#9 OVERSEAS SIEGE BATTERY, C. E. F. TRIPLICATE.

ATTESTATION PAPER.

No. 2100611

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Snodgrass
1a. What are your Christian names?	Russell Lee
1b. What is your present address?	Young's Cove Road, Queens Co., NB
2. In what Town, Township or Parish, and in what Country were you born?	Young's Cove Road, Queens Co. NB
3. What is the name of your next-of kin?	Annie Snodgrass
4. What is the address of your next-of-kin?	Young's Cove Road, Queens Co., NB
4a. What is the relationship of your next-of-kin?	mother
5. What is the date of your birth?	August 4, 1898
6. What is your Trade or Calling?	student
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?	no
10. Have you ever served in any Military Force? (If so, state particulars of former Service.)	no R. L. S.
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Russell Lee Snodgrass, 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.

Russell Lee Snodgrass (Signature of Recruit)

Date 25-4-18 191 . R. B. Belmore (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Russell Lee Snodgrass, 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.

Russell Lee Snodgrass (Signature of Recruit)

Date 25-4-18 191 . R. B. Belmore (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 West St JohnNB this 25th day of April 1918 191 .

R. B. Belmore (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of Russell Lee Snodgrass on Enlistment.

Apparent Age 19 years 8 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 10½ ins.
Chest measurement. Girth when fully expanded	36 ins.
Chest measurement. Range of expansion	3 ins.
Complexion	fair
Eyes	Hazel
Hair	medium
Religious denominations. Church of England	
Presbyterian	
Methodist	yes
Baptist or Congregationalist	
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).

NIL Vision RD20 LD20

Hearing normal both ears

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 25-4-18 191 .

Place St. John W NB

J K Wilson
Capt Ame
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.

Russell Lee Snodgrass 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.

P. W. Wetmore Major (Signature of Officer)

O. C. #9 Overseas Siege Battery, C. E. F.

Date 25-4-18 191 .

2RMc 14-4-19

REGIMENTAL DOCUMENTS

NAME Snodgrass Russel Lee REGT. NO. 2/00611 UNIT 9th S Battg H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2/	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	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)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
	MEDICAL EXAMINATION (M.F.W. 129)					
	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)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
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)			32827		
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M.F.W. 192					
1	D.M.S. 1375					
1	M.F.W. 2572					
1	C.A.D.C. 5009A					
1	R129					

W. 2589
100M-11-18
1772-39-1377

SURNAME. Snodgrass,

CHRISTIAN NAMES Russell, Lee

REGL. No. 2100611 RANK Gnr.

UNIT 9th. Siege Bty

FORMER CORPS Nil

CARD NO. 7

S.O.S. Dis. 14-3-19

Demob. ~~FOLL.~~

D.O. 77 of 18-3-19. 7DD

T. O. S. Apr. 25. 1918

D.O. Part II No 115

NEXT OF KIN.

NAMES IN FULL Snodgrass, Mrs. Annie

RELATIONSHIP TO SOLDIER Mother

ADDRESS Young's Cove Rd., Queens Co., N.B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Young's Cove, N.B. DATE Aug. 4th 1898

PLACE OF ATTESTATION West St. John, N.B. DATE Apr. 25th 1918

O/S 3/8/18 1357/3

R/C. 25-2-19 270/78. (Sig)

L. L. 25989. M. & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Number 2100611 Rank Gnr

Surname SNOWGRASS.

Christian Name Russell Lee

Units C Ga. Theatre of War Eng.

Date of Service 15-8-18.

Remarks

Latest Address Nonny's Cove
N.B.

Roll No. Ca Page 2218

200-2-21.M.

Repd

DESP. FEB 21
REGN. No. 10549

DESP. OCT 30 1922
REGN. No. 17853

No. 2100611 Rank Ste. Name Snodgrass R. L.

T.O.S. 25/4/18 (D.O.105) of 20/1/18 Unit 9th Overseas Siege Battery

M.D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Apr. 25	Apr 30	N.		
May		N.		
June		N.		

Local

*Name Snodgrass Russell Lee Rank Sig Regtl. No. 2100611

Fyle Depot

Original unit G.S.B. Present unit D.A.C.O.D. M. or S. Age 19 Religion Meth Ref. H.Q.

Port, ship and date of arrival Halifax Emp of Britain 25-2-19

Next of kin Mother Minnie Snodgrass Young's Cove Rd. Lawrencetown

Address on leave as above

Address on discharge as above

Transportation issued Yes / No Date Character on discharge

Previous occupation Student Date and place of enlistment West St John 25-4-18

Diagnosis Date of Medical Boards

Date. T.O.S.	Remarks.	Pt. 2 Order No.
17-2-19	Dispersal Station 25-2-19, Leave 26-2-19 to 12-3-19	#60
14-3-19	Discharged H.M.S.	#77

*—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

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 2100611 (Rank) Sig.

