ORIGINAL

6th M. D. ~~xxxx~~ 1st Depot Battalion Nova Scotia Regiment

Regtl. No. 3201649

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname ~~XXXX~~ Hughes
2. Christian name James John
3. Present address St Mary's Road, P.E.Island
4. Military Service Act letter and number HC 591313
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth November, 1st, 1896
6. Place of birth St Mary's Road, P.E.Island
   (town, township or county and country)
7. Married, widower or single Single.
8. Religion Roman Catholic
9. Trade or calling Farmer
10. Name of next-of-kin James M. Hughes
11. Relationship of next-of-kin Father
12. Address of next-of-kin St Mary's Road, P.E.Island
13. Whether at present a member of the Active Militia NO
14. Particulars of previous military or naval service, if any NO
15. Medical Examination under Military Service Act :—
    (a) Place Charlottetown, PEI (b) Date 18-6-18 (c) Category A2

DECLARATION OF RECRUIT

I, James J Hughes, do solemnly declare that the above particulars refer to me, and are true.

James J Hughes (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs. 9 mths.

Height 5 ft. 2½ ins.

Chest measurement — fully expanded 33½ ins.; range of expansion 3½ ins.

Complexion Medium

Eyes Blue

Hair Red.

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

H. Coy. 1st. DEPOT B'n AUG 16 1918 CHARLOTTETOWN Nova Scotia Regiment

P.E. Palmer Lieut

O. C. Depot Btn.

Regt.

Place Date for O.C. "H" COY. 1st DEPOT B'N N.S. REGT

M. F. W. 133.
500M.—5-18.
1772—39—1158.

A.C. 15-8-15

REGIMENTAL DOCUMENTS

NAME Hughes James J. (Pte) REGT. NO 3201649 UNIT 1st D.B.N.S.R.H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				38322
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
1	TRAINING HISTORY SHEET (M.F.W. 113)				
1	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)				
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
1	DENTAL HISTORY SHEET (M.F.B. 465)				
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
1	MEDICAL EXAMINATION (M.F.W. 129)				
1	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)				
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)				
1	M.F.W. 71				

NON-EFFECTIVE BY DEATH

Category

DISCHARGE

Category

Demob.

DESERTION

9-1-70

30-11

28-11

F.

W 3159
1000-11-18
3772-3-1327

H. Q.

M. D. No. 6

Surname Hughes

Christian names James John

Regtl. No. 3241649 Rank Cte

Unit No 2 Regt 1st Dpt 8 Bn

T. O. S. Aug. 16. 1918.

D. O. Pt. II 2350 of 20-8-18.

S. O. S. Dis. 23-7-1919

Reason Demob.

Auth. Pt II do 2054 of 23-7-19. #4 Dist. C.G.R.

Next of kin. Hughes James Mr.

Relationship Father

Address St Mary's Rd C.E.I.

Also notify:

BORN—Place Canada, St Marys Rd. Date Nov 1st 1896

ATTESTED—Place Charlottetown P.E.I. Date Aug. 16th 1918

Lt. M.S.6, 22-11-18

O/S

R/C

W. 22—100M-7-18. 1772-39-839

C

M. F. W. 71—500M.—6 18.
1772.—39—951.

NAME HUGHES . J. J

REGIMENTAL NO. 3201649 RANK Private

ENLISTED AT Halifax. N.S. PROMOTIONS, &c. AND DATE

DATE 21-1-19

IF SERVED PREVIOUSLY. STATE UNIT, &c. N. S. 1. D. R. N. S. R.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN James Hughes RELATIONSHIP Father

ADDRESS OF St. Mary's Road P.E.I.

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT A 2

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR R. C.

