DUPLICATE.

DUPLICATE.

April 7 card Sgn.

115th Battalion, C. E. F.

DUPLICATE. ORIGINAL.

ATTESTATION PAPER.

No. 742033

Folio. 1

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? Holland
1a. What are your Christian names? George
1b. What is your present address? Milltown NB.
2. In what Town, Township or Parish, and in what Country were you born? Rockland Me. U.S.A.
3. What is the name of your next-of-kin? Mrs. Samuel Huntly
4. What is the address of your next-of-kin? Milltown NB. FW
4a. What is the relationship of your next-of-kin? Mother
5. What is the date of your birth? 25th Dec 1894
6. What is your Trade or Calling? Candy maker.
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? yes
10. Have you ever served in any Military Force? no
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Holland, 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.

George Holland X (Signature of Recruit)

Date Dec 21st 1915 Daniel L. Dwyer (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Holland, 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.

George Holland X (Signature of Recruit)

Date Dec 21st 1915 Daniel L. Dwyer (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Town of St Stephen this 21st day of December 1915

Daniel L. Dwyer (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Holland, George on Enlistment.

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

Waist	29
Height	5 ft. 5 3/8 ins.
Chest measurement. Girth when fully expanded	34 3/4 ins.
Chest measurement. Range of expansion	2 ins.

Complexion Dark

Eyes Blue

Hair Black

Religious denominations:
- Church of England
- Presbyterian
- Methodist Yes
- Baptist or Congregationalist
- Roman Catholic
- Jewish
- Other Denominations (Denomination to be stated)

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.)

none

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 declares that he is not subject to fits of any description.

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

Date December 21 1915. Wm. Warwick P. Capt.

Place St. Stephen N.B.

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.

George Holland 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.

Lt. Col. (Signature of Officer)

O. C. 115TH OVERSEAS BATTALION, C.E.F.

Date FEB 8 1916 191

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Holland, George.

Regt. No. 742033 Rank Pte.

Corps 115th O'Bn. C.E.F.

29969

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Pay card — 1

M. F. W. 62.
25m.—11-15.
H. Q. 1772-39—935.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 115th. O.S.?Battlion, C.E .F.

Regimental No. 742033 Rank Private Name Holland, George

Enlisted (a) 21·12·15 Terms of Service (a) C. E. F. Dofw. Service reckons from (a) 21·12·15.

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

Extended Re-engaged Qualification (b)

Report		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				
3·4·16	115th	SOS. Deserter by C of I.	St John N.B.	6·3·16	D.O. Pr II. 82

D Guthrie

Capt for Dofw

(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				

CARD NO. V

SOS Dec 5
1/16 FOLL.

SURNAME. Holland

CHRISTIAN NAMES George

REGL. No. 742033 RANK Pte.

UNIT 115th Batt.

FORMER CORPS Nil

NEXT OF KIN.

NAMES IN FULL Huntley Mrs. Samuel

RELATIONSHIP TO SOLDIER Mother

ADDRESS Milltown, N. B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH U. S. A. Rockland, Me. DATE Dec 25th 1894

PLACE OF ATTESTATION St. Stephen, N. B. DATE Dec 21st 1915

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING candy-maker RELIGION Methodist

DESCRIPTION.

APPARENT AGE 20 YEARS — MONTHS

HEIGHT 5 FEET 5 3/8 INCHES

CHEST MEASUREMENT 34 3/4 INCHES EXPANSION 2 INCHES

COMPLEXION dark EYES blue HAIR Black

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE St. Stephen, N.B. DATE Dec 21st 1915

No. 742033 RANK Pte NAME Holland, George.

T.O.S. 18-11-15 UNIT 115th Battalion C.E.F.
Do 1 of Dec 1915

M.D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1915	1915			
Nov 18	Nov. 30	✓		
Dec.		✓		
1916	1916			
Jan.		✓		
Feb.		✓		
Mar.		n.		
Apr	No. a/e.		S.O.S. Deserter 6-3-16	Do. 82 of 3-4-16.

UNIT SAILED
JUL 23 1916

a/e closed by charges to

B

MEDICAL HISTORY SHEET.

Surname Holland *Christian Name* George

Examined { on 21 day of Dec 1915 / at St Stephens NB

Birthplace { City or Town Rockland / County Maine

Apparent age 20

Trade or occupation Candy Maker

Height 5 Feet 5 3/8 Inches.

Weight 126 Lbs.

Chest measurement { Minimum 32 3/4 inches. / Maximum expansion 34 3/4 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number 100

When Vaccinated last

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

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

Teeth Good Sexual

upper front Missing

Vision R.S. 20 L.S. 20

Approved by Wm Warwick P.

Rank Capt. 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.
		M.O.
		M.O.
		M.O.

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

Enlisted on 15th *day of* November 1915 *at* St. Stephen, N.B.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

carded 31-7-16 J.S.

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				