. Badgls</i>	<i>Field</i>	<i>16.9.18</i>	<i>Cross</i>

Finishing

F. B. 10. 3. 18
18
see P. 10. 12

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.				
16-12-18	NSRD	TOS from 2nd Lt. Coy PVE	Basht	14-12-18 - 308-71	19-12-18 2nd Lt. Coy
27-12-18	N.S.R.D	O/C to G.D.D. Rhyl	-	27-12-18 - 313	Recd.
18-2-19	NSRD.	Cases 7/2 to G.D.D. Rhyl	Rydon	29-1-19 - 38	M.D.10 on strength of NSR. date attached
		S.O.S. to M.D.10. Canada	R.L.	23-6 Vol. 21	28-12-18 ceased robe att.
				8/R.I. 73 15219.	29-1-19 Pr. & Do. No. 30 of 31-1-19.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

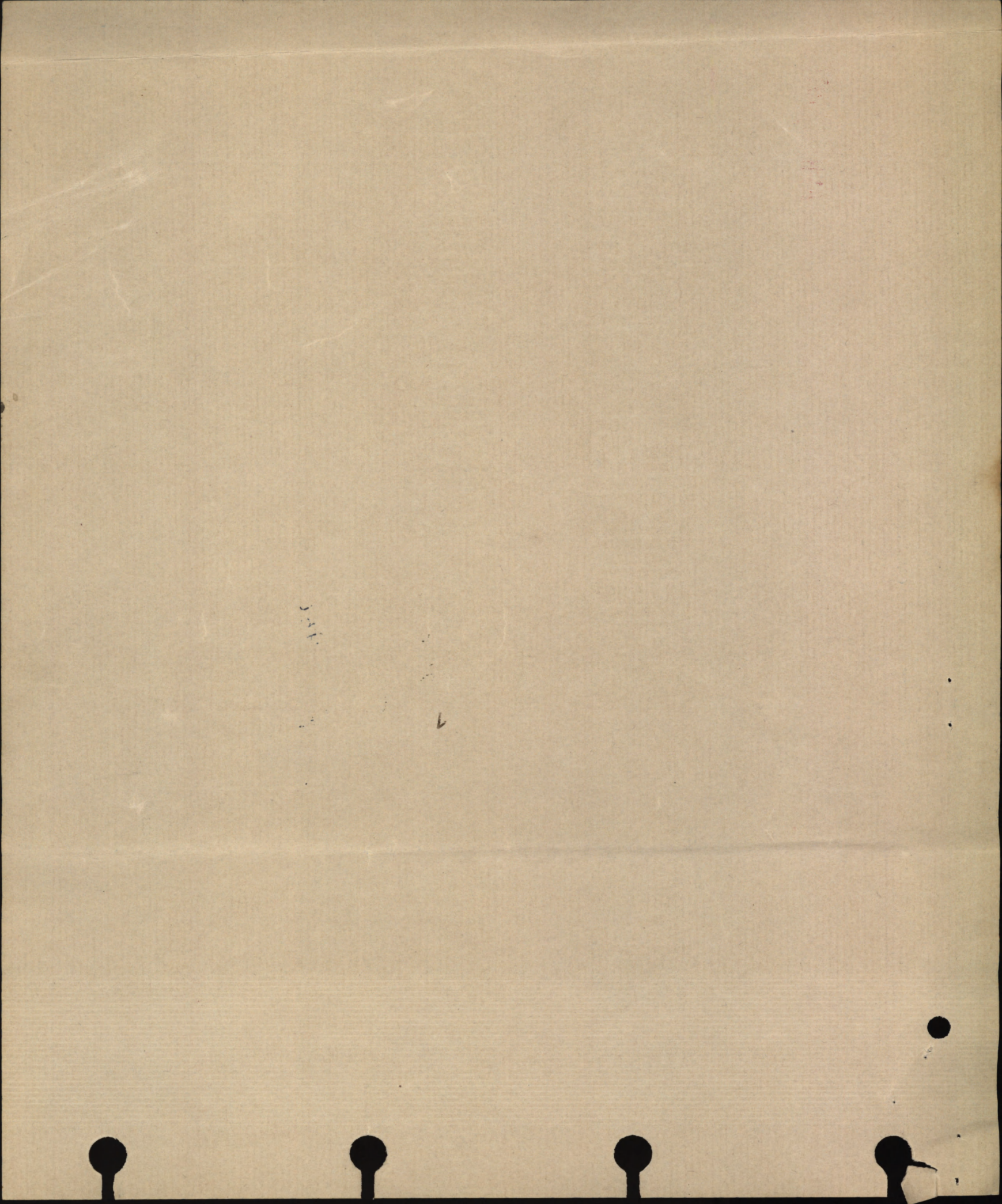
To Whom *Mrs. Mary Lee Henderson* By Whom Assigned *Gans Joe*
Address *1414 Dell ave* Regtl. No. *931276*
Grand Forks Rank *Pte*
North Dakota U.S.A. Corps *ns 2 coast Bn.*
Rate *10⁰⁰*