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O. NO.	PART II. D. O. DATE	REMARKS IF IN HOSPITAL, NOTE NAME, &c
Trans "C" to 21-1-19	29	29-1-19	D. Hosp 28-2-19 D059
Forfeits 1 days Pay 28-4-19	118	28-4-19.	
M.R 23-7-19. Demob	204	23-7-19	D.2. 868-T-1

LEDGER NO. 84 SERIAL NO. E 38281 2

REG. NO. 320/649 NAME Hughes James

RANK Pte CORPS 6th C Gk AGE 22 SERVICE 2/12

	HOSPITALS	DATE OF ADMISSION
1	Cogswell St Mil Hospl	22.2.19
2		
3		

DIAGNOSIS Pharyngitis

TRANSFERRED TO

DISPOSITION 28.2.19 CATEGORY

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS:

DENTAL HISTORY SHEET

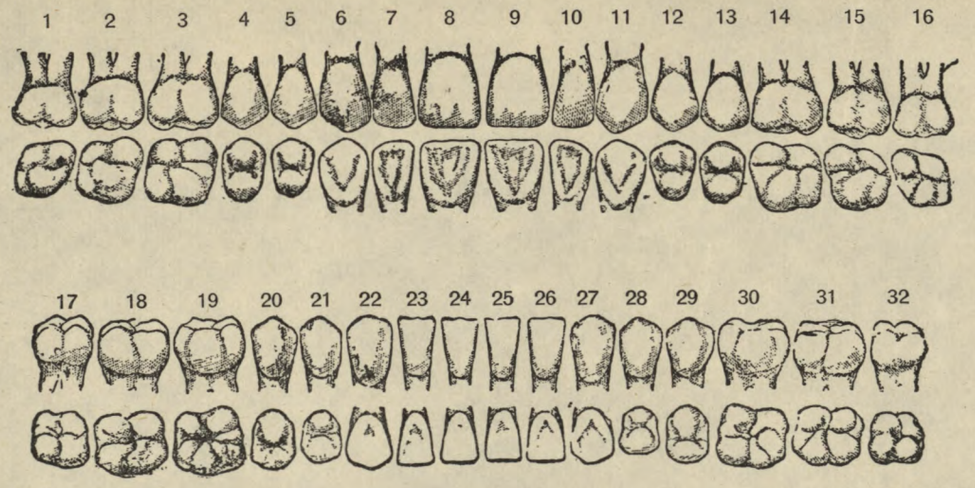
CANADIAN ARMY DENTAL CORPS

DISTRICT 6.

NAME OF SOLDIER J. Hughes.

REGIMENT 1 Mtge Bn. RANK Pte. No. 320162

M. F. B. 465.
150M—6-18.
(72-39-950.



INSTRUCTIONS

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	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							
																					J B Barron		Didn't report.

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. 320164 Rank Pte Surname Hughes
(Give name in full)
James Johnson
Unit or Corps 6th Draft 6 YR. Birthplace St Marys Road P.E.I.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 144 lbs. Height 5 ft. 3½ in. Colour of Eyes Blue

Nutrition Fair

Pulse 70

Condition of arteries normal

Vision Rt. D 20 Left. D 20

Hearing (conversational voice) Rt. 20 ft.

Left. 20 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 Yes

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.

Pharyngitis 22-2-1916 28-2-19
Recovered.

A II

(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 N.S. (Canada)

Date July 19/18 Signed Jas. Murdock 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 Hughes James Johns

(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. 199.
1033 (D.P.) 500M-11-18.
1772-39-1142.

M.S.A. 15.

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 Neyhes Christian name James Forbes

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule HC 591313

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

4. Address (including street and number, if any) [illegible] Mount Road PEI

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 16 day of [illegible] 1917, by the undersigned medical board sitting at [illegible]

5. Age as stated 24 Years 9 Months. 6. Apparent age 21 Years 9 Months

7. Height 5' Feet 2½ Inches. 8. Weight 102 Pounds.

9. Chest measurement { Minimum 30 Ins. / Maximum Ins. } 10. Complexion Medium { Eyes Blue / Hair Brown }

11. Physical development. Good { Good / Fair / Poor } 12. Smallpox marks

13. Number of vaccination marks { Right arm / Left arm } 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 Vision R 6/9 L 6/9 Hearing Right Left

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 A1

[illegible] *President.*

[illegible] *Member.* [illegible] *Member.*

Signature of Man

Date	Result	Vaccinations		Date	Result	Anti-Typhoid Inoculations, Etc.	
17-1-19		Stevenson	M.O.	17-1-19		Stevenson	M.O.
			M.O.	5.7.19	AB	Jm. Murdoch	M.O.
			M.O.				M.O.

