DUPLICATE

6th M. D. 1st Depot Battalion Nova Scotia Regiment

Regtl. No. 4050787

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname: Smith
2. Christian name: Ezra
3. Present address: Selma, Hants Co, N.S.
4. Military Service Act letter and number: Defaulter, arrested 26-7-18.
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension. or surrender)
5. Date of birth: April 7th, 1890.
6. Place of birth (town, township or county and country): Selma, Hants Co, N.S.
7. Married, widower or single: Single
8. Religion: Methodist
9. Trade or calling: Farmer
10. Name of next-of-kin: Silas Smith
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Selma, Hants Co, N.S.
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None
15. Medical Examination under Military Service Act :—
    (a) Place Aldershot, N.S. (b) Date August 1st, 1918 (c) Category E

DECLARATION OF RECRUIT

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

Ezra Smith (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	28 yrs.	- mths.	Distinctive marks, and marks indicating congential peculiarities or previous disease.
Height	5 ft.	7 ins.	
Chest measurement: fully expanded		36 ins.	
Chest measurement: range of expansion		2 ins.	Nil.
Complexion	Fresh		
Eyes	Blue		
Hair	Light Brown		

N. H. Parsons Major

for O. C. 1st Depot Btn.

N.S. Regt.

Place Aldershot, N.S. Date August 1st, 1918.

M. F. W. 133.
500M.—5-18.
1772—39—1158.

MT 13.9.18

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

Attestation Papers.....2 3

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

MTW 82-1
MTW 113-1
AT B122-1

M. F. W. 62.
50m.—9-16.
H. Q. 1772—39 935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Smith Ezra

Regt. No. 405787 Rank Pte

Corps 1st Depot Bn. N. S. Regt
Cat E

26965

H. Q. ✓

M. D. No. 6

Surname Smith

T. O. S. July 11th 1918

Christian names Ezra

D. O. Pt. II 210 of 31-7-18

Regtl. No. 4050787 Rank Pte

S. O. S. 8-8- 1918.

Unit N.S. Regt. 1st Dpo. Bn.

Reason M.U.

Auth. D.O. 2177. 7-8-18. 1/M.S.R.

Next of kin Smith, Silas

Relationship Father

Address Selmal, Hants Co., N.S.

Also notify:

BORN—Place Canada, Selmal, N.S. Date Apl. 7th 1890

ATTESTED—Place Aldershot, N.S. Date Aug. 1st 1918

O/S

R/C

W. 22—100M-7-18. 1772-39-839

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

4050787

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 Smith Christian name Ezra

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) Truro N.S. (Selma Hants Co N.S.) Home address

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 1st day of Aug 1917, by the undersigned medical board sitting at Aldershot N.S.

5. Age as stated 28 Years Months. 6. Apparent age Years Months

7. Height 5 Feet 7 Inches. 8. Weight 135 Pounds.

9. Chest measurement { Minimum 34 Ins. / Maximum 36 Ins. 10. Complexion Fresh { Eyes Blue / Hair Light Brown

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

13. Number of vaccination marks { Right arm — / Left arm — 14. When vaccinated last —

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 6

V. R.O. 30 L.D. 30
*. Both ears Deaf

Signature of Man Ezra Smith

G. J. McNally Major President.

W. Mackasey Capt. Member. Member.

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

Joined 1st day of Aug 1918 at Aldershot N.S.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st. D. B. N. S. R.	4050787		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Aldershot N.S.	1/8/18	Deaf in both ears.	Category E

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.

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				

FORM OF WILL

I, Ezra Smith (Name in full)

Regimental Number 4050787 serving in 1st D Bn N S R,

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Mrs Silas Smith
mother Selma Hants Co

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

mother Mrs Silas Smith
Selma Hants Co

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE
This space for the appointment of Executor if necessary.

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 3rd day of August A.D. 1918

Ezra Smith Signature of Soldier.

*N.B. Personal estate includes pay, ~~effects, money in bank, insurance policy,~~ in fact everything except real estate.

C. T.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness C. Trott

Address of Witness 1st Depot Bn N S Regt

Occupation of Witness Soldier

Signature of Second Witness F A Bunley Pte

Address of Witness 1st Depot Bn N S Regt

Occupation of Witness Soldier

M. F. W. 82.
300M.-12-16.
1772-39-983.

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. 450787 Rank Pte Name Smith Ezra

Corps 1st Depot Bn. N.S. Regt who was* discharged

On Aug 8 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Aug 1 1918, to Aug 8 1918, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	289	30
Advances by Cheques No.			Regt'l Pay 8 days at $ 1 c. —	8	
Advances by Cheques No.			Field Allow. 8 days at $ — c. 10		80
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges	289	30	Other Allowances*		
Payment on transfer or discharge No. 438	8	80	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	298	10	Total	298	10

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of Assigned Pay for the month of 191 and Sep'n Allce. 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

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

REMARKS:—

State (1) date of enlistment 11/11/17

(2) if married and if a Separation Allowance Card has been submitted

(3) cause of discharge Category E authority 237-259

(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 Aug 12/18

Place Aldershot N.S.

A. A. Cameron Lt

Paymaster.

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.

M. F. W. 44.

300M—2-18.
H. O 1772-39-903.

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1st Depot Batt'n N. S. Reg't.

Regimental No. 4050787 Rank Pte. Name Smith, Ezra.

Enlisted (a) 1-8-18. Terms of Service (a) C. E. F. War and 6 months. Service reckons from (a) 1-8-18.

Date of promotion to present rank ..... Date of appointment to lance rank ..... Numerical position on roll of N. C. Os. .....

Extended ..... Re-engaged ..... Qualification (b) Farmer.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Discharged, Cate. "E".	Aldershot, N.S.	8-8-18.	

Capt
Adjt 1st Depot B'n N. S. Regiment

N. H. Parsons Major
for O.C. 1st D B N S 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				

This space to be for numbers.

MILITARY DISTRICT No. 6
HALIFAX, N. S.
AUG 31 1918
M. D. No. 6 39.5.169

Proceedings on Discharge.

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

No.	4050787
Rank	Private.
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	SMITH? Ezra
Corps (Squadron, Battery or Company)	1st. Depot Battalion N.S. Regt.
Date of Discharge	August 8,1918.
Place of Discharge	Aldershot Camp, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	28 years 4 months.	Nil.
Height	5 feet 7 inches.	
Complexion	Fresh	
Eyes	Blue	
Hair	Light Brown	
Trade	Farmer	
Intended place of residence (To be given as fully as practicable.)	Selma, Hants Co., N.S.	

2. The above-named man is discharged in consequence of being in Category "E" and unfit for service.

Auth. 237-529.

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.

Nil.

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.)

Farmer.

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

5. He is in possession of the following number of G. C. Badges:

Nil.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations ..... Nil.

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) ALDERSHOT CAMP ..... Capt. for Lt.-Col.

(Date) August 8, 1918. ..... *Commanding* 1st. Depot Bn. N.S.R.

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) Ezra Smith ALDERSHOT CAMP ..... (*Signature of Soldier.*)

(Date) August 8, 1918. C W Sawson Pte. (*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.

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

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years 8 days.

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

11. **Confirmation of Discharge.**

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

(Place) ALDERSHOT CAMP

(Date) August 8, 1918.

(*Signature*) ..... Capt. for Lt. Col.

O.C. 1st. Depot Bn. N.S. 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.)

Ezra Smith

C.W. Dawson Pte.

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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.