

# • TRIPLICATE

## ATTESTATION PAPER.

No. 3430\$5

Folio.

### CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

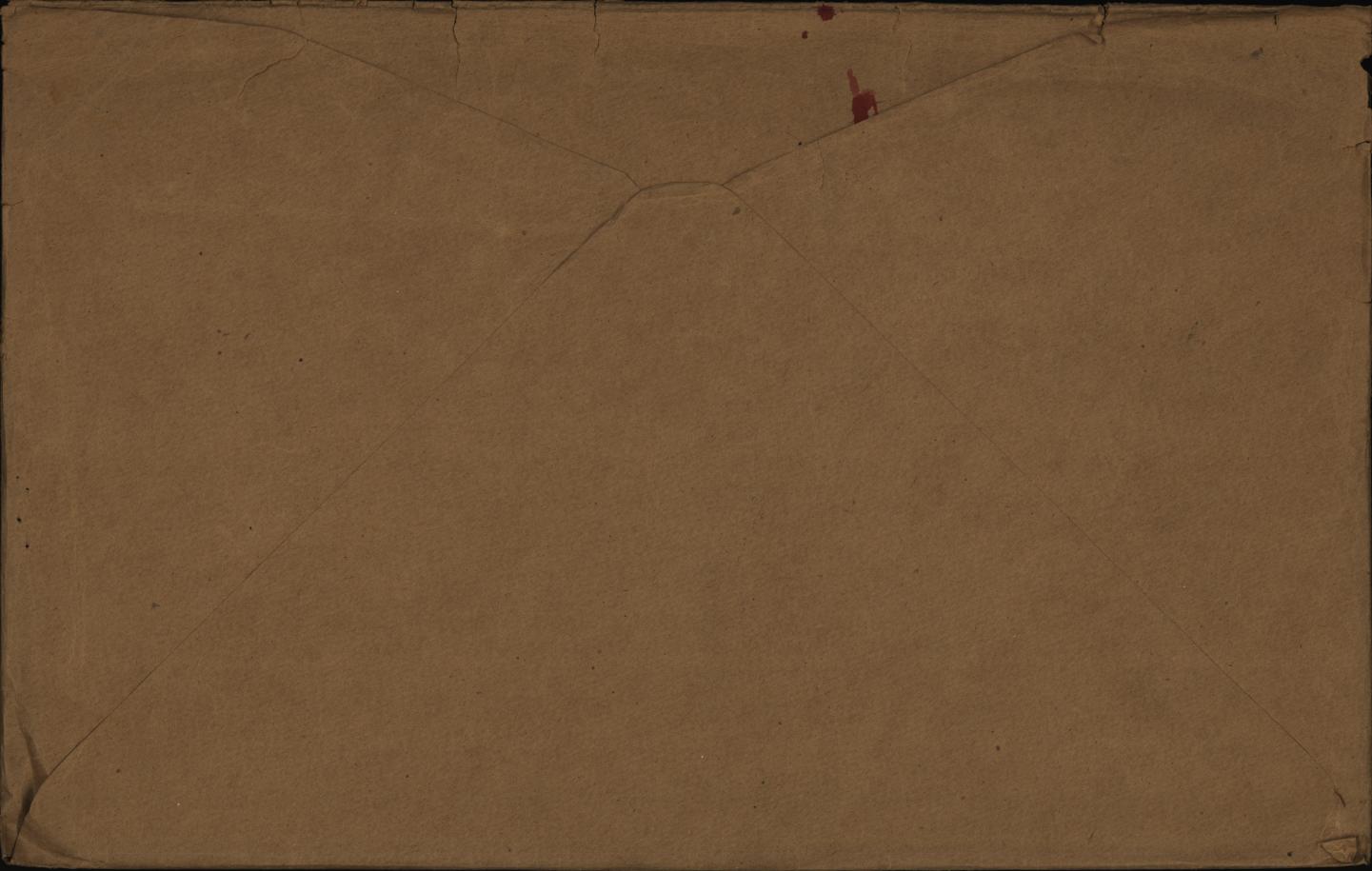
QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Taylor.
1a. What are your Christian names?	Gilbert Sinclair.
1b. What is your present address?	90 Powell Ave. Ottewar Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Ottawa, Ont., Can.
3. What is the name of your next-of kin?	Mrs. Mary Taylor.
4. What is the address of your next-of-kin?	90 Powell Ave. Ottawa, Ont.
4a. What is the relationship of your next-of-kin?.	Mother.
5. What is the date of your birth?	Aug. 15th.,1898.
6. What is your Trade or Calling?	Clerk.
7. Are you married?	No.
8. Are you willing to be vaccinated or revaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
O. Have you ever served in any Military Force?  If so, state particulars of former Service.	No.
1. Do you understand the nature and terms of your engagement?	Yes
2. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes
3. Have you ever been discharged from any Branch	Мо
of His Majesty's Forces as medically unfit? 4. If so, what was the nature of the disability?	110
5. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
6. If so, what was the reason?	enson in the composition of the
by me now made, and I hereby engage and agree of corce, and to be attached to any arm of the service existing between Great Britain and Germany shoul after the termination of that war provided His Majlischarged.	re true, and that I am willing to fulfil the engagements to serve in the Canadian Over-Seas Expeditionary therein, for the term of one year, or during the war now d that war last longer than one year, and for six months jesty should so long require my services, or until legally
Date May 4 th 191 7	7. Cindorach(Signature of Witness)
OATH TO BE TAKEN BY	Y MAN ON ATTESTATION.
n duty bound honestly and faithfully defend His M Dignity, against all enemies, and will observe and ound of all the Generals and Officers set over me.	
	(Signature of Recruit)
Date May 4 th., 1917. Ko	(Signature of Recruit)
CERTIFICATE	OF MAGISTRATE.
The Poornit above named was continued by	ne that if he made any false answer to any of the above
The above questions were then read to the R I have taken care that he understands each cluly entered as replied to, and the said Recruit ha	ided in the Army Act. ecruit in my presence. question, and that his answer to each question has been as made and signed the declaration and taken the oath
The above questions were then read to the R I have taken care that he understands each cluly entered as replied to, and the said Recruit ha	ided in the Army Act. ecruit in my presence. question, and that his answer to each question has been