Joined 16th *day of* August 1918 *at* Charlottetown, PEI

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st DBMSR	3201649		
Transferred to.....	6th, Batt, Can. Garrison Regt. C.E.F.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
[illegible]	4/1		

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 HUGHES Christian Name JAMES JOHN

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				
Halifax		22	2	19	28	2	19	pleurisy	7	Invalided from a ward ship off Dundalk pleurisy - under treatment.	[illegible]

CLINICAL CHART

(To be pasted into Case Book opposite Patient's Case.)

Corps 6th C. G. R. Hospital Station

No. 3201649 Rank and Name Hughes James Pte Age 22 Service

Disease Pneumonia Date of Admission 22-2-19 Date of Discharge 28.2.19 Result Recovd Case Book Folio

Dates of Observation	22	23	24	25	26	27
Days of Disease						
Temperature Fahrenheit	TIME am pm	TIME am pm	TIME am pm	TIME am pm	TIME am pm	TIME am pm
107°	.8 .6 .4 .2					
106°	.8 .6 .4 .2					
105°	.8 .6 .4 .2					
104°	.8 .6 .4 .2					
103°	.8 .6 .4 .2					
102°	.8 .6 .4 .2					
101°	.8 .6 .4 .2					
100°	.8 .6 .4 .2					
99°	.8 .6 .4 .2					
98°	.8 .6 .4 .2					
97°	.8 .6 .4 .2					
	.8 .6					
inute		80 24	80 90	74 72	72	88
Minute			90 19	18 16	16	
			T. 19			

38.

513.

Signature H. Churchward Capt In charge of case.

[redacted]TRAL LABORATORY OF HYGIE[redacted]

MILITARY HOSPITAL. HALIFAX. 23/2/19

TO M.O.i/c LA Ward. H

THE THROAT SWAB IN THE CASE OF

Pte Hughes James. 3201649

WAS FOUND TO CONTAIN No DIPTHERIA BACILLI AND THE

4. CULTURE THEREFROM IS Neg: FOR DIPTHERIA.

K G Mahabir CAPT. A.M.C.

O i/c Laboratory of hygiene

CASE HISTORY SHEET.

Aswell St. Military Hospital Hospital. Halifax N.S. Station.

No. 3201649 Rank Pte Name Hughes, James Age 22

Unit 6 C.G.R.C. Completed years of service Where and how long 2/12

Date of admission 22/2/19 Date of discharge FEB 28 1919

Diagnosis Rheumatitis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

Patient was admitted complaining of pain in joints and muscles of both legs and arms. Temperature 101 degrees. Pulse 80. Respiration 20. Tongue coated. Bowels constipated. Appetite poor. Patient was given a dose of salts and ordered to bed. Urine sent to laboratory. Urine examined. Albumen present. Temperature 101 degrees.

Feb 24. Patient complains of pain in joints and muscles of both legs and arms. Temperature 101 degrees. Pulse 80. Respiration 20. Tongue coated. Bowels constipated. Appetite poor. Patient was given a dose of salts and ordered to bed. Urine sent to laboratory. Urine examined. Albumen present.

Feb 26. Convalescent

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

Aspirin tablets

CONDITION ON DISCHARGE,

(and disposal made of case.) Recovered. Returned to duty.

