To be sworn in

ORIGINAL

931510

ATTESTATION PAPER.

No. 931510

No. ~~2 CONSTRUCTION~~, B'n. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	JONES
1a. What are your Christian names?	George Elwood
1b. What is your present address?	72 McDougall St., Windsor, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	~~Windsor, Ont.~~ Allegan Mich
3. What is the name of your next-of-kin?	Millie Jones
4. What is the address of your next-of-kin?	72 McDougall St., Windsor, Ont.
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	December 29th, 1887
6. What is your Trade or Calling?	Laborer
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former service.	No
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 Elwood Jones, 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.

x George Jones (Signature of Recruit)

Date September 11th 1916 J C Winston (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Elwood Jones, 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.

x George Jones (Signature of Recruit)

Date September 11th 1916 J C Winston (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 Windsor, Ont. this 11th day of September 1916.

[illegible] (Signature of Justice)

Notary Public

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

Description of George Elwood Jones **on Enlistment.**

Apparent Age 28 years 9 months.
To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 6 ft. 1 ins.

Chest measurement.
- Girth when fully expanded 34½ ins.
- Range of expansion 2½ ins.

Complexion Light Brown

Eyes Dark Brown

Hair Brown

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.)

Appendictory Scar

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 September 11th 1916 [signature]

Place Windsor, Ont. Major, A. M. C.
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:—

APPROVED
[signature]
CAPT & R.O.

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Elwood Jones 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.

C. W. Reis Capt (Signature of Officer)

Date Oct 23rd 1916.

DESERTERS
& ~~DISCHARGE~~ DOCUMENTS

R. O. No.
H. Q. No.

Name JONES GEORGE ELWOOD
Regt. No. 931510 Rank Pte
Corps #2 Const. Bn.
S.O.S. 6-1-17.

11666

Proceedings of Court of Inquiry or on men reported Missing on Active Service 3
Attestation Papers 2 3
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
m 7 B 259-3
m 7 H 67-2
paycard 1

M. F. H. 62.
H. Q. 17[illegible] 935.

To be made out in duplicate. ORIGINAL H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins. No 2 Construction Batt

(2) Regimental Number 931 510

(3) Full Name of Soldier Geo E Jones

(4) Place of Birth Allegan Mich

(5) Are you married, or not? yes

(6) If married, state,
(a) Full name of your wife Mrs Nellie Jones

(b) Present Postal Address 22 Orchard St

(7) Are you a widower? Windsor Ontario

(8) Have you any children? No

If so, give number of boys and girls No

Also their names and ages

M. F. W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address

(10) Is your Mother alive? No

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

Half

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Wife

Mrs Millie Jones

22 Orchard st Windsor Ont

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

yes

(15) Are you insured? No

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

C. W. Rego Capt
for Officer Commanding.

Date Oct 23rd 1916

No. 93/1510 RANK Pte. NAME Jones. George Elwood.

T. O. S. 11-9-16 UNIT No 2. Construction Battalion

D. O. S. 19-9-16 M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Sept. 11-	Sept. 30	n.		
Oct.		n	48 hrs det. A.W.L. Striking guard.	D.O.S. 14-10-16
Nov		✓		
Dec.		✓		
1917 Jan	1917	✓		
Feb.		n	A.W.L. since 19-2-17	Mar. payleaf
Mar 1	Mar 19	n	S.O.S. by C. of J. 19-3-17	D.O.C. 20-3-17
			a/c not closed.	

931510

MEDICAL HISTORY SHEET

Original 931510

Surname JONES *Christian Name* George Elwood

Examined { on 11th day of September 1916 / at Windsor, Ont.

Birthplace { City or Town ~~Windsor~~, Allegan / County ~~Essex Co.~~, ~~Ontario~~ Mich.

Apparent age 28 years 9 months

Trade or occupation Laborer

Height 6 feet 1 Inches

Weight 167 lbs.

Chest measurement { Minimum 34½ inches / Maximum expansion 37 inches

Physical development good

Small-pox Marks none

Vaccination Marks { Arm Right yes Left / Number one

When Vaccinated last 1904

(*a*) Marks indicating congential peculiarities or previous disease Appendectomy Scar

(*b*) Slight defects but not sufficient to cause rejection none

Approved by [signature]

Rank Major. A. M. C. 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.
25/10/16	L+g.R.	H. V. Kent Major M.O.
1/11/16	L+g.R.	H. V. Kent Major M.O.
7/11/16	L+g.R.	H. V. Kent Major M.O.

Enlisted on 11th *day of* September 1916 *at* Windsor, Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No. 2 Construction Battalion.	931510		11/12/16
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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

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

Surname JONES **Christian Name** George Elwood

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				

Original not available.

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 No 2 Construction Battalion.

Regimental No. 931510. Rank Pte. Name Jones, George Elwood.

Enlisted (a) 11-9-16. Terms of Service (a) C.E.F. Dof W. Service reckons from (a) 11-9-16.

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				
20-3-17.	#2 Const. Bn.	awoh. since 19-2-17. S.O.S. - deserter by Cop I. held 19-3-17.	Truro. N.S.	19-2-17.	Pt II D.O. 67.

D. [illegible] -

Capt. for Dof R.

(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				

L. L. Job 4503.—M. & D. 6832.

11-9-16

MILITIA AND DEFENCE

49 9[illegible]

M. F. [illegible]. 11.
50m.—6-16.
H. Q. [illegible]72-39-818.

SEPARATION ALLOWANCE

Name Mrs. Millie Jones

Address 22 Arthur St.
Windsor,
Ont.

Relation to Soldier wife, child or mother } Wife.

Name of Soldier Jones George Elwood

Regtl. No. 931510

Rank Pte.

Corps No. 2 Construction Bn C.E.F.

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ACCOUNT CLOSED
DATE ..... PER W.

11-9-16

MILITIA AND DEFENCE

M. F. W. 11a.
50m.-6-16.
1772—39—818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs. Millie Jones Wife

Name of Soldier Jones, G. E.

PAYMENTS. 931510 Pte. #2 Const. Bn.

L. L. Job 4503.-Req. 6832.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.		L. 24467	33		33
Nov.		P 24539	20		20
Dec.		A28277	20		20
Jan.	1917	K 28762	20		20
Feb.			X	X	20 Notch auth 3/1/17 (mark 22/1/17)
March			X	X	27/1/17 Stopping
April		a. 2305	32		Mailed 7-4-17
May					
June					Struck off 19/3/17 Doont 24/3/17 Same
July					
Aug.					
Sept.					~~32.50 due to close~~
Oct.					
Nov.					
Dec.					ACCOUNT CLOSED
Jan.	1918				DATE..... PER W
Feb.					
March					
April					
May					
June					
July					

$ ~~32.00~~ < 20 / 12

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.		Remarks.
Aug.	1918				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1920				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					