-	determined according to the instructions given in the Regu-	peculiarities or previous disease.
lat	determined according to the instructions given in the Reguions for Army Medical Services.)	(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).
Heig	ht	A second units and the pare self it st
		The state of the s
st . ire-	Girth when fully expanded. 36 ins.	of the dangless in how the profit server at the
Chest measure- ment.	Range of expansionins.	the common and the state of the
Com	plexion	
	Black	Mone
		Cambridge Service Serv
Hair	Brown	The state of the s
	Church of EnglandX	The state of the s
	Presbyterian	The state of the s
ions.	Methodist	
Religious denominations.	Baptist or Congregationalist	
Rel	Roman Catholic.	The first of the Community of the Commun
de	Jewish	dmans reaction begins followed the control of the
	Other denominations(Denomination to be stated.)	f thinkness is come alress to a little for the
free Date	He can see at the required distance with eit use of his joints and limbs, and he declares that  I consider him*	her eye; his heart and lungs are healthy; he has the he is not subject to fits of any description.  anadian Over-Seas Expeditionary Force.
-	Gilbert S.Taylor.  ected by me this day, and his Name, Age, Date recorded, I certify that I am satisfied with the	Can (Signature of Officer)
Date	May 4th 191 7. C. 72nd	I (Queen's) Battery, C.F.A., C.E.F.

## REGIMENTAL DOCUMENTS 15/4/ NAME TOYLOR GILBIRT SINCLAIRREGT. NO. 343055 UNIT 38 By CHA. Q. FILE NO. CONTENTS M. F. W. 2505 DATE RECEIVED TO WHOM FORWARDED DATE FORWARDED NON-EFFECTIVE BY REFERENCE ATTESTATION PAPER (M.F.W. 23, 133, or 51) DEATH CASUALTY FORM (M.F.W. 54 or A.F.B. 103) Category TRAINING HISTORY SHEET (M.F.W. 113) 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) Sunt 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 LAST PAY CERTIFICATE (M.F.W. 44) PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268) PARTICULARS OF CHARACTER (A,F.W. 3226) COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) Mise

W. 2589 100M-11-18



SURNAME. Taylor 4:	3 CARD NO.
REGL. NO. 343055. RANK Gr-LOW.	SOS. 29/3/19. Jend
REGL. NO. 343055. RANK Gr- LOW.	00.7/4/19" 48%
UNIT 72 nd. Bty. C. J.a.	
FORMER CORPS hel.	
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Yaylor mrs. mary	
RELATIONSHIP TO SOLDIER mother	
ADDRESS 90 Powell are Ottawa	
Ont.	
COUNTRY OF BIRTH Canada, Ottawa OntoATE	aug. 15th 1898
PLACE OF ATTESTATION Ottawa Ont. DATE	may 4th. 1917
0/8.5-2-18: 1101 P/e.27/3/19	9. 291 9.
L. L. 10437. M. & D. 7253. M. F. W. 22. 100m1	23 -

TRADE OR CALLING Clerk. RELIGION Church of England DESCRIPTION. APPARENT AGE | 9 YEARS | 6 MONTHS HEIGHT 5 FEET 10 INCHES CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES COMPLEXION Medium EYES Black HAIR Brown DISTINGUISHING MARKS Wil

Present address 90 Powell aux. Foronto ont.

MEDICAL EXAMINATIO PLACE Ottawa Ont. DATE apr. 27th. 1917.

343055 Theatre of War... Date of Service 18-9-18 Remarks Latest Address..... 200m.-2-21.M

Rank

Surname of Respective Surname of Surname of

### PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

#### INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1)	Name of Overseas Unit wh	nich Soldier joins	72nd (Q1	een's	) Battery, C.E.	F
(2)	Regimental Number	343055				
(3)	Full Name of Soldier	Taylor, Gi	lbert Sincle	air		
(4)	Place of Birth	Ottawa, On			louge o	
(5)	Are you married, or not?	No		3		
(6)	If married, state, (a) Full name of your	wife		n vocasi		
	(b) Present Postal Add	dress	<b></b> -			
(7)	Are you a widower?	No				
(8)	Have you any children?					
	Also their names and a					***************************************
	<u> </u>		girgan, a san		A	
				3		The state of the s
					and the second	-

(9) Is your Father alive?
If so, state name and address Robert Taylor, 90 Powell Ave., Ottawa.
(10) Is your Mother alive?
If so, state name and addressMrsMaryTaylor90. Powell Ave
Ottawa, Ont.
(11) If your Mother is a widow
Are you her sole support, or not?
(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.
A Calaboratification, could be a constant of the constant of t
(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.
15) Are you insured?
If so, in what Company?
Have you made arrangements for payment of your Insurance premium
• If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.
Relau Hamin Major
Date Mary 54th 1017
DateMay 5th,1917

