1st DEPOT BATTALION, N. B. REGIMENT.

7 M. D. First Depot Battalion New Brunswick Regiment

Regtl. No. 3257800

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

DUPLICATE

7/8/18
2.2.

(Class.....)

1. Surname..... McKaskall
2. Christian name..... Willis
3. Present address..... Elmsville, Charlotte Co., NB
4. Military Service Act letter and number 658392 FC
5. Date of birth..... January 9th, 1890
6. Place of birth..... Elmsville, Char. Co., NB.
(town, township or county and country)
7. Married, widower or single..... Single
8. Religion..... Presbyterian
9. Trade or calling..... Farmer
10. Name of next-of-kin..... Mrs. George McKinney
11. Relationship of next-of-kin..... Mother
12. Address of next-of-kin..... Elmsville, Charlotte Co., NB.
13. Whether at present a member of the Active Militia..... No
14. Particulars of previous military or naval service, if any..... Nil
15. Medical Examination under Military Service Act:—

(a) Place St. Stephen, NB. (b) Date Oct. 24, 1917. (c) Category A2

DECLARATION OF RECRUIT

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

Willis McKaskell. (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 28 yrs. 3 mths.

Height 5 ft. 6 ins.

Chest measurement: fully expanded 39 ins.; range of expansion 2 ins.

Complexion Light

Eyes Grey

Hair Red

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

NIL

F. J. Mackay Lt.-Col.

O. C. O. C. 1st. Depot Battalion New Brunswick Regiment. Depot Btln.

Regt.

Place St. John, NB. Date April 30th, 1918.

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

Claim 20.3.19.

REGIMENTAL DOCUMENTS

NAME Pte Mc KASKELL WILLIS REGT. NO. 3257800 UNIT 1st D.B. N.B. H. Q. FILE NO.

S

	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)					
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)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)				19233	
	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)					DESERTION
1	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					

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

SURNAME. Mc Kaskell

CHRISTIAN NAMES Willis

REGL. No. 3257880 RANK Pte

UNIT N. B. Regt 1st Dpo Bn

FORMER CORPS

CARD NO. 7

S.O.S. 7/2/19 Demob. FOLL

D.S. 38 of 7/2/19 1/N.B.R.

T. O. Apr 2/1918

D.O. Part II No 116

NEXT OF KIN.

NAMES IN FULL Mc Kinney, Mrs George

RELATIONSHIP TO SOLDIER Mother

ADDRESS Elmsville, Charlotte Co., N. B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Elmsville N.B. DATE Jan. 9th 1890

PLACE OF ATTESTATION St. John, N. B. DATE Apr. 30th 1918

L. L. 26989 M. & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Dental Examination on Discharge

File No.....

Rank Pte. Name McCaskill W. Regt. No. 3257800

Date of enlistment 30-4-18 Service, where Canada

If any dental treatment in army, where Nil.

Discharge examination at St. John. N.B. Date 7-2-19

Treatment to be received Cavities 7 8 9 15 20

Extractions 2 3 4 13 10

At ..... Examined by R.G. Williamson Lieut.

Above treatment completed by ..... Date .....

Completed History Sheet File No. .....

M. F. W. 2572
100m-8-18
1772-39-1359

OTHER SIDE FOR REMARKS

Refuses work W. McHaskell.

M. F. W. 71—500M.—5 18.
1772—39—961.

NAME Mc Raskall, Willis

REGIMENTAL NO. 325788 RANK Pte

ENLISTED AT St. John N.B. PROMOTIONS, &c. AND DATE

DATE April 20th/18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN Mrs George McKinney RELATIONSHIP mother

ADDRESS OF Elmsville Kchar. Co N.B.

ASSIGNMENT OF PAY $ Nil C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT NO

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
SOS Demobilization R.O. 1357 Para B 25-11-18	338	7-2-19	

M. F. W. 54. (A. F. B. 103.)
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BATTALION, N. B. REGIMENT.

Regimental No. 3257800 Rank Pte Name McKaskall, Willis

C. E. F.

Enlisted (a) 30-4-18 Terms of Service (a) Duration of War Service reckons from (a) 30-4-18

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				
7-2-19	OC 1DBNBR	SOS 1st D.B.N.B.Reg. Demobilization R.O.1357 Para B 25-11-18	St John N.B	7-2-19	DO.38 Part 11 Sh.2, 7-2-19 A. Taylor Lieut. Adjutant, 1st. Depot Battalion New Brunswick Regiment.

(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				

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. 3257800 Rank Pte. Surname MacKaskell
(Given name in full) William.

Unit or Corps 1st. Depot. Battn. Birthplace Elmsville, N. B.

