

No. 7 M. D. First Depot Battalion New Brunswick Regiment

Regtl. No. 3357773

amb
7-6-18

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class F C)

1. Surname..... McCluskey

2. Christian name..... Ivan Carton

3. Present address..... Grand Falls, Vic. Co. N.B.

4. Military Service Act letter and number..... 383875 F C

5. Date of birth..... March 24th 1895

6. Place of birth..... Grand Falls Vic. Co. N.B.
(town, township or county and country)

7. Married, widower or single..... Single

8. Religion..... R. C.

9. Trade or calling..... Drug Clerk

10. Name of next-of-kin..... Patrick A. McCluskey

11. Relationship of next-of-kin..... Father

12. Address of next-of-kin..... Grand Falls Vic. Co. N.B.

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..... Perth N.B. (b) Date..... Nov. 27th 1917 (c) Category..... B 2

DECLARATION OF RECRUIT

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

Ivan C. McCluskey (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....	<u>23</u>	yrs.....	<u>1</u>	mths.	} Distinctive marks, and marks indicating congenital peculiarities or previous disease. Fracture Right Radius
Height.....	<u>5</u>	ft.....	<u>7½</u>	ins.	
Chest measurement } }	fully expanded.....	<u>36</u>	ins.		
	range of expansion.....	<u>5</u>	ins.		
Complexion.....	<u>Medium</u>				
Eyes.....	<u>Blue</u>				
Hair.....	<u>Brown</u>				

J. J. May
Major,
2nd i/c. 1st. Depot Battalion
O. C. New Brunswick Regiment. Depot Btln.
Regt.

Place St. John N.B. Date May 3rd. 1918

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class 10

1. Surname: CUNNINGHAM

2. Christian name: John Gordon

3. Present address: Grand Hall, 7th St., N.S.

4. Military service Act letter and number: 525255 B 0

5. Date of birth: March 24th 1890

6. Place of birth: Grand Hall, N.S.

7. Married, widower, or single: Single

8. Religion: Methodist

9. Trade or calling: Blacksmith

10. Name of next of kin: John Gordon

11. Relationship of next of kin: Brother

12. Address of next of kin: Grand Hall, N.S.

13. Whether at present a member of the Active Militia: No

14. Particulars of previous military or naval service: None

15. Medical examination under Military Service Act: (a) Place: Edinburgh (b) Date: May 24th 1917 (c) Category: 1

DECLARATION OF RECRUIT

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

Signature of Recruit: John Gordon Cunningham

DESCRIPTION ON CALLING UP

Apparent age	25	Yrs	4	inches
Height	5	ft	6	inches
Chest	34	inches	fully expanded	inches
Measurements	34	inches	range of expansion	inches
Complexion	Fair			
Eyes	Blue			
Hair	Brown			

Distinctive marks and marks indicating congenital peculiarities or previous diseases: None

Place: Edinburgh, Date: May 24th 1917

Regimental Depot Battalion The Hussars No. 525255

DISCHARGE DOCUMENTS

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

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

Attestation Papers..... 2

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..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

M. F. W. 399 — 1

A. F. W. 178 — 1

M. F. W. 71 — 1

Dental History Sheet. — 1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

M. F. W. 129 — 1

Training History Sheet. 1

M. F. W. — 2572 — 1

Name McCLUSKEY IVAN CARTON.

Regt. No. 32577^{1/2} Rank pte.

