

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname HIGHGATE,
2. Christian name Clifford
3. Present address Turnerville, Ont
4. Military Service Act letter and number 708208 AC
5. Date of birth Jan. 8th, 1897
6. Place of birth Raleigh Twp., Kent Co.
7. Married, widower or single Single
8. Religion Methodist
9. Trade or calling Farmer
10. Name of next-of-kin Mr. Alfred Highgate
11. Relationship of next-of-kin R.R. W. Turnerville, Ont. 155 Wellington St. E., Chatham, Ont
12. Address of next-of-kin Father
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any None
15. Medical Examination under Military Service Act:—
(a) Place Chatham Ont (b) Date Nov 21st 1917 (c) Category A 11

DECLARATION OF RECRUIT

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

May 22nd 1918

Signature of Recruit: Clifford Highgate

DESCRIPTION ON CALLING UP

Apparent age 21 yrs 5 mths.
Height 5 ft 5 1/2 ins.
Chest measurement fully expanded 37 1/2 ins.
range of expansion 34 ins.
Complexion Medium
Eyes Brown
Hair Brown

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

Right eye D 30 Left eye D 30
20 20

Hearing R Normal L Normal

Signature of Officer: John Young
Lieut. Colonel
1st Depot Battalion W. O. R. Btl.

Place LONDON, ONT. Date MAY 23 1918

1st Depot Battalion, W. O. R. Regiment  
Reg. No. 10041

Depot Battalion

M. D.

# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class: ONA

1. Surname: WILKINSON

2. Christian name: CLIFFORD

3. Present address: WATERVILLE, ONT.

4. Military Service No. (letter and number): 201 208 AC

5. Date of birth: Jan. 21st 1897

6. Place of birth: Waterville, Ont., Kent Co.

7. Married, widower or single: Single

8. Religion: Methodist

9. Trade or calling: Farmer

10. Name of next-of-kin: Mr. Alfred Wilkinson

11. Relationship of next-of-kin: Brother

12. Address of next-of-kin: Waterville, Ont.

13. Whether or present a member of the Active Militia: No

14. Particulars of previous military or naval service: None

15. Medical Examination under Military Service Act: None

(a) Place: CANADA (b) Date: NOV 21ST 1917 (c) Category: A 41

## DECLARATION OF RECRUIT

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

(Signature of Recruit)

Date: 22nd 1918

## DESCRIPTION ON CALLING UP

Appearance	SI	5	Imp	Distinctive marks and marks indicating congenital peculiarities or previous disease
Height	5' 2"	34	Imp	
Build	fully expanded	38	Imp	
Complexion	fair	34	Imp	
Complexion	fair			
Complexion	fair			

Place: Waterville, Ont.

Date: 22nd 1918

Signature of Recruit: Clifford Wilkinson

Signature of Officer: [Signature]

Rank: [Rank]

Regiment: 1st Depot Battalion, W. O. R. Regiment

REGIMENTAL DOCUMENTS

17.6.19

NAME *Highgate Clifford*

REGT. NO. *3136321*

UNIT *1st D. B. W. O. R. H. Q.* FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH H
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
1 TRAINING HISTORY SHEET (M.F.W. 113)					
2 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)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)				21002	Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Remob.</i>
1 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)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>1 Disch. cert.</i>					
<i>1 Ment. cert.</i>					
<i>1 misc.</i>					
<i>2 cas card</i>					
<i>1 R 122</i>					

M

I

*170-4337*

*4-18*  
*19-18*  
*32-18*



Surname *Highgate* .....  
 Christian names *Clifford* .....  
 Regtl. No. *3136321* Rank *Pte* .....  
 Unit *West Ont Regt. 1st Opn Bn* .....  
 H. Q. ....  
 M. D. No. *X* .....  
 T. O. S. *May 22nd 1918* .....  
 D. O. Pt. II *130 of 10-5-18* .....  
 S. O. S. *Div. 31-5-19. 19* .....  
 Reason *Wannob* .....  
 Auth. *Pt II No. 155 of 4-6-19* .....  
*#. I. W. W.*

Next of kin *Highgate, Alfred* ..... Relationship *Father* .....  
 Address *155 Wellington St. E.* ..... Also notify: .....  
*Chatham, Ont.* .....