APR 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





ASSIGNED PAY

Sheet No. 2.
(Assignee)*Mrs Mary Lee Henderson*

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

*Gans Joe.
Rte Post Const Bn*

L. L. Job 5470—Req. 6888.

no 931276

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>10⁰⁰</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4826</i>	<i>10</i>	
May		<i>C 7936</i>	<i>10</i>	<i>10 W.</i>
June		<i>E 15058</i>	<i>10</i>	<i>10. S</i>
July		<i>I 21818</i>	<i>10</i>	<i>C</i>
Aug.		<i>F 32741</i>	<i>10</i>	<i>6</i>
Sept.		<i>P 35450</i>	<i>10</i>	<i>C</i>
Oct.		<i>G 41900</i>	<i>10</i>	<i>6</i>
Nov.		<i>G 43397</i>	<i>10</i>	
Dec.		<i>M 58659</i>	<i>10</i>	<i>98</i>
Jan.	1918			<i>90</i>
Feb.				
March				
April				
May				
June				
July				

*APR**1917**me**90*

MILITIA AND DEFENCE.
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D.10

NAME OF SOLDIER (Block Letters)

MR GANS, Y.J.

REGIMENT

2, C.C.B.

RANK

PLT

No.

931276.

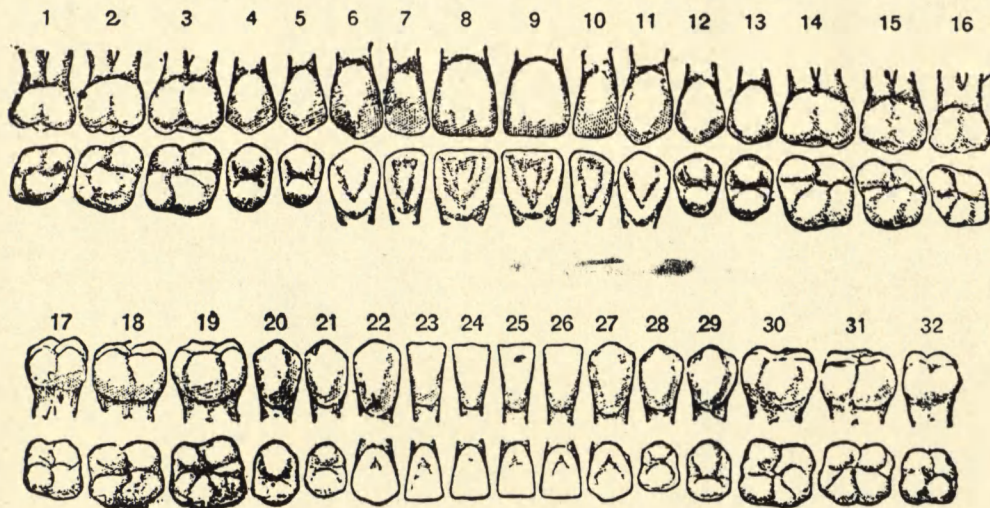
Date of Examination in England

20.12.15.

Date of Examination in France

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

Nil

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

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer

H.W. Read
capt.

THE CANADIAN ARMY DENTAL CORPS OFFICERS
DENTAL CERTIFICATE OF DEMONSTRATION

M.D. 19

MS GUNS. 2.1.

S. C. B.

THE CANADIAN ARMY DENTAL CORPS OFFICERS
DENTAL CERTIFICATE OF DEMONSTRATION

THE CANADIAN ARMY DENTAL CORPS OFFICERS
DENTAL CERTIFICATE OF DEMONSTRATION

fit

- () Fall Upper
- () Part Upper
- () Fall Lower
- () Part Lower
- () In Canada
- () In England
- () In France

Handwritten signature and initials

Casualty Form - Active Service.

Regiment or Corps ~~1st Bn~~ No 2 Cdn Com Coy.
 Rank plc Surname Gans Christian Name Young Joe
 Religion Age on Elistment years months
 Enlisted (a) Terms of Service (a) Service reckons from (a)
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked			
<u>11¹² 18</u>	<u>aaq</u>	<u>trans to Eng & posted to N.S. Reg Depot Bramshott</u>		<u>14¹² 18</u>	<u>KR 344.</u>
		<u>ba Hewitt</u>			
		<u>Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.</u>			
<u>14.12.18</u>	<u>N.S.R. 10</u>	<u>S.O.S. attached to 2.C.C. 10 for Qrs & Rations</u>	<u>B'shott</u>	<u>14.12.18</u>	<u>S.O. 305.</u>
					<u>PART II D.O. 27/12/18</u>
	<u>N.S.R.D</u>	<u>ON COMMAND TO CDD Kimmel Rhyl</u>	<u>BRAMSHOTT</u>		
					<u>ba. Knight</u>

(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) Signaller, Shoeing-Smith, &c.
 W. 5527-M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B./103 E/1555. I.P.T.O.

Date	From whom received	Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
	M.D. 10	Orders to b.b.b. Kennel Park		30-12-18	Pl 11 5/6 18.
	M.D. 10	Orders to be taken transferred to b.b.f.		8-1-19	Pl 11 No 9.
				31 1 19	Pl 11 8/6 20
					<p><i>W. E. Over Lt.</i> <i>Pl 11 O.P. M.D. 10 Kennel Park</i> <i>W.P. Sully</i> <i>Dalton</i></p>
29.1.19		<p>T. O. S. of No. 10 District Depot, Part 2 Order No. 45 Para 2 <i>b.b. Patton</i> Lt.-Col. O. C. No. 10 District Depot.</p>			
		<p>*Discharged 4-3-19,* C. O. 51/619 D. O. 59 <i>Hay</i> Major Officer Commanding No. 10 District Depot</p>			

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 No 2 Construction Batt. C.E.F.

