M. D. Depot Battalion RLY. CONST. DETAILS Regiment

Regtl. No. 3182517

PARTICULARS OF RECRUIT

Original.

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class.....)

1. Surname: Hickman
2. Christian name: Wilson Hawkins
3. Present address: 403 Charlotte St. Sydney Cape Breton
4. Military Service Act letter and number: 3182517
5. Date of birth: June 6th 1896
6. Place of birth (town, township or county and country): Louisburg Cape Breton
7. Married, widower or single: Single
8. Religion: Methodist
9. Trade or calling: Loco. Engineer
10. Name of next-of-kin: Mrs. Elizabeth Hickman
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: ~~Mrs Reuben Pardy Brookfield North Syd~~ 37 Jubilee Rd, Halifax, N.Scotia. NWMPolice
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: No. Sufficient address
15. Medical Examination under Military Service Act:—
    (a) Place Sydney NB (b) Date 30 April (c) Category H II

DECLARATION OF RECRUIT

I, Wilson Hawkins Hickman, do solemnly declare that the above particulars refer to me, and are true.

Wilson H Hickman (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	21 yrs	11 mths.	
Height	5' ft	9½ ins.	
Chest measurement	fully expanded	40 ins.	
	range of expansion	6 ins.	
Complexion	Medium		
Eyes	Grey.		
Hair	Red		

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

G R Barnes, Lt.-Col.
O. C. 1st. Depot Battalion
New Brunswick Regiment.
O. C. Depot Btln.
Regt.

Place Windsor N.S. Date April 30/18

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

REGIMENTAL DOCUMENTS

NAME HICKMAN WILSON HAWKINS Lt/Spr/ REGT. NO. 3182317 UNIT 6 K R I H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		Comp't & D.P.O.	5-11-19	D.P.O. Spec 1098	DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)			25/11/19		Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					M
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				23504	
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob. a
2	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)					
1	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	mzw192					
1	20m81375.					
2	6a20 05-009a					

H

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

Open
Arts

1937

W.A.N.

Number 318257 Rank Spr. B

Surname HICKMAN

Christian Name Wilson Hawkins V

Units C.R.T. Theatre of War France

Date of Service 9-10-18

Remarks

Latest Address Sydney, N.S.W.

Roll No. B

200m.-2-21.M. Page 13634

H. Q.

M. D. No. 7 b

Surname Hickman

Christian names Nelson Hawkins

Regtl. No. 318257 Rank Pte

Unit N S Regt 1st Dpo Bn

T. O. S. Apr 30th 1918

D. O. Pt. II 192 of 11-7-18

S. O. S. Disb 31-3-1919

Reason Demob

Auth Pt II WO 85 of 26-3-19 # h.w.d.

Next of kin Hickman, Mrs Eliz

Address C/o Mrs Reuben Pardy
Brookfield North Sydney
C.B.N.S.

Relationship mother

Also notify:

BORN—Place Canada Louisburg N.S. Date June 6th 1896

ATTESTED—Place Windsor N.S. Date Apr 30th 1915

O/S 3-8-18. 1356

R/C 5-3-19. 278 Dpr

38

W. 22—75M-5-18. 1772-39 839.

*Name Hickman William Rank Hpr Regtl. No 318257

Original unit [redacted] Present unit D.B.C. ~~M~~ or S. Age 22 Religion Meth. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax — Megantic — Arr'd 5/3/19

Next of kin Elizabeth Hickman (Mother)

Addr[redacted]on leave Sydney

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Loco. Engineer Date and place of enlistment Windsor 30/4/18

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
25/2/19	T.O.S. D.B.C. Posted 5 Coy. Cyf. 5/3/19 D.O.	66
31/3/19	DISCHARGED at Halifax, N. S	85

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

(over)

Date.	Remarks.	Pt. Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

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. 318257 Rank Pte Surname HICKMAN (Give name in full) WILSON

Unit or Corps W.D. No. 6 Birthplace Lowestoft

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

1. GENERAL DESCRIPTION:

Physique good Weight 165 lbs. Height 5 ft. 10 in. Colour of Eyes Brown

Nutrition good

Pulse 72

Condition of arteries N

Vision Rt. N Left N

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

nil

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

nil

Sidney Cape Briton % C & R Round House.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Halifax (Canada)

Date 20 3 19 Signed P Haverstock 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 W. H. Dickinson

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-80-1142.

