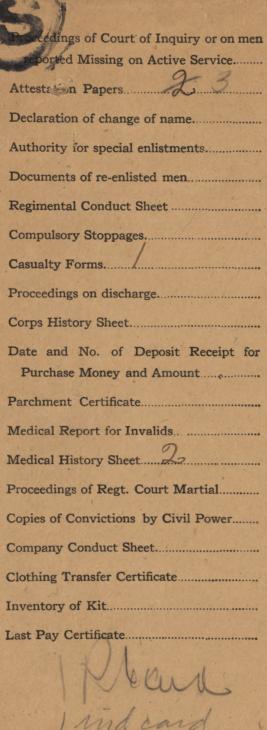
Duplicate APERATT. O APTESTANDA FAPERATT.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT	BEFORE ATTESTATION. (ANSWERS.)
1. What is your surname?	hicholson
la. What are your Christian names?	Many/
1b. What is your present address?	The grahuford
2. In what Town, Township or Parish, and in what Country were you born?	
What is the name of your next-of kin ?	me may nicholan
	new grahenford
4a. What is the relationship of your next-of-kin?.	mosho
What is the date of your birth?	1898
What is your Trade or Calling?	Faimes
7. Are you married?	no
8. Are you willing to be vaccinated or re-	1, 26 20
vaccinated and inoculated?	Two Stell
9. Do you now belong to the Active Militia?	1900
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Zo'
11. Do you understand the nature and terms of your engagement?	Yns
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	
after the termination of that war provided His Majes discharged. Date 1916 971	that war last longer than one year, and for six months sty should so long require my services, or until legally with legally (Signature of Recruit)
bear true Allegiance to His Majesty King George the duty bound honestly and faithfully defend His Majenty, against all enemies, and will observe and obtained of all the Generals and Officers set over me. So	
()	Mry Michelson (Signature of Recruit)
CERTIFICATE O	F MAGISTRATE. (Signature of Witness)
The above questions were then read to the Red I have taken care that he understands each questions	
	Cherry (Signature of Justice)
M. F. W. 23.	A Justice of the Part
600M.—2-16. H. Q. 1972-99-241.	A Justice of the Peace in and for the

Description of Ticholes	- Harry on Enlistment.
Apparent Age	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).
Height	Lorge sear at Carper metacarfal joints of first how frigues of sight hand of sight hand blue coal sear on by affect the sight appropriate the sight approp
I have examined the above-named Recruit a of rejection specified in the Regulations for Army Me He can see at the required distance with either the second of the second	her eye; his heart and lungs are healthy; he has the
B 4 6	
Date 191	W. J. Can Jen
Place by your us	Medical Officer.
*Insert here 'fit' or "unfit.' Note.—Should the Medical Officer consider the Recruit unfit, been attested, and will briefly state below the cause of unfitness:—	he will fill in the foregoing Certificate only in the case of those who have
Harry Hickory	ER COMMANDING UNIT. having been finally approved and of Attestation, and every prescribed particular having correctness of this Attestation.
AUG 1 0 1916	Litherland (Signature of Officer)