Regimental No. 931.276 Rank pta Name James GRANS, Young Joe
C. E. F.

Enlisted (a) 18-9-16 Terms of Service (a) period of war Service reckons from (a) 18-9-16

Date of promotion to present rank 16- } Duration of appointment to lance rank } Numerical position on roll of N. C. Os. 16-

Extended Re-engaged Qualification (b) Prize Fighter

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				
17/1/17	O.C. 2nd Constr. Batt.	Embarked, Canada Disembarked, England Proceeded Overseas	Halifax NS Liverpool Seaford	25/3/17 7/4/17 17/1/17	✓ Pt & D.O. #
22-5-17	NSRD.	J.O.S. from 2 CCC as 2/pl.	Bramshott	22-5-17	Captain. Adjutant, No. 2 Construction Batt. C.E.F. Pt II 074 + 125 of 2-66. Br.
21-8-17	"	On Command Longmoor RR	"	21-8-17	" " " 165
11/10/17	"	Rel. from bond. & P.O.P. to 26 Res. Bn	"	8/10/17	Pt. II 206 ✓

J. Jackson
for CAPTAIN & ADJUTANT,
FOR O.C. NOVA SCOTIA REGIMENTAL DEPOT.

(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, Shoing 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				
4/10/17	O.C. 26th Res. Bn.	Taken on Strength.	Bramshott	3/10/17	D. O. PART II No: 235 ✓
15-10-17	O.C. 26TH RES. BN.	STRUCK OFF STRENGTH	B'shott.	15-10-17	D.O. Part II No. 244 ✓ <i>Wounded in action</i>
	on transfer to	17th Canadian Res. Batt.			
15 OCT 1917	O.C. th Res. Bn.	Taken on Strength.	B'shott	15/10/17	D.O. Part II 245 ✓
25-3-18.	O.C. 17th.	S.O.S. on transfer to Can. For. Corps.	Bramshott.	25-3-18	Pt. 11. Order 71. ✓ <i>manley</i> Lieut., Asst. Adj.
26-3-18	O.C. C.F.C.	T.O.S. Base Depot, C.F.C. Sunningdale	25-3-18	Pt. 11 D.O. 43 ✓	17th Canadian Res. Batt.
24.18	O.C. C.F.C.	BASE DEPOT C.F.C. SUNNINGDALE	24.18	PT. II. DO. NO. 74.	<i>Manley</i> Maj. C.F.C.
18-6-17	O.C. R.R.D.	Reverts to Pte.	B'shott	18-6-17	Pt. II - 101 ✓
3/4/18	O.C. B.D.	T.O.S. on ar. in France.		3/4/18	N.R. 612 D/3/4/18. ✓
5/4/18	"	Left for unit.		5/4/18	N.R. 1141 D/5/4/18. ✓
13.4.18	O.C.	Ar. at unit.	9ld.	8.4.18	B. 213.
23.4.18	O.C.	Date T.O.S. 2 ban. for Co.	chgd. to	24.4.18	Cert. B. 153 D/23. D/23.4.18. ✓
21.9.18	O.C.	Awarded the Medal	Given	16.9.18	B. 213 H. 25 204 1918 ✓

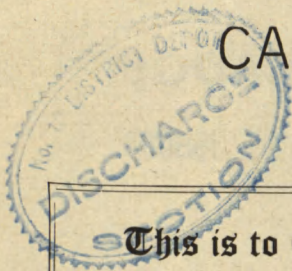
CERTIFIED CORRECT
 12 APR 1918
 CAN. RECORDS, LONDON

H.H. Moody, LIEUT.
 FOR LT: COL: I/O RECORDS, C.O.M.F.

(Two Blue Chevrons)

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate 14453



This is to Certify that No. 931246 (Rank) Private

Name (in full) YOUNG, JOE, GANS. enlisted in

the No. 2 Construction Battalion.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 18th

day of September 1916

HE served in France, 2nd C.C. Battalion. 8 months

and is now discharged from the service by reason of Demobilization R.O. 1420 (c)

★ C.O. 51 - 619 D.O. 59 ★

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

Age 28 years 8 months

Height 5'-4"

Complexion Black.

Eyes Hazel.

Hair Black.

Marks or Scars Small scar 1/4" above right eyebrow on forehead. Accident Child-Road.

Joe Gans
Signature of Soldier

E. W. Crooke
Issuing Officer Major
Officer Commanding No. 10 District Depot

Date of Discharge 4-3-19

Rank

Signed at Winnipeg this 4th day of March 1919

Appointment

in Military District No. 10

File Reference No. 449-980

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.

WAR SERVICE BADGE

CLASS "A" NO. 71570 ISSUED

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

.....
Name of Officer

.....
Rank

.....
Appointment

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

COPY

AJS

Certificate of Service

WAR SERVICE BADGE.
Class "A" # 71570.

(Issued following loss of Permanent Discharge Certificate M. F. W. 39)

This is to Certify that No. 931276 (Rank) Private

(Name in full) GANS, Young Joe.

Enlisted in No.2 Construction Battalion.