Name (in full) Snodgrass, Russel Lee enlisted in

the 9th Siege Bty, O.S.

CANADIAN EXPEDITIONARY FORCE at West St. John, N.B. on the 25

day of April 1918

HE served in Canada England

and is now discharged from the service by reason of Demobilization

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

Age 19 yrs. 8 mths

Height 5' 10½"

Complexion Fair

Eyes Hazel

Hair Medium

Marks or Scars Nil

R. L. Snodgrass
Signature of Soldier

R A Major Capt. O. C.
Issuing Officer

DISPERSAL STATION, ST. JOHN, N. B. FOR
O. C. DISTRICT DEPOT #7
Rank

Date of Discharge 14-3-19

Appointment

Signed at St John NB this 14th day of March 1919

in Military District No. 7

File Reference No.

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.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

Form R 122.
2353—100M—9-12-16.

CR

Rank | Name SNODGRASS, Russell Lee. | Reg'l No. 2100611

Unit 111, Dft. No 9 Sge. Bty | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment St. John, N.B. Apr. 25th. 1918. Place of Birth Young's Cove Rd., N.B.

Name and Address, Next-of-Kin Annie Snodgrass,
Young's Cove Road, Queen's Co., N.B. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

1591

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.
Res Bde					
		Arrived in England.		16.8.18 S.S IXION	
1. 2. 19	JM.D.C. WING KINMEL PK.	P. O. S. pending return to Canada	Sig Rhyl.	31. 1. 19	Pt. II O. 32 & Res. Bde 31 d/31.1.19
18.2.19	"	S.O.S. to Canada	" "	17.2.19	" 49

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.					

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9:0.

Casualty Form—Active Service.

Unit, Regiment or Corps 9# S. B.

Regimental No. 2100611 Rank Sig C. E. F. Name Snodgrass Russell Lee

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

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				
17-2-19.	G.M.F.C.	TAKEN ON STRENGTH PART II. ORDER No. 66 [signature] Lieut. & Asst. Adjt. For O. C. District Depot No. 7.	District Depot No. 7. Fton N.B.		
14-3-19.		STRUCK OFF STRENGTH PART II. ORDER No. 77 [signature] Lieut. & Asst. Adjt. For O. C. District Depot No. 7.	District Depot No. 7. Fton N.B.		

(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				

#9 OVERSEAS SIEGE BATTERY, C.E.F.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps #9 OVERSEAS SIEGE BATTERY, C. E. F.

Regimental No. 2100611 Rank ~~Gunner~~ Private C. E. F. Name ~~Russell Lee Snodgrass~~

Enlisted (a) 25-4-18 Terms of Service (a) ~~D.D.~~ Duration of War & 6 months Service reckons from (a) 25-4-18

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) student

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				
		Embarked	Canada	4-8-18	H. M. T.
		Disembarked	England	15-8-18	"NELLORE"
20-8-18	Res.Bde. C.F.A.	T. O. S. from Canada	Witley	15-8-18	B.O. Pt.II 232
		On Command Frensham Pond.			
1-10-18	Res Bde C.F.A.	Off Comm. Frensham Pond.	Witley	30-9-18	B.O. Pt.11 274.
31-1-19	Res. Bde. C.F.A.	S.O.S. to M.D. 7 Wing Concentration Camp Rhyl.	Bordon	31-1-19	B.O. Pt II 31

P. Gray Lieutenant,
for O.C. Reserve Brigade, C.F.A.

(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				
1-2-19	CRas	Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. 32. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No. ~~39~~ 49			
17-2-19	MD7	J Stuart Lieut			
	For O/	Commanding MD7 Wing, Kinmel Park Camp.			

H.M.T. EMPRESS OF BRITAIN.

SAILED FEB 17 1919 ARRIVED FEB 25 1919

TOS D. D. NO 7. F'TON N. B

FEB 17 1919

25' 2' 19 OVERSEAS

SOS D. D. NO 7 ST JOHN N. B.

S. A. Burdon Lt

DISPERSAL STATION, ST. JOHN, N. B.
FOR O. C., DISTRICT DEPOT No. 7

ORIGINAL.

#9 OVERSEAS SIEGE BATTERY, C. E. F.

MILITARY SERVICE ACT, 1917.

