TRIPLICATE

ATTESTATION PAPER.

No. 2011040

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Newcomb
1a. What are your Christian names?	Frank Arnold
1b. What is your present address?	Hopewell Hill, Albert Co. N.B.
2. In what Town, Township or Parish, and in what Country were you born?	Hopewell Hill, Albert Co. N.B.
3. What is the name of your next-of kin?	Wesley John Newcomb
4. What is the address of your next-of-kin?	Hopewell Hill, Albert Co. N.B.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	12 April 1898
6. What is your Trade or Calling?	Labourer
7. Are you married?	Single
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 F.A.N
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	Nil
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	Nil

SUFFICIENT ADDRESS

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank Arnold Newcomb, 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.

Frank Arnold Newcomb (Signature of Recruit)

Date 3 June 1918. 191 . J. F. Robison Sergt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Arnold Newcomb, 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.

Frank Arnold Newcomb (Signature of Recruit)

Date 3 June 1918. 191 . J. F. Robison Sergt. (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 St. John, N.B. this 3 day of June 1918. 191 .

G H Curry Lieut. (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Frank Arnold Brown on Enlistment.

Apparent Age 20 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... ft ..... ins.

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

Complexion Medium

Eyes Brown

Hair Brown

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist Yes
- 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).

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 he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date May 31 1918. A E Lowe Capt

Place St John N.B. 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:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Frank Arnold Brown 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.

W Mitchell Lt. Colonel C. E. (Signature of Officer)
C. C. Engineer Training Depot.

Date May 31st 1918.

REGIMENTAL DOCUMENTS

NAME NEWCOMB FRANK ARNOLD, Spr REGT. NO. 20,110,40 UNIT 3rd C.F.R.B. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1+1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	Smd 31-3-19				~~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
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)			C3633		Demob
9	MEDICAL EXAMINATION (M.F.W. 129)					
1	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)					~~DESERTION~~
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
1	LAST PAY CERTIFICATE (M.F.W. 44)					
2	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)					
	MFW 192					
	MFW 2571					
1	Misc					
	R 122					
1	Indy Card					

W. 2539
100M-11-18
1772-39-1377

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
200470	SPR.	NEWCOMB Christian Names (1) E (2) A (3)	Date	25-8-18

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
St John	3/6/18	Canada	METH.	26.6.18	D
Province: NB	Age on 20	Date 6.8.18.		Vaccination 26.6.18	

On Command	Hospital	Permanent Cadre Date taken on	Employed as
Date Proceeding	Date Admitted		

Record of Overseas Service:

Reason for Return:

Profession or Trade (Civil)
TEAMSTER

Transferred or Posted to

Date

Married or Single S

Address of Next of Kin Mother
Fannie Newcomb
Hopewell Hill
Country Albert Co NB

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.
	5-12-18	10-12-18	Yes.

A.G. 10434.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.

TRAINING.

Weeks of Training.

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | Over.

Nature of Training	Date passed test
Drill	
Musketry	4.10.18
Bombing	6.9.18
Rifle Bombing	
Bayonet Training	
Anti-Gas	3.9.18
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

H. Q.

M. D. No. ~~11~~ 7.

Surname Newcomb.

Christian names Frank Arnold.

Regtl. No. 2011040 Rank Spr.

Unit Can. Eng. Tr. Dpo.

T. O. S. June 3 1918.

D. O. Pt. II 156 of 5-6-18

S. O. S. Disc 21/2/19 1.9

Reason Demob.

Auth. D.O. 52/21/2/19 #750.19.

Next of kin Newcomb Wesley J. Relationship Father

Address Hopewell Mill
Albert Co N.B.

Also notify:

BORN—Place Canada. Hopewell Mill. N.B. Date Apr. 12 th 1898.

ATTESTED—Place St Johns. N.B. Date June 3rd 1918

O/S 29-6-18-1301/32 Spr. R/C 25-1-19. 258/127.

W. 22—75M-5-18. 1772-39 839.

Number 2011040 Rank Spr

Surname NEWCOMB

Christian Name Frank Arnold

Units 6 E. Theatre of War England

Date of Service 22-7-18

Remarks

Latest Address G.P.O.

Hopewell Hill

Roll No A Page 1327

Remarks Date

Rank Regtl. No.

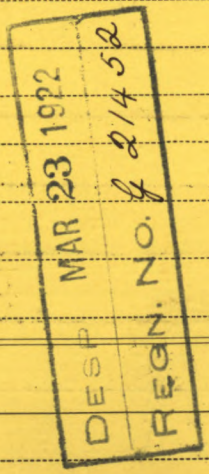
Fyle Depot

M. or S. Age Religion Ref. H.Q.

Date Character on discharge

Date and place of enlistment

Date of Medical Boards



Remarks

Pt. 2 Order No.