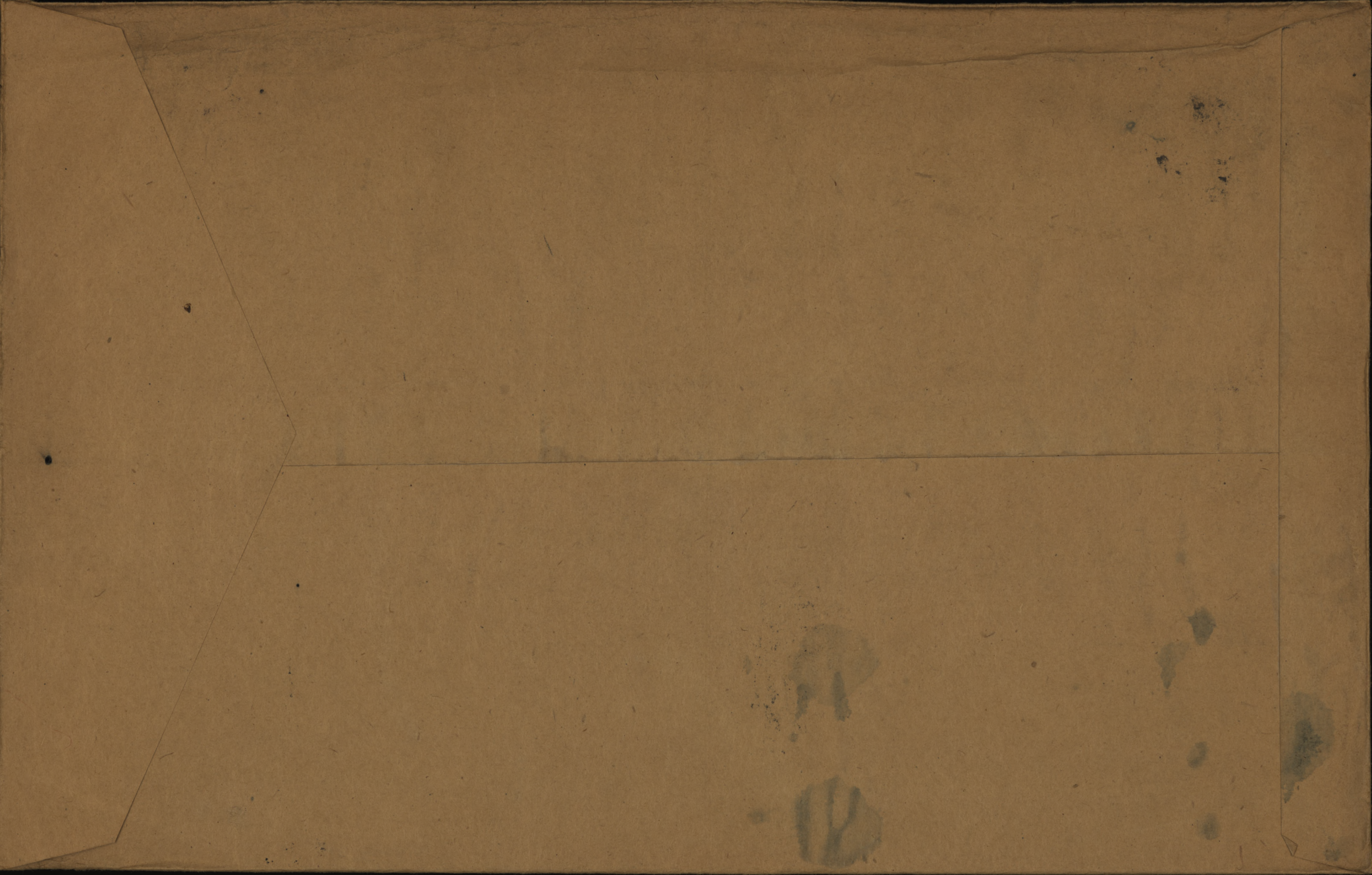
Corps 7th. Bn. C. Y. R. C. E. F.

Demobilization.

Deceased 6-10-53

04376





R.C.

M. F. W. 71-500M.-5 18.
1772-39-961.

bat. ar

NAME

McCluskey Isaac Carter

REGIMENTAL NO.

3257773

RANK

1st Lt

ENLISTED AT

St. John. N.B.

PROMOTIONS, &C.
AND DATE

DATE

26/4/18.