M. F. W. 62. 25m.—12-15. H. Q. 1772-39-935.



DISCHARGE DOCUMENTS

R. O. No ...

H. Q. No ..



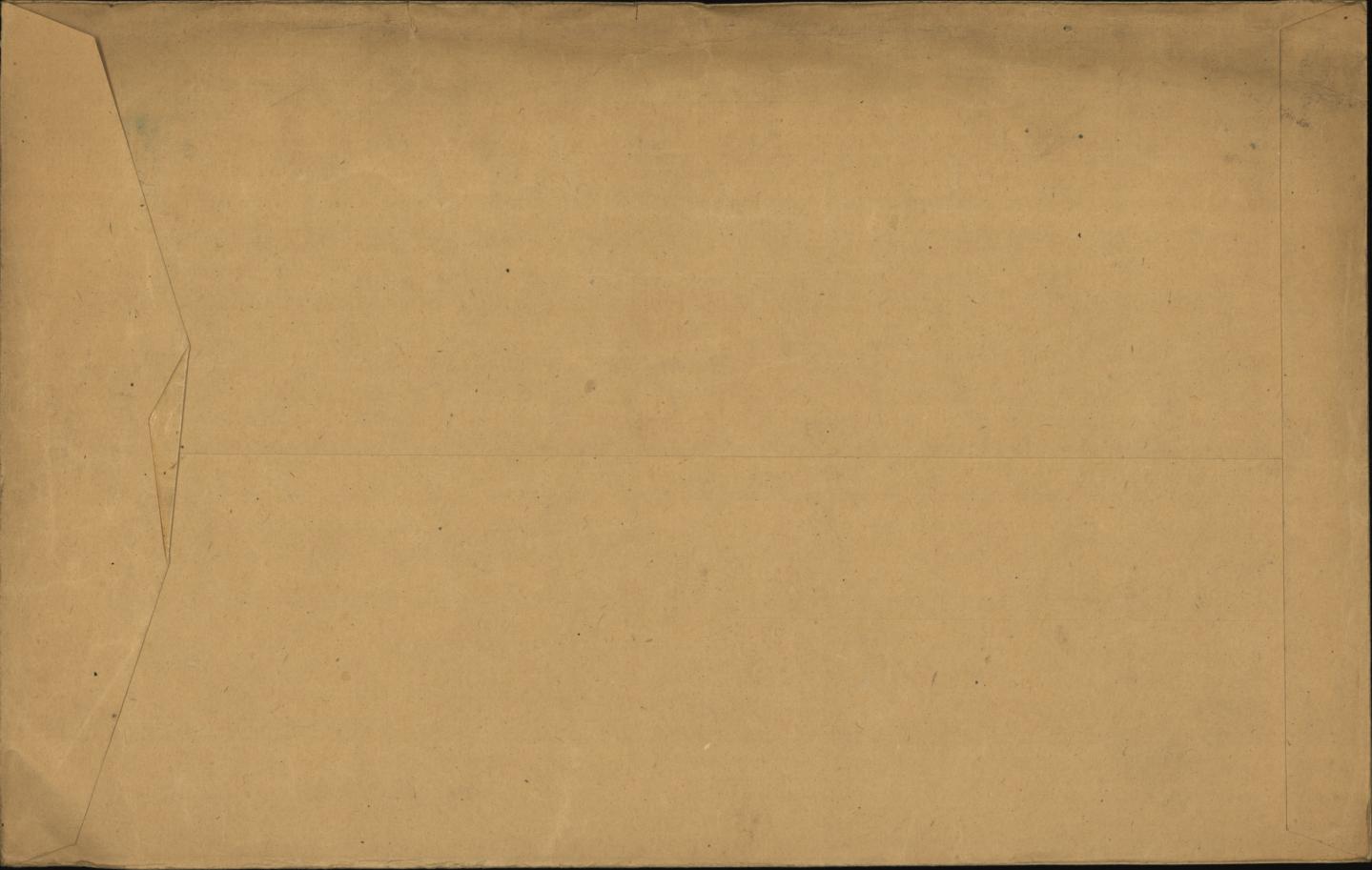
Name Micholson, Harry.

Regt. No. 93/075 Rank Pte.

Corps No. 2 Construction Bn.

05376





SURNAME. hickolson.	CARD No.
CHRISTIAN NAMES / Hovery	5.0. S. Lles. 3/9/16. 6.
REGL. NO. 931075. RANK Pte.	
UNIT No. 2 Construction (Coloured)	Bn.
FORMER CORPS Nil.	
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL nicholson, hors mary.	
RELATIONSHIP TO SOLDIER hother.	
ADDRESS here Waterford. le. 13. n. 8.	
COUNTRY OF BIRTH Garada middle River Vie 60 ATE	1898.
PLACE OF ATTESTATION Sydney, n. S. DATE	ang 4.1916.
L. L. 94504. M. & D. 6512. M. F. W. 22. 25	50м.—2-16. H. Q. 1772-39-339.

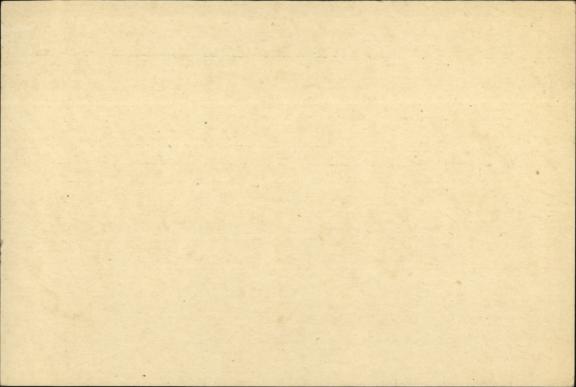
TRADE OR CALLING Yarmer RELIGION WIDOWER Presbyterian APPARENT AGE /8 YEARS 8 MONTHS

HEIGHT 5 FEET 3 1/2 INCHES

CHEST MEASUREMENT 3 5 INCHES EXPANSION & INCHES COMPLEXION Fair EYES Blue HAIR Fair of first two fingers of right hand, Blue coal sear on left upper eye lid.