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

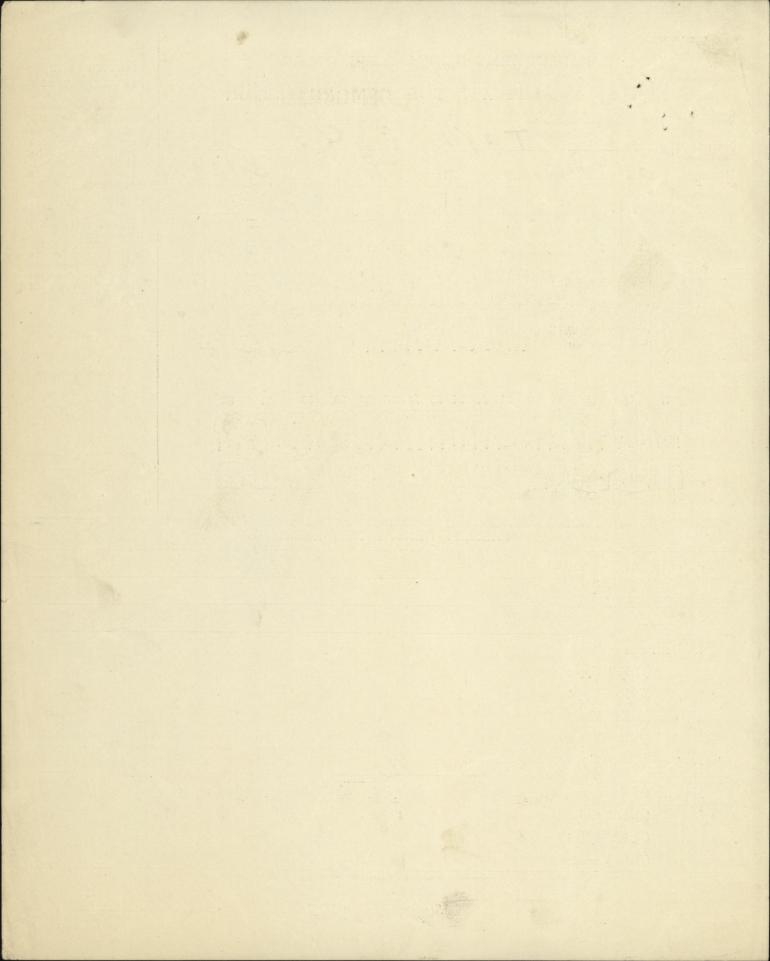
### CANADIAN ARMY DENTAL CORPS, O.M.F.C.

## DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

This form will be made out for each individual at the

REGIMENT 38 1214	RANK 4 -	No. 31/303	zation in England or France.
Date of Examination in England	Date of Examination	on in France	2. Figures as per chart will be used to designate teeth
17 18 19 20 21 22 00000000000000000000000000000000000	7 8 9 10 11 12 10000 70000 23 24 25 26 27 28 29 10000	13 14 15 16  00000000000000000000000000000000000	concerned.  3. In reference to Partial Dentures the numbers of teeth thereon will be stated.
	9000088	<b>BBB</b>	
PR	RESENT DENTAL REQU	UIREMENTS	
1. Fillings	ger galery and a second		
2. Extractions			
3. Crowns			
4. Dentures  (a) Full Upper  (b) Part Upper  (c) Full Lower  (d) Part Lower			
Has he ever refused Dental Tr	REATMENT? 700		
Has he ever received Dental Tr (a) In Canada (b) In England (c) In France		" where applicable to any or al	l of a, b or c.)
	Signature of Dental	Officer DOSTON	arlatt
			Many



# MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No	343055 Rank Driver Surname TAYLOR
	Given name in full)  4 ilbert Sinclair
Uı	nit or Corps 38 the Battlery. Birthplace Ottawa, Out
	(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).
1.	GENERAL DESCRIPTION:
0.1	Physique
· K	Nutrition State Identification marks, scars, or deformation.  Pulse S. D. A. J. Market (Give cause and date of origin).  Condition of arteries State
	Hearing (conversational voice) Rt. W.ft. Slue Scar on back lwrist- 9 mos 40-box
Op	inion as to general health and physical condition
2.	Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)  Nervous System
3.	If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date

iption of the present condition.

