

TRIPPLICATE

No. 2 M. D. 1st.

Depot Battalion

2nd. C.O. Regiment

Regtl. No.

03109989

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE.)

M.S.A.

1. Surname..... Irwin

2. Christian name..... Frank

3. Present address..... Milton Ont.

4. Military Service Act letter and number..... 788547

5. Date of birth..... July 9th 1895

6. Place of birth..... Osprey, Ont.
(town, township or county and country)

7. Married, widower or single..... Single Married 9-5-18

8. Religion..... Methodist

9. Trade or calling..... Clerk & Lumberman

10. Name of next-of-kin..... Ethel Irwin

11. Relationship of next-of-kin..... Wife

12. Address of next-of-kin..... 69 Gowan, Ave., Toronto, Ont.

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. Milton Ont. (b) Date. 22nd. Oct. (c) Category. A-2

DECLARATION OF RECRUIT

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

Franklin Irwin (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....	22	yrs.	3	mths.	Distinctive marks, and marks indicating congenital peculiarities or previous disease. Vaccs. 1905. 1 left Scar on inner side of right leg. Enlarged tonsils. Vision both eyes D15.
Height.....	5	ft	6	ins.	
Chest measurement }	fully expanded.....		33	ins.	
	range of expansion.....		3	ins.	
Complexion.....			fair		
Eyes.....			brown		
Hair.....			brown.		

W. Stewart
O. C. MAJOR
For O. O. 1st Depot Bn., 2nd C. O. B., Depot Btln.
Regt.

Place. Hamilton Ont. Date. 13th May, 1918

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1915

(Class)

1. Surname

2. Christian name

3. Present address

4. Military Service Act form and number

5. Date of birth

6. Place of birth

7. Married, widower or single

8. Religion

9. Trade or calling

10. Name of nearest kin

11. Relationship of nearest kin

12. Address of nearest kin

13. Whether at present a member of the Active Militia

14. Particulars of previous military or naval service, if any

15. Medical Examination under Military Service Act

16. Place of Birth (a) Date (b) Date (c) Category

DECLARATION OF RECRUIT

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

Signature of Recruit

DESCRIPTION ON CALLING UP

Height	ins.	5	ft.	5	ins.	Apparent age	25
Weight	ins.	145	ft.	10	ins.	Chest	48
	ins.	145					
Chest	ins.	48	ft.	10	ins.	Chest	48
	ins.	48					
Complexion							
Eyes							
Hair							

Distinctive marks and marks indicating congenital peculiarities or previous disease

9/13 1374/18

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

Registration Papers..... 42

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

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.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 11

A. P. B. 122-1
M. P. W. 39-1

1 Hollerith Card

DISCHARGE DOCUMENTS



Name Irwin Frank

Regt. No. 3109989 Rank Pte

Corps 1st Depot Bn. C. O. R.

gostey

Join Royal Air Force.

Cards.

1 Part II

1 Casualty.

R. O. No.....

H. Q. No.....



01905



MILITARY SERVICE ACT, 1917.

DUPLICATE

103109989

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 Irwin Christian name Frank
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 788547
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Milton Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 22nd day of Oct. 1917, by the undersigned medical board sitting at Milton Ont.

5. Age as stated 22 Years 3 Months 6. Apparent age Years Months

7. Height 5 Feet 6 Inches 8. Weight 117 Pounds

9. Chest measurement { Minimum 30 Ins. Maximum 33 Ins. 10. Complexion fair { Eyes brown Hair brown

11. Physical development fair { Good Fair Poor 12. Smallpox marks 1905 none.

13. Number of vaccination marks { Right arm Left arm 1 14. When vaccinated last 1905

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar on inner side of right leg.

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

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

(Strike out disease admitted or suspected.)

Vision both eyes D15.

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

W. Bethune. President.

F.W. Overholt. Member. H. McColl Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes handwritten entries for dates like 14/5/18 and 17/5/18.