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 Snodgrass Christian name Russell Lee
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule N.A
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Youngs Cove Road Queens Co NB

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 25 day of April 1918 by the undersigned medical board sitting at West St John NB

5. Age as stated 19 Years 8 Months.
6. Apparent age 19 Years 8 Months
7. Height 5 Feet 10 1/2 Inches.
8. Weight 150 Pounds.
9. Chest measurement { Minimum 33 Ins. / Maximum 36 Ins.
10. Complexion Fair { Eyes Hazel / Hair Medium
11. Physical development Good { Good / Fair / Poor
12. Smallpox marks Nil
13. Number of vaccination marks { Right arm — / Left arm 2
14. When vaccinated last 1917
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 R. D20 L. D20
(b) Hearing. R. Normal Yourself

J R Walker President.

Member. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
10-5-18	good	J R Walker M.O.	1/5/18		J R Walker M.O.
		M.O.	25.6.18		B J Dash. M.O.
		M.O.	3.7.18		B J Dash. M.O.

Joined 25 day of April 1918 at ST. JOHN, N. B.

#9 OVERSEAS SIEGE BATTERY, C. E. F.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to		2100611		25-4-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

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.

M. F. B. 313.
300M.—10-17.
1772-39-439.

Signature of Man Russell L. Snodgrass

Surname Snodgrass Christian Name Russell Lee

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				

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: Big Name: Russell Lee. Surname: Snodgrass

Unit or Corps: C.F.A. (If a soldier) Regtl. No. 2100611

Born at: Youngs Cove, N.B. on, date: 4-8-98

Signature (for identification): R L Snodgrass.

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

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

Weight 165 lbs.

Height 5 ft. 11 ins.

Moderate Physique

2. NUTRITION AND DIATHESIS? fairly 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? Neg

4. RESPIRATORY SYSTEM. Neg

5. HEART? Neg

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 90 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? no

7. DIGESTIVE SYSTEM? Neg

8. GENITO-URINARY SYSTEM? Neg

Urinalysis—S.G.? 1020 Reaction? Acid Albumen? Neg Sugar? Neg

9. SKIN, MIDDLE EAR, EYE or any other part? Neg

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

STANDING MEDICAL BOARDS M. D. No. 7. MAR 12 1919 ST. JOHN. N. B.

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

Examined at: Bordon Signed: J Lyon May M.O.

Date: 30-1-19 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.*

~~St John N.B. 13.3.19 Correct A.L. Jewell Capt Camel~~

Dental Examination on Discharge

File No.....

Rank Sig. Name Snodgrass, R. L. Regt. No. 2100611.

Date of enlistment May 25th 1918. Service, where ~~France~~ England

If any dental treatment in army, where Canada.

Discharge examination at St John. N.B. Date 13-3-19.

Treatment to be received Fillings. 4-12-30- 10-20.

At St John. N.B. Examined by K. E. Williamson

Above treatment completed by..... Date.....

Completed History Sheet File No.....

M. F. W. 2572
100m-8-18
1772-39-1359

OTHER SIDE FOR REMARKS

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 1

NAME OF SOLDIER Snodgrass R.L.

REGIMENT 9th Siege

RANK Gm

No. 2100611

M.F.B. 465.
50M.—2-18.
1772-39-950.

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	1918			1/8							4/3 13 18 31					1/10				A H LeBlanc		Op 8. 1. 2. 14. 15. 19. 31. 4
	June 20	8/																		Lieut.	1	Ex 31
	June 20	1-2(2) 14-15 19-31 4								1/8	1/31	Prophylaxis, Local an.								A. H. LeBlanc	7	Completed.

1

DENTAL HISTORY SHEET

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

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 210611 Rank Gnr. Name Snodgrass R. (Surname first)

Unit ..... who was* Disc.

On 14-3-19 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-3-19 to 14-3-19 191... the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month	3 5 78	
Regimental Pay 14 days at $ 1 00 c.		14 00
Field Allowance 14 days at $ 10 c.		1 40
Separation Allowance		
Clothing Allowance		35 00
Post Discharge Pay		91 42
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges C. W. C.	1 04	
Balance on transfer or on discharge, cheque No. 11554	105 00	
Total	141 82	141 82

*Give particulars.

A monthly stoppage of $ 20 00 (†) has been paid (‡) been paid on account of Assigned Pay for the month of Feb. 191... and Separation Allce. for month of ...191... (to) Assignee Mrs. A. Snodgrass

(Address) Youngs Cove Rd. Queens 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 .....

(2) Separation Allowance, entitled or not nil (3) Reason for discharge Demob.