IF SERVED PREVIOUSLY, STATE UNIT, &C.

MARRIED, WIDOWER, OR SINGLE

Single

NEXT OF KIN

Patrick A. McCluskey

RELATIONSHIP

Father

ADDRESS OF

Grand Falls, N.C. U.S.

ASSIGNMENT OF PAY \$

C.

TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

Supt. Runner. B. O. Room

CASUALTIES, &C.

NATURE E.G. ABSENCE, PROMOTION, &C.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &C.
	No.	DATE	
J.O.S. 7 th Bn. C.G.R.	9	9-1-19	
S.O.S. " " "	24	24-1-19	
on discharge			

Dental Examination on Discharge

File No.....

Rank Pte. Name McCluskey I.C. Regt. No. 3257773

Date of enlistment..... 26-4-18. Service, where..... Canada.

If any dental treatment in army, where..... Canada.

Discharge examination at..... St. John N.B. Date..... 8-1-19.

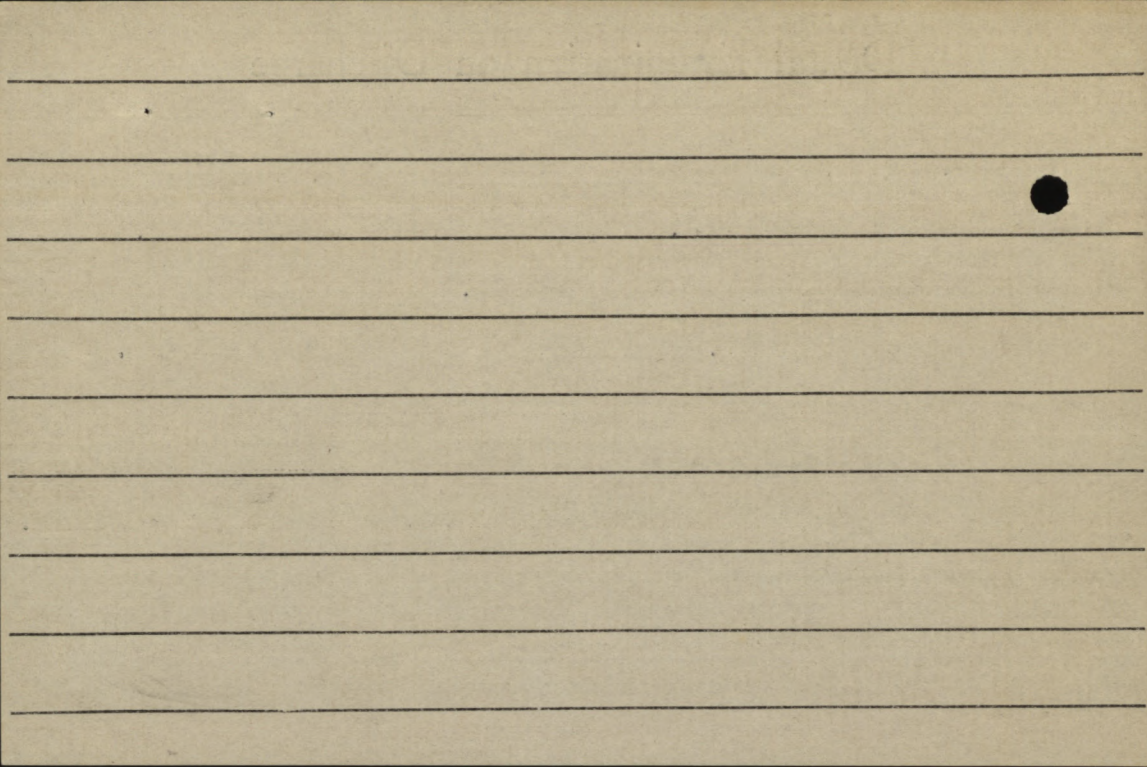
Treatment to be received.....