Canadian Expeditionary Force, on the Eighteenth day

of September 1916

He served in CANADA ENGLAND & FRANCE

and was discharged at Winnipeg, Manitoba. on

the Fourth day of March 19 19

by reason of Demobilization

His conduct and character while in the Service were

Description on Discharge: Age 23 Years; Height 5' 7";

Complexion Black; eyes Hazel; Hair Black.

Address 2937 So. Dearborn St. Major.

1st Floor Rear, Assistant Director of Records

Chicago, Ills., U.S.A. Ottawa 26th day of August 19 27

H. Q. 649-G-4720

Continuation of Service

1. Name of the person to whom this certificate is issued: _____

2. Name of the person by whom this certificate is issued: _____

3. Date of issue: _____

4. Place of issue: _____

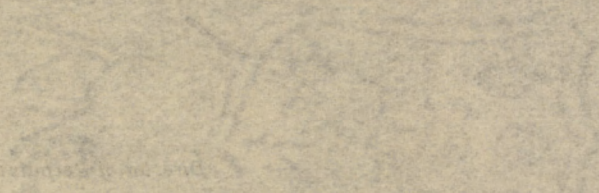
5. Name of the person to whom this certificate is issued: _____

6. Name of the person by whom this certificate is issued: _____

7. Date of issue: _____

8. Place of issue: _____

9. Name of the person to whom this certificate is issued: _____



10. Name of the person to whom this certificate is issued: _____

DUPLICATE

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.

(1) Name of Overseas Unit which Soldier joins. **No. 2 CONSTRUCTION, B'n. C.E.F.**

(2) Regimental Number 931276

(3) Full Name of Soldier Young Joe Jan

(4) Place of Birth Leitham Ont.

(5) Are you married, or not? _____

(6) If married, state,
(a) Full name of your wife _____

(b) Present Postal Address 1414 Dell Ave. A.D.U.S.A.

(7) Are you a widower? _____

(8) Have you any children? _____

If so, give number of boys and girls _____

Also their names and ages _____

(9) Is your Father alive?.....

If so, state name and address.....

(10) Is your Mother alive? *yes*.....

If so, state name and address *Mrs Mary Lee Henderson*

1414 Dell Ave N D. U.S.A

(11) If your Mother is a widow..... *yes*

Are you her sole support, or not?..... *no*

(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.

None

(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.

Mother

Mrs Mary Lee Henderson

1414 Dell Ave N D. U.S.A

(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?.....

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.

C. H. Reis Capt
for Officer Commanding.

Date *OCT 24 1916*

92
MEDICAL HISTORY SHEET *931276*

Surname *Jans*

Christian Name *Young Joe*

Examined { on *15* day of *Sept* 191*6*
at *Winnipeg Man*
Birthplace { City or Town
County

Approved by *M.B. Grant*

Rank *Lieut. Col.* M.O.

Apparent age *20 years*
Trade or occupation *Labour*
Height *5'* feet *5 1/2"* Inches
Weight *135* lbs.
Chest measurement { Minimum *34"* inches
Maximum expansion *36 1/2"* inches

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
<i>26/3/18</i>	<i>A</i>	<i>W. Roberts Capt. M.O.</i>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development *Good*
Small-pox Marks *None*

Vaccination Marks { Arm *Right* - *Left* *1*
Number *one*
When Vaccinated last *childhood*

Date	Result	VACCINATIONS
<i>18/3/17</i>		<i>Dan Murray M.O.</i>
<i>29/4/17</i>		<i>Dan Murray M.O.</i>
		M.O.

(a) Marks indicating congenital peculiarities or previous disease *None*

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<i>29/10/16</i>	<i>GR</i>	<i>H. V. Kent - Major and M.O.</i>
<i>29/10/16</i>	<i>GR</i>	<i>H. V. Kent - Major and M.O.</i>
<i>17/11/16</i>	<i>GR</i>	<i>H. V. Kent - Major and M.O.</i>

Enlisted on *15* day of *Sept* 191*6* at *Winnipeg*

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				<i>18/9/16</i>
Transferred to	<i>No. 2 CONSTRUCTION B.N. C.E.</i>	<i>931276</i>		<i>22/5/17</i>
	<i>H. P. R. D.</i>			<i>3/10/17</i>
	<i>26 Regt</i>			<i>15-10-17</i>
	<i>17th Regt Bn</i>			

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.

Category Aii of J. Broyles Capt. Comd

MEDICAL FACTORY SHEET

Surname *Jane* Christian Name *Young Joe*

STATION	Date of Arrival at the Station	DATES OF						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
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
<i>Bramshott</i>		<i>26.</i>	<i>5.</i>	<i>17.</i>	<i>12.</i>	<i>6.</i>	<i>17.</i>	<i>Gonorrhoea.</i>	<i>18.</i>	<i>Slight leucorrhoea but discharge</i>	<i>Andrews</i> <i>Cap. R. A. S.</i>

Records

W. Batic General Del. Topg. Man

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. *931276* Rank *Pte* Surname *Lans*
(Given name in full)
 Unit or Corps *C.R.T. 7-1000* Birthplace *Young J. Ont.*

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

1. GENERAL DESCRIPTION:

Physique *Good* Weight *165* lbs. Height *5 1/2* ft. Colour of Eyes *Brown*
 Nutrition *Good*
 Pulse *80*
 Condition of arteries *Normal*
 Vision Rt. $\frac{20}{20}$ Left $\frac{20}{20}$
 Hearing (conversational voice) Rt. *20* ft. Left *20* ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
Small fox pock - deep brown - on right side of nose. Childhood.
Small scar 1/4" above right eyebrow on forehead. Accident Childhood!