Joined day of 191 at

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Includes 'Joined on enlistment' and 'Transferred to'.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: 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.

Signature of Man (handwritten signature)

CERTIFIED TRUE COPY FOR: LT.-COLONEL O. G. Mobilization Centre HAMILTON, ONT.

no card

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 Private Name Frank Surname Irwin
Unit or corps 1st D. Bn. 2nd COR (If a soldier) Regtl. No. D3109989
Born at Faversham, Ontario on, (date) July 18, 1895
Signature (for identification) Franklin Irwin

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

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

None

Weight

Colour of eyes

123 lbs.

blue

Height

Identification Marks

5 ft. 6 in.

small scar on breast, 1 vaccination mark

2. NUTRITION AND DIATHESIS?

GOOD

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

3. NERVOUS SYSTEM? Is there a history of previous disability? None

Normal

4. RESPIRATORY SYSTEM? Is there a history of lung trouble? None

Normal

5. HEART? Normal

Abnormal Sounds? none

Abnormal Size? none

Pulse Rate? 84 Intermittence or Irregularity? none
Muscular Tone? Good

6. ARTERIES.- (a) Any hardening or nodulation? none
(b) Blood Pressure. 120

7. DIGESTIVE SYSTEM? Condition of teeth and tonsils to be included).

normal

8. GENITO-URINARY SYSTEM? normal

Urinalysis-S.G.? 1014 Reaction? acid

Albumen? none Sugar? none

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

None

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

Good Health

Examined at Inaugural Camp Signed _____ M.O.

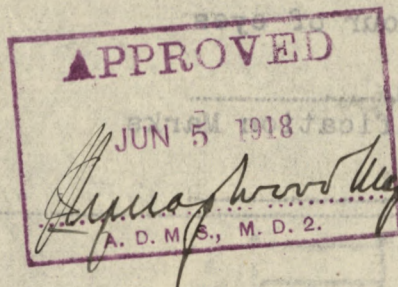
Date June 4, 1918 Signed A. R. Bennett M.O.

Franklin Smith
Signature note of soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, 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.

M.F.W. 129

7-17.



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

3. NERVOUS SYSTEM? Is there a history of previous disability?

4. RESPIRATORY SYSTEM? Is there a history of lung troubles?

5. HEART? Abnormal Sounds? Abnormal Size? Irregular Rate? Intermittence or Irregularity? Muscular Tones?

6. ARTERIES--(a) Any hardening or nodulations? (b) Blood Pressure?

7. DIGESTIVE SYSTEM? Condition of teeth and tonsils to be included.

8. GENITO-URINARY SYSTEM? Urinalysis-S.G.? Reaction? Sugar?

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. D-3109989 (Rank) Private

Name (in full) IRWIN, Frank, enlisted in
the 1st Depot Bn. 2nd C.O.R.

CANADIAN EXPEDITIONARY FORCE at Hamilton, Canada on the 13th
day of May 1918.

HE served in 1st Depot Bn. 2nd C.O.R.

and is now discharged from the service by reason of "To join Royal Air Force."

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

Age 22 yrs. 3 mos.

Height 5 ft. 6 ins.

Complexion Fair

Eyes Brown

Hair Brown

Marks or Scars
Vaccs. 1905. 1 left. Scar on
inner side of right leg.

Frank Irwin
Signature of Soldier

B. W. Belson
Issuing Officer

Date of Discharge June 8th 1918.

O. B. 1st 2nd B. 2nd C.O.R.
Rank

Signed at Niagara Camp, Ont this 8th day of June 1918.

in Military District No. 2.

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.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. **D-3109969** (Rank) **Private** Name **IRWIN, Frank,**

Unit **1st Depot Bn. 2nd C.O.R.**

Address on Discharge **MILTON, Ont.**

Character and Conduct

Former Occupation **Clerk & Lumberman**

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at **Niagara Camp, Ont** this **8th** day of **June** 19**18**

W. M. Belton
Name of Officer

Alvt.
Rank

O.C. 1st D.B. 2nd C.O.R.
Appointment

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

M.D. 2
No. 35

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F. 1916).