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

1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs. Height 5 ft. 6 in. Colour of Eyes gray

Nutrition good

Pulse 76

Condition of arteries good

Vision Rt. D-20 Left D-20

Hearing (conversational voice) Rt. 15 ft.

Left 15 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).

Nil.

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 Sytem 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 no

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.

(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 St. John, N. B. (Canada)

Date ..... Feby. 7th. 1919. ..... 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 W. McKaskell.

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-89-1142.

M.D.No.7
No.14

LAST PAY CERTIFICATE.

Rest'l. No. 3257800.....Rank..Private.....Name..McKAUSKELL W.....

Corps. 1st. D.Bn.N.B.R.who was...Discharged.....

on,..7-2-19.....to.....

The Following is a statement of the above named from..1-2-19.....

to.....7-2-19.....the inclusive date of trans or disc..

DR.	$	¢	CR.	$	¢
Bal.Dr. from prev.mo.....			Bal.Cr. from prev.mo....	21	40
Advances by Cheques) No.#7419.....	62	51	Reg.Pay...7....Ds.@1.00	7	00
) No.....			Fld.All..7....ds.@..10		70
A.P.and S.A. No.....			Sep.Allce.monthly.....		
Other Charges.C.D.V.....	1	59	Other Allce..clothing....	35	00
Payment on Trf. or Dis....			Other Credits.....		
Bal.Cr.(Paid by new unit)			Bal.Dr.(Deducted by new unit)		
Total.....	$64.10		Total.....	$ 64.10	

A monthly stoppage of .....has.....benn paid on ac't of Assgd.

Pay for month of .....
And Sep. Allce. month of.....) to Assignee.....
.....

Address.....N I L.....

On transfer of an Officer.

Out. Allce. of $..... has been paid by the P.M. M. D .....

REMARKS.....

1.Date of enlistment.....2.Married of single.....

3. Has Separation Allowance Card been submitted.....

4.Cause of discharge..demobilization...Authority....D.O.38-2.....

5. Authority for transfer.....

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

Date..February.21st,.1919.

Place..St.John.N.B.....

.....Captain.
1st Depot Bn.N.B.R. Paymaster.

M.F.W.44

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3257800 (Rank) Private

Name (in full) Mc Kaskell Willis enlisted in

the 1st Depot Battalion N.B. Regt.

CANADIAN EXPEDITIONARY FORCE at St John N.B. on the 30 th

day of April 19 18

HE served in Canada

and is now discharged from the service by reason of Demobilization

R.O. 1357 ParaB 2511-18

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

Age 28 years 3 mos .

Height 5 ft 6 ins.

Complexion Light

Eyes Grey

Hair Red

Marks or Scars

" NIL"

Willis McKaskell.

Signature of Soldier

J. L. Mi ...

Issuing Officer

Lt Col.

O. C. 1st Depot Battalion

New Brunswick Regiment.

Rank

Appointment

Date of Discharge February 7 1919

Signed at St John N.B. this 7 th day of February 19 19

in Military District No. 7

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
200m.—2-18.
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

.....
Name of Officer

.....
Rank

.....
Appointment

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

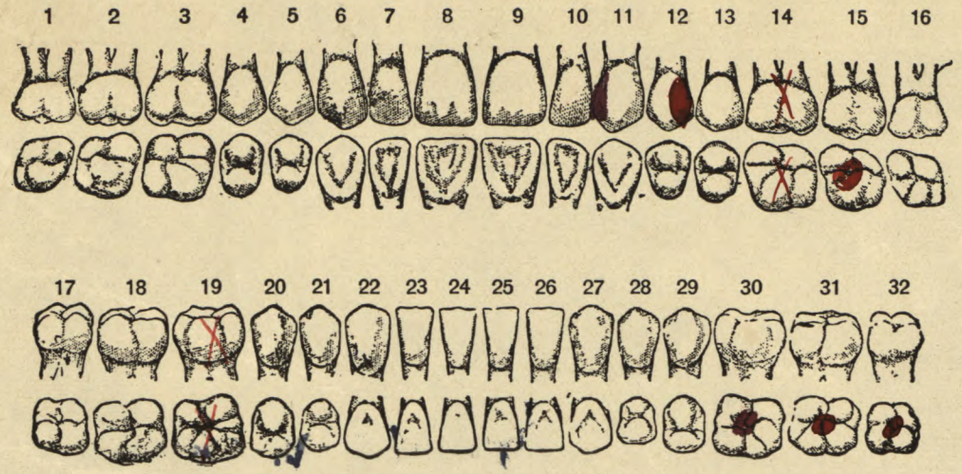
DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 2

Name of Soldier Pte. Coakill W.