BORN—Place *Canada Raleigh Exp, Ont.* Date *Jan. 8th. 1897* .....  
 ATTESTED—Place *London, Ont.* Date *May, 23rd. 1918* .....  
 O/S *11-7-18*  $\frac{1310}{3}$  ..... R/C *22-5-19. 335. Pte.* .....  
*8.*









No. 3136321 RANK *Private*

NAME *Highgate Co.*

T. O. S.

UNIT

*1st Depot Battalion W. O. Regt.*

*Transf. fr. N. Co. 22-5-18  
S. O. 1843 May pay list*

M. D. /

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAIL FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1918 May 22</i>	<i>1918 May 31</i>	<i>ni</i>		



NAME

*Highgate C.*

REGT. No.

*3136321*

RANK AND UNIT

*Pte*

*Depot Bn. Can For Corps.*

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

6486-2 Beech Hill Englefield H. 4-19.

Influenza

6493-2 Discharged <sup>Green</sup> 12-4-19.

Influenza

Surname

Christian Name or Names

Reg. No.

HIGHGATE

C.

3136321

Rank 1.

Unit 1.

2 Pte.

2. CFC Depot

3.

3.

4.

4.

Cas List.

Hospital and Diagnosis.

Date

4-4-19

7-4-19 C486-2 Beach Hill H. Englefield

Influenza *ay*

15-4-19 6493-2

*Dis.*

12-4-19



708208 AC  
167  
Chatham 139

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 Highgate Christian name Clifford
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 708208 AC.
- 3. Consecutive number on schedule of men reporting for service (if he appears on it) 167
- 4. Address (including street and number, if any) RR.1, Turnerville, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 21st. day of November 1917, by the undersigned medical board sitting at Chatham, Ont.

- 5. Age as stated 20 Years 10 Months.
- 6. Apparent age 20 Years 10 Months
- 7. Height 5 Feet 5 1/2 Inches.
- 8. Weight 135 Pounds.
- 9. Chest measurement { Minimum 34 Ins. Maximum 37 1/2 Ins.
- 10. Complexion Med. { Eyes Brn. Hair Brn.
- 11. Physical development Good { Good Fair Poor
- 12. Smallpox marks Nil
- 13. Number of vaccination marks { Right arm \_\_\_\_\_ Left arm 1
- 14. When vaccinated last Childhood
- 15. Distinctive marks and marks indicating congenital peculiarities or previous disease \_\_\_\_\_

16. Slight defects but not sufficient to cause rejection Scar on left little finger with distal joint stiff.  
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis

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

A 2

Eyesight L.D-30 R.D- 30  
Hearing L.Nor. R.Nor.

George Benten Capt. Member. C.A.M.C. R.H. Fraser Member. Major. President. C.A.M.C.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
1/4/18		<u>Good Moore</u> M.O.	1/6/18		
		M.O.	5/6/18		
		M.O.	17/4/18		

Joined \_\_\_\_\_ day of MAY 22 1918 191 at LONDON, ONT.

<u>#2 Construction</u> 1st Depot Batta., W. O. R.	REG'TL NUMBER <u>313632.1</u>	HABITS	DATE <u>MAY 27 1918</u>
Joined on enlistment			
Transferred to..... <u>transferred to 1st Depot Bn W.O.R. London, Ont.</u>			<u>JUN 27 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>London Ont</u>	<u>5/22/18</u>	<u>_____</u>	<u>Presr Cat - A</u>
<u>Sunnyvale</u>	<u>26-7-18</u>	<u>a.</u>	<u>_____</u>
<u>Sunnydale</u>	<u>30-9-18</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>22-4-19</u>	<u>_____</u>	<u>_____</u>

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.