Regimental No. **D2109989** Rank **Pte.** Name **Irwin Frank**
 Corps **1/2 C.O.R.** who was* **Transferred**
 On **8.6.18** 191... to **Join R.A.F.**
 *Insert "discharged" or "transferred."

MILITARY SERVICE
AUG 11 1918
H.Q.
CANADA

The following is a statement of the account of the above named from **1.6.18.** 191...
 to **8.6.18** 191... the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10.	15
Advances } No.....			Reg't Pay 8. days at \$ 1.00	8.	00
by } No.....			Field Allow. 8. days at \$.....	10.	80
Assigned Pay and Sep'n Allice. No.....	20.00		Separation Allowances* (Monthly)	20.	00
Other charges Ldry. 25¢ Kit 2.25	2.45		Other Allowances*		
Payment on transfer or discharge No.....	16.50		Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	38.95		Total	38.	95

* Give particulars.

A monthly stoppage of \$ **15.00** (†) has..... (‡) been paid on account of Assigned
 { Pay for the month of **May** 191... }
 { and Sep'n Allice. for month of 191... } (to) Assignee **Ettie Irwin**
 (Address) **69 Cowan Ave.**
Toronto Ontario

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment **12.5.18**
 (2) if married and if a Separation Allowance Card has been submitted **Yes** **R** **Yes**
 (3) cause of discharge **To join R.A.F.** authority **DO 158.**
 (4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date **July 15/18**
 Place **Niagara Camp, Ontario**

[Signature]
 Captain.
 Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

495-9 -12-18

9-11-18

RECEIVED
NOV 11 1918

NOV 11 1918

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NOV 11 1918

NOV 11 1918

NOV 11 1918

NOV 11 1918

M. D. 2
No. 35

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 5109989 Rank Private Name Irvin R.
 Corps 1st Bn Can C.O.R. who was* Discharged
 On June 8th 1918 191... to Join R.A.F.
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-6-18 191...
 to 6-8-18 191..., the inclusive date of transfer or discharge.

Dr.		\$	c.	Cr.		\$	c.
Bal. Dr. from prev. month				Bal. Cr. from prev. month		10.15	
Advances by Cheques	No.			Reg't Pay	8 days at \$ 2	0.	00
	No.			Field Allow. days at \$		
Assigned Pay and Sep'n Allice. No.				Separation Allowances* (Monthly)			
Other charges	<u>Laundry 25/ Kit 2.00</u>	2.45		Other Allowances*			
Payment on transfer or discharge No.		16.50		Other Credits*			
Balance Cr. (to be paid by the new unit)				Bal. Dr. (to be deducted by new unit)			
Total		19.95		Total		10.95	

* Give particulars.

A monthly stoppage of \$ 15. (†) has..... (‡) been paid on account of Assigned
 { Pay for the month of Nov 191... } (to) Assignee Ettie Irvin
 { and Sep'n Allice. for month of 191... } 69 Cowan Ave.
 (Address) Toronto, Ont.

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted Yes Yes
- (3) cause of discharge To join R.A.F. authority.....
- (4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date June 10th 1918.
 Place Camp Niagara, Ont.
[Signature] Capt. Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
 If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

LAST DAY CERTIFICATE

THE CONTINENTAL EXPEDITIONARY FORCE, UNITED STATES OF AMERICA, HAS THE HONOR TO ANNOUNCE THAT THE FOLLOWING OFFICERS AND MEN OF THE REGIMENT, COMPANY, AND BATTALION, HAVE COMPLETED THEIR TOUR OF SERVICE AND ARE HEREBY DISCHARGED FROM THE SERVICE OF THE UNITED STATES OF AMERICA.