..... Completed

At..... Examined by..... J.G.Harrington Lieut.

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

Completed History Sheet File No.....



SURNAME. *Mc Cluskey*
CHRISTIAN NAMES *Ivan Barton*
REGL. No. *3257773* RANK *Ote.*
UNIT *N. B. Regt. 1st. Dps. Bn.*
FORMER CORPS *Nil*

7 CARD NO. *4*
S.O.S. Div 24-1-19
FOLL
D.O. 24 of 24-1-19
Serial 26
T. O. S. *Apr. 26 1918*
D.O. Part II No. *113*

NEXT OF KIN.
NAMES IN FULL *Mc Cluskey, Patrick A.*
RELATIONSHIP TO SOLDIER *Father*
ADDRESS *Grand Falls, Victoria Co. N. B.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada, Grand Falls, N. B.* DATE *March 24th, 1895*
PLACE OF ATTESTATION *St. John, N. B.* DATE *May 3rd, 1918*

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



CANADA

CANADA

DEPARTMENT OF VETERANS AFFAIRS

R 54

OTTAWA 4, June 19th, 1956.

IN YOUR REPLY REFER TO FILE NO.

DVA: CEF-Mc (WSR 5)

Mrs. Ivan McCluskey,
Grand Falls, New Brunswick.

3257773, Private Ivan Carton McCLUSKEY

Dear Mrs. McCluskey:

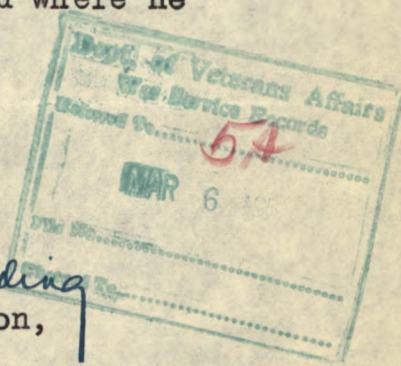
This Department has for attention your letter of June 12th concerning your late husband, a veteran of World War I.

The subject of your enquiry would appear to be the above-named veteran who served under the regimental number shown in the margin.

As your letter under reply was the first intimation received that Mr. McCluskey is deceased, for the completion of records would you be good enough to advise this office when and where he died.

Yours truly,

J. B. Loring
for H. M. Jackson,
Director,
War Service Records.



noted SA

*My husband died on October 6/1953
of Coronary Thrombosis.
Sorry for delay.
B. McCluskey.*

October 4, 1958

ADAM



October 4, 1958

Private Raymond M. ...

Dear Mrs. ...

Your letter of June 13th concerning your late husband, a veteran of World War I.

The subject of your inquiry would appear to be the above-named veteran who served under the regimental number shown in the margin.

As your letter was received, the first indication received that Mr. ... is deceased, for the completion of records would you be good enough to advise the office when and where he died.

Yours truly,

...
...
... service records.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3257773 (Rank) Private

Name (in full) Ivan Carter McCLUSKEY. enlisted in
the 1st Depot Battalion, New Brunswick Regiment,

CANADIAN EXPEDITIONARY FORCE at St John, N.B. on the 3rd
day of May 19 18.

HE served in CANADA

and is now discharged from the service by reason of DEMOBILIZATION.

Auth. R.C. 1420 para, 1, sub-sec, C, d/12-12-18. AMD7 4-Mc-705 d/20-1-19.

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

Age 23 Years 10 Months.

Height 5 Feet 7½ Inches.

Complexion Medium.

Eyes Blue.

Hair Brown.

Marks or Scars.....

N I L.

Ivan C. McCluskey
Signature of Soldier

Ivan W. Woodburn
Issuing Officer

Lieutenant Colonel.

Date of Discharge January 24th. 1919.

Rank Commanding 7th. Bn. COP. ..CEP.

Appointment

Signed at St John, N.B. this 24th day of January 19 19.

in Military District No. SEVEN.