Signature of Man G. Clifford Highgate

K. No. 60









M.S.A. J5.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

167

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 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 Highgate Christian name Clifford
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 708208 AC.
- 3. Consecutive number on schedule of men reporting for service (if he appears on it) 187
- 4. Address (including street and number, if any) RR.1, Turnerville, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 21st. day of November 1917, by the undersigned medical board sitting at Chatham, Ont.

- 5. Age as stated 20 Years 10 Months. 6. Apparent age 20 Years 10 Months
- 7. Height 5 Feet 5 1/4 Inches. 8. Weight 135 Pounds.
- 9. Chest measurement { Minimum 34 Ins. Maximum 37 1/2 Ins. 10. Complexion Med. { Eyes Brn. Hair Brn.
- 11. Physical development Good { Good Fair Poor 12. Smallpox marks Nil
- 13. Number of vaccination marks { Right arm Left arm 1 14. When vaccinated last Childhood
- 15. Distinctive marks and marks indicating congenital peculiarities or previous disease

*Clifford Highgate*

Signature of Man

16. Slight defects but not sufficient to cause rejection Scar on left little finger with distal joint stiff.  
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A 2 Eyesight L.D-30 R.D- 30 Hearing L.Nor. R.Nor.

*W. J. Brown* Major, President. C.A.M.C.  
*Geo. Reuter* Capt. Member. C.A.M.C. *R. H. Fraser* Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
1/6/18		<i>Joe Moore</i> M.O.	1/6/18		<i>Joe Moore</i> M.O.
		M.O.	8/6/18		M.O.
		M.O.	1/9/18		M.O.

Joined 22 day of MAY 1918 at LONDON, ONT.

DATE	CORPS	REG'TL NUMBER	HABITS
Joined on enlistment	<u>2 Construction 1st Depot Batta., W. O. R.</u>	<u>3136321</u>	<u>MAY 22 1918</u>
Transferred to	<u>Transferred o/s from 1st Depot Bn. W. O. R. London, Ont.</u>		<u>JUN 27 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
London Ont	5/22/18	<i>W. J. Brown</i>	<u>Pres. Cat. A</u>

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.



OVERSEAS MILITARY FORCES OF CANADA.

DATE... 27... 3... 1919.

To:- Hospital Representative,  
Military Convalescent Hospital,  
Woodcote Park, Epsom, Surrey.

410

The marginally-named soldier has this day been medically examined and placed in Category A and is now available to be discharged.

I heroby certify that this man has been found at this inspection this day free from Vermin, Venereal and Infectious Diseases.

*[Handwritten signature]*

Captain, C.M.I.C.  
For the Commandant,  
Military Convalescent Hospital,  
Woodcote Park, Epsom, Surrey.

FURL UGH ADDRESS:-

*Y. A. C. A.  
Glasgow.*

NEAREST STATION:-

*Beaver Hat  
London*

*Forester -  
Summerdale*

*C. F. C.  
Pte.  
Highgate C.  
8136820*

Form No. 10410

SI-10380-2-17

OVERSEAS MILITARY FORCES OF THE U.S.

DATE: .....

To: Hospital Representative,  
Military Convalescent Hospital,  
Vocaster Park, Epson, Surrey

The originally named soldier has this day been  
medically examined and found to  
be in no way liable to be discharged.  
I hereby certify that this man has been found at  
this hospital on his way from Vietnam, Thailand and  
Indochina District.



UNIT USE ONLY

Captain, USAF  
For the Commanding  
Military Convalescent Hospital,  
Vocaster Park, Epson, Surrey

UNIT USE ONLY

ALL RIGHTS RESERVED  
Copyright © 1988  
by [illegible]

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

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) HIGHGATE, C.  
REGIMENT C.F.C. RANK Pte No. 3136321

Date of Examination in England 22/4/19 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.