LOCAL

*Name NEWCOMBE, Frank Arnold Rank Sapper Regtl. No. 2011040

Fyle Depot 86-N-45

Original unit C.E. Present unit 3rd C.E.R.B. M. or S. ## Age 21 Religion Bapt. Ref. H.Q.

Port, ship and date of arrival Halifax, N.S. AQUITANIA 24-1-19.

Next of kin Father - Wesley John Newcombe - HOPEWELL HILL, ALBERT CO NB

Address on leave as above.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Laborer Date and place of enlistment ST. JOHN 3rd June, 1918.

Diagnosis Date of Medical Boards

T.O.S. Dates.	Remarks.	Pt. 2 Order No.
18-1-19	Cas Co'y 24-1-19 Leave from 26-1-19 to 10-2-19	#29 Co 29
21-2-19	To Discharge Section	C.O. 52.
21-2-19	Dis. H.M.S. Tenedos, N.B. D.S.O. #44	(21-2-19)

*—Name will be given in full; surname first.

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5 18
1772-39-1243

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

MD #7

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Newcomb F.A.

REGIMENT 3rd C E R B RANK Spr No. 2011040

Date of Examination in England 6/1/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 8, 9,
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) In Canada Yes
- (*b*) In England
- (*c*) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer H W Reed Capt

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Maurer, J. A. DISTRICT 4.

REGIMENT C. E. RANK Spr. No. 2011040

M.F.B. 465.
50M—2-18.
1772-89-950.

X to be extracted
M are missing

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
Condition on first Examination Bair	1918 June 18																			Capt Simpson	4	cav. 3-8-9-11-15-30

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

M.F.W. 44.
1133 (D.P.) 250M.-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 2011040 Rank Spr. Name Newcombe F.A.
(Surname first)

Unit ..... who was* Disc.

On 21/2/19 191....., to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/2/19 to 21/2/19 191... the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month	359	
Regimental Pay 21 days at $ 1.10 c.		23 10
Field Allowance ..... days at $ ..... c.		
Separation Allowance		
Clothing Allowance		35 00
Post Discharge Pay		70 00
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
8826		
Balance on transfer or on discharge, cheque No. 12451		
Total	128 10	128 10

*Give particulars.

A monthly stoppage of $ 15 00/100 (†) has — (‡) been paid on account of Assigned Pay for the month of Jan — 191 9 and Separation Allce. for month of — 191 — (to) Assignee Wesley J. Newcombe

(Address) Hopewell Hill Albert Co N.B

(†) 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 ..... married or single S.

(2) Separation Allowance, entitled or not No (3) Reason for discharge Demob

(4) Authority for discharge ~~or transfer~~ D.D. # 7 21/2/19

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 20-2-19

Place St John N.B.

C.H. Burnett Captain
Paymaster District Depot No.
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT				Signature of Officer Making Payment.
			Dr.		Cr.		
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2011040 (Rank) Sapper

Name (in full) - - - - - - - FRANK ARNOLD NEWCOMB - - - - - - - - enlisted in the - - - - - - - - - - - - - Canadian Engineers - - - - - - - - - - - - - - -

CANADIAN EXPEDITIONARY FORCE at St. John, N. B. on the 3rd day of June 1918.

HE served in CANADA AND ENGLAND -

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

Authority - R.O. 1420 (c)

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

Age	20 years 10 months
Height	6 feet
Complexion	Medium
Eyes	Brown
Hair	Brown

Marks or Scars: NIL

C. Frank A. Newcomb
Signature of Soldier

W. Russell
Issuing Officer

MAJOR.
Rank

Date of Discharge: FEBRUARY 21, 1919.

O.C. DISTRICT DEPOT NO. 7.
Appointment

Signed at Fredericton, N. B. this 21st day of February 1919.

in Military District No. 7

File Reference No. D.D.7 86-B-45.

DISTRICT DEPOT No. 7
FEB 21 1919
FREDERICTON, N.B.

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.

1893

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. 20.11044 Rank Gnr Surname Newcombe
(Given name in full) Frank Arnold

Unit or Corps S.D.E. 7 Birthplace Hopewell Hill N.B.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 148 lbs. Height 6 ft. — in. Colour of Eyes Brown

Nutrition Well Nourished

Pulse 72

Condition of arteries Normal

Vision Rt. 6/6 Left 6/6

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 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]

1803

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 Fredericton NB. (Canada)

Date 19-2-19 Signed H. B. Lawson Capt. 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 Frank Neweomb

(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.
1772-39-1142.

