ORIGINAL

A-2 Irish

ATTESTATION PAPER.

1st Depot Bn. 1st C. O. R.

No. 3040434

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? James.
1b. What is your present address? #1905 West 34th Place, Chicago, Ill., U.S.A.
2. In what Town, Township or Parish, and in what Country were you born? Co. Down, Ireland.
3. What is the name of your next-of kin? Jane Taylor.
4. What is the address of your next-of-kin? Bally Rolley, by Donaghadee, Down, Ireland.
4a. What is the relationship of your next-of-kin? Mother.
5. What is the date of your birth? May 23rd, 1874.
6. What is your Trade or Calling? Labourer.
7. Are you married? Single.
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 Naval or Military Force? No.
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.
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?
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?

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Taylor, 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.

James Taylor (Signature of Recruit)

Date July 29th, 1918 191 . S F Litt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Taylor, 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.

James Taylor (Signature of Recruit)

Date July 29th, 1918. 191 . S F Litt (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 Toronto, Canada this 29th day of July, 1918. 191 .

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of James Taylor on Enlistment.

Apparent Age 44 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 3 ins.

Chest measurement.
Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Brown.

Religious denominations.
Church of England
Presbyterian Pres.
Methodist
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

R. D.20-30 L. D.20-40
Hearing nose throat normal.

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 July 29-18. 191 . W.S.Maxwell.
J. C.Chono.
Place Chicago, Ill. J. W. Bruce, Mo's.
Medical Officer.

*Insert here "fit" or "unfit."

CHICAGO

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.

James Taylor, 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 of Officer)
Major
O. C. 1st Depot Bn., 1st C. O. R.

Date JUL 30 1918 191 .

23 10 18 L M

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

Name TAYLOR, JAMES

Regt. No. 3040434 Rank Pte

Corps 1st Depot Bn. 1st C.O.R.

American Citizen

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

M F B 465-1

A F B 122-1

M F W 113-1

M F W 39a-1

Index Card.....

Casualty Card.....

Non-Effective Card.....

Part II Order Card.....

Change of Address Card.....

Honour & Award Card.....

03112

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

H. Q. .....

M. D. No. 2

Surname Taylor

T. O. S. July 30th 1918

Christian names James

D. O. Pt. II 212 of 31-7-18

Regtl. No. 304434 Rank Pte

S. O. S. 3-10-18 19

Unit 1st Cen Ont Regt 1st Dpo Bn

Reason Am Cit.

Auth. D.O. 275 of 2-10-18 1/1 C.O.R.

Next of kin Taylor Mrs Jane

Relationship Mother

Address Bally Rolley by Donaghadee Co Down Ire

Also notify:

BORN—Place Ireland Co Down Date May 23rd 1876

ATTESTED—Place Toronto Ont Date July 29th 1918

O/S.....

R/C.....

W. 22—100M-7-18. 1772-39-839.

M.S.A. 15.

#1-S.D.3

ORIGINAL

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 Taylor Christian name James

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) 1905 W. 34th Place, Chicago, Illinois

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 25th day of July 1917, by the undersigned medical board sitting at Chicago, Illinois

5. Age as stated 44 Years 2 Months. 6. Apparent age 44 Years Months

7. Height 5 Feet 3 Inches. 8. Weight 119 Pounds.

9. Chest measurement Minimum 30 Ins. Maximum 33 Ins. 10. Complexion Ruddy Eyes Blue Hair Brown

11. Physical development Good (Good / Fair / Poor) 12. Smallpox marks nil

13. Number of vaccination marks Right arm 0 Left arm 1 14. When vaccinated last 1909

15. Distinctive marks and marks indicating congenital peculiarities or previous disease ~~nil~~ mole on neck

16. Slight defects but not sufficient to cause rejection Slight flat feet.

The man denies having had Rheumatism / Tuberculosis / Syphilis (Strike out disease admitted or suspected.)

We find no evidence of past Rheumatism / Tuberculosis / Syphilis

vision 20/30 20/40 hearing 20/20 20/20

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A-2 C.E.F.

Nose & throat, Normal.

APPROVED BY MEDICAL BOARD JUL 25 1918 BRITISH RECRUITING MISSION

J. W. Bruce President. Capt. C.A.M.C.

J. A. Dunwoodie Member. J. C. Furlong Member.

Signature of Man James Taylor

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
9/8/18	Good	J.W.B. Capt M.O.	2/8/18		J.W.B. Capt M.O.
		M.O.	9/8/18		M.O.
		M.O.	13/8/18		M.O.

Joined 29th day of July, 1918 191 at Toronto, Canada.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Bn.			
Transferred to	1st.C.O.Regt.	304/0434		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Camp Niagara	Aug 9/18	Rigid Flat Feet	B-2. J.H. King Capt Res. S.M.B.

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

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

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER Taylor, James DISTRICT 2

REGIMENT 1/1 C. O. R. RANK Private No. 3040434

M.F.B. 465.
200M —6-18.
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			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
													U	L	P			Gold	Porcelain				
Condition on first Examination																							

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3040434 (Rank) Private.

Name (in full) James TAYLOR enlisted in

the 1st. Depot Bn.1st. Central Ontario Regiment.

CANADIAN EXPEDITIONARY FORCE at Toronto Ont. on the 29th

day of July 19 18.

HE served in C A N A D A

and is now discharged from the service by reason of "American Citizen"(H.Q.16/T-160-12/9/18)-(C.R.T.H.D.#2. A.S. #232-1/10/18)

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

Age	44 Yrs	4 Months.	Marks or Scars
Height	5 Ft.	3 ins.	
Complexion	Fair.		Nil.
Eyes	Blue.		
Hair	Brown.		

James Taylor
Signature of Soldier

Issuing Officer

Major
Rank

Date of Discharge October 3rd. 1918.

1st. Depot Bn.1st. C.O.R.
Appointment

Signed at Camp Niagara Ont. this 3rd. day of October 19 18.

in Military District No. 2

File Reference No. 34-Ts-260

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. 3040434 (Rank) Private. Name James TAYLOR

Unit 1st. Depot Bn. 1st. Central Ontario Regiment.

Address on Discharge 1905 West 34th St. Chicago Ill U.S.A.

Character and Conduct Good

Former Occupation Labourer.

Special Qualifications of Value in Civil Life

Medals and Decorations Nil.

Remarks

Signed at Camp Niagara Ont. this 3rd day of October. 1918.

Name of Officer

Major
Rank

1st. Depot Bn. 1st. C.O.R.
Appointment

ORDERLY ROOM
OCT 3 1918
1st Depot Bn., 1st C.O.R.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

3. J.R.B.

LAST PAY CERTIFICATE

M. D. 2

No. 15

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 3040434 Rank Private Name TAYLOR, J.

Corps 1st. Depot Bn., 1st. C.O.R. who was* Discharged

On October 3rd. 191 8, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from October 1st. 191 8, to October 3rd. 191 8, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10	00
Advances by Cheques No.			Regt'l Pay 3 days at $ 1 c. 00	3	00
Advances by Cheques No.			Field Allow. 3 days at $ 10 c.		30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No. 7923	13	30	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	13	30	Total	13	30

*Give particulars.

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

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment 29-7-1918

(2) if married and if a Separation Allowance Card has been submitted NO.NO.

(3) cause of discharge AMERICAN CITIZEN authority DO.275 (HQ-16-7-160) 12-9-1918

(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date October 5th-1918

Place Camp Niagara, Ontario

W Kempton