*n 15 7*

### PRESENT DENTAL REQUIREMENTS

1. FILLINGS 13.

2. EXTRACTIONS Med

3. CROWNS Med

4. DENTURES

(a) Full Upper Med

(b) Part Upper

(c) Full Lower

(d) Part Lower

**CONTENTS COPIED**  
G. A. D. C., M. D. No. 1.

HAS HE EVER REFUSED DENTAL TREATMENT? No.

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada Med

(b) In England

(c) In France

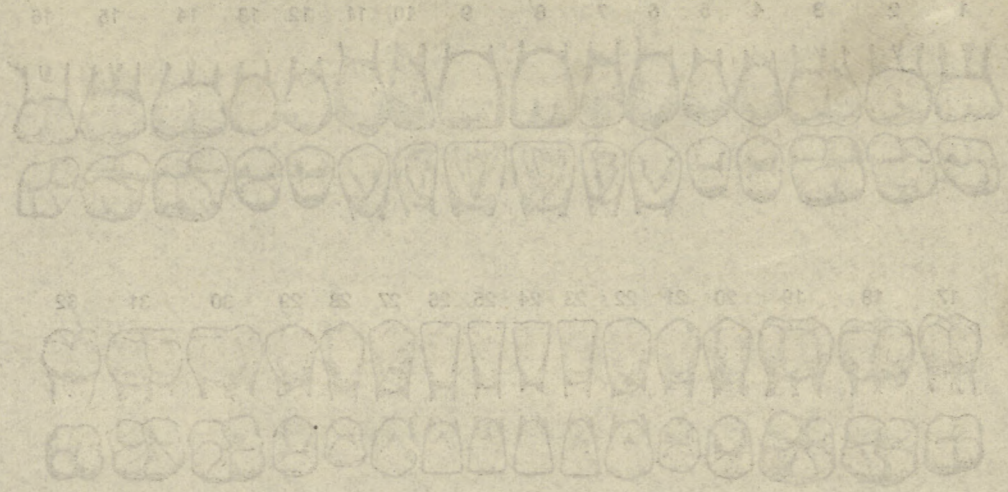
Signature of Dental Officer R. J. [Signature]  
Capt





**INSTRUCTIONS**

1. On examination the condition of patient's teeth 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



REMARKS

OPERATOR

CLASS

DATE

EXAMINER

AGE

SEX

ETHNICITY

RELIGION

EDUCATION

OCCUPATION

RESIDENCE

EXAMINATION

BELFAST LEDGER

MADE IN CANADA

DEPARTMENT OF DENTAL SURGERY  
UNIVERSITY OF TORONTO

DATE

TIME

PLACE

BY

NO.

INITIALS

SIGNATURE

*Hugh*

*B4*

# 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. *3136221* Rank *PTE* Surname *HIGHGATE*  
(Given name in full)

*CLIFFORD*  
Unit or Corps *C.F.C.* Birthplace *TURNERVILL Ave.*

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

### 1. GENERAL DESCRIPTION:

Physique *good* Weight *135* lbs. Height *5* ft. *5 1/2* in. Colour of Eyes *brown*  
Nutrition *good*  
Pulse *76*  
Condition of arteries *good*  
Vision Rt. *20/30* Left *20/30*  
Hearing (conversational voice) Rt. *21* ft.  
Left *21* ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin.)  
*none*

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.