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. 382517 Rank Sapper Surname Hickman
(Given name in full) Wilson Hawkins

Unit or Corps 3rd C.R.T. Birthplace Louisbourg Co. B. Can

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

1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs. Height 5 ft. 9½ in. Colour of Eyes brown.

Nutrition good

Pulse 72

Condition of arteries normal

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

nil

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

(If space is insufficient, continue on back of form.)

[OVER]

A.D.S. HEADQUARTERS CANADIAN TROOPS FEB 1945 WITLEY

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 11/2/14 Signed R B Kennedy Lt 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 W. H. Dickman

(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.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

D.M.S.-1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☞ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Spr Name W H Surname Hickman

Unit or Corps 3 C.R.S (If a soldier) Regtl. No. 318257

Born at Louisburg Cape Breton NS on, date June 6th 1894

Signature (for identification) W.H. Hickman

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 166 lbs.

Height 5 ft. 11 ins.

2. NUTRITION AND DIATHESIS? Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? normal

4. RESPIRATORY SYSTEM. Good

5. HEART?

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 72 Intermittence or irregularity? no

6. ARTERIES.—Any hardening?

7. DIGESTIVE SYSTEM? Good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1018 Reaction? acid Albumen? ns Sugar? no

9. SKIN, MIDDLE EAR, EYE or any other part? Good

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

11. Opinion as to the health and physical condition of the one examined? Good

Examined at Etaples

Date Dec 30th 1918

Signed J Burke Capt. M.O.

Signed H.L. Wansbrough Capt. M.O

☞ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

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

M. F. W. 54. (A. F. B. 103.
[illegible]M.—9-16
H[illegible]1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 3192517 Rank Spr. Name Hickman W.H.
C. E. F.

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

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		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				
25/2/19	O/S.	985 Fo 6 D.D. Posted to Can. L.	Eff.	5/3/19	D066 G.B.Elliot Lt. O/c Records
31/3/19		DISCHARGED at Halifax, N.S D O 85			[illegible] Capt. O. C. DISCHARGE SECTION No. 6 DISTRICT 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, 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				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 318517 (Rank) Sapper

Name (in full) Wilson Hawkins Hickman enlisted in

the 1st Depot Battalion, N.B. Regiment

CANADIAN EXPEDITIONARY FORCE at Windsor N.S. on the 30th

day of April 1918

HE served in France

and is now discharged from the service by reason of

Demobilization

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

Age 22yrs 9 mos.

Height 5 ft 10 inches

Complexion Medium

Eyes Gray

Hair Red.

Marks or Scars Nil

W H Hickman
Signature of Soldier

C W MacAlonen CAPTAIN.
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

Rank

Appointment

Date of Discharge March 31, 1919

Signed at Halifax N.S. this 26th day of March 1919

in Military District No. Six.

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....
Name of Officer

.....
Rank

.....
Appointment

Form R 122.
2353—100M—9-1-16

Rank KR Name HICKMAN. Wilson Hawkins. Reg'l No 3182517

Unit 109th Draft. C R T to C-R T D If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Windsor. N.S. April 30th. 1918 Place of Birth Louisburg. Cape. Breton.

Name and Address, Next-of-Kin Mrs. Elizebth. Hickman.

37 Jubilee Rd. Halifax. N. Scotia. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

M.E. R.B. No. 13125
File R.I.
Category Can. O.R.

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.	REMARKS Taken from Official Documents.
		Arrived in England		15-8-18	S/S IXION
16. 8. 18.	Depot CRTD	T O S from Canada	Buddfleet	15.8.18	P640. 226.
9. 10. 18	"	S O S to 3rd. CRTD Seaton	"	9 10 18	" 280.
22 10 18	3rd CRTD	T O S. from CRTD	Seaton	10 10 18	" 110
31.12.18	"	Posted to CRTD	"	~~26.12.18~~ 5-1-19	Pt II O 130
17-2-19	4 Res	T O S from CRA	Witley	14-2-19	C.R.A. 0.45 14-2-19
19.2.19.	"	S.O.S to 3rd. D.C.M. to 6.	"	19.2.19.	" 42. (3) 1052 1906 21/2/19
10-1-19	Res Bde CFA	T.O.S from France	Baden	5-1-19	— 10
28.2.19	M.D. 6	S.O.S. to Canada	Khyl.	28 2/19	— 59

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.					