(4) Authority for discharge or ~~transfer~~ A.O. 20 #7

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 14-3-19

Place St. John

C. R. Burnett Captain
Paymaster District Depot No. 7. 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 purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. 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 Certificate 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.		
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

AUTHORITY
A.P. NOM. ROLL

ASSIGNED PAY * ~~ENGLAND OR~~ CANADA.

EFFECTIVE DATE:- 1/8/18 1/1/19

AMOUNT:- 20⁰⁰

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- SNODGRASS, Russell Lee

NUMBER:- 2100 611

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.

Mrs Annie Snodgrass, mother
Young Cove Road
Queens Co. N.B.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.C. from Canada	16/8/18	Gnr

UNIT AND TRANSFERS

ORIGINAL UNIT:- 111, 9th Sqn Bty

DATE ACCOUNT FIRST OPENED:- 16/8/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			R.C.A.

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
~~4/12~~		~~Barrack Damages~~	~~30~~				
~~28/11/18~~	~~2047~~	~~Bord.~~	~~4 87~~				
~~24/9/19~~		~~Comm'd Paid Trust Comm'd~~	~~4 87~~				
~~13/1~~	~~2600~~	~~Bord~~	~~4 87~~				
~~23/1~~	~~3309~~	~~"~~	~~5 11~~				
~~26/1~~	~~3516~~	~~"~~	~~19 47~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.C. from Canada	1 ⁰⁰	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: 39 49 Dis to Can. 3/1/19 AR 2366 Bordon 28/1/19 Bordon M.D. 4 L.S.C. Bal Debit 5-48

MONTH	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
15/8/18	Bal. from Canada								31 80		
16-31/8/18	Gnr pay 16 days	17 60		AR 3901 22/8/18 Frenchan A.P.	4 87			20			
									24 23		
		17 60			4 87			20			
Sept	"	33 -		A.P.				20	37 23		
				AR 6190 Frenchan 18/9	29 20				8 03		a/c allowed 28/9
		33 -			29 20			20 -			
Oct	Gpay.	34 10		A.P.				20	22 13		
				AR 5357. Cha 9/10	4 99						
				6080 — 30/10.	4 87				12 27		
		34 10			9 86			20			
4/00	"	33 -		CAP				20			
Dec		34 10		AR 300 CRA 13/11/18	2 43						
				CAP Dec				20			
				AR. 1072 CRA 29.11	2 43						
				AR 1092 " 19/12	14 60						
Jan		34 10		CAP				20	34 01		
		101 20			19 46			60			
				AR. 2600 CRA 13.1.19	4 87				29 14		
				AR 2047 " 30/1	4 87				24 28		
				A/c Mrs Trust Comm'd Bulk	4 87						
				AR 3309 CRA 23.1	5 11						
				AR 3516 " 23.1	19 47						
				AR 1303. K/L 14/1/19 Endorsed.	2 43				7 61		
					41 62						
Sept 1919				8/12/18. Barrack Damages	— 30				7 91		
	Dis to Can	33/2/19		L 24 CAR 20	— 30						

NUMBER RANK NAME

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

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. 2100611

Rank Sig.

Surname Snodgrass

Christian name Russel Lee

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

Corps (Squadron, Battery or Company) D.D. 7

Date of discharge 14/3/19

Place of discharge St. John, N.B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	19 years 8 months.	
Height	5 feet 10½" inches.	
Complexion	Fair	
Eyes	Hazel	
Hair	Medium	Nil
Trade	Student	
Intended place of residence (To be given as fully as practicable.)	Young's Cove	

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

Auth. R.O. 1420 Para.1. S.S. "C" D/ 12-12-18

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)..... St. John, N.B. .....

(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. T. P. Snodgrass *(Signature of Soldier.)*

(Date)..... 14/3/19 E. LeBlanc Lt. *(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)..... St. John, N.B.

(Date)..... 14/3/19

(Signature) Ramaj. Coff O. C.
DISPERSAL STATION, ST. JOHN, N. B. FOR
O. C. DISTRICT DEPOT #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.)

I have no reservations to make

A. L. Goodgrass

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.