*n.a.*

**EXAMINATIONS.**

**THIS SECTION FOR USE OVERSEAS—**

Examined at Sunningdale (Overseas)

Date 22.4.19

Signed W. Sutherland 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 X. C. Spinks

(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]

# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3136321 (Rank) Pte

Name (in full) Clifford Highgate enlisted in  
the 1st Bn. WOP

CANADIAN EXPEDITIONARY FORCE at London Ont. on the 23rd  
day of May 1918

HE served in France - 8 Coy - C.F.C.

and is now discharged from the service by reason of Demobilization.  
~~Medical Unfitness.~~

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

Age 22 years

Height 5' - 5 1/4"

Complexion medium

Eyes Brown

Hair Brown

Marks or Scars

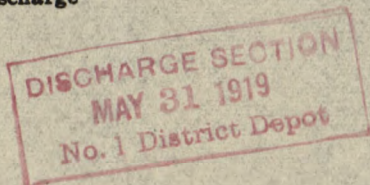
none

Highgate Clifford  
Signature of Soldier

H. S. Hall  
Issuing Officer

Date of Discharge

Suit  
Rank



For O. C. Dispersal Area Sta. "K"  
Date ..... 19.....

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

CANADIAN EXPEDITIONARY FORCE  
DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. \_\_\_\_\_ (Rank) \_\_\_\_\_

Name (in full) \_\_\_\_\_ enlisted in \_\_\_\_\_

the \_\_\_\_\_

CANADIAN EXPEDITIONARY FORCE at \_\_\_\_\_ on the \_\_\_\_\_

day of \_\_\_\_\_ 19\_\_\_\_

He served in \_\_\_\_\_

and is now discharged from the service by reason of \_\_\_\_\_  
Demobilization  
Medical Reasons

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

Age \_\_\_\_\_

Height \_\_\_\_\_

Complexion \_\_\_\_\_

Eyes \_\_\_\_\_

Hair \_\_\_\_\_

Marks or Scars \_\_\_\_\_

Signature of Soldier \_\_\_\_\_

Date of Discharge \_\_\_\_\_

Issuing Officer \_\_\_\_\_

Rank \_\_\_\_\_

Date \_\_\_\_\_

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it to an appointed agent or to the Secretary, Military Council, Ottawa, Canada.

M. T. N. 344  
REVISED 1918  
M. T. N. 344

MADE IN CANADA

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

War Service Badge  
 Class "A" No. 121  
 No. 2 Const Bn  
 15/18

M. F. W. 54. (A. F. B. 103.  
 350M.—5-16  
 H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battalion, W.O.R.  
 Regimental No. 3136321 Rank Pte Name Highgate, Clifford  
 23.5.18 Enlisted (a) MSA Terms of Service (a) new Service reckons from (a) 23/5/18  
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
 Extended. Re-engaged. Qualification (b) Yarnes

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				
JUN 27 1918	1st Depot Bn. W.O.R.	Transferred o/s EMBARKED 10-7-18 DISEMBARKED 22-7-18	London, Ont. CANADA ENGLAND		Authority H.O. 593 / see 249 JUN 24 1918
24.7.18	636 Bn	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale		23.7.18	Pt. 11 D.O. 175.
16.9.18	OC 636 505	on posting to 56 Dist. 142 Co	BASE DEPOT C.F.C. SUNNINGDALE	16.9.18	PT. 11. DO. NO. 921 C.F.C.
26/18	OC 636	T.O.S. 56 <sup>th</sup> Dist 142 Coy.	E. Pheen	17/18	Pt II. D.O. 256th D.
30 9/18	OC 56 Dist C.F.C.	S.O.S. on transfer to Base Depot		28 9/18	3 Kearney Captain & Adjt., for O.C. No. 56 District, Canadian Forestry Corps.

(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.]

Date	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
1.1.18	<i>[Signature]</i>	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale	Pt. 11.D.O.	28/9/18	234
21 OCT. 1918	<i>[Signature]</i>	S.O.S. BASE DEPOT C.F.C. SUNNINGDALE	Pt. II. D.O. NO 242	10/10/18	<i>[Signature]</i> for O.C. C.F.C.
2-4-19	8th Coy. CFC. G.C.Cdn. S.O.S. for demobilisation to C.F.C. Cmp. Le Havre	Disembarked France.	Sunningdale	11-10-18.	D.O.No.1.dated 4-11-18. N.R. K4-1 Pt. 2.0/3. <i>[Signature]</i> Lieut. for Lt. Col A.A.G. Cdn. Sect. C.H.Q.
14/4/19		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale	Pt. 11.D.O.	3/4/19	94 from C.F.C. France
10-5-19	B.D.C.F.C.	S.O.S. BASE DEPOT C.F.C. on transfer to M.D.I. Can. camp	SUNNINGDALE	10-5-19	Pt. II D.O. 130 <i>[Signature]</i> Lt. for O.C. B.D.C.F.C.