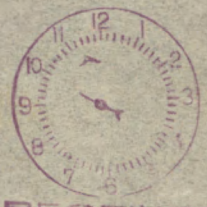
Opinion as to general health and physical condition *Good*

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 Sytem *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.

DISTRICT DEPT NO. 10



RECEIVED HEADQUARTERS FEB 21 1919

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 *St. John's* (Canada)

Date *Feb. 20. 19* Signed *John H.P. Bond 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 *John H.P. Bond Capt*

(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.)

J.P. Panton

LAST PAY CERTIFICATE

Reg't. No. **931276** Rank **Pte.** Name **Gans, Y.J.** - **C.R.T.**
 Corps, No. 10 District Depot, **ID 10**, who was **Discharged.**
 on **Mar. 4th** 1919, to

The following is a statement of account of above named from **M.D. 10**
Mar. 1st to **Mar. 4th** 1919, inclusive date of **NO. 30**
 Transfer or Discharge.

DR.	CR.
Bal. Dr. from prev. month.....	Bal. Cr. fr. prev. mth.....
Advances) No.....	Reg. Pay... 4 Dys 1.00 4.00
by)	4 .1040
Cheques) No.....	Fld. All..... Dys.....
Assgd. Pay & S.A.....	S.A. Monthly \$.....
Other Charges.....	Civ. Cloth 35.00
Pay't. on Trans. or Dis..... 39.40	Other Allices.....
Bal. Cr. (to be pd. by new unit).....	Other Credits.....
	Bal. Dr. (to be ded- ucted by New Unit).....
39.40	39.40
TOTAL.....	TOTAL.....

A monthly stoppage of \$ **20.00** has been paid on **chgd. on L.P.C.**
 acc't. of Assigned Pay for month of **February, 1919** } **Mrs. M.L. Henderson,**
 & Sep. Allice for mo. of **Nil, 1919** } To Assignee.....
1233 Second St.,
Milwaukee Wisc, U.S.A.

REMARKS: **Entitled to 153 Days NS.G.**

- State (1) date of enlistment.....
- (2) if married & if Sep. Card has been submitted..... **No.**
- (3) Cause of Discharge..... **Demob.** Auth..... **D.O. 59**
- (4) Authority for Transfer.....

I have carefully examined this statement of account and find it to be correct extract from the payroll of the unit.

DATE **Mar. 3rd** 1919.

PLACE **Winnipeg, Man.**

W. Galtier Paymaster.
 District Depot, M.D. 10.

Made up by **J.B.**

Checked By **D.B.**

IN SENATE
January 10, 1910.

REPORT OF THE
COMMISSIONERS OF THE LAND OFFICE
IN RESPONSE TO A RESOLUTION PASSED BY THE SENATE
MAY 15, 1909.

ALBANY:
J. B. WARD, STATE PRINTER,
1910.

- (1) Report of the Commissioners of the Land Office in response to a resolution passed by the Senate May 15, 1909.
- (2) Report of the State Engineer and Surveyor in response to a resolution passed by the Senate May 15, 1909.
- (3) Report of the State Comptroller in response to a resolution passed by the Senate May 15, 1909.
- (4) Report of the State Auditor in response to a resolution passed by the Senate May 15, 1909.

Printed by the State Printer, Albany, N. Y., 1910.

ALBANY: J. B. WARD, STATE PRINTER, 1910.

This space to be for numbers.



WAR SERVICE BADGE

CLASS "A" NO. 71570 ISSUED

Proceedings on Discharge.

Handwritten initials 'P. S.' in the top right corner.

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

Handwritten number '3' in the top right margin.

No.	931276
Rank	Private.
Surname	Gans.
Christian name	Young Joe.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	#2 Cons. Batt.
Date of discharge	4-3-19.
Place of discharge	Winnipeg.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 23 years..... 8 months.	Descriptive marks Small scar 1/4" above right eyebrow on forehead; accident childhood.
Height..... 5 feet..... 7 inches.	
Complexion Black.	
Eyes Hazel.	
Hair Black	
Trade Boxer.	
Intended place of residence (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
★ C. O. 51 - 619 D. O. 59 ★	
Authority for discharge..... Demobilization R.O. 1420 (c)	
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)

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.....

Four horizontal dashed lines for listing 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) Winnipeg.

Joe Goss (Signature of Soldier.)

(Date) 4-3-19.

J. A. Dack (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) Winnipeg.

(Signature) E. D. Hoode Major.

(Date) 4-3-19.

O.C. No 10 District Depot.

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.

J. Aoy Gaus.

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge.</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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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.

Lempsey

MEDICAL HISTORY OF—

Regional No.....

A.F. B.178.

Regimental No. *231246*

Region.....

Surname *Gans*

Christian Names *G. J.*

TABLE I.—General Table.

Birthplace { Parish.....
County.....

Examined { on.....day of.....191...
at.....

Declared Age.....years.....days.

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair.....Complexion.....

„ Eyes.....

Chest Measurement { Girth when fully expanded }.....inches.
Range of expansion.....inches.

Physical development.....

Vaccination Marks { Arm, RIGHT. | LEFT.
Number.....

When Vaccinated.....

Vision { R. E.—V =
L. E.—V = With Glasses { R.....
L.....