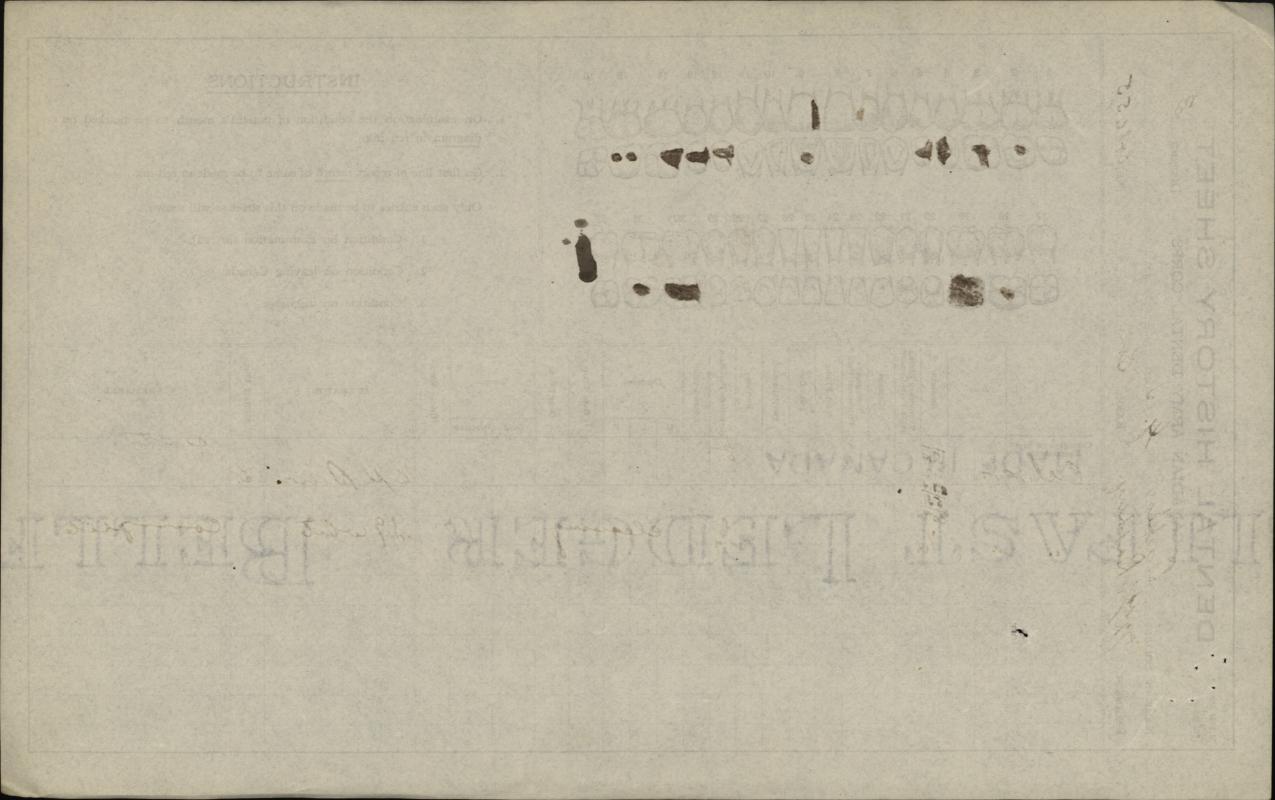
# **EXAMINATIONS.**

	FOR USE OVERSEAS—
Examined at	ulfold (Overseas) 13 / 19 Signed Monnell Lant M.O
I hereby cert condition; that I ing any other affe	ify that I have read, or have heard read, the above description of my present find it correctly stated; and that I have not withheld any information concernctions from which I suffered, either prior to or during service.  Signature
(II	not satisfied, M.F.B. 227 will be completed by Medical Board.)
(II)	not satisfied, M.F.B. 227 will be completed by Medical Board.)
A-193	FOR USE IN CANADA—
CHIS SECTION	FOR USE IN CANADA—  (Canada)
CHIS SECTION	FOR USE IN CANADA—  (Canada)
Examined at  Date  I hereby cert condition; that I	FOR USE IN CANADA—  (Canada)
Examined at  Date  I hereby cert condition; that I	FOR USE IN CANADA—  (Canada)  Signed

[OVER]

No. 348055 1. On examination the condition of patient's mouth to be marked on diagram in red ink. DISTRICT. 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). CORPS 2. Condition on leaving Canada. 3. Condition on discharge. DENTAL Temporary Filling Work Military Dist. Root Filling Gold Clasp Gold Filling Crowns Dentures Date OPERATOR REMARKS ARMY L Gold Porcelain Condition on first Examination CANADIAN SOLDIER NAME