CERTIFIED COPY  
 21 OCT. 1918  
 10/10/18



# SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I.  
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/3

HWV(R1460)

3/19

100,000

P2151

W10416

(6 28 19)

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin ( <i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.		
(10) Enlistment ( <i>b</i> ) (12) Service reckons from ( <i>date</i> ) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement ( <i>c</i> ) (13) Special conditions (if any) of enlistment ( <i>d</i> )			
(Authority)		( <i>date</i> )		
(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life ( <i>vide</i> Army Order 93 of 1917)  Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on ( <i>date</i> ) Second Occupation Card despatched on ( <i>date</i> )
(17) Next of Kin (18) Demobilizer ( <i>f</i> ) (Place) (19) Pivotal-man ( <i>f</i> ) (Date) (20) Qualifications ( <i>g</i> ) or (21) Corps trade and rate (22) Extended { (23) Re-engaged {				
(24) Miscellaneous entries :—				

Initials and Rank of  
an Officer.

{ Signature of  
Posting Officer

**NOTES.**—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoemg-smith, &c.

3136321 Pte. Highgate Clifford

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					

12/5/19 O.C.M.D.C.W.I. T.O.S. For return to Canada, Rhyll 10/2/19 D.O. No. 111

S.O.S. on Proceeding to C.E.F. Can. Rhyll.....D.O. No.....

*J. H. G. L.* Lieut.

Officer i/c W.D.O. for O.C.M.D.C.W.I.

Sent-61 HMT Regina

Emb Liverp 20 5 19

Disembk Halfx 28 5 19

☆☆☆☆

TOS No. 1 Dist Depot

Displ. Stn. K. 28-5-19

SOS Dispersed

31, 5, 19 D.O. No. 154

*Wm Stutall*

for O. C. Dispersal Area Sta. "K."

Nothing to be written in this margin.

BT. Rank No. 2 Const. Bn CF C B D Name HIGHGATE Clifford. Reg'l No. 3136321  
 Unit No. 2 Const. Bn CF C B D If in perm. Corps, }  
 What Unit? } Married or Single Single  
 Place and Date of Enlistment London, 23rd. May 1918 Place of Birth Raleigh, Ont.  
 Name and Address, Next-of-Kin Mr. Alfred Highgate.  
RR. No. 1. Turnerville, Ont. Relationship Father.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.D. No. 165744  
 FNo R.L. \_\_\_\_\_  
 Category O.R.G.an

CHECKED  
 8 OCT 1918  
 H.F.B. 103

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.				
<u>C</u>	<u>Arrived in England</u>			<u>22-7-18</u>	<u>S/S SATURNIA</u>
<u>24.7.18</u>	<u>B.D. C.F.C</u>	<u>T.O.S. from Canada</u>	<u>St S' Dale</u>	<u>27.7.18</u>	<u>Pro. 175.</u>
<u>10.10.18</u>	<u>" "</u>	<u>S.O.S. to Maritime Coast C.F.C</u>	<u>" "</u>	<u>10.10.18</u>	<u>248 p 10.1. 4-11-18</u>
<u>16.9.18</u>	<u>" "</u>	<u>S.O.S. to 56 Dist</u>	<u>" "</u>	<u>16.9.18</u>	<u>Pro. 221</u>
<u>1.10.18</u>	<u>" "</u>	<u>T.O.S. from 56 Dist</u>	<u>" "</u>	<u>28.9.18</u>	<u>" 234</u>
<u>4-11-18</u>	<u>8 boy</u>	<u>T.O.S. on Arrival in France from C.F.C</u>	<u>Field</u>	<u>11.10.18</u>	<u>" 1.</u>
	<u>SOS To BDCFC</u>	<u>24.19</u>			
	<u>8 Co. D 9 dg-4. 19.</u>				
	<u>TOS BDCFC</u>	<u>DOg4d4-4. 19</u>			
<u>10.5.19</u>	<u>BDCFC</u>	<u>S.O.S. to m. DCW 1.</u>	<u>" S' Dale</u>	<u>10-5-19</u>	<u>-130</u>
<u>21-5-19</u>	<u>1. m. DCW</u>	<u>S.O.S. from C.F.C.</u>	<u>" Ryl.</u>	<u>11-5-19</u>	<u>-119</u>