File Reference No. MD7. 4-Mc-705

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. (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.

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

M. F. W. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-39-9-20.

Casualty Form—Active Service.

1st DEPOT BATTALION, N. B. REGIMENT.

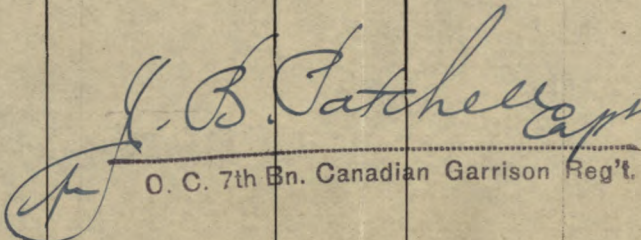
Unit, Regiment or Corps.....

Regimental No. 3257773 Rank Pte Name McCluskey, Ivan Carton
C. E. F.

Enlisted (a) 3-5-18 Terms of Service (a) Duration of War Service reckons from (a) 3-5-18

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) Drug Clerk

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.O.S. 7th Bn. C.G.R. on transfer 1st Depot Gm. N.B. Regt.	St. John. N.B.	7/19	Auth. Dist Order 42/8-1-19
24-1-19	7th Bn. C.G.R.	S.O.S. on discharge by reason Demobilization	St. John. N.B.		Daily Order 9#d/9/19 P.O. 1420d/12/12/18 Daily Order 24d/24/19
 J. B. Patches O. C. 7th Bn. Canadian Garrison Reg't.					

(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.

Casualty Form Active Service

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				

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. 3257773 Rank Private Name McCluskey, J.C.
 Corps 7th Bn C.G.R. who was* Discharged
 On 24-1-19 191... to.....
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 8-1-19 191...
 to 24-1-19 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Balance Cr. from prev. month <u>L.P.C.</u>	24	00
Advances } No.			Regt'l. Pay <u>17</u>days at \$..... <u>1c</u>	17	00
by } No. <u>A.R. 22</u>	20	00	Field Allow.... <u>17</u>days at \$..... <u>20</u>	1	70
Cheques }			Separation Allowance* (Monthly).....		
Assigned Pay and Sep'n Allee. No.....			Other Allowances*.... <u>Clothing</u>	35	00
Other charges.....			Other Credits*.....		
Payment on transfer or discharge <u>N57.67</u>	57	70	Bal. Dr. (to be deducted by new unit).....		
Bal. Cr. (to be paid by the new unit).....			Total.....	77	70
Total.....	77	70			

*Give particulars.

A monthly stoppage of \$.....NIL..... (†) has..... (‡) been paid paid on account of Assigned

{ Pay for the month of.....191... }
 { and Sep'n Allee. for month of.....191... } (to) Assignee.....

(Address)

(†) 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.

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

REMARKS:—

State (1) date of enlistment.....~~XXXX~~.....3-5-18.....
 (2) if married and if a Separation Allowance Card has been submitted....No.....
 (3) cause of discharge. Demobilization..... authorityR.O. 1420.....
 (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 25-1-19.....

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

[Signature]
 Lieut.
 Paymaster.
8th Bn C.G.R.

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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY STATEMENT

Statement of the last pay of the members of the Canadian Contingent Expeditionary Force, as at the date of their discharge, and of the amount of the pay of the members of the force who were discharged on the 1st day of the month of the year 1919.

No.	Name	Rank	Branch	Pay	Gratuities	Total
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Statement of the last pay of the members of the Canadian Contingent Expeditionary Force, as at the date of their discharge, and of the amount of the pay of the members of the force who were discharged on the 1st day of the month of the year 1919.

Statement of the last pay of the members of the Canadian Contingent Expeditionary Force, as at the date of their discharge, and of the amount of the pay of the members of the force who were discharged on the 1st day of the month of the year 1919.