INSTRUCTIONS



Height 5 feet 10 Inches Weight 33 inches Weight 33 inches Maximum expansion 36 inches	A CONTRACTOR OF A CONTRACTOR O	(Taylor)	Chi			X	1 Su	6
City or Town Ottswa. Carleton.  Apparent age  Cignity  Carleton.  Apparent age  Clerk  Height  Birtholace  Clerk  Height  Chest measurement  Maximum expansion 36 inches  Chest measurement  Maximum expansion 36 inches  Chest measurement  Maximum expansion 36 inches  Physical development  Pair  Small-pox Marks  Number	(on 27 th.	day of April	191.7	App	proved by	n	morted	Cope
Apparent age  19  Trade or occupation  Clerk Height  5 feet 10 Inches Weight  135 Ibs. 33 inches Maximum expansion 36 inches Physical development  Fair Small-pox Marks  Number  Qhildhood & 1910.  (a) Marks indicating congential peculiarities or previous disease  Appendix scarr. 1906.  (b) Slight defects but not sufficient to cause rejection  Transferred on  Transferred to  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  RESULT  Passed as Medically Fit. Date or 2.24/7  Passed as Medically	(City or Toy	vn Ottawa.		10000	Rat	Char	Door	GRO
Trade or occupation  Clerk  Height 5 feet 10 Inches Weight 135 lbs.  Weight 33 inches  Waximum expansion 36 inches  Physical development Fair  Small-pox Marks  Nath Left Number 0 1 Date Result  Waximum expansion 36 inches  Waximum expansion 36 inches  Physical development Fair  Small-pox Marks  Nath Left Number 0 1 Date Result  Number 0 1 Date Result  ANTI-TERPOID INCULATIONS, ERC.  When Vaccinated last Childhood & 1910.  (a) Marks indicating congential peculiarities or previous disease  Appendix sour. 1906.  (b) Slight defects but not sufficient to cause rejection  Balisted on The Corp.  Int.  Ealisted on The Corp.  Int.  Corp.  REDICAL STATES  RESULT  PROCEEDED ASEA TO DEAL  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  Passed as Medically Fit. Date or 24/17  Passed as Medically Fit. Date or 24/1	thplace County	Carleto	on.		Fit or	12/200	vo vot Ple Kno Ch	
Transferred to  Clerk  Height 5 feet 10 Inches Weight 135 lbs.  Wight 135 lbs.  Wight 135 lbs.  Wight 135 lbs.  Wight 135 lbs.  Maximum expansion 36 inches  Physical development Fair  Small-pox Marks  Mall.  Left 1 Dato Result Vaccinations  Waccination Marks Number 0 1 Dato Result Vaccinations  When Vaccinated last Childhood & 1970. 7-7-77.  When Vaccination Marks Arm Right Left Result Anti-Tree-ond Incording Result An	parent age	19		Date	Unfit	000	Muy	Cap L
Weight 155 lbs. Chest measurement Minimum 33 inches Maximum expansion 36 inches Physical development Fair Small-pox Marks Vaccination Marks Vaccination Marks Vaccination Marks Vaccinated last Childhood & 1910.  When Vaccinated last Childhood & 1910.  (a) Marks indicating congential peculiarities or previous disease Appendix sonr. 1906.  (b) Slight defects but not sufficient to cause rejection 33-4-17.  Ball Anti-Tree-ond Issueutations, Erg.  101.  Enlisted on Anti-Tree-ond Issueutations, Erg.  102.  103.  104.  105.  10	ade or occupation	Clerk						M.C
Weight 135 lbs.  33 inches Maximum expansion 36 inches Maximum expansion 37 inches Maximum expansion 37 inches Maximum expansion 37 inches Max								M.C
Chest measurement {  Maximum expansion 36 inches    Physical development	eight	135	lbs.					
Cores  Hairs  Cores  Ealisted on Transferred to  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  Passed as Medically Fit. Date of 2447	( Mir	nimum 33	inches				Part of the same o	M.C
Vaccination Marks  Vaccination Marks  Number	est measurement { Ma	ximum expansion 36	6 inches				*	M.C
Vaccination Marks  Vaccination Marks  Number	ysical development	Fair						M.(
Vaccination Marks  Arm Right Left Number O 11  When Vaccinated last Childhood & 1970. 7-7/7.  When Vaccinated last Childhood & 1970. 7-7/7.  (a) Marks indicating congential peculiarities or previous disease  Appendix scar. 1906.  (b) Slight defects but not sufficient to cause rejection  33-4-77.  When Vaccinated last Childhood & 1970. 7-7/7.  Anti-Transferred to Date Result Anti-Transferred to Cours Regard Number Habital Date  Transferred to SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  Station Result Anti-Transferred to Date Result Date Result Anti-Transferred to SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  Passed as Medically Fit. Date of 24/7.  Passed as Medically Fit. Date of 24/7.  On 2011  Date Result Vaccinations  Note Result Vaccinations  Note Result Vaccinations  Passed as Medically Fit. Date of 24/7.  On 2012  Passed as Medically Fit. Date of 24/7.  On 2012  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit. Date of 24/7.  On 2013  Passed as Medically Fit.	nall-pox Marks	Nil.						
When Vaccinated last Childhood & 1910. 7-7/7. CUTTLEW (a) Marks indicating congential peculiarities or previous disease  Appendix scar. 1906.  (b) Slight defects but not sufficient to cause rejection 23-6-77. CATL  NII. 20-6-77. CATL  NII. 20-6-77. CATL  Page 11 and Degrated Corp.  Enlisted on April Corps Regard Number Habits Date  Fransferred to SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  Passed as Medically Fit. Date (C. 2. 24) 7. Passed Passe	(Arr	n Right Left		1				
When Vaccinated last Childhood & 1970. 7-7/7. CATE  (a) Marks indicating congential peculiarities or previous disease  Appendix scar. 1906.  (b) Slight defects but not sufficient to cause rejection 93/7. CATE  Nil. 7-7/4 fast Degrated Law Called Carlons, Etc.  (b) Slight defects but not sufficient to cause rejection 93/7. CATE  Nil. 7-7/4 fast Degrated Carlons, Etc.  Fallisted on 1917 at Otteva.  Cores Regist. Number Habits Date  Transferred to 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION PROCEEDED ASEAS TO DESMA 3 RESULT  Passed as Medically Fit. Date for 2 2447  Passed as Medically Fit. Date for 2 2447  Passed as Medically Fit. Date for 2 2447	ccination Marks Nu	mber 0 1		Date	Result	- 0	VACCINATIONS	
(a) Marks indicating congential peculiarities or previous disease  Appendix scar. 1906.  (b) Slight defects but not sufficient to cause rejection  93-4-77.  CATE  NII.  PROCEEDED ASEAS TO CARE  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  PASSED AS Medically Fit. Date for 24/7 G			40	7-7	-17.	CX	Telux	M.(
Appendix scar. 1906.  (b) Slight defects but not sufficient to cause rejection  (c) Slight defects but not sufficient to cause rejection  (d) Slight defects but not sufficient to cause rejection  (e) Slight defects but not sufficient to cause rejection  (f) Slight defects but not sufficient to cause rejection  (f) Slight defects but not sufficient to cause rejection  (f) Slight defects but not sufficient to cause rejection  (f) Slight defects but not sufficient to cause rejection  (f) Slight defects but not sufficient to cause rejection  (g) ANTETED DID INCULATIONS, ETC.  (h) Slight defects but not sufficient to cause rejection  (g) ANTETED DID INCULATIONS, ETC.  (h) Slight defects but not sufficient to cause rejection  (g) ANTETED DID INCULATIONS, ETC.  (ANTETED DID INCULATIONS, ETC.  (								M
Appendix scar. 1906.  (b) Slight defects but not sufficient to cause rejection  93-4-17.  CAL  30-4-17.  CAL  Table Result  ANTI-TEPPOID INJUSTATIONS, ETC.  (b) Slight defects but not sufficient to cause rejection  93-4-17.  CAL  7-7-18-1919  Passed as Medically Fit. Date for 2417.  Passed as Medically Fit. Date for 2417.  Date Anti-Teppoid Injustations, Etc.  ANTI-TEPPOID INJUSTATION INJUSTATION INJUSTATION  ANTI-TEPPOID INJUSTATION INJUSTATION INJUSTATION  PASSED IN 1918  ANTI-TEPPOID INJUSTATION INJUSTATION INJUSTATION  Passed as Medically Fit. Date for 2417.				* - ×				
Enlisted on State day of April 191 7 at Otteva.  Correst Regrit. Number Habits Date SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION RESULT  Passed as Medically Fit. Date No. 224/7							-	
Enlisted on 27th day of May 1911.  Corps Rect't, Number Habits Date 27-4-1  Transferred to SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION PROCEEDED ASTRONOMY DISMAN 3  Passed as Medically Fit. Date of 24/7					Result	ANTI-TY	PEOID INCCULATIONS	, ETC.
Enlisted on Hand day of Corps Rect'l Number Habits Date  Corps Rect'l Number Habits Date  Joined on enlistment 72 & Adery PROCEEDED JSEAS TO C.P.A. SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION RESULT  Passed as Medically Fit. Date for 2247  Passed as Medically Fit. Date for 2247  Passed as Medically Fit. Date for 2247					6-17.	C	AL	M.
Enlisted on the day of				30-	6-17.	(	OTE	M.O
Enlisted on 27th day of 1917 at Otteva.  Corps   Regr't Number   Habits   Date    Joined on enlistment   72 Baldery   PROCEEDED JSEAS TO GEAR   SEP 1 6 1918    EXAMINED OR DISCHARGED BY A MEDICAL BOARD   STATION   Passed as Medically Fit. Date   No. 22447   97		Nil.		7-7	17	6	KI	M.0
Transferred to  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION  PROCEEDED OF THE PROPERTY OF THE PASSED AS MEDICAL BOARD  PROCEEDED OF THE PORT OF THE PASSED AS MEDICAL BOARD  PROCEEDED OF THE PORT OF THE PASSED AS MEDICAL BOARD  Passed as Medically Fit. Date of 2247  Passed as Medically Fit. Date of 2247  Passed as Medically Fit. Date of 2247	1,#	MAI	/	149/1	Jan	Dygos	udlay Ca	1. cai
Joined on enlistment  72 Bakker  PROCEEDED OSEAS TO SEP 1 6 1918  EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION  MEDICAL BOARD  Passed as Medically Fit. Date for 2 4/7 9 7	disted on 27th. de	y of April	•	19	1 <b>7</b> at	Ot tawa		
EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION  MEDICAL BOARD, M. D. DISCHARGED BY A MEDICAL BOARD  Passed as Medically Fit. Date for 2 4/7 9			The state of the s				DATE	
EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION  MEDICAL BOARD, M. D. DISCHARGED BY A MEDICAL BOARD  Passed as Medically Fit. Date for 2247 7	ined on enlistment	72 Baltery	3430	055	y.	rd.	27-4	-/7
EXAMINED OR DISCHARGED BY A MEDICAL BOARD  STATION  MEDICAL BOARD, M. D. DISMS. 3  Passed as Medically Fit. Date for 22477 97		PROCEEDED OSEA	B TO C,	E.AJ			SEP 1 6 1918	
Passed as Medically Fit. Date for 22/17 97	ansferred to			22		Array Maria		
Passed as Medically Fit. Date Vor. 22/17	EXAMI	NED OR DISC	HARGE	ED BY	AM	IEDICAL	BOARD	
Passed as Medically Fit. Date Vor. 22/17	1	EDICATEROA	RALN	D Dis	No. 3		RESULT	
Passed as Medically III.		MEDICAL DON	Fit	Date	WW.2	4/7	91	
Je Jegen Coff Compresident	Passed	as Medicany	glai	Coffic	ame.	RESIDENT		
	-							