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.				
21-5-19	<i>1 M. D. W. S. 10. G. F. C.</i>	<i>S. O. S. W. Lau. S. L. 61</i>	<i>Pte Rhyt. 61-K.</i>	<i>20-5-19 - 119 20-5-19</i>	



NUMBER 3136321 RANK PKE

NAME HIGHGATE b

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919	Ford	6490			2802				8155		
Feb-mar				DR 127. 11-3-19 8 Co. 700							
				" 1275. 21-3-19 6400	460						
				Co. A-P				15-			
				Co. A-P				15-	7677		
		6490			3968			30-			
apr	PP	33		cap				15-	9477		
				649297 H.H.19 125 249					8030		
				" 1683 25-H-19 "	7787				1447		
		33			8030			15-			

SOS Can 20/1/1919/461

A 3 M. FORM RECEIVED 1/5/19  
 DISCHARGED Canada DATE 30/4  
 PAY BOOK VERIFIED 28/4  
 AUTHORITY 1447 P.C. REN 28/4  
 AUTHORITY 14687 1/4 scale ms "K"

COMPILED BY H. J. Baughman.  
 CHECKED BY.....



SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

War Service Badge  
Class "A" No. 262511

M.D. 1

K

1. No. 3136321.

2. Rank. Pte.

3. Name. Highgate Clifford

4. Unit. 1<sup>st</sup> Dpl. Bn Reserve C. F. C.

5. Date of Discharge MAY 31 1919 Place LONDON, ONT.

6. Reason for Discharge. DEMOBILIZATION Category. AW  
 Occ. Group.....  
 Next of Kin. Father  
 Religion. Medt.

7. Authority. R.O. 1894. Destination. Chatham Ont.

8. Proposed Residence after Discharge. G.P.O. Chatham, Ont.  
 Casualty. Yes  
 Decorations. None  
 Service in France. 12 Mths

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.? Highgate Clifford Sail-61 FMT Regina  
 Emb Iverly 20 5 19  
 Disembk Halifax 28 5 19

☆☆☆☆

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place. LONDON, ONT.

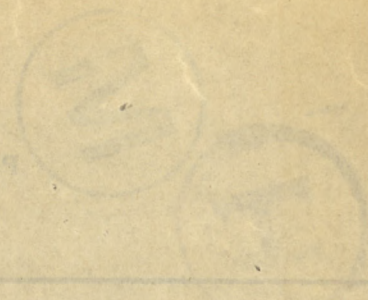
Date. MAY 31 1919

Signature. R. Sutcliffe (O. C. Discharging Unit.)

