DUPLICATE

13 (M. D. First Depot Battalion Alberta Regiment

Regtl. No. 3210631

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname Moyer
2. Christian name ~~George Stanley~~
3. Present address ~~XXXXXXXXXXXX~~ Gordon Stanley Didsbury P.O. Alta.
4. Military Service Act letter and number 370687 MC
5. Date of birth September 25th 1894
6. Place of birth Brasslau Ontario (town, township or county and country)
7. Married, widower or single Single
8. Religion Methodist
9. Trade or calling Farmer
10. Name of next-of-kin Simon Moyer
11. Relationship of next-of-kin Father
12. Address of next-of-kin Elmira Ontario (King St)
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 Calgary, Alta (b) Date 15-5-18 (c) Category C3

DECLARATION OF RECRUIT

I, Gordon ~~George~~ Stanley Moyer, do solemnly declare that the above particulars refer to me, and are true.

Gordon Stanley Moyer (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 23 yrs 5 mths.

Height 5 ft 4 ins.

Chest measurement: fully expanded 37 ins.; range of expansion 4 ins.

Complexion Medium

Eyes Brown

Hair Brown

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

Marked fingers on left hand second and third

Lt. Col.
Commanding 1st Depot Batt'n, Alta. Reg't

O. C. Depot Btln.

Regt.

Place Calgary, Alta. Date 15-5-18

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

M. D. ..... Depot Battalion ..... Regiment

Regtl. No. .....

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class .....)

1. Surname .....
2. Christian name .....
3. Present address .....
4. Military Service Act letter and number .....
5. Date of birth .....
6. Place of birth ..... (town, district of county and country)
7. Married, widower or single .....
8. Religion .....
9. Trade or calling .....
10. Name of next-of-kin .....
11. Relationship of next-of-kin .....
12. Address of next-of-kin ..... (King St)
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—

(a) Place ..... (b) Date ..... (c) Category ....

DECLARATION OF RECRUIT

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

..... (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	yrs.	mths.	Distinctive marks, and marks indicating congenital peculiarities or previous disease.
Height	ft.	ins.	
Chest measurement	fully expanded	ins.	
	range of expansion	ins.	
Complexion			
Eyes			
Hair			

O. C. ..... Depot Btln.

..... Regt.

Place ..... Date .....

M. F. W. 133.
500 M.—8-17.
1272—39—1108.

REGIMENTAL DOCUMENTS

Pte SMOYER Gordon Stanley REGT. NO. 3210631 UNIT 1st D.Bn Alta R H. Q. FILE NO.

14-4-19

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	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)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)				36878	
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					Demob
	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)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M F W 160					
1	Indey Card					

W 2589
100M-11-18
1772-39-1377

H. Q. .....

M. D. No. 13.

Surname Moyer, T. O. S. May 15th 1918.

Christian names Gordon Stanley D. O. Pt. II 138 of 18-5-18.

Regtl. No. 3210631. Rank Pte. S. O. S. ..... 19.....

Unit Alta. Regt., 1st Dpo. Bn Reason .....

Auth. .....

Next of kin Moyer Simon Relationship Father

Address King St., Elmira, Ont Also notify: .....

BORN—Place Canada, Braslau, Ont Date Sept. 25th 1894

ATTESTED—Place Calgary, Alta., Date May 15th 1918.

O/S ..... R/C .....

W. 22—75M-5-18. 1772-39 839.

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 1st Depot Batt. A.R.

Regimental No. 3210631 Rank Private C. E. F. Name Moyer, Stanley Gordon

Enlisted (a) 15-5-18 Terms of Service (a) duration of war Service reckons from (a) 15-5-18

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) 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				
~~14-10-18~~ 14-8-18	1/alta	Struck off strength on return to Registrars records.	Calgary.	14-9-18	Part 2. D.O.226.

A. D. Foster
Lieut. & Adjt.

1st Depot Batt'n. Alta. Reg.

(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				

I St. Depot Battn. Class I.

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 Moyer Christian name Gordon Stanley

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

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

4. Address (including street and number, if any) Didsbury Alta.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 15 day of May 1918. 1917, by the undersigned medical board sitting at CALGARY

5. Age as stated 23 Years 8 Months. 6. Apparent age 24 Years Months

7. Height 5 Feet 10 ½ Inches. 8. Weight 174 Pounds.

9. Chest measurement { Minimum 34 Ins / Maximum 38 ½ Ins } 10. Complexion Ruddy { Eyes Hazel / Hair Brown }

11. Physical development Good { Good / Fair / Poor } 12. Smallpox marks None

13. Number of vaccination marks { Right arm None / Left arm One } 14. When vaccinated last Childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease None

16. Slight defects but not sufficient to cause rejection Left Eye Blind

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 B1

Vision R. D. 20/40 L. D. Blind

Hearing RT. Normal LFT.

President CAPTAIN C. A. M. C.

Member. CAPTAIN C. A. M. C. Member. CAPTAIN C. A. M. C.

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

Joined day of 191 at

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

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 Gordon Stanley Moyer

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				

3210631

DEC 1 1 1917

15

MEDICAL 370687 MC

SERIAL NO.

SHEET NO. 335

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 MOYER Christian name GORDON STANLEY

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

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

4. Address (including street and number, if any) Halcourt Alta.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 5th day of December 1917, by the undersigned medical board sitting at High Prairie Alta.

5. Age as stated 23 Years 3 Months. 6. Apparent age 24 Years Months

7. Height 5 Feet 9 Inches. 8. Weight 175 Pounds.

9. Chest measurement { Minimum 34½ Ins. / Maximum 38 Ins. } 10. Complexion Clear { Eyes Grey / Hair Brown }

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

Scars on fingers of left hand.

16. Slight defects but not sufficient to cause rejection None

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 A II

Hearing
R. Ear normal
L. Ear normal

Eyesight
R. Eye D 15
L. Eye D 200

Signature of Man Gordon Stanley Moyer

Ckd. to Schedule by

Gillespie President. Major C.A.M.C.

H. L. Collins Member. Major C.A.M.C. A. E. Clendenan Member. Major C.A.M.C.

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

Joined ..... *day of* ..... *191* ..... *at* .....

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

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.

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				

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. 3210361

Rank Private

Surname Moyer,

Christian name G.S.

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

Corps (Squadron, Battery or Company) 1st Depot Batt'n, A.R.

Date of discharge 14-9-18

Place of discharge Calgary, Alta.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age.....years.....months.	
Height.....feet.....inches.	
Complexion	
Eyes	
Hair	
Trade	
Intended place of residence (To be given as fully as practicable.)	

2. The above-named man is discharged in consequence of Demobilization. Struck off strength on return to Registrars records. 14-10-18. Daily Order 226 14-9-18.

Authority for discharge P.C. 3051 of 11-12-18.

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)..... *(Signature of Soldier.)*

(Date)..... *(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) Calgary, Alta.

(Date) March 8, 1919.

(Signature).....

Capt. M.S.A.D.O.

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, 3	Militia form	B. 313
Casualty Form 1	"	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	Militia Form	W. 23
or		
Particulars of Recruit 2	"	W. 133
Proceedings on Discharge 1	"	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.

C.L.of A. Certificate . . . . . M.F.W. 160.

Training History Sheet . . . . . M.F.W. 113.

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.