C.A.D. 009 A

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

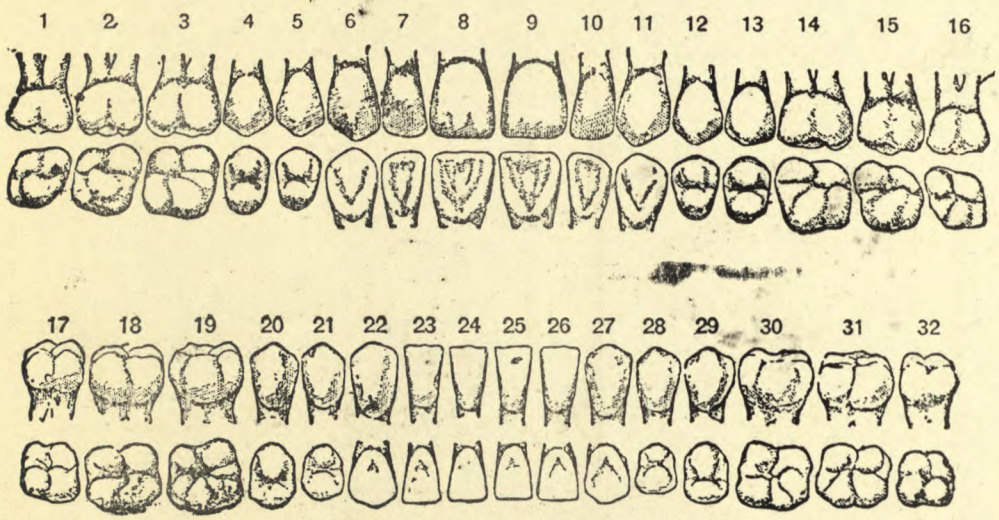
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) HICKMAN W.H.

REGIMENT 3 CRD. RANK Spr. No. 3162517

Date of Examination in England | Date of Examination in France 30-12-18



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 Denturos the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 9 13 14 18
2. EXTRACTIONS 12
3. CROWNS 8
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

Signature of Dental Officer D. K. McIntosh Capt.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER Hickman H. H.

RANK Pte

REGIMENT Rutland

No. 3182517

INSTRUCTIONS

Office copy

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

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

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1918 May	14.										3/14 19 30.									Examined By L H Reed.	3	3. 7. 8. 9. 13. 14. 18. Ext 12.

M.F.B. 50m.—2-18. 1772-39-950.

DENTAL HISTORY SHEET

C.A.D. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) HICKMAN W.H.

REGIMENT 3rd Bn Can Rly Troops RANK Spr. No. 3182-317

Date of Examination in England 10/2/19 | 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 9, 13, 15, 18, 32
2. EXTRACTIONS 5, 12
3. CROWNS 5
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

Signature of Dental Officer W.H. Lunnon Capt.

M.S.A. 15. 3921 NOV 15 1917 632665-9C

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Hickman Christian name Wilson

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

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

4. Address (including street and number, if any) 6 Charlotte St Sydney CB

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 8 day of Nov 1917, by the undersigned medical board sitting at Sydney CB.

5. Age as stated 22 Years ..... Months. 6. Apparent age ..... Years ..... Months

7. Height 5' Feet 8½ Inches. 8. Weight 165' Pounds.

9. Chest measurement { Minimum 37 Ins. / Maximum 40 Ins. } 10. Complexion Ruddy { Eyes brown / Hair brown }

11. Physical development. 1 { Good / Fair / Poor } 12. Smallpox marks No

13. Number of vaccination marks { Right arm ..... / Left arm 2 } 14. When vaccinated last 1910

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

16. Slight defects but not sufficient to cause rejection .....

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A-1

P W Merrill Lt Col President.

A H Cameron Capt Member. J R Richardson Lt Member.

Signature of Man

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined ..... *day of* ..... *191* ..... *at* .....

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

N. B.—This sheet is to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Surname..... 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				

MEDICAL HISTORY SHEET

Surname Hickman Christian Name Wilson Hawkins

Examined { on 9 day of May 1918 / at Windsor, N. S.

Birthplace { City or Town Louisburg / County Cape Breton

Apparent age 22

Trade or occupation Loco. Engineer

Height 5 feet 9½ Inches

Weight lbs.