Ed

SHORT FORM  
PROCEEDINGS ON DISCHARGE

(Form 100-10)



1. No.	213331
2. Rank	1st Lt.
3. Name	William P. Haddock
4. Unit	1st Lt. Haddock 1st Lt. Haddock
5. Date of Discharge	1945
6. Reason for Discharge	Other
7. Authority	Medical
8. Proposed Residence after Discharge	Home
9. Proposed Residence after Discharge	Home
10. Proposed Residence after Discharge	Home
11. Proposed Residence after Discharge	Home
12. Proposed Residence after Discharge	Home
13. Proposed Residence after Discharge	Home
14. Proposed Residence after Discharge	Home
15. Proposed Residence after Discharge	Home
16. Proposed Residence after Discharge	Home
17. Proposed Residence after Discharge	Home
18. Proposed Residence after Discharge	Home
19. Proposed Residence after Discharge	Home
20. Proposed Residence after Discharge	Home
21. Proposed Residence after Discharge	Home
22. Proposed Residence after Discharge	Home
23. Proposed Residence after Discharge	Home
24. Proposed Residence after Discharge	Home
25. Proposed Residence after Discharge	Home
26. Proposed Residence after Discharge	Home
27. Proposed Residence after Discharge	Home
28. Proposed Residence after Discharge	Home
29. Proposed Residence after Discharge	Home
30. Proposed Residence after Discharge	Home
31. Proposed Residence after Discharge	Home
32. Proposed Residence after Discharge	Home
33. Proposed Residence after Discharge	Home
34. Proposed Residence after Discharge	Home
35. Proposed Residence after Discharge	Home
36. Proposed Residence after Discharge	Home
37. Proposed Residence after Discharge	Home
38. Proposed Residence after Discharge	Home
39. Proposed Residence after Discharge	Home
40. Proposed Residence after Discharge	Home
41. Proposed Residence after Discharge	Home
42. Proposed Residence after Discharge	Home
43. Proposed Residence after Discharge	Home
44. Proposed Residence after Discharge	Home
45. Proposed Residence after Discharge	Home
46. Proposed Residence after Discharge	Home
47. Proposed Residence after Discharge	Home
48. Proposed Residence after Discharge	Home
49. Proposed Residence after Discharge	Home
50. Proposed Residence after Discharge	Home

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby certify that the information furnished on this form is true and correct to the best of my knowledge and belief, and that I have signed this form voluntarily and without duress, coercion, or other improper influence.

Signature of Soldier

CONTRIBUTION

The character of the above stated discharge is hereby confirmed.

Signature of Official

Date

Official Title





**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

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1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (A.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)  
(Enclosed in special envelope (260M) ).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... A

Checked by No. .... 19

..... JTC

Date..... 12-5-19

Date of Enlistment 22.5.18

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch **H**

18180

1st July 18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15 <sup>00</sup>			
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## PARTICULARS OF SEPARATION ALLOWANCE

## PARTICULARS OF ASSIGNMENT

No.	Rank	Promoted	Reverted	Discharge
	Soldier's Name			
	Battalion <i>Ind C.B., WOR. 43 sft</i>			
	Beneficiary			
	Relationship			
	Address			

Name	Address	Change of Address
1	ALFRED HIGHGATE, R.R.#1,	H13180
2	TURNERVILLE, ONT.	15 15.00
3	% 3136321 PTE CLIFFORD HIGHGATE FIFTEEN DOLLARS	
4		

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918 July	A 25845		15	15	
Aug	D 34330		15	15	
Sept	G 42149		15	15	
Oct	E 48809		15	15	
Nov	C 56866		15	15	
Dec	E 67030		15	15	
1919 Jan	C 75787		15	15	
Feb	E 76635		15	15	
Mar	E 87741		15	15	
Apr	D 4431		15	15	
May	R 7684		15	15	
				165	

8692-6-23

ENTERED IN  
MILITARY LEDGER  
JUL 15 1918  
M.F.W.

M. F. W. 128  
400M. - 5-17-172-38-141  
L. L. 22520 - M. & D. 1888.

M.R.O. #1  
M.R.O. 118785-579  
A/c Closed 21-5-19  
Ret'd per Regina  
Date 28-5-19 M.F.W. 187 5-6-19  
Closed E. Reade

AUDITED.

AUTHORITY 1-131  
FOR Robt Armstrong  
NEW ACCT. 16.7.18