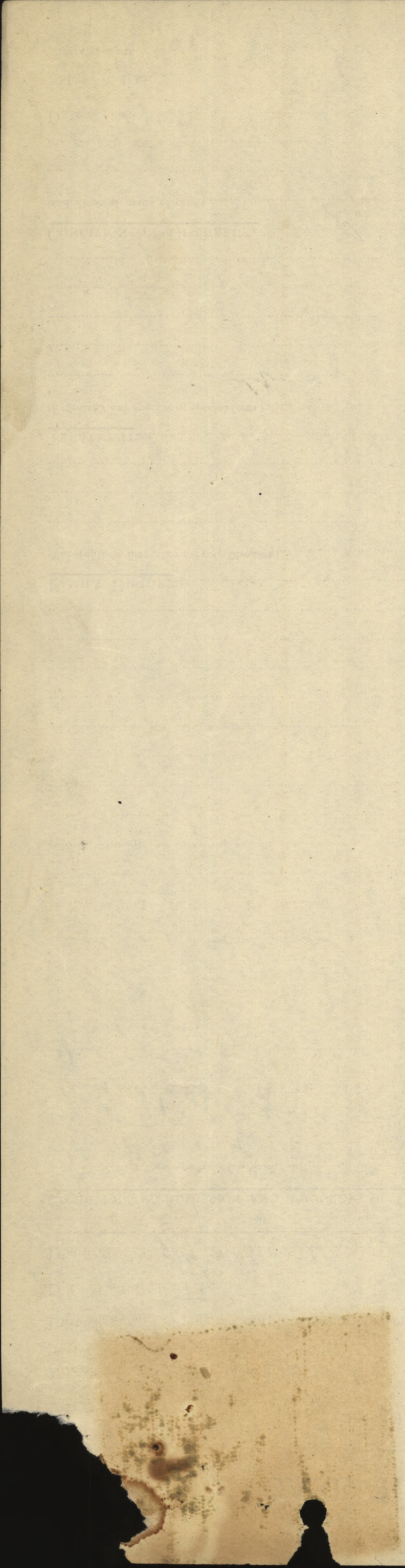
Date 27-2-19

F. L. Chamberlain

Medical Officer i/c case.

M. F. B. 313a.
200M.–5-18.
1772-39-439.

E 38281



CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 201649 (Rank) Pte

Name (in full) James John Hughes enlisted in

the 1st D.B.N.S.R.,

CANADIAN EXPEDITIONARY FORCE at Charlottetown P.E.I. on the 16th

day of August 19 18,

HE served in Canada

and is now discharged from the service by reason of Demobn

H.Q. 868-8-1

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

Age 22 8/12 yrs.

Height 5 ' 2½ "

Complexion Medium

Eyes Blue

Hair Red

Marks or Scars

Hughes Pte

Signature of Soldier

G Z Mott

Issuing Officer

Major

Rank

O. C. 6th Dist Canadian Garrison Regt. C. E. F.

Appointment

Date of Discharge JUL 23 1919

Signed at Halifax N.S. this JUL 23 1919 day of 19 19

in Military District No. 6

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

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

.....
Name of Officer

.....
Rank

.....
Appointment

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 "H" Coy 1st D.B.N.S.REG'T

Regimental No. 3201649 Rank Private Name Hughes, James John

C. E. F.

Enlisted (a) 16-8-18 Terms of Service (a) War and 6 Mons Service reckons from (a) 16-8-18

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) Farmer

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				
		S.O.S. on transfer to 6 Bn C.G.R.		21/1/19	D821
		J. D. White Lt for O.C. H Coy 1st D.B.N.S.R.			
		Taken on strength 6th Batt C.G.R. C.E.F.	Halifax N.S.	21.1.19	A. D. Mackay Capt Lieut Officer i/c Records 6th Batt C.G.R. C.E.F.
		S.O.S. 6th C.G.R. C.E.F., HALIFAX, N.S. 23/7/19 DEMOBILIZATION H.Q. 868-8-1 S.O.S. D.O. Pt. 11 No 201 JULY 23 19 A. D. Mackay Capt OFFICER i/c RECORDS 6th C.G.R. C.E.F.			