Chest measurement { Minimum 40 inches / Maximum expansion 46 inches

Physical development

Small-pox Marks

Vaccination Marks { Arm Right Left / Number

When Vaccinated last May 8/18.

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by

Rank 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	
13/5/18		T. A. Smith Capt.	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
13/5/18		T. A. Smith Capt.	M.O.
5/6/18		T.A.S.	M.O.
6/7/18		T.A.S.	M.O.

Enlisted on 30 day of April 1918 at Sydney Cape Breton

	Corps	Regt'l Number	Habits	Date
Joined on enlistment		3182517	A II	
Transferred to	1st DEPOT BATTALION, N. B. REGIMENT 3rd CRY			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Sussex N.B.	July 3/18		A
Fort Edward	Aug 19/18		C. Lowe Lieut. A. Lt. J. D. Inwards Capt.
Wolfville	11/2/19	nil	C, Elliott Capt.

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Mackay Christian Name William Hamilton

STATION	Date of Arrival at the Station	DATES OF Admission into Hospital Day	Month	Year	Discharge from Hospital Day	Month	Year	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

FORM OF WILL.

I, Wilson Hawkins Hickman (Name in full)

Regimental Number 31825-17 serving in N. S. Ry. Cons. & Forestry Depot. PLY. COY. ST. DETAILS

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

Mrs. Elizebth Hickman
Brook Street
North Sydney C.B.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Elizebth Hickman
Brook Street
North Sydney C.B.

Name and Address of person or persons to receive personal estate* *(See note).*

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

this 15 day of May A. D. 1916

Wilson Hickman 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 J. A. Rankin Lt.

Address of Witness Fredericton N.B.

Occupation of Witness Soldier

Signature of Second Witness Alex J. McLeod

Address of Witness York St. Glace Bay C.B

Occupation of Witness Trainman & Driver

Lets Medelwy 4-813
Nomlell 45-

M. F. W. 82
300M-5-16.
1772-39-983.

WAR SERVICE BADGE.
CLASS "A" No .....

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

M. F. W. [illegible] F. B. 103.
[illegible]-5-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps 109 Draft. ~~1st DEPOT BATTALION, N. B. REGIMENT~~ C.R.T. to C.R.T.D

Regimental No. 3182517 Rank Private Name HICKMAN, Wilson Hawkins
C. E. F.

Enlisted (a) 30-4-18 Terms of Service (a) Duration of War Service reckons from (a) 30-4-18

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

Extended ..... Re-engaged ..... Qualification (b) Loco. Engineer

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
		Embarked Disembarked	Halifax Liverpool	2-8-18 15-8-18	
16-8-18	C.R.T. Depot.	Taken on strength on arrival from Canada.	Purfleet.	15-8-18	Part 2 D.O.226.
9.10.18	do	S.O.S. on ~~transfer~~ to 3rd Bn. C.R.T. overseas.	do	9.10.18	pt II 2[illegible] A.A.Worrall Lieut for O.C. DEPOT CAN. RLY. TROOPS.
10.10.18	C.G.B.D.	T.O.S. 3rd Bn. C.R.T. on arrival in France from C.R.T. Depot Purfleet		10.10.18	N.R. 788 D.O.II. 110 d/22.10.18
12.10.18	"	Left for Unit		12.10.18	N.R. 1424
19.10.18	3 C.R.T.	Joined Unit	Field	"	B. 213

(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				
5-1-19	C.B.D.	Trans. to England Sposted to C.R.T.D. Witley		~~27-1218~~ NR23 5-1-19 DO 1/1919 Chas. B. Chapnell Lieut. for Lt.-Col., A. A. G., Canadian Section, G. H. Q. 3rd Echelon, B. E. F.	
		10-1-19 O.C. C.R.T. T.O.S. on reporting from Bordon 6-1-19 Ba.Pt II No.10. Can. Inf. Base Depot, France.		A Benson Lieut. for Lieut-Colonel, O.C. 3rd Bn. C.R.T.	
14-2-19	O.C., C.R.A.	S.O.S. on transfer to 4th Can. Res. Battn.	Witley	14-2-19 Bty.O.Pt. 11 No.45.	
				A Benson Lieutenant for Lieut-Colonel, Commanding, Canadian Reserve Artillery.	
17-2-19	O/C 4th Res.	T.O.S. on transfer from C.R.A.	Witley	14-2-19 D.O. No. 40	
19-2-19	— do —	S.O.S. on transfer to M.D. Wing No. 6. Kimmel Park	— do —	19-2-19 D.O. No. 42	
				LIEUT. & ASST. AD. FOR O. C. 4TH CANADIAN RESERVE BATTN.	