Regiment 1st Depot Bn. Rank Pte. No. 325788



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 Dist.	REMARKS
	1918																					
Condition on first Examination	May 2	17/12.15 31.33									2/14.19									Examined by		Oct. 7.8.9.18.20
																				J. K. Farrer	7	Oct. 2.3.4.13.10

Feb. 7-19. Examined for discharge incomplete

K. G. Williamson
W. McKaskell

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3257800

2 Rank. Private

3. Name. Mc Kaskell Willis

4. Unit. Ist Depot Battalion N.B. Regt.

5 Date of Discharge | February 7 1919 | Place St John N.B.

6 Reason for Discharge Demobilization

7. Authority. R.O. 1357 Para B 25-11-18

8. Proposed Residence after Discharge Elmsville

Charlotte Co N.B.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? 39 St John N.B. February 7 1919

Willis McKaskell.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place St John N.B.

Date February 7 1919

Signature J L M Crosby Lt-Col.

O. C. 1st Depot Battalion
New Brunswick Regiment.

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

Discs issued 15/3/19

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

DENTAL HISTORY SHEET

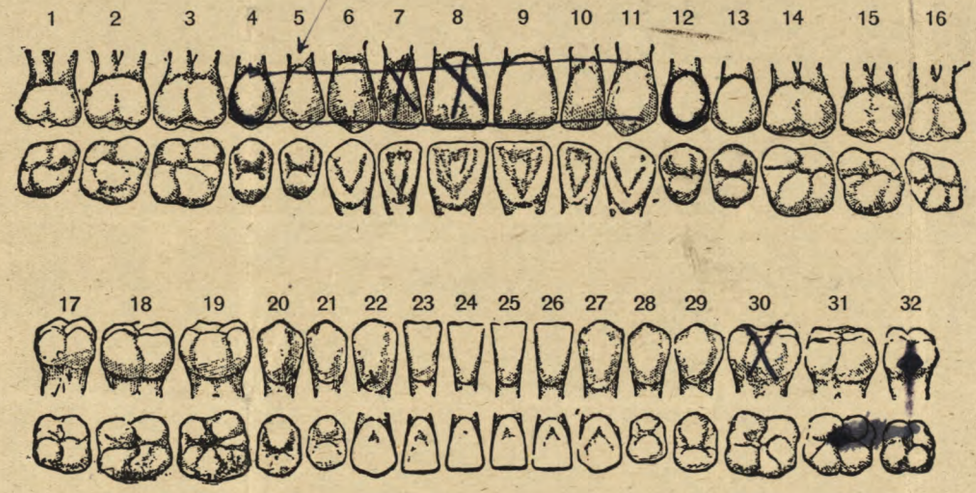
CANADIAN ARMY DENTAL CORPS

DISTRICT.....

NAME OF SOLDIER A. J. Mackay

REGIMENT 27th Battalion RANK Pte No.

Has been extracted



INSTRUCT

1. On examination the condition of pati... diagram in red ink.
2. On first line of report record of same to b...

Only such entries to be made on this sheet a...

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			32 31									7-8 30						12		4 to 11			Estimate $160.00

M.F.B. 465.
200M.—6-18.
1772-20-950.

Certified Copy

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 Mc Kaskell Christian name William
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 658392 F
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Elmsville, N.B.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 24 day of October 1917, by the undersigned medical board sitting at St. Stephen

5. Age as stated 27 Years 9 Months. 6. Apparent age 27 Years 9 Months
7. Height 5 Feet 6 Inches. 8. Weight 160 Pounds.
9. Chest measurement Minimum 37 Ins. Maximum 39 Ins. 10. Complexion Light Eyes Gray Hair Red
11. Physical development Good — (Good / Fair / Poor) 12. Smallpox marks
13. Number of vaccination marks Right arm — Left arm — 14. When vaccinated last nil
15. Distinctive marks and marks indicating congenital peculiarities or previous disease
16. Slight defects but not sufficient to cause rejection

The man denies having had Rheumatism / Tuberculosis / Syphilis (Strike out disease admitted or suspected.) We find no evidence of past Rheumatism / Tuberculosis / Syphilis

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**

17. (a) Vision R. L. (b) Hearing. R. L.

B F Johnson *President.*

F I Blair Inglis *Member.* E V Sullivan *Member.*

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
30/4/18	WR Capt	M.O.	30/4/18	[illegible]	WR M.O.
		M.O.	11/5/18		WR M.O.
		M.O.			M.O.

Joined 30 *day of* April 191 8 *at* St John NB

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot	3257800		
Transferred to	NB Regt			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
St. John NB	May 1/18		Cat A2 McLoggie Capt / Dunlop Capt / Geo. Cooper Lt.
Sussex NB	Jun 27/18		Cat A2

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.

M. F. B. 313.
300M.—10-17.
1772-39-439.

St John N.B 7/2/19 A2 — Lt Kenneth [illegible] H Kennedy

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				