

ORIGINAL

ATTESTATION PAPER.

No. 2100733

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? Snell
1a. What are your Christian names? Frederick William
1b. What is your present address? Harvey, Albert County, New Brunswick
2. In what Town, Township or Parish, and in what Country were you born? Havelock, Kings County, New Brunswick
3. What is the name of your next-of kin? Elizabeth Snell
4. What is the address of your next-of-kin? Harvey, Albert County, New Brunswick
4a. What is the relationship of your next-of-kin? Mother
5. What is the date of your birth? Aug. 29th, 1899
6. What is your Trade or Calling? Cost Accountant
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? or Naval? No
10. Have you ever served in any Military Force? No
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frederick William Snell, 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.

Frederick W. William Snell (Signature of Recruit)

Date August 8th 1918 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frederick William Snell, 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.

Frederick William Snell (Signature of Recruit)

Date August 8th 1918 (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 8th day of August 1918

(Signature of Justice) major C.O. 9th o/s Siege Battery, CEF

Description of Frederick William Snell on Enlistment.

Apparent Age 19 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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 5 ft. 7½ ins.

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 3 ins.

Vision:- RD20 LD20

Hearing:- Normal both ears.

Complexion Fair

Scars:- Nil

Eyes Brown

Hair Fair

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist. X.....
 Roman Catholic.....
 Jewish.....
 Other denominations
 (Denomination to be stated.)

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 August 8th 1918.

Place St. John, N.B.

[Signature]
 Capt.
 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.

Frederick William Snell 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.

[Signature] Major (Signature of Officer)
 C.O. 9th o/s Siege Battery, CEF

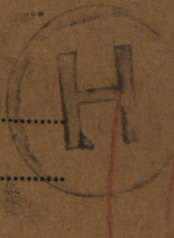
Date August 8th 1918.

BB 12-2-19

DISCHARGE DOCUMENTS

R. O. No.....

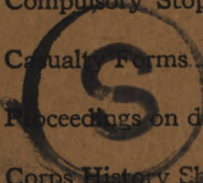
H. Q. No.....



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name SNELL, FREDERICK,
 Regt. No. 2100733 Rank Gnr
 Corps #7 Arty Depot R. G. A.

DEMOB'N.



32555



M.F.W. 178 - 1
 M.F.W. 71 - 1
 M.F. B465 - 1
 M.F. W129 - 1

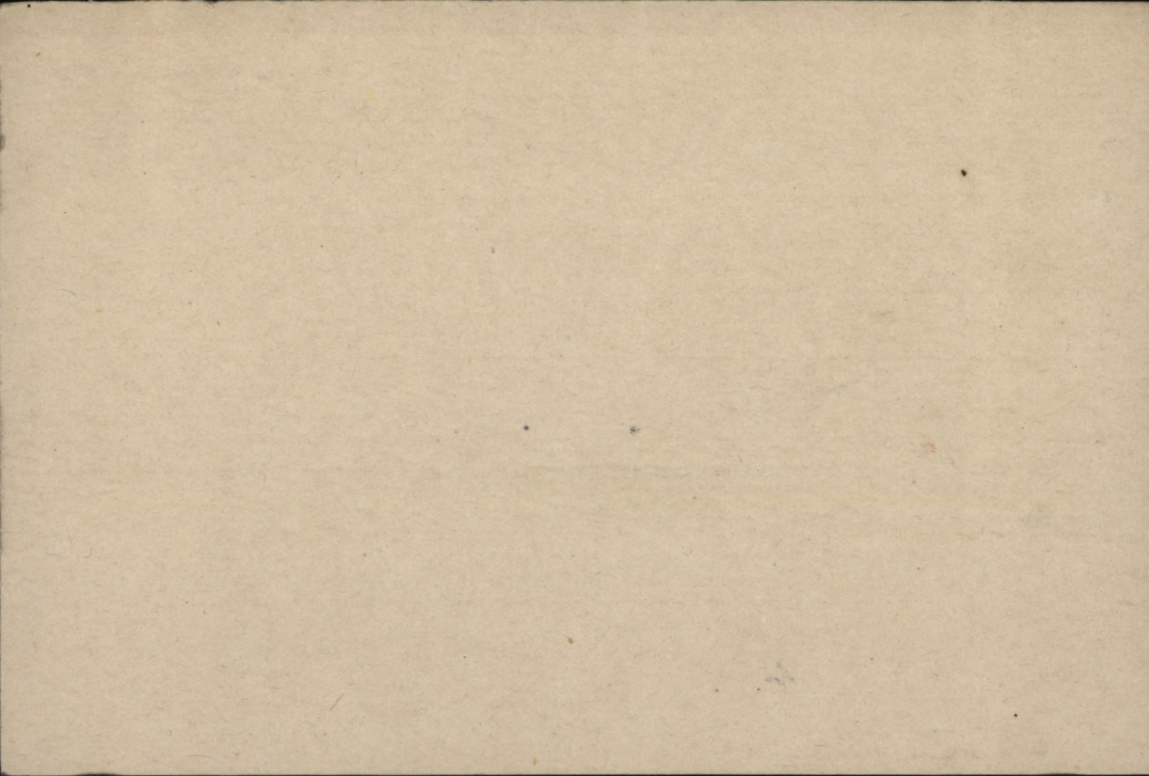
M. F. W. 62
 50m.-9-16.
 H. Q. 1772-39 935. M.F.W. 2572-1