25-2-19 EMBARKED LIVERPOOL

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	~~ENGLAND~~ or * CANADA.	SEPARATION ALLOWANCE.
EFFECTIVE DATE:- 1-8-18		EFFECTIVE DATE:-
AMOUNT:- #20 00		AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SA... WORD "SAME" ONLY TO BE W...

Mrs. Elizabeth Hickman (mother)
c/o. Mrs R Pardy,
Brook St.,
North Sydney. N.S.
Stopped off 1/3/19

NR

L 3022

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, BY INSERTION OF DATE CHARGED

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT
7/12/18	1865	3 CRT 45 prs	8 19			L R C to
2/4/19	7665	Base 25 prs	4 66			Leaps bal
7/4/19	2817	CRT £40 0	19 47			
10/4/19		London £2 0 0	9 73			
21/11/19	4690	CRA £4 0 0	19 47			

PARTICULARS OF RENDERING NON-EFFECTIVE.- Ftd to Canada 1/

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	
July 31	Balance from Canada			
Aug.	P P	34 10		C. a
		34 10		
Sept	P P	33		Can
				AR 169
				" 2263
		33		
Oct.	P P	34 10		Can
				AR 1592
				Q 4005
		34 10		
Nov ~~Oct~~	P P	33		Can
				AR 1720
Dec	P P	34 10		Can
1919 Jan	do	34 10		
				M. O. R
		101 30		
Feb	P P	30 80		Can
				6P 1086
				AR 766
				" 186
				" 2947
				" 4628
		30 80		

S.O.S to Canada 25/2/19

~~ENGLAND OR~~ CANADA.

SEPARATION ALLOWANCE. ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- HICKMAN ~~Wilson~~ ~~Hawkins~~

NUMBER:- 3182517

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.C. Canada	1-8-18	Spr

UNIT AND TRANSFERS

ORIGINAL UNIT:- Pft 109 C.R.T. Depot.

DATE ACCOUNT FIRST OPENED:- 1. 8. 18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.R.T. Depot

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

~~man(mother)~~

~~N.S.~~ L3022

~~Mth. 6 Mth.~~

MD 6

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

AMOUNT	DATE OF PAYMENT	NUMBER OF A.P.	UNIT PAID BY	AMOUNT
~~8 19~~			L.P.C. bal Dr.	5 87
~~4 66~~			Leaf bal Cr.	55 85
~~19 47~~				
~~9 73~~				
~~19 47~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.C. Canada	1	10		
	Mth. 6			

ON-EFFECTIVE:- ~~Sfd to Canada 1/3/19 Auth MR L3022 (4/7/19~~ Mth. MD 6

S	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Canada								15 35		
	34 10		C.A.S.				20 -	29 45		
	~~34 10~~						~~20~~			
	33		Can A.S.				20			
			AR 1698 4/9/18 CRSD 1	19 47						
			" 2252 24/9/19 " 10	2 43				20 55	Balance apd	
	33			~~2 90~~ 21 90			~~20~~			
	34 10		Can A.S.				20	34 65		
			AR 1592 21/10/18 3 CRT 27	8 39				26 26		
			Q4005 K547 6/10/18 CRSD 46	3 69				22 57		
	34 10			~~12 08~~			~~20~~			
	33		Can A.S.				20	35 57		
			AR 1720 20/11/18 3 CRT 17	17 72				17 85		
	34 10		Can A.F.				20	31 95		
	34 10		do	~~17 72~~			20	46 05		
			Mth 30R 8/11/18 70	1 00				45 05		
	~~101 70~~			~~18 72~~			~~40~~			
	30 80		Can A.F.				20	55 85		
			CD 1086 20/1/19 CRM 19	9 73				46 12		
			AR 765 2/1/19 Base 29	4 66				41 46		
			" 1865 17/12/18 2 CRT 31	8 39				33 07		
			" 2947 7/1/19 CRA 40	19 47				13 60		
			~~" 4625 12/2/19~~ 72	~~19 47~~				5 87		
	30 80			~~61 72~~ 60 72			~~20~~			

Canada 25/2/19 NL 22 CRT

NUMBER 3182517 RANK NAME HICKMAN Wilson H

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2

CKMAN Wilson Hawkins

ARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	Deferred	Separation

1098

20 FEB 1919

1098

WAR SERVICE BADGE. CLASP No

M. D. 6. RECEIVED APR 10

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3182517

2 Rank. Spr.

3. Name. Stickman Wilson Ed.

4. Unit. C.R.T. C.R.T.

5 Date of Discharge | MAR 31. 1919. | Place Halifax

6 Reason for Discharge Medical Officers Loco. Foreman 13

Cat H Ser in France 12 months

7. Authority.

8. Proposed Residence after Discharge

HC 813.