NAME OF OFFICER OR MAN: _____
RANK: _____
COMPANY: _____
BATTALION: _____
REGIMENT: _____
DATE OF DISCHARGE: _____
PLACE OF DISCHARGE: _____
BY: _____
OFFICER IN CHARGE

THIS CERTIFICATE IS VALID FOR THE PURPOSES OF THE NATIONAL ARCHIVES ACT, PUBLIC LAW 89-661, OCTOBER 2, 1966, AND THE NATIONAL ARCHIVES ACT OF 1950, PUBLIC LAW 81-874, JULY 1, 1950.

FOR INFORMATION OF THE OFFICER AND MEN DISCHARGED, THE FOLLOWING INFORMATION IS FURNISHED: THE NATIONAL ARCHIVES HAS BEEN ADVISED OF THE DISCHARGE OF THE ABOVE-NAMED OFFICER AND MEN, AND THE RECORDS OF THE OFFICER AND MEN WILL BE MAINTAINED IN THE NATIONAL ARCHIVES. THE NATIONAL ARCHIVES WILL MAINTAIN THE RECORDS OF THE OFFICER AND MEN FOR THE PURPOSES OF THE NATIONAL ARCHIVES ACT, PUBLIC LAW 89-661, OCTOBER 2, 1966, AND THE NATIONAL ARCHIVES ACT OF 1950, PUBLIC LAW 81-874, JULY 1, 1950.

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

M. E. W. 54. (A. F. B. 10s.

500M.—9-16

H. Q. 1772-39-9.0.

Casualty Form—Active Service.

Unit, Regiment or Corps. **1st DEPOT BN., 2nd C. O. R.**

Regimental No. **13109989** Rank **Pte** Name **Irwin Frank**

Enlisted (a) **5/13/18** Terms of Service (a) **6 months** ^{C. E. F.} **after** Service reckons from (a) **5/13/18**

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) **Clull & Lumberman**

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents
Date	From whom received				
6/6/18	Dist. Orders	Discharged	na Camp	8/6/18	

(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, Shoening Smith, etc., etc., also special qualifications in technical Corps duties.

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.)

REPT
OFFICE
JUL -9 1918
H.S. CANADA

No.	D-3109989	
Rank	Private	
Name	IRWIN, Frank	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	1st Depot Bn. 2nd C.O.R.	
Date of Discharge	June 8th 1918.	
Place of Discharge	Niagara Camp, Ont.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age...22.....years.....3.....months.	Descriptive Marks	
Height...5.....feet...6.....inches.	Vaccs. 1905. 1 left. Scar on	
Complexion Fair	inner side of right leg.	
Eyes Brown		
Hair Brpwn		
Trade Clerk & Lumberman		
Intended place of residence	MILTON, Ont.	
<small>(To be given as fully as practicable.)</small>		
2. The above-named man is discharged in consequence of		
"To join Royal Air Force."		
<small>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.</small>		
3. Conduct and character while in the service have been, according to the records, etc.		
<i>Good</i>		
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>		
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		
<i>Clerk Lumberman</i>		

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

100m.—6-16.
H. Q. 1772-30-113.

(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 *Nil*

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).....Niagara Camp, Ont.....

W.C. Coffey Major.

(Date).....June 8th 1918.....

"C" Co. Commanding 1st Depot Bn. 2nd C.O.R.

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.

(Place).....Niagara Camp, Ont.....

Frank Lewis (Signature of Soldier.)

(Date).....June 8th 1918.....

W.C. Coffey (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.

Frank Lewis (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....27 days.

Total.....years.....27 days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place).....Niagara Camp, Ont.....

(Signature) *W.C. Coffey* Lt. Col.

(Date).....June 8th 1918.....

O. C. 1st Depot Bn. 2nd C.O.R.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

NONE.

Signature of Soldier..... *Frank Quinn*

Signature of Witness..... *Edw. J. Ryan*

8/14/18
385
1

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="margin-left: 40px;">(a) Proceedings on Discharge.</p> <p style="margin-left: 40px;">(b) Attestation.</p> <p style="margin-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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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.