Form R 122.
10287—65M—28-7-17.

1803

G.H. Rank Name NEWCOMB, Frank Arnold. Reg'l No. 2011040.

If in perm. Corps, What Unit?

Unit 1st. Hart 4th Dft Eng to CETC Married or Single Single.

Place and Date of Enlistment St. John. NB 3rd June 1918. Place of Birth Hopewell Hill.N.B

Name and Address, Next-of-Kin Wesley John Newcomb,

Hopewell Hill, Albert Co. N.B. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 6095
File R.L.
Category CAN.OR

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date.	REMARKS Taken from Official Documents
		Arrived in England		22-7-18	S/S SATURNIA
26-7-18	2nd CERB	TOS from Canada 22/7/18			D056
6-8-18	II CER Bn	S.O.S. to 3 CERB	Seaford	6.8.18	DC-65 3 CERB DO 1
31.12.18	7.M.D. CW. Rhyl.	Attached from 3 CERB — " —	Spr.	30.12.18	Pte O.S. 3 CERB DO. 125 dy 30.12.18.
18-1-19	— " —	Cease. & Attached	Rhyle. "	18-1-19	Pte O. 18.
29-1-19	3 C E R B.	Cease o/c to Kinmel Pk Rhyl. & S.O.S to The C.E.F. in Canada	Spr. Seaford	18-1-19	Pte O. 24.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.7.18.	EFFECTIVE DATE:-
AMOUNT:- 1500	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Wesley John. Newcomb. (Father)
Hopewell Hill.
Albert Co. N.B.

NAME:- NEWCOMB. Frank. Arnold.
NUMBER:- 2011040.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
2 CE RB-D056	22,7,18	Spr.

No. 74. Draft. C.E.
UNIT AND TRANSFERS
ORIGINAL UNIT:- 2ND C.E. RES. BN. C.E.T.C.
DATE ACCOUNT FIRST OPENED:- 22,7,18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
18/12/18	1702.	3. C&R	1947.				
27/12/18.	1801.	"	973.				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10	X	

PARTICULARS OF RENDERING NON-EFFECTIVE: Struck off to Canada 1/1/19. N.B. 1- 26/12/18- 3 C&RB. Credit balance per Cpl. 8 4½

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	BALANCE FROM CANADA								1280		
Aug	To Pay 22-7- 31-8.	415 10		A/R. 1975 · 30-7-18. C.D Seaford	487						
"	" 1/2/19	23 10		" 1423 - 14-8-18 3 C&RB	973						
				C.C.P. Jul + aug				30.	3640		
		439 10			1460			30			
		C&R 20									
Sept	"	33		Cap				15			
				" 185 5/9/18 3 C&RB	973						
				" 427 27/9/18 "	973				2494	9/c Agreed	
		33			1946			15			
Oct	"	3440		Cap.				15	5404		
				" 749 11/10/18 "	487						
				" 912 25/10/18 "	973				3944		
		34 10			1460			15			
Nov	"	33		Cap				15			
				A/R 1146 15/11/18 "	973						
				" 1399 27/11/18 "	2920						
Dec	"	3410		Cap				15			
				A/R 1702 18/12/18	1947				1814		
		67 10			5840			30			
				A/R 1801 27/12/18 "	973						
				" A 315 9/1/19 Rhyl Xpc 6	245				598		
					1718						

Sd Canada 18/1/19
Do 24 3 C&RB 5d/1

CANADIAN ASSIGNED PAY AUDITED
31/12/18 R.C. Shorncliffe
AUDIT CLERK
DATE 6/6/19

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION

Date of Enlistment 3-5-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch N

OVERSEAS CONTINGENTS

Date of Assignment 2785 1-7-18

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15 00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion Canadian Engineers Draft 74

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 WESLEY J.NEWCOMB,
2 HOPEWELL HILL,
ALBERT CO.,N.B. 15 15.00
3 % 2011040 SPR FRANK NEWCOMB
FIFTEEN DOLLARS
4

Date 1918	Cheque No.	Amount S/A	Amount A/P	Total		13344. L-17 REMARKS
July	11 5161		15	15	✓	mailed 14-8-18
Aug	X 41079		15	15	✓	
Sept	U 46524		15	15	✓	
Oct	Y 47367		15	15	✓	
Nov	U 60960		15	15	✓	
Dec	X 70182		15	15	✓	
Jan 19	U. 75954		15	15	✓	
			105	105		

CANADIAN
ASSIGNED PAY AUDITED
31/12/18
H Admitt
AUDIT CLERK
DATE 6/6/19

ENTERED IN AUDIT LEDGER
AUG 9 1918
BY WMS
VOUCHER SECTION

M.F.W. 128
400M.—6-17—1772-49-1141
L. L. 22520—M. & D. 1933.