Statement of the last pay of the members of the Canadian Contingent Expeditionary Force, as at the date of their discharge, and of the amount of the pay of the members of the force who were discharged on the 1st day of the month of the year 1919.

Statement of the last pay of the members of the Canadian Contingent Expeditionary Force, as at the date of their discharge, and of the amount of the pay of the members of the force who were discharged on the 1st day of the month of the year 1919.

Statement of the last pay of the members of the Canadian Contingent Expeditionary Force, as at the date of their discharge, and of the amount of the pay of the members of the force who were discharged on the 1st day of the month of the year 1919.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

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. 3257773 Rank Pte. Surname McCluskey
 (Given name in full)

Signature Ivan Carton
 (If not attested, M.F.B. 227 will be completed by Medical Board)

Unit or Corps 1st Depot bn. N.B. Regt Birthplace Grand Falls N.B.

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

1. GENERAL DESCRIPTION:

Physique good Weight 132 lbs. Height 5 ft. 7 1/4 in. Colour of Eyes Blue

Nutrition good

Pulse normal

Condition of arteries normal

Vision Rt. 20/15 Left 20/15

Hearing (conversational voice) Rt. 20 ft.

Left 20 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 System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System yes

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.

Bronchitis during service 16-8-18
 entirely recovered.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date SignedM.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 *8-1-19* Signed *A. E. Lovibond*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 *J. C. McBluskey*.....

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

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

Opinion as to general health and physical condition

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.)

Cardio-Vascular System *no*

Respiratory System *no*

Digestive System *no*

Muscular System *no*

Genito-Urinary System *no*

Special Senses *no*

Immune System *no*

Gasosa and Joint System *no* Any other general condition *no*

If the answer to any part of Section 3 above is "Yes," here give full particulars with cause and date of origin; and also a description of the present condition.

Bronchitis during service 1918-19 entirely recovered.

DENTAL HISTORY SHEET

M.F.B. 465,
Rev. 2-18,
1772-08-900.

CANADIAN ARMY DENTAL CORPS

DISTRICT *7*

NAME OF SOLDIER

McLachlan J.L.

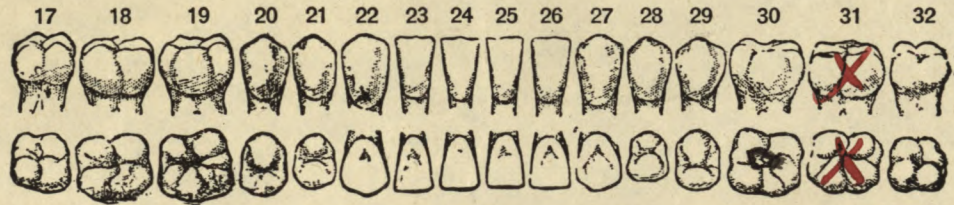
REGIMENT

1 Regt

RANK

pt

No. *225733*



*History Sheet
15/8/18
Office copy.*

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.

Condition on first Examination	Date	Amalgam	Temporary Filling (a)/G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoia	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
												U	L	P			Gold	Porcelain				
	<i>1918</i>																					
	<i>May 6</i>										<i>2/9 31</i>									<i>Examined By J.L. Dooze</i>	<i>7</i>	<i>of 3, 17, 31. Ext. 2, 15.</i>
	<i>Nov. 18</i>										<i>2/15</i>		<i>Local Anaes.</i>						<i>W.R. Currie</i>	<i>7</i>	<i>Completed.</i>	
	<i>Jan. 8/19</i>																		<i>J. P. Jamnigan</i>		<i>Complete Lieut</i>	

*J. P. Jamnigan
Tom Clagby*

INSTRUCTIONS

1. On examination the condition of patient's teeth to be marked on diagram in red ink.
2. On first line of report record of date to be made in red ink.
3. Only such entries as be made in this report as will show condition on examination in red.
4. Condition on previous examina.
5. Condition on discharge.

