A 60

A 58326

V-31

# ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? John Scott
2. In what Town, Township or Parish, and in what Country were you born? W Hartlepool Durham
3. What is the name of your next-of-kin? James Scott Father
4. What is the address of your next-of-kin? 1337 St Urbain St Montreal
5. What is the date of your birth? 25 October 1897
6. What is your Trade or Calling? Bookmaker
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? No
    If so, state particulars of former Service.
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

x John Scott (Signature of Man).

W H Fuller (Signature of Witness).

Discharged

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Scott, do solemnly declare that the above answers made by me to the above questions 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.

x John Scott (Signature of Recruit)

Date July 29th 1915 W H Fuller (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Scott, 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.

x John Scott (Signature of Recruit)

Date July 29th 1915. W H Fuller (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 Montreal this 30 day of July 1915

J. V. O'Donahoe Major (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

(Approving Officer)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Present address: 183 Y. St Andre St. Montreal.

## Description of John Scott on Enlistment.

Apparent Age 18 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 2½ ins.

Chest measurement: Girth when fully expanded 35 ins.
Range of expansion 2 ins.

Wt 101½

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic ✓
- Jewish

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).

Vac L arm
mole L side

## 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 29 July 1915 J. A. Paine
Lieut A.M.C.
Place Montreal
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.

John Scott 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.

H Wascoyne (Signature of Officer)

Date July 191..

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

Attestation Papers.....3.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet .....1.....

Compulsory Stoppages.....

Casualty Forms.....

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.....1.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M. F. W. 62.
25m.—11-15.
H. Q. 1772-39—935.

# DISCHARGE DOCUMENTS

Name Scott John

Regt. No. 438326 Rank Pte.

Corps 60th Batt.

Under Age

V. b. 5-D. 5.

R. O. No.....

H. Q. No.....

09025

No. A 58326 Rank Pte. Name Scott John

T. O. S. 59-1-15. Unit 60th. Battalion
No 60-2-8-15.

M. D. Val

| Paid From | Paid To | Sig or Rec't | Promotions, Transfers, Discharges, Etc. | |
|---|---|---|---|---|
| | | | Particulars | Authority |
| 1915 July 29 | 1915 Aug 21 | | Discharged 21-8-15. | No 78-21-8-15. |

UNIT SAILED
NOV 6 1915

a/c closed by payment

## ACTIVE MILITIA.

## CERTIFICATE OF DISCHARGE.

THIS CERTIFIES that 418326 Pte Scott John

of Montreal County of.....

Province of Quebec Dominion of Canada, aged

18 9/12 years, served continuously in.....

60th Battalion, C. E. F.....

of Active Militia of Canada, from the 28th day of

July 1915, to the 21st day of Aug 1915

and is now discharged therefrom.

Dated at Vancouver F. A. Gascoigne, Lt Col.

the 13th day of October .....Lieut. Colonel.

1915 Commanding 60th BATTALION C. E. F.

## ACTIVE MILITIA.

## CERTIFICATE OF DISCHARGE.

THIS CERTIFIES that.....

of.....County of.....

Province of.....Dominion of Canada, aged

.....years, served continuously in.....

60th Battalion, C. E. F.....

of Active Militia of Canada, from the...day of

.....19..., to the.....day of.....19...

and is now discharged therefrom.

Dated at.....

the...day of.....

19...

.....Lieut.Colonel.

Commanding.....

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

Original not Available

M. F. W. 54. (A. F. B. 105.
500M.—9-16
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 60th Battalion

Regimental No. 458326 Rank Pte Name Scott, John.

Enlisted (a) 29-7-15 Terms of Service (a) C.E.F. D of War Service reckons from (a) 29-7-15

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) .....

| 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 | | | | |
| 21-8-15 | 60th Bn | S.O.S. "Minor" | Valcartier Que. | 21-8-15 | H.Q. 54-21-10-1. D.O. # 78. V.C. D-5-5. |

D Mathie

for D J R.

(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 | | | | |

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A 58326

# MEDICAL HISTORY SHEET.

*Surname* Scott *Christian Name* John

Examined { on 29 day of July 191 5
at Montreal

Approved by J. A. Fairie
Rank Lieut A.M.C. M.O

Birthplace { City or Town W. Hartlepool
County Durham

Apparent age 18½

Trade or occupation Bootmaker

Height 5 Feet 3½ Inches.

Weight 101½ Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 35 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left. ✓
Number ✓

When Vaccinated last

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

| Date | Fit or Unfit | Examined for Re-engagement, |
|---|---|---|
| | | M.O |
| | | M.O. |
| | | M.O |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | Vaccinations. |
|---|---|---|
| | | M.O. |
| | | M.O. |
| | | M.O. |

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

*Enlisted on* ..... *day of* ..... *191* ..... *at* .....

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | | | | |
| Transferred to.. ..... | | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| | | | |
| | | | |

N. B.—This sheet 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.

100M.—5-15.
H. Q. 1772-39-439

Surname..... Christian Name.....

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. | | | Dates of Discharge from Hospital. | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |

This space to be for numbers.

A. Co.

# Proceedings on Discharge.

**(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.).**

No. 458326

Rank Private

Name Scott, John

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

Corps (Squadron, Battery or Company) 60th BATTALION C. E. F.

Date of Discharge 21/8/15

Place of Discharge Valcartier, Que.

**1.** DESCRIPTION AT THE TIME OF DISCHARGE.

Age 18 years 9 months.

Height 5 feet 2½ inches.

Complexion Fair

Eyes Blue

Hair Brown

Trade Bootmaker

Intended place of residence. (To be given as fully as practicable.)

Descriptive Marks.

Vac L. Arm

Mole L. Side

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

V. C. 5-D-5

N.B.—The causes 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 soldier and the Officer Commanding his Squadron, Battery or Company.

**4.** Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

OVER

M. F. B. 218.

5m.—2-15.
H.Q. 1772-39-113.

**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) Valcartier

OFFICER COMMANDING 60th Battn. C.E.F.

(Date) OCT 11 1915

*Commanding* 60th BATTALION C. E. F.

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

(Date).....(*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

**9.** **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

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

**10.** **Statement of Service.**

Service toward Engagement to....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

**11.** **Confirmation of Discharge.**

The discharge of the above named man is hereby confirmed.

OFFICER COMMANDING 60th Battn. C.E.F.

(Place) Valcartier

(Date).....

(*Signature*) F. A. Buscoigne, Lt Col.

60th BATTALION C. E. F.

## 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.)

(OVER)

# List of Discharge Documents.

| | | |
|---|---|---|
| Reg. Conduct Sheet, | Militia Form | B. 263. |
| Squadron / Battery / Company Conduct Sheet, | " | B. 263a. |
| Copies of Convictions, by C. P. | | in MS. |
| Med. Hist. Sheet, | Militia Form | B. 313. |
| Medical Report for Invalid* | " | B. 227. |
| Settlement of Man's Account on Transfer and Last Pay Certificate, | " | D. 877. |

*Only if discharged "Medically unfit."

| | | |
|---|---|---|
| Attestation Paper, | Militia Form | B. 235. |
| 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 (in the event of such having been prepared.)

*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.*