W.H.T.

A/c Closed
Ret'd per aquitania
Date 25-1-19 M.F.W.181 31-1-19
Clerk L.V.Dodson

R. Garry
M. R.
W.d.L.4. B3.
A. Gleason
8-8-18

AUTHORITY FOR NEW A/C'T.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

	Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS

54. F. W. 128.
40M.—17—1772 '39-1141
L. L. 2-320—M. & D. 1933.

Address - See A.P.

AUDITOR | PAYMASTER

M. OR S. **M.D.No.7**

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 2011040 RANK Spr. NAME (IN FULL) Newcomb, Frank A. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN Wesley J. Newcomb, Father — RELATIONSHIP

ADDRESS Hopewell Hill, Albert Co., NB

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
3x70		

ORIGINAL UNIT C.E.F. C.E. — IF IN P.F. WHAT UNIT? — PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

Aquitania 25-1-19

DATE OF ATTESTATION 3-6-18 — TRANSFERRED TO — DATE — AUTHORITY M.7.W.71. (25/45)

ASSIGNED PAY $ 15 00 — DATE EFFECTIVE No 7 D.D. 1-2-19

PAYABLE TO Wesley J. Newcombe — RELATIONSHIP Father — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Hopewell Hill, Albert Co N.B

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Fredericton — DATE 21-2-19 — REASON Demob — AUTHORITY 2052 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					T.O.S. DO. 29.
Dec							8	41	8	41																											Cr bal. Emg. L.P.C. 31-1278
Jan	31	1 10	34	10	11	20			45	30	K.P.		C.S.		C.S.		2	43	30	48 00	5	00					15	00			57	30	3	59	8	41	Cr bal. paid by Ottawa
Feb	21	1 10	23	10	35	00			58	10	59	20					124	51													124	51	70	00			Subs. 26-1-19 to 10-2-19 DO. 29.
																																					Dr. bal. 31-1-19
																																					CK 8826
																													70		70				140		
																													70		70				70		1/6/1903 A.P. 121 21/3/19
																													70		70						C 394302 Pay Acct 19
																																					Non Effective.
					210		210																						210		210						

30M-11-18.—L.L. 50677-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

1803 D.M.S. 1375.

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 Spr. Name NEWCOMBE. Surname Gerard Arnold.

Unit or Corps 3rd C.R.B. (If a soldier) Regtl. No. 2011040

Born at Hopewell Hill. N.B. on, date Apr 12th 1895.

Signature (for identification) G.A. Newcombe.

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

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

Weight 140 lbs. est. no

Height 5 ft. 6 ins.

2. **NUTRITION AND DIATHESIS?** Good

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

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM.** no

5. **HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 74 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1020 Reaction? Acid Albumen? 0 Sugar? 0

9. **SKIN, MIDDLE EAR, EYE** or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

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

Examined at Pernel Park

Date 6/1/19

Signed [illegible] M.O.

Signed [illegible] M.O

☞ *If any disease or impairment of health or physical condition is discovered, 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.*

Voluntary Enlistment

1803

M.S.A. 15.

~~MILITARY SERVICE ACT, 1917.~~

201040

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 Newcomb Christian name Frank Arnold

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) Hopewell Hill, Albert, Co. N.B.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 4th day of June 1917, by the undersigned medical board sitting at St John N.B.

5. Age as stated 20 Years 1 Months. 6. Apparent age 20 Years Months

7. Height 5 Feet 6 3/4 Inches. 8. Weight 122 Pounds.

9. Chest measurement { Minimum 31 Ins. / Maximum 33½ Ins. } 10. Complexion Medium { Eyes Brown / Hair Brown }

11. Physical development Fair { Good / Fair / Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm 0 / Left arm 2 } 14. When vaccinated last February 1918.

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.)

VISION R.D. 20 L.D. 20

HEARING NORMAL

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 2

A E Losie Capt President.

F Wetherall Member. Member.

Signature of Man Frank Arnold Newcomb

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
26.6.18		C. A. Derick Lieut M.O.	17.6.18	T.A.B. 1st inj.	C. A. Derick Lieut M.O.
		M.O.	21.6.18	" 2nd inj.	M.O.
		M.O.	26.6.18	" 3rd "	C. A. Derick Lieut M.O.