A.S.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becaming non-effective; the date and cause being stated on next page.

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

### CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE War Service Badge Class "A" No. .....

THIS IS TO CERTIFY that No. 8 43 0	
Name (in full eller sur	clair Daylor enlisted in
the 72ms Baly	CB6, 8
CANADIAN EXPEDITIONARY FORCE at	Trawa on the 4th
day of May 19/	Baly C. J.C.
and is now discharged from the service by reaso	Demobilization.  Medical Unfitness.
THE DESCRIPTION OF THIS SOLDIER on th	ne DATE below is as follows:
Age 20	Marks or Scars
Height 5' /0"	appendix sear
Complexion Medicin	Blue sear on
Eyes Black	back L. Wish
Hair Brown	
I Staylor	Adam &
Signature of Soldier	MIMA
Date of Discharge	Issuing Officer
	Older No Discharge Section, Dispersal Station "F"
491)000	Rank
Zona way	Date 2 29 19

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

THE LATE CHARLES that No 25 A S & S TRANSPORT AND STATE ni belaimen 1753 A.A. in DEPRENTITIONARY FORCE ALL DESCRIPTION OF THIS SOLDER on the DATE below is as follows Character Burger

N.H. - is in Arment of the Corribate Will be based, any person hading same as requested to formers it is an uneranged surveyon to the Secretary, Militia Connect Offices Connects.

### Fill in only.-Unit, Number, Rank and Name.

# Casualty Form—Active Service.

Unit, Regiment or Corps. 72nd (Queens) Bty.C.E.F. Regimental No. 343055- Rank Pte. Name TAYLOR, Gilbert Sinclair. Date of promotion to Date of appointment Numerical position on to lance rank roll of N. C. Os. present rank Record of promotions, reductions, transfers, Report casualties, etc., during active service, as retaken from Army Form B. 213, ported on Army Form B. 213, Army Form Place Date Army Form A. 36, or other From whom A. 36, or in other official documents. The Date official documents received authority to be quoted in each case 0/8 T.O.S. D.D.#4 19-3-19 D.O.Pt.II-97. 7-4-19 Montreal. S.O.S. D.D.#4 Demob. Montreal. 29-3-19 D.O.Pt.II-97. R.O.1420. 9.4. Assistant Adjulant,
District Depat No. 4.

Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re-	A STATE OF STREET	a ambielitesik	Remarks	
Date From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	taken from Army Form B. 213, Army Form A. 36, or other official documents	
	chies happy alle	o mendedae kom dan semire		as suffraging hour	
	Liv does Senting		Security 1		
The season sure in the season of the season		- Proceed on the many of the control	Toolsonoon		

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

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

## Casualty Form—Active Service.

Unit, Regiment or Corps. Regimental No 343055 Rank Trivale Name.... Enlisted (a) May 4/17 Terms of Service (a) Con the for Service reckons from (a) May 4, Date of appointment Date of promotion to Numerical position on present rank to lance rank roll of N. C. Os. Qualification (b) & euceer Extended..... Re-engaged. Record of promotions, reductions, transfers, Report Remarks casualties, etc., during active service, as retaken from Army Form B. 213, ported on Army Form B. 213, Army Form Place Date From whom Army Form A. 36, or other Date A. 36, or in other official documents. The received official documents authority to be quoted in each case 21-2-18 O.C.Res. Bde, C.F.A. T.O.S. from Canada 17-2-18 Bo. Pt. Witley 17-9-18 Res Bde Proceeded O/Seas to CFA Witley 16-9-18 R.B. BO Pt. 11 260 Lieutenant & Asst. Adjutant. · Res. Bde. Canadian Field Artillery 18-9-18. CGBD. Arr.as Reinf & TOS. Can. Art. Pool. 18-9-18. NR.762 Pt.II 0.126 21-9-18. Left Base for C.C.R.C. Field 221-9-18. NR.1395 Arrived at C.C.R.C. Field

<sup>(</sup>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.