Identification Marks, such as Tattoo, Moles, Scars, etc. :—
.....
.....

Defects or Ailments :
.....
.....

Examined and found—

Fit for Grade { I.
II.
III.
IV.

(Strike out those which do not apply.)

Signature
Chairman of Medical Board.

Re-examined for posting at

On.....day of.....191...

Enlisted { at.....
on.....day of.....19...

	Corps.	Regtl. No.
Joined on enlistment
Transferred to

TABLE III.—Boards, Courts of Enquiry, 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.
.....
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Special Remarks : state if a discharged Soldier
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.....

TABLE IV.—Service Table.

Station or Troopship.	Date of arrival or embarkation.	Date of Departure or disembarkation.
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Became non-effective by
on.....day of.....191...
(Signature).....
(Rank).....

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. NO. *931276* RANK *Pte* NAME (IN FULL) *Gans Young Joe*

M. OR S. _____

ORIGINAL UNIT C.E.F. *2 Const. Pm.* IF IN P.F. WHAT UNIT? _____

PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION *18/9/16.* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *6/6 Mr. Geo. Road.*

671 Main St Wreg.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

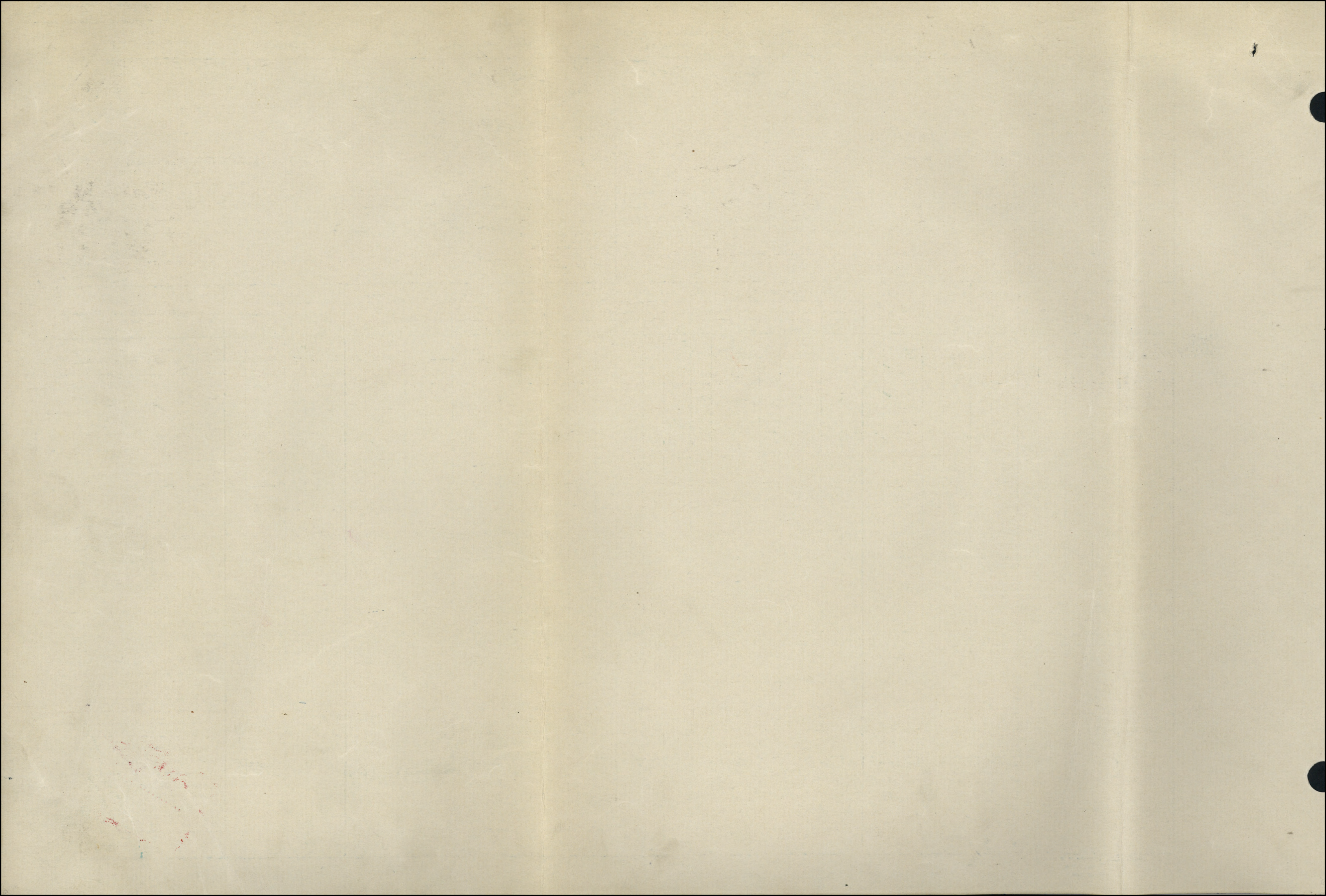
DISCHARGED _____ PLACE _____ DATE *4/3/19.* REASON _____ AUTHORITY _____ IF ENTITLED TO POST DISCHARGE PAY _____