C.A.D.C. 5009A

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

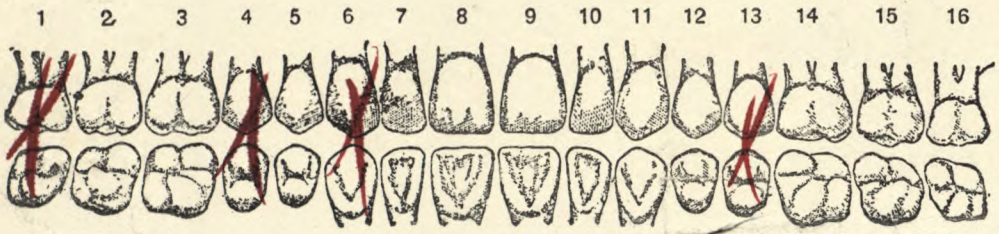
DENTAL CERTIFICATE FOR DEMOBILIZATION

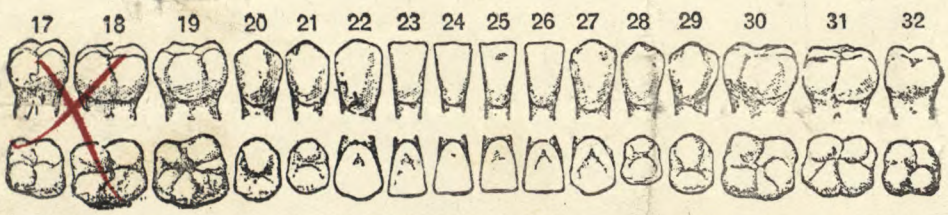
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) SNODGRASS. R. L.

REGIMENT C. R. A. RANK SIG. No. 2100611

Date of Examination in England JAN 30/19 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 H. 12. 30 16 12 20 X
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

K. G. Williamson
R. L. Snodgrass

HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

Signature of Dental Officer Wt. Rutherford Capt.

Date of Enlistment 25-4-18.

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch S-16697. Aug 1-18.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20.			

PARTICULARS OF SEPARATION ALLOWANCE

Env

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion #9 Overseas Siege Bttry. C.E.F. Dft 11

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.ANNIE SNODGRASS,
YOUNG'S COVE RD.,
QUEENS CO.N.B. 20 20.00
% 2100611 GNR RUSSELL LEE SNODGRASS
TWENTY DOLLARS

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Aug	Y 36855		20	20	✓
Sept	F 34975		20	20	✓
Oct	D 41935		20	20	
Nov	F 50110		20	20	
Dec	Q 66399		20	20	
Jany	L 71820		20	20	✓
Feb	L 81517		20	20	✓
MAR			140	140	

17008. R-11

REMARKS

A/c Closed 28-2-19
Ret'd per Emp. of Britain
Date 25-2-19 M.F.W.187 MD 7
Closed 3-3-19 [illegible]

MRO 58695 Destroy Ren 3-3-19 O.K. 3/3/19 F.L.

AUTHORITY FOR NEW ACC'T. NK MD 7-B-3 Balcrossley 27-8-18.

M. F. W. 128.
400M.—9-17—1772 39-1141
L. L. 22320—M. & D. 7993.

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

M. F. W. 128.
400M.—4-17—1772 39-1141
L. L. 22320—M. & D. 7993.

M.D. No. 7

M. OR S.

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

Youngs Cove Road, Queens Co. N.B.

AUDITOR | PAYMASTER 2

REGT. No. 2100611 RANK Gnr. NAME (IN FULL) Snodgrass, R. L. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 9th S.B. — IF IN P.F. WHAT UNIT? — TRANSFERRED TO — DATE — AUTHORITY "Empress of Britain" 25-2-19

PLACE OF ATTESTATION — DATE OF ATTESTATION 25/4/18 — TRANSFERRED TO — DATE — AUTHORITY 2545

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE No 7 D.D. 1-3-19.

PAYABLE TO Mrs A. Snodgrass, Mother — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Youngs Cove Rd., Queens Co, N.B.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE St. John — DATE 14-3-19 — REASON Demob. — AUTHORITY O.C. 77. — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																															5	48					T.S.D.O. 60
Jan.																																					Dft Bal Emg & PC 31-1-19
Feb.	28	1.10	30	80	11	20			42	60	Nominal		Roll		Clerk		2	43	4	87	5 00 / 40	00							20	00			72	30	35	78			Subs 26/2/19 - 12/3/19 100 60
Mar.	14	1.10	15	40	35	00			50	40	37	14					105	00											1	04			10 6 / 183	04 / 92	91	42			To S.S.B.
			Dft Sls								WAR SERVICE GRATUITY																										Dft Sls			
92 days @ Nine			210						210																										9	12			Soldier 1st pay to above
																																			48	58	118	58	
																																					70 00	Bk #37293 - 15-4-19
																																			70		—		Bk 398860 ARO 1.11.19
																																					Non-Effective	
B.			210 —						210 —																										210	00			

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL 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.	