			Tation 7
Report From w	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form	Place Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other
Date receiv		A Sound State of Stat	official documents
	Granieu 8 Days	The state of the s	(b) holomon to stall be
	Leave 'o U.K.007	98 60%	A A
No. 35	Proc. O.S. W,0	4 . 10 19	17.9 W.O. 17
		A Live States Same of Same of	G. S. Hervett
to Many	1000 (mile)	series want 1919 I made you	Lieut
		see Stag of Ledong of pt a	for Lt. Col., AAG.,
1000	MEde on passes	1 4	Canadian Section
201V. 0	The prince	edeng Kund	19/3/19
	Dust Phondin	28/49	19/3/19 10th BRIGADE.
	Gara , is a cons	34	C.F.A.
58-	11 .79 .00 31-3-11	29/19	huppind at
	· 大学· 大学· 大学· 大学· 大学· 大学· 大学· 大学· 大学· 大学	MRBella	ulino ( 100
			1
			Secret Contract Contract
		The state of the s	
			46 7 1000 1-0
	-23		
	The state of the s	- Carlotte Charles	
	The state of the s	The state of the s	17-9-10 Fee 200 Proce
	"itley le-o-10 - 1	Act as assure both	OSA DE ONE
6. 11.	16-9-16 6.8. To		
	The San Control		and the second s
1000年代	blat redicardiage, mad	to also space at a main and pass in total or	to to the constant with the constant of the co
The state of the s	The second secon	A Service of the second second	

,

11'

Form R 122. 10287-65M-28-7-17. Dft. 72nd, Queens Bart Kingston To CRA

CR. Rank

TAYLOR, Gilbert Sinclair. Name

343055. Reg'l No.

Unit

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment

Ottawa, May 4th. 1917.

Place of Birth Ottawa, Ont.

Name and Address, Next-of-Kin

Mrs. Mary Taylor.

90 Powell Ave., Ottawa, Ont., Canada.

Relationship

Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

	Disch	arge, Date a	nd Place	Reaso	on		Character		
				,					
	Repor	t.	Record of promotions, reductions, transfers,		plantana renormaly		REMARKS		
	Date.	From whom received.	casualties, etc., during active service.  The authority to be quoted in each case.	-	Place. Date.		Taken from Official Documents.		
			Arrived in England	Siles.		18 8/8	MISBASAFIE		
	21.2.18	Res C.F. H	Taken on strength	gni	toutley		M		
	21-9-18.	an Pool.	T.O.S from. 14 10 gal.	11	Field	18-9-18	PV11-126 - Res Bylle 260-17-9-18.		
	12-10-18	10 Bose C. 74	T.D.S how and Pool.	"	4	2-10-18	Pr11-129 + ash Post. 142-10-10-18		
	22.2.19.	10 Bde.	From A Canada			20.2.19.	29-G + 10 Bde. PH 20.29. 193/19.		
•									

343055 Taylor 95.

Réport.		Record of promotions, reductions, transfers, casualties, etc., during active service.  The authority to be quoted in each case.		Di		REMARKS .	
Date.	From whom received.	The authority to be quoted in each case.		Place. Date.		Taken from Official Documents,	
***							
		,					
		• in the second second					
		VALUE OF THE PARTY OF THE					
,					2		
The state of	1						
	7						
	1						
		The second second	7				情情情情,

APPOINTMENTS. PROMOTIONS AND REVERSIONS PLACE OF ATTESTATION Ottawa. Out DATE OF ATTESTATION ORIGINAL Oft. 72 Bty MARRIED OR SINGLE PARTICULARS. Ottawa, Out PLACE OF BIRTH NAME OF NEXT OF KIN being daylor. RELATIONSHIP bother PRESENT UNIT Cautes Cert PER MONTH \$ 20 DATE EFFECTIVE PAR AUTHY. PARTICULARS OF TRANSFERS 90. Lowell ave. Ottawa . Ou STOPPED EFFECTIVE CAUSE DATE ADMISSIONS V. OR TO HOSPITAL, &c.

ADMITTED DATE DISCH'D A. NAME OF HOSPITAL. NAME OF NEXT OF KIN RELATIONSHIP DATE ASM FORMS REND. ADDRESS PER MONTH \$ DATE EFFECTIVE AUTHY. STOPPED EFFECTIVE PAYABLE TO SEPARATION ALLOWANCE. EFFECTIVE (DATE) SEPARATION ALLOWANCE MONTHLY \$ STOPPED EFFECTIVE (DATE) RELATIONSHIP DATE ASM FORMS REND PAYABLE TO REASON PER MONTH \$ DATE EFFECTIVE AUTHY STOPPED EFFECTIVE PAYABLE TO CAUSE RELATIONSHIP REMARKS DATE ASM FORMS REND. EFFECTIVE DATE PER MONTH \$ DATE EFFECTIVE STOPPED EFFECTIVE (DATE) SEPARATION ALLOWANCE MONTHLY \$ STOPPED EFFECTIVE REASON PAYABLE TO CAUSE RELATIONSHIP AUTHORITY RELATIONSHIP DATE ASM FORMS REND. REMARKS DISCHARGE DATE AND PLACE AUTHORITY FOR ISSUE ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE) NEW PAYBOOK ISSUED REASON AND AUTHORITY ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) NEW PAYBOOK ISSUED TOTAL SEPARATION ALLOWANCE BALANCE CARRIED FORWARD OTHER CHARGES ALL CASUALTIES. PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS
OF "OTHER CREDITS" OR "OTHER CHARGES" NO. OF RATE \$ C. OF RATE \$ C. \$ C. \$ C. \$ C. CREDIT DEBIT \$ c. CR. | CR. 2 PARTICULARS I. for Jany. Deductes on Can Pay List 14 45 arss 13 175 cra. 489 as It sheh 64 90 1

BALANCE
CARRIED FORWARD

NUMBER OF
ACQUITTANCE
ROLLS

CREDIT

DEBIT

1

2

NUMBER OF
S.A. AND A.P.
CHEQUE REMARKS.

ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS
OF "OTHER CREDITS" OR "OTHER CHARGES"

NUMBER 343055 RANK GAR. NAME TAYLOR. G.S. CR. 1. | CR. 2. PARTICULARS PARTICULARS DR. 1 DR. 2 DR. 3. DR. 4. BALANCE DEFERRED SEPARATION MONTH Balance Forward. 31-8-18 2464 Des 1034.) 27/10 " nov 3410 eck 1456 10 yeth. 1618 10 cta Phal 1330. V 1 34 3820 Whisor Boar 1611. 3 73 2015 10 Ctup 30 74 30 80 Bay 41 14 3410 al. 55 64 2140 10 Cta 3/4/2. 24/20 38397 Loudon. 1043. Awing C.C.C. 3227. 3 D'Irain

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Dec 1/17.

RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 343055.	Name Mrs. Mary Laylor.
Rank Gur. Promoted Reverted Discharge	Address 90 Powell and Ottawa
Soldier's Name Gilbert. S. Taislor	Change of Address Out.
Battalion 172 Battery C. F. a. C.E. F.	1
Beneficiary	2
Relationship	3
Address	4

	Date	Cheque No.	Amount S/A	Amount A/P	Total		017844- 9-43 REMARKS
	Dec 17	4.65992		20	20	R	017844-4-43 REMARKS mailed 28-12-17.
	Jan 18	768905		20	20		
	Telegy	0,72313		20	20	9	
	migh	V 93614		20	20	-	
	apr.	V 8830		20	20	4	
	may	7 14871		20	20	V	,
	Jime	P 21844		20	20	~	
	July		,	20	20	"	
	Olling		2	20	20	~	
	Sept-	P 42096		20	70	-	
	7	7 57059		20	20		
	Suo-	1 64024		20	20		
	1	2 70767		20	20		
7993.	12,1	0 8/5/3		20	20		
82-33 D.	man	B 87100		20	20		
4.0m, 6-7—172-39-1141 L. L. 22320—M. & D. 7993	du			20	20		
OM. L. 223-	- gra			320	320		A STEMO
71			×	0	edie		HAS BEEN MAR
			1	27/3/10	A THE STATE OF THE PARTY OF THE	1/4/	19
			1	Marie of who water or	6728	1 01	HIS AGGS
			C	losed	274 0 5-0 200 One 200 000 and	2000 In. U	Lung Rw

### MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE O	F SEPARATIO	N ALLOWAI	NCE

RATE OF ASSIGNMENT
* 战物和 6

#### PARTICULARS OF SEPARATION ALLOWANCE

#### PARTICULARS OF ASSIGNMENT

	No.				Name .	
TO	Rank	Promoted	Reverted	Discharge	Address	,
	Soldier's Name	•			Change of Address	
	Battalion				1	
	Beneficiary	· · · · · ·			2	
	Relationship				3	
	Address				4	

Date	С	heque No.	Amount S/A	Amount A/P	Total		REMARKS	A
			\					

19 G

## SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization:) War Service Badge

Class "A" No. .....

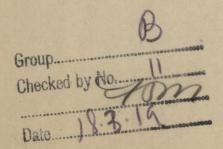
1.	No. 343055
2	Rank. Driver
3.	Name. Taylor Gilbert Sinclair
4.	Unit. 38 th Battery, C.7.a.
5	Date of Discharge 29-3-19 Place Ditterva Montreal, O
6	Reason for Discharge Demobilization
7.	Authority. R.O. 1420. BD.D.#4. D.O.Pt.II-97.
8.	Proposed Residence after Discharge Ottawa, Out
9.	CERTIFICATE TO BE SIGNED BY SOLDIER.
	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
	M. F. \$/? B 39 Monteal.
	March 29-1919
	Signature of Soldier.
10.	CONFIRMATION.
	The discharge of the above named man is hereby confirmed.
	Place Montreal
	Date March 29-1919
	Alge To
	Signature Office of Discharge Section, Dispersal Station of Unit.)

W.

#### LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet.	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobteniable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attornal and (M F W. 23), or Particular of Lacing Medical History Sheet (M.F.B. 313 or A.F.R. 4. Proceedings of Med. Board (M.F.R. 227 or M.F. 5. Double Certificate (C.A.D.E. 5000a. 6. Field Conduct Sheet (A.F.B. 122). Proceedings on Discharge (M.F.R. 122). 8. Discharge Certificate (A.F.B. 122). (Proceedings on Discharge (M.F.W. 30). Opposite of Discharge Certificate (A.F.W. 30). Dispersal Certificate (C.D.S). Beginnent Statement Q.M.G. Form (D.O.S. 2. 1. Equipment Statement Q.M.G. Form (D.O.S. 2. Pay Book (A.B.64). War Service Gratuity (Form M.F.W. 2595).



REGT. NO. 343055 RANK STW. NAME (IN FULL) AYLOR CILIBERT, S

ORIGINAL UNIT
C.E.F. (BLOCK LETTERS SURNAME FIRST)

PLACE OF PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES M. OR S. NEXT OF KIN RELATIONSHIP AUTHORITY PARTICULARS 2.05 PLACE OF ATTESTATION TRANSFERRED TO ADDRESS AUTHORITY Dup 2 DATE AUTHORITY ASSIGNED PAY \$ IS SEPARATION ALLOWANCE PAID? Mil DATE EFFECT Mus Mury Joyler WJ9 PAYABLE TO RELATIONSHIP TO WHOM PAID ADDRESS ADDRESS STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE Minheae REASON AUTHORITY IFENTITLED POST DISCHARGE PAY IF ENTITLED TO DISCHARGED PAY AND F.A. ACQUITTANCE ROLLS CASH PAYMENTS ASSIGNED OTHER TOTAL OTHER TOTAL MENTAL CHARGES DEBITS CREDITS CREDITS CHARGES PARTICULARS OR REMARKS MONTH AMOUNT OL. NO. 1 COL. NO. 2 COL. NO. 3 COL. NO. 1 COL. NO. 2 COL. NO. 3 RATE BALANCE FROM PREVIOUS ACCOUNT Balanc S. A. Total Sold 280 20 NS 19 90 20 00M-1-19.-L. L. 53962-M. & D. 9723.

M. F. W. 2596. 1772-39-1390.