9.15

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
<i>Mar 4</i>	<i>153</i>			<i>350 -</i>				<i>7454</i>	<i>70 -</i>						<i>280 -</i>		<i>70.00 1st Payment W-SG.</i>	
<i>Apr 3</i>								<i>129990</i>	<i>70 -</i>						<i>210 -</i>		<i>70 Ind " "</i>	
<i>May 2</i>								<i>861160</i>	<i>40 -</i>						<i>140 -</i>		<i>70.00 Ind " "</i>	
<i>June 4</i>								<i>75559</i>	<i>40 -</i>						<i>70 -</i>		<i>70 as 4th " "</i>	
<i>July 2</i>								<i>179914</i>	<i>40 -</i>						<i>20</i>		<i>70.00 5th Ind " "</i>	
				<i>350 -</i>				<i>350 -</i>					<i>350 -</i>					

BALANCE FROM PREVIOUS ACCOUNT

AUDITED
 JUL 28 1919
 Audit Clerk
 M. L. 10



PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S.

REGT. No. *931276*

RANK *Pte*

NAME (IN FULL) *Gaus.*

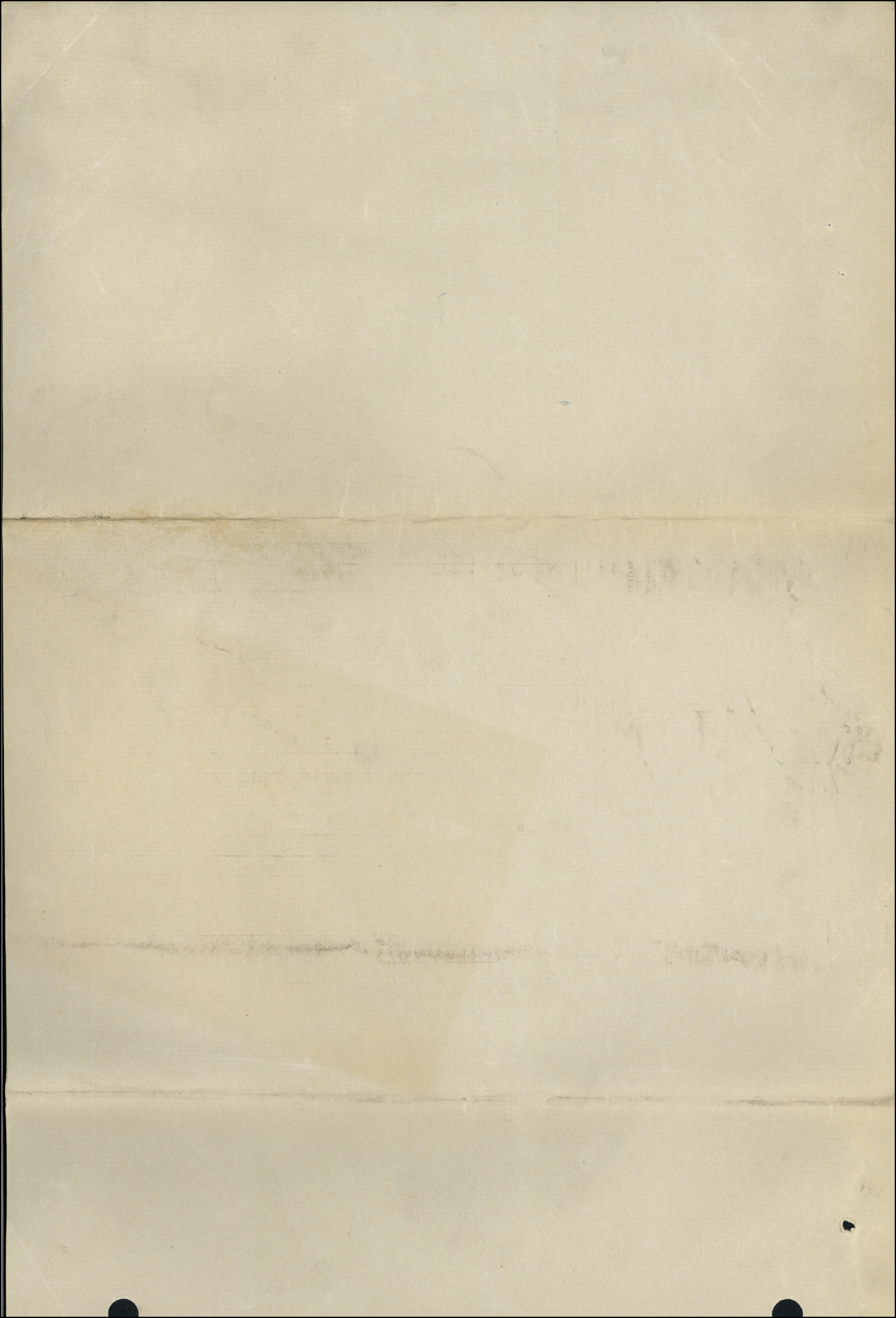
(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	BLOCK LETTERS SURNAME FIRST				
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY			
IS SEPARATION ALLOWANCE PAID? <i>no</i>	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY			
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$ <i>2009</i>	DATE EFFECTIVE <i>11/3/19</i>	RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS				
ADDRESS					PAYABLE TO <i>Mr. Mary L. Henderson (M)</i>	ADDRESS <i>1233 Second St Milwaukee Wisconsin USA</i>					
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	DISCHARGED	PLACE <i>MD #10</i>	DATE <i>4/3/19</i>	REASON <i>D.</i>	AUTHORITY <i>D.O. 59</i>	IF ENTITLED TO POST DISCHARGE PAY <i>yes.</i>