MEDICAL EXAMINATION. PLACE Sydney. N.S. DATE and 4.1916. Cresent address. new Waterford. L. B. n. S.

NAME Michalson. Harry. No. 931075. RANK P. T. T.O.S. 4-8-16 no 2 Construction Ballation D.O. 6 7. 8.16 PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PAID PAID SIG. OR TO REC'T FROM AUTHORITY **PARTICULARS** 1916 dug. 4 ling 31 ... Dec. deserter by C. of 25.10.16 D.O. 61. 26-10-16 Took Closel



Original not available
Fill in only.—Unit, Number, Rank and Name.

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

Casualty Form—Active Service.

Unit, Regiment or Corps. # 2 Construction Bon. Regimental No. 9.310.75 Rank Pt. Name nicholson Harry. Enlisted (a) 4-8-16. Terms of Service (a) Loof (w) Service reckons from (a) 4-8-16 Date of appointment Numerical position on roll of N. C. Os. Date of promotion to) present rank Extended Qualification (b). Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as retaken from Army Form B. 213. ported on Army Form B. 213, Army Form Place Date From whom Army Form A. 36, or other Date A. 36, or in other official documents. The received official documents authority to be quoted in each case 26-10-16 # 2 Construct Alleg. about. Talifax, n. S. 5-10-16 P !- I Order # 61.

⁽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.

M. OF TARSONS

Record of promotions, reductions, transfers, Report Remarks casualties, etc., during active service, as retaken from Army Form B. 213, Date ported on Army Form B. 213, Army Form Place Army Form A. 36, or other From whom A 36, or in other official documents. The Date official documents received authority to be quoted in each case Diescrit gank deor tucing The (a) In the case of a man who has no second to be colored by as the contract of any second or any sec

Christian Name Approved by Rank M.O. Fit or Unfit Date EXAMINED FOR RE-ENGAGEMENT Apparent age M.O. Trade or occupation M.O. Height M.O. Weight lbs. Minimum inches M.O. Maximum expansion M.O. Physical development M.O. Small-pox Marks M.O. Vaccination Marks Date Result VACCINATIONS Number When Vaccinated last M.O. (a) Marks indicating congential peculiarities or M.O. previous disease. M.O. Date ANTI-TYPHOID INOCULATIONS, ETC. (b) Slight defects but not sufficient to cause rejection M.O. M.O. M.O. Enlisted on day of. CORPS REGT'L NUMBER HABITS DATE Joined on enlistment Transferred to. EXAMINED OR DISCHARGED BY A MEDICAL BOARD STATION DATE DISEASE RESULT

MEDICAL HISTORY

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Servcie, on the man becoming non-effective; the date and cause being stated on next page.

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. DATES OF Number of Date of Arrival Signature of Admission into Hospital Discharge from Hospital DISEASE days in STATION at the Medical Officer Hospital Station Day Month Year Day Month Year Christian Name Su name

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide	Articles	122, 13	80 and 141, Financial Instructions, 25715c, C.E.F.,	1916).			
			.Name				
Corps. 12 District Depot	v	vho was	Discharged				
On191.	sert "dis	scharge	d" or "transferred."				
The following is a statement of the accou	nt of th	e above	named from	19	91		
to	usive da	te of tr	ansfer or discharge.				
8-1-19 Dr.	\$	c.	Cr.	\$	c.		
Bal. Dr. from prev. month. Advances by No. L.P.C. Balance Cr. from prev. month. Regt'l. Pay. Assigned Pay and Sep'n Allce. No. Other charges. Payment on transfer or discharge No. Bal. Cr. (to be paid by the new unit) Total. A monthly stoppage of \$. (†) has (†) has (‡) been paid paid on account of A and Sep'n Allce. for month of 191. (Address) Bal. Dr. (to Assignee.							
	On Tr	ansfer	of an Officer.				
Out Allowance of \$has	been p	aid by	Paymaster, Military District No				
(2) if married and if a Separation (3) cause of discharge	Allowa	nce Care	d has been submittedauthority				
		unt and	find it to be a correct extract from the Pay				
Place N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to duplicate to District Paymaster, triplicate to accompany the pay list at the end of the month, and to as a record. For purposes of discharge it is to be made out in triplicate. Original copy to accompany do 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 cate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Pocate, with his discharge documents. M. F. W. 44							

H.Q. 1772-89-903. 100M-9-18, D.P. 874.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LIST PAY CERTIFICATE

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