Joined 31 day of May 1918 at St. John, N.B.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	~~Can Eng.~~	201040		31-5-1918.
Transferred to	Can Eng.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
ST. JOHNS, P.Q.	JUN 18 1918		A II Capt. Blackadar
Kunnel Pad	6/1/19	" nil	A HP 6 mths Capt.
Fredericton	19—19		A

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.

1803

Surname Reuvens Christian Name Frans H. Arnold.

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 7

NAME OF SOLDIER Mcinerney H K

REGIMENT 44th Bn RANK Spr No. 2011440

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 from the Service.

	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	Prophylaxis	OPERATOR	Military District	REMARKS
Condition on first Examination	18/02/19	/		9/11.19 20.							9/11.19. 13.										Capt L K Davison F A Newcomb	7	Cavities 8 9 11 Extractions
						Cpl for Discharge																	

M.F.B. 465
150M--10-18
1772-39-950

Fill in only.—Unit, Number, Rank and Name. 1803

M. F. W. 54. (A. F. B.)
500M.—9-16
H. Q. 1772-39-9-20.

Canadian Engineers.

Casualty Form—Active Service.

ENGINEER TRAINING DEPOT

Unit, Regiment or Corps.....

Regimental No. 201040 Rank A/R C.E. F. Name Newcomb Frank Arnold

Enlisted (a) 3-6-18 Terms of Service (a) Dft Service reckons from (a) 3-6-18

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) Laborer

Report: Date	Report: From whom received	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
		Embarked	Canada	20-6-18	
		Disembarked	England	22-7-18	
26-7-18	2nd CERD	T.O.S. of 2nd CERB from Canada	Seaford	22-7-18	Part 11 Order No. 56
6-8-18	2nd CERB	T.O.S. of 2nd CERD to 3rd C.E.R. Bn.	Seaford	6-8-18	Part 11 Order No. 65
					A.G.B. Ferguson Lieut. O.C.
7-8-18	3rd CERB	To C.S. of 3rd. CERB from 2nd CERB	Seaford	6-8-18	Capt. 2nd. C.E.R. Bn. CETC. Part 11 Order No. 1.
27-12-18	3rd CERB	~~On Command Kinmel Park~~	~~Seaford~~	~~1918~~	~~Pt II O 178~~
31-12-18	3 CERB	Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. 8. Ceases to be attached C.C.C. Kinmel Park for embarking for Canada. Part II Order No. 18			H.M.T. 'AQUITANIA' EMBKD. LIV'L. JAN. 13. 1919 DEBKD. HALIFAX N.S. JAN. 24. 1919
16.1.19	MD7	A Runaway Lieut Commanding MD7 Wing, Kinmel Park Camp			
	For O.				

(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 ent
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

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				
18.1.19	England	TAKEN ON STRENGTH D.D.#7 Ft. Lon. N.B. PART II. ORDER No. 29		29.1.19	T.A. Raud Capt. & Adjt. For O.C. District Depot No. 7.
21-2-19		"DISCHARGED" FROM HIS MAJESTY'S SERVICE Auth R.O. 1420(C) & S.O. #44 (21-2-19)	Ft. Lon. N.B.	21-2-19	A. Glenn Lieut. O.C. Discharge Section For O.C. District Depot No. 7.

DISTRICT DEPOT No. 7
FEB 21 1919
FREDERICTON, N.B.

1803

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.	2011040
Rank	Sapper
Surname	NEWCOMB
Christian name	FRANK ARNOLD

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

Corps (Squadron, Battery or Company)	District Depot No. 7,
Date of discharge	February 21, 1919.
Place of discharge	Fredericton, N. B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	20 years 10 months.
Height	6 feet 0 inches.
Complexion	Medium
Eyes	Brown
Hair	Brown
Trade	Laborer
Intended place of residence (To be given as fully as practicable.)	Hopewell Hill, N.B.

Descriptive marks

NIL

2. The above-named man is discharged in consequence of Demobilization.

Authority for discharge R.O. 1420 (c)

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) Fredericton, N. B. F. A. Newcomb *(Signature of Soldier.)*

(Date) February 18, 1919. H. B. Hobbs Lieut. *(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) Fredericton, N. B.

(Signature) W. H. Arnold

MAJOR.

(Date) February 21, 1919.

O.C. DISTRICT DEPOT NO. 7.

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

F. A. Newcomb.

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,	Militia form	B. 313
Casualty Form	"	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	"	W. 133
Proceedings on Discharge	"	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.

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.