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE	
	NO. OF DAYS	RATE	AMOUNT		NO.	DATE	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT
			\$	C.			\$	C.	\$	C.	\$	C.						
<i>11-28/2</i>	<i>59</i>	<i>110</i>	<i>64.90</i>	<i>11.20</i>			<i>17341</i>	<i>19397</i>		<i>9.59</i>	<i>30.80</i>			<i>35.71</i>	<i>35.71</i>	<i>35.71</i>		
<i>1/3 1/3</i>	<i>4</i>		<i>4.40</i>	<i>35-</i>			<i>2127</i>				<i>39.40</i>				<i>39.40</i>			
			<i>69.20</i>	<i>46.20</i>						<i>9.59</i>	<i>70.20</i>			<i>71.42</i>	<i>157.21</i>	<i>35.71</i>		

153 Days USA.
Trans D.O. 59 for pay on 11/1/19.
at Chicago for pay + July 1st pe
at 3500 B.O.D.O. 59
J.P.G. Ford.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Dec/19

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>20⁰⁰</i>			
------------------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *931276*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *J. Gano.*

Battalion *No 2, Constri Battn*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Mary Lee Henderson*

Address *1414. Will Ave.*

Change of Address *Grand Forks North Dakota U.S.A.*

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

Feb.

~~40~~ ~~40~~

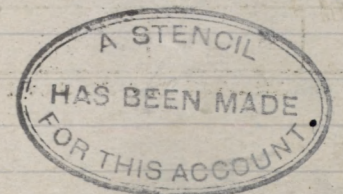
~~20~~ ~~20~~

*ABO. 19-2-18 27m. 23/18.
\$40⁰⁰ to adv. Dec + Jan.*

*Destroy
See current Ledger
see account 1921
in reg ledger. 18*

M. F. W. 128.
40000-17-1772 39-1111
L. L. 22320-M. & D. 7983.

MRO 2B 19² 18



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
400M. 5-17-1772 89-1141
L. L. 25320-M. & D. 7393.

P. 878.

Extract D.O. No. 8.

Unit: - 2nd C.C.D.

Date. -

RAILING LIST

Reg. No.

Ran

Name

931276

PTE.

GANS. Y. J.

Canada

Struck off Strength of O.M.F. of C.
on transfer to C.E.F. Canada. No. D 10

29-1-19.

Acted on

Ledger Ck.

V



Ledger K.

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

772

Apr. 1/17

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>10</i>	<i>20</i>		
-----------	-----------	--	--

1/17/17

PARTICULARS OF SEPARATION ALLOWANCE

No. *931276*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Joe Sans*
 Battalion *no 2 Const Batt.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Mary Lee Henderson*
 Address *1414 Dell Ave*
 Change of Address
 1 *Grand Forks North Dakota, U.S.A.*
 2 *103 1/2 Higgins Ave Winnipeg Man*
 3 *1414 Dell Ave*
 4 *Grand Forks North Dakota*
1233 Second St. Milwaukee Wisconsin U.S.A.

Mother

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>1917 Dec 31</i>			<i>90</i>	<i>90</i>
<i>Jan 18</i>	<i>B 62836</i>		<i>10</i>	<i>10</i>
<i>Feb 18</i>	<i>W 71550</i>		<i>40</i>	<i>40</i>
<i>Mar</i>	<i>A 138327</i>		<i>20</i>	<i>20</i>
<i>April</i>	<i>G 15498</i>		<i>20</i>	<i>20</i>
<i>May</i>	<i>B 14644</i>		<i>20</i>	<i>20</i>
<i>June</i>	<i>Z 10286</i>		<i>20</i>	<i>20</i>
<i>July</i>	<i>Z 21423</i>		<i>20</i>	<i>20</i>
<i>Aug</i>	<i>Z 33618</i>		<i>20</i>	<i>20</i>
<i>Sept</i>	<i>Z 47029</i>		<i>20</i>	<i>20</i>
<i>Oct</i>	<i>Z 61673</i>		<i>20</i>	<i>20</i>
<i>Nov</i>	<i>Z 76223</i>		<i>20</i>	<i>20</i>
<i>Dec</i>	<i>Z 95694</i>		<i>20</i>	<i>20</i>
<i>Jan 19</i>	<i>Z 107006</i>		<i>20</i>	<i>20</i>
<i>Feb</i>	<i>Z 120587</i>		<i>20</i>	<i>20</i>
			<i>380</i>	<i>380</i>

6646-9-12 REMARKS *MRO 1 B 12-4-18*

MRO 2A USA acc.
798526 Can A.P. 20⁰⁰ x 1 1/2 - 2 M 20 1/2 - M 9 1/8
Mailed 4-2-18 40⁰⁰ x Feb to adjust - 20⁰⁰ x future
MRO 2A 9-2-18 N.S. rendered not acted on
AA RO 2 A 26-2-18

M.P.O. Destroy rec'd 11-2-19 # 51772.

M. F. W. 128
4005 6-17-1772-89-141
L. L. 2320-M. & D. 7983.

md
 #10
 A/c Closed *28-2-19*
 Ret'd per... *Bartie*
 Date *6-2-19* M.F.W. 187 *11-2-19*
 Clerk... *E. Cooch*