(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				

6

This space to be for numbers.

Proceedings on Discharge.

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

No. 3201649

Rank Pte

Surname Hughes

Christian name James John

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 6th. Can. Garrison Regt. C.E.F.

Date of discharge JUL 23 1919

Place of discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years 8 months.

Height 5 feet 2½ inches.

Complexion Medium

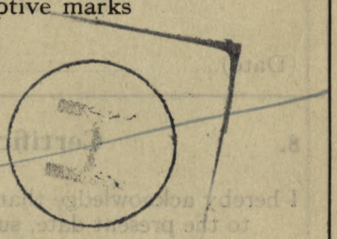
Eyes Blue

Hair Red

Trade Farmer

Intended place of residence (To be given as fully as practicable.) St Mary's Rd P.E.I.

Descriptive marks



2. The above-named man is discharged in consequence of

Demob.

Authority for discharge H.Q. 783-8-1

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.....

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) Halifax N.S. Hughes J.J. *(Signature of Soldier.)*

(Date) JUL 23 1919 Ethel A. Cosh *(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) Halifax N.S.

(Signature) G L Mott Major

(Date) JUL 23 1919

O. C. 6th Canadian Garrison Regt. C. E. F.

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.)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company Conduct Sheet,	"	B. 263a
or Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper or Particulars of Recruit	Militia Form	W. 23
	"	W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

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.

Rank.....orps.....

Ward.....

Receiv Wd II Urine

Pte. Hughes. 22-2-19

Volume .....

Sp. Gr. 1028

Reaction acid

Albumin nil

Blood nil

Glucose nil

Bile nil

Deposit .....

.....

Examined by H. G. Mahaby Capt.

M. F. W. 2537
15m.—5-18
1772-39-1314

AUDITOR | PAYMASTER

M. OR S. Bingle

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

REGT. No. 3201649 RANK Pte NAME (IN FULL) Hughes James John (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN James Hughes RELATIONSHIP Father

ADDRESS St Marys Rd R.F.D.

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Not enough Service for payment of W.D.D.		

ORIGINAL UNIT C.E.F. 1st Div. Sig. Co. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Charlottetown — TRANSFERRED TO 6th C.S.R. — DATE 21-1-19 — AUTHORITY

DATE OF ATTESTATION 6-8-18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 1.50 — DATE EFFECTIVE

PAYABLE TO James Hughes RELATIONSHIP Father — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS St Marys Rd R.F.D.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE Halifax N.S. DATE 23/7/18 REASON Demobilization AUTHORITY H.Q. 868-1 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																									0												Cr Pa. Lemieux 16-21-4-1918 105
April		1.10			10																				1	10	1	10									Cr Pay 30.8.18
	30		33						43		15	13/2	26	19/4			10		6				15		25						33	45			9	55	Cr Pay A.R.21.
May	31	1.10	34	10	9	55			43	65	34	17/3					10						15		25						33	65			10		Cr Pay A.R.10.
													114	29/5					8	40																A.R.9.
June	30	1.10	33		10				43		49	9/6	63	25/6			10		7	85			15		15						33				10		
					10						77	12/7					10																				Lt. Allen
July	22	1.10	24	20	35				~~6~~ 9	~~20~~									~~5~~ 9	~~20~~											~~6~~ 9	~~20~~					L.O.P. II 204 Discharged 22/7/19.
	25	1.10	1	10					70	30									60	30											70	30					
Totals			125	40	74	55			199	95							40	00	82	55			45	00	1	85	1	10			170	40			29	55	

Certified that all payments due on this sect. have been paid.

Allen CAPT.
For Senior Officer Pay Services, M.D. 6

100M-1-19.—L. L. 53962—M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

I certify that I have handed over to Admitting Medical Officer, all valuables and cash in my possession.

Date 22/2/19

Hughes J J.

Signature.....

Signature of M.O.....

I certify that I have handed over to Alma Writing Medical Officer, all valuables and effects in my possession.

Date.....

Signature.....