1. On examination the condition of patient's teeth to be marked on diagram in red ink.

2. On first line of report record of date to be made in red ink.

THE UNIVERSITY OF CHICAGO
 LIBRARY
 DENVER, COLORADO

Temporary
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 Cluskey Christian name Juan Barton
 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)..... Grand Falls, Victoria B.C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 6 day of May 1917, by the undersigned medical board sitting at St. John's B.C.

5. Age as stated 23 Years 1 Months. 6. Apparent age 23 Years..... Months
 7. Height 5 Feet 9 Inches. 8. Weight 145 Pounds.
 9. Chest measurement { Minimum..... Ins. 10. Complexion Fair { Eyes Blue
 { Maximum..... Ins. { Hair Dark Brown
 11. Physical development..... { Good Fair Poor 12. Smallpox marks nil

13. Number of vaccination marks { Right arm 0 14. When vaccinated last 1900
 { Left arm 1

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 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 A2

17. (a) Vision R..... L.....
 (b) Hearing. R..... L.....
Dr. Cooper Member. Dr. Morgan Member.
Dr. [Signature] President.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/5/18</u>	<u>Done</u>	<u>M.O.</u>	<u>3/5/18</u>	<u>Done</u>	<u>M.O.</u>
		<u>M.O.</u>	<u>21/5/18</u>	<u>Done</u>	<u>M.O.</u>
		<u>M.O.</u>	<u>21/6/18</u>	<u>Done</u>	<u>M.O.</u>

Joined..... day of..... 1917 at.....

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Sussex Bk</u>	<u>16/8/18</u>	<u>Branchitis</u>	<u>13 for 1 month</u> <u>Dr. [Signature]</u>

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. 8/1/19
 3001—10-17.
 171—39-439.

Signature of Man

10-2-19 18

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.	# 3257773
Rank	Private
Surname	McCluskey.
Christian Name	Ivan Carton.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	7th. Bn. CGR. CEF.
Date of Discharge	January 24th. 1919.
Place of Discharge	St John. N.B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age..... 23..... years..... 10..... months.
 Height..... 5..... feet..... 7 1/2..... inches.
 Complexion Medium.
 Eyes Blue.
 Hair Brown.
 Trade Railway Employee
 Intended place of residence } Grand Falls N.B.
 (To be given as fully as practicable.)

Descriptive Marks



NIL.

Deceased 6-10-57

2. The above-named man is discharged in consequence of **DEMOBILIZATION.**
 Authority for discharge Routine order 1420 para. 1,
sub-sec C, d/12-12-18 & MD7, 4-Mc-705 of the 20/1/19.

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.

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.)

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

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.

(Place)..... St. John. N.B. *John Bevan Coy* (Signature of Soldier.)

(Date)..... January 24th, 1919. *M J Howe M Sgt* (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)..... St John/N.B.

(Date)..... January 24th. 1919

(Signature) *John Bevan Coy*

C. C. 7th Bn. Canadian Garrison Regt.

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.)

I HAVE NO RESERVATIONS TO MAKE;-

Joan e. M. O'Connell

<p>Proceedings on Discharge B. 263a</p>	<p>Reg. Conduct Sheet Squadron Battery Company</p>
<p>(a) Proceedings on Discharge (b) Attestation (c) Medical History Sheet (in the event of such having been prepared)</p>	<p>Copies of Convictions by C.P. in M.S. Med. Hist. Sheet Militia Form B. 313 Medical Report for Invalid* B. 237 Statement of Man's Account on Transfer and Last Pay Certificate D. 877 *Only if discharged "Medically unfit."</p>

Record of Service.
Canada from 3/5/18 to 24/1/19.

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.

I HAVE NO RESERVATIONS TO MAKE.

<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 Certificate, " 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> <p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(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.

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 _____ day

Total _____ years _____ day

11. Confirmation of Discharge.

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

(Place) St. John, N. B.

(Signatures)

(Date) January 24th, 1913