Surname Snell H. Q.
Christian names Frederick William M. D. No. 7
Regtl. No. 2106433 Rank Cpr. T. O. S. Aug 8th 1918
Unit 9th Siege Bty D. O. Pt. II 1220 of 8/8/18
S. O. S. Dis. 6-1-1919 7
Reason Demob.
Auth. DO 696-1-19
#7 art spo

Next of kin Snell, Mrs Elizabeth Relationship Mother
Address Harvey, Albert Co N.B. Also notify:
.....
.....

BORN—Place Canada, Havelock N.B. Date Aug 29th 1899
ATTESTED—Place St. John N.B. Date Aug 8th 1918
O/S R/C
4



M. F. W. 71-500M.-5-18.

1772-30-961.

Cost Accountant

NAME

Frederick William Snell

REGIMENTAL NO.

2100733

RANK

Gunner

ENLISTED AT

St John NB

PROMOTIONS, &c.
AND DATE

DATE

8-8-18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

no

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN

RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY \$

C.

TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &C.

NATURE E.G. ABSENCE, PROMOTION, &C.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &C.
	NO.	DATE	
Moved	253	11-9-18	Pty Cole.
Leaves Co. Co.	25	1-11-18	
Leave	1	1-1-19	30-12-18 to 2-1-19
Discharged	6	6-1-19	RD 1378

Dental Examination on Discharge

File No.....