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.?

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

Date of Enlistment 30-4-18.

30-4-18.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

H-14064.

Date of Assignment 1-8-18.

RATE OF SEPARATION ALLOWANCE

~~24-~~ 22.	$30 00		

1-9-18.
P.B.2753.
M.O 22410.

RATE OF ASSIGNMENT

20 00			

6248 10 HR

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion 1st. Depot Batt. N.B.R. Dft-109.

Beneficiary

Relationship W. Mother.

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2 MRS.ELIZABETH HICKMAN,
BROOK ST.,% MRS.R.PARDY,
NORTH SYDNEY,N.S. 20 20.00

3 % 3182517 PTE WILSON HAWKINS HICKMAN
TWENTY DOLLARS

4

Date 1918	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						85-89-W-31.
Aug.	X 34782		20	20	✓	
Sept.	G 41862		20	20	✓	×S.A. acct. opened effective 30-4-18. auth card.
Sept.	L 5423	126		126	✓	×M.R.O. alt. 19-9-18. C.M.O. L5423 mailed 24/9/18 @ 26/9/18
Oct.	E 48524	25	20	45	✓	adj. Ctr. ord. # 6064. $126.00 S.A. from 30-4-18 to 30-9-18. C.M.
Nov.	L 56589	25	20	45	✓	
Dec.	64515	45	20	65	✓	
Jan.	L 75548	30	20	50	✓	
Feb.	E 76411	30	20	50	✓	
Mar.	E 87533	30	20	50	✓	

S.A. $311 00
A.P. $160 00

A/c Closed " 31-3-19.
Ret'd per "Megantic"
Date 5-3-19. M.F.W.187 10-3-19.
Closed W.A.
M.O. #6.

M. R. O. Dest. 70219 issued 10/4/19.

M.D.7 – B-2.

AUTHORITY FOR NEW ACC'T. 24-8-18. E.C. Ellerman

M. F. W. 128.
4'OM. 6-'17—1772-31-1141
L. L. 22320—M. & D. 7933.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400m.—'-17—1779 38-1141
L. L. 22820—M. & D. 7933.

AUDITOR | PAYMASTER

Megantic, 5-3-19.

M. OR S. Taken on Strength 25/4/19 ...B. O. 66 Area

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

REGT. No. 318255 RANK Spr. NAME (IN FULL) Dickman, Wilson A.

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes 30.00 DATE EFFECTIVE 1.4.19

TO WHOM PAID — RELATIONSHIP

ADDRESS

Same as A.F.

English.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 6.R.Y. — IF IN P.F. WHAT UNIT? — 390

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE 1-4-19.

PAYABLE TO Mrs E. Dickman. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS c/o C.G.R. Sydney CB

ADDRESS c/o Mrs E. Pardy, Brookland, N. Sydney, NS Louisburg CB

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

L.P.C. MONTH		PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	E.P.D. $	E.P.D. C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT	28-2-19		1.10																												5 87							Bal E.P.D.
																															39 87							On Board
																															26 00							A.P. Rec for March.
																																		65 74		65 74			
COMPILED BY 6/38. CHECKED BY PASSED BY																																							
Mar	31	110	34	10	35	—		80	30																								65 74	100 74	20 44			
																																		120 44	120 44			
			was	Da																																			
		9	210		90			300																												140		150		
																																			70		80		
																																					30		
			310	—	90	—		300	—																															

× 70 — 21604 — 21603 35 — × 30 — 21605

All Payments made

Bal 78/19 157547 March 31

Debit Balance Aug 28 98810 on March #28

Apr 26/19 CB 157548

May 26/19 585985/585986

Ds. Bal of 120.

100M-1-19.—L. L. 52963-M & D. 9723.
M. F. W. 2596.
1772-38-1380.