Rank *Private* Name *Snel, F.W.* Regt. No. *2100733*

Date of enlistment *8/8/18* Service, where *Canada*

If any dental treatment in army, where *Canada*

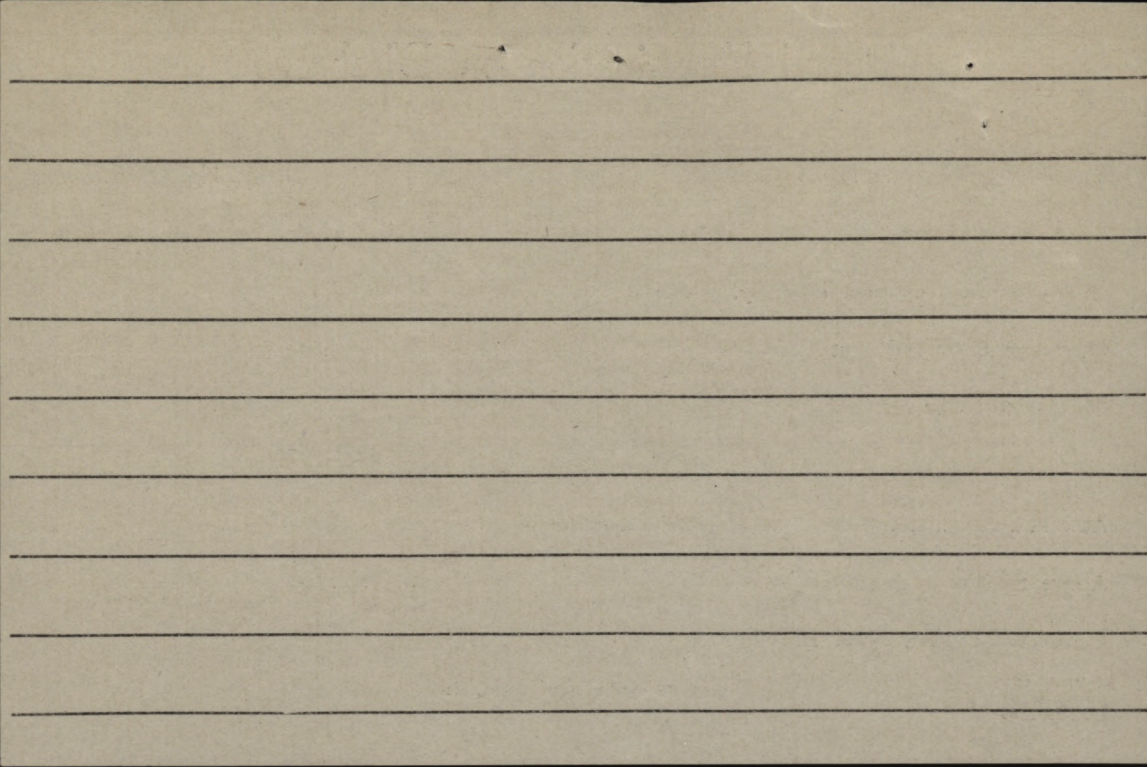
Discharge examination at *Sydney, N.S.* Date *2/1/18*

Treatment to be received *Fillings 2.7.8.9.15*
Refuse Work

At Examined by

Above treatment completed by Date

Completed History Sheet File No.....



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. 9th o/s Siege Battery, C.E.F.

Regimental No. 2100733 Rank Gunner Name Frederick William Snell

C. E. F.

Enlisted (a) 8-8-18 Terms of Service (a) C.E.F. Service reckons from (a) 808-18

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) Cost Accountant

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				
	<u>Discharged on Demobilization,</u>				
		<u>R.outine O. #1327, 18-11-18</u>	<u>St.John, N.B</u>	<u>6-1-19</u>	<u>D. OPart 2, #6, 6-1-19</u>
				<u>P. Wetmore</u>	<u>Major.</u>
					<u>C. R. C. A. No. 7 Artillery Depot.</u>

(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				

Discharged on
Demobilization
R. 41337, 18-11-41
01-1-42, 42-1-19, 42-1-19, 42-1-19

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. 2100733 Rank Gunner Name Snell, Frederick William

Corps No. 7 Artillery Depot, R. C. G. A. who was* Discharged

On Jan. 6th. 1919 1919, to _____

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/1/19 1919, to 6/1/19 1919, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....	15	92
Advances by Cheques } No.....			Reg'tl Pay <u>6</u> days at \$ <u>1</u> c <u>00</u> .	6	
} No.....			Field Allow. <u>6</u> days at \$ c <u>10</u>		60
Assigned Pay No.....			Other Allowances*.....		
Other Charges*.....			Other Credits* <u>Clothing Allow.</u>	35	
Payment on transfer or discharge No. <u>844</u>	57	52	Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	57	52	Total.....	57	52

*Give Particulars.

A monthly stoppage of \$ Nil. (†) has _____ (‡) been paid on account of Assigned Pay for the month of _____ 1919 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 8/8/18
 (2) if married and if a Separation Allowance Card has been submitted Nil.
 (3) cause of discharge and authority Demobilization. R.O.#1328

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date _____

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 8/1/19

Place Partridge Island, N.B.

J. W. Deane
 Major.

C. E. C. A. No. 7 Artillery Depot Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

Residential No. 210120, Name: Shell, Frederick William, Rank: Captain

On Jan. 23, 1919, discharged

Insert "discharged" or "transferred"

The following is a statement of the account of the above named from the date of transfer of discharge to the inclusive date of transfer of discharge

Dr.					
	Balance Cr. (to be paid by the new unit)				
	Payment on transfer of discharge No. 210120				
	Other Charges				
	Assigned Pay No.				
	Charges No.				
	Advances No.				
	Balance Dr. from prev. month				
	Other Allowances				
	Field Allowance				
	Project Pay				
	Other Credits - Overtime Allowance				
	Total				

Pay for the month of () 1919. A monthly advance of \$ () has been paid on account of Assigned () ()

(1) Insert amount to be assumed, whether it has been paid or not. (2) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Other Allowance of \$ () has been paid by Paymaster, Military District No. ()

REMARKS

(1) If dated and if a separation allowance has been submitted. (2) If dated and if a separation allowance has been submitted. (3) Cause of discharge and authority. If discharged from the contingent, state if stop payment advice for assigned pay has been forwarded, and date. I have carefully examined this statement of account and find it to be correct except from the list of the unit.

Place: () Date: ()

N.B.—For purpose of transfer this form is to be made out in quadruplicate. One copy to be retained at the paymaster's office, one to be retained at the unit, one to be retained at the contingent, one to be retained at the discharge office, one copy to accompany pay list at the end of the month, and one for retention as a receipt.

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 *Priv* Name *Frederick William* Surname *Snell*
Unit or corps *7th Artillery Depot* (if a soldier) Regt. No. *2100733*
Born at *Hawstock Kings* on, (date) *Aug 29th 1899*
Signature (for identification) *Fred W Snell*

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

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

Weight

145 lbs.

Colour of eyes

brown

Height

5 ft 7 1/2 in.

Identification Marks

nil

2. NUTRITION AND DIATHESIS?

no

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

3. NERVOUS SYSTEM? Is there a history of previous disability?

no

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

no

5. HEART?

Abnormal Sounds? *no*

Abnormal Size? *no*

Pulse Rate? *78*

Intermittence or Irregularity?

Muscular Tone?

no
good

6. ARTERIES.- (a) Any hardening or nodulation? *no*

(b) Blood Pressure.

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

good

8. GENITO-URINARY SYSTEM?

Urinalysis-S.G.?

Reaction?

Albumen?

Sugar?

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 Sophm N. 3 Signed A. L. Gerson Capt M.O.

Date Jan 4th 1919 Signed _____ M.O.

Fred W. Snel
Signature of soldier

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, 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.

M.F.W. 129
7-17

DENTAL HISTORY SHEET

207.

DISTRICT

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER

Small, G. H.

REGIMENT

207 Siege Battery

RANK

Gunner

No.

200733



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>Aug. 16.</i>	<i>6</i>								<i>1/19</i>									<i>Refer. by</i>		<i>Op. 2. 7. 13. 14. 15. 17. 18. 31</i>
	<i>Aug 16.</i>	<i>2. 13. 14. 15.</i>								<i>2/5. 30</i>									<i>A. H. Stane</i>	<i>7</i>	<i>Op. 3. 5. 30.</i>
	<i>Sept 10</i>	<i>17. 31 18</i>								<i>1/7 1/3</i>		<i>Prophylaxis</i>							<i>A. H. Stane</i>	<i>7</i>	<i>Completed.</i>

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT

No. 7

NAME OF SOLDIER

McNeill, J. W.

REGIMENT

2 R.C.G.A.

RANK

Gunner

No. *2400733*



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.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoec	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	Prophylaxis	OPERATOR	Military District	REMARKS	
												U	L	P			Gold	Porcelain						
	<i>1919</i>																				<i>Examined by</i>		Cavities <i>2.7.8.9.10</i>	
	<i>Jan 2</i>		<i>4</i>	<i>13.14</i>																	<i>C.P. Davison</i>	<i>7</i>	Extractions	
	<i>Jan 2</i>																				<i>C.P. Davison</i>	<i>7</i>	<i>Incompleted</i>	

INSTRUCTIONS

1. On examination the student is to be asked the following questions:
 - a. What is the purpose of the experiment?
 - b. What is the theory of the experiment?
 - c. What is the apparatus used?
 - d. How is the experiment carried out?
 - e. What are the results of the experiment?
 - f. What is the conclusion of the experiment?
2. The student is to be asked to write a report on the experiment. The report should be written in the student's own words and should be clear and concise. It should include the following parts:
 - a. Title
 - b. Aim
 - c. Theory
 - d. Apparatus
 - e. Procedure
 - f. Results
 - g. Conclusion

REVISION QUESTIONS
 REVISION QUESTIONS

REVISION QUESTIONS
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REVISION QUESTIONS
 REVISION QUESTIONS

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 Snell Christian name Fredrick William
 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)..... Harry Albert Co. T.B.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 8th day of Aug 1918, by the undersigned medical board sitting at Batter Point Camp Sh John X B.

5. Age as stated 19 Years..... Months.....
 6. Apparent age 19 Years..... Months.....
 7. Height 5 Feet 7 1/2 Inches.....
 8. Weight 145 Pounds.....
 9. Chest measurement { Minimum 32 Ins. Maximum 35 Ins. }
 10. Complexion fair { Eyes brown Hair fair }
 11. Physical development good { Good Fair Poor }
 12. Smallpox marks nil
 13. Number of vaccination marks { Right arm nil Left arm 3 }
 14. When vaccinated last shoulder
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease nil

16. Slight defects but not sufficient to cause rejection nil
 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 P.D. 20/20
 (b) Hearing. R. normal
B. J. Dask President.
 _____ Member. _____ Member.

Signature of Man Fred W. Snell

VACCINATIONS			ANTI-TYPHOID INOCULATIONS, ETC.		
Date	Result		Date	Result	
<u>8.8.18</u>		<u>B. J. Dask Capt M.O.</u>	<u>8.8.18</u>		<u>B. J. Dask Capt M.O.</u>
		M.O.	<u>27.8.18</u>		<u>B. J. Dask Capt M.O.</u>
		M.O.	<u>3.8.18</u>		<u>B. J. Dask M.O.</u>

Joined _____ day of _____ 1918 at _____

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>#9 OVERSEAS SIEGE BATTERY, C. E. F.</u>	<u>2100733</u>		<u>8-8-18</u>
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2100733 (Rank) Gunner

Name (in full) Frederick William Snell enlisted in
the #9 Siege Battery

CANADIAN EXPEDITIONARY FORCE at St. John, N. B. on the 8th
day of August, 1918 19

HE served in Canada

and is now discharged from the service by reason of Demobilization, R. O. #1328

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

Age 19 yrs. 4 mos.

Height 5 ft. 7 1/2 in.

Complexion Fair

Eyes Brown

Hair Bair

Marks or Scars

NIL

Fred. W. Snell

Signature of Soldier

G. O. Betman

Issuing Officer
Major a/C.R.C.A. MD 7

Rank

Date of Discharge January 6, 1919

Appointment

Signed at St. John, N. B. this 6th day of January, 1919

in Military District No. 7

File Reference No. R. O. #1328, d/18-11-18



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.

This space to be for numbers.

22

Proceedings on Discharge.

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

No.	2100733
Rank	Gunner
Surname	Snell
Christian name	Frederick William
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	#7 Artillery Depot, R.C.G.A.
Date of discharge	January 6, 1919
Place of discharge	Partridge Island, St. John, N. B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age..... 19 years..... 4 months.	Descriptive marks
Height..... 5 feet..... 7 1/2 inches.	
Complexion Fair	NIL
Eyes Brown	
Hair Fair	
Trade Coxst Acct.	
Intended place of residence } Hampton, N. B.	
(To be given as fully as practicable.)	

2. The above-named man is discharged in consequence of
 Demobilization, Routine Order #1323, Dated 18-11-18

Authority for discharge.....

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) St. John, N. B. Fred. W. Snell (Signature of Soldier.)

(Date) January 6, 1919 [Signature] (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.

Fred. W. Snell (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.

(Signature).....

(Date) January 6, 1919

[Signature]
Major
C. R. C. A. No. 7 Artillery Depot.

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.

No Reservations

Fred W. Shell
..... Soldier

WITNESS:

[Signature]

Enlisted in #9 Siege Battery, C.E.F., August 8, 1918

Transferred to #7 Artillery Depot, R.C.G.A. October 8, 1918

Discharged from #7 Artillery Depot, R.C.G.A. January 6, 1919

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263 Squadron } Battery } Conduct Sheet, " B. 263a Company } 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.
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Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

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

John W. Smith
(Signature of Soldier)

Statement of Service.

Confirmation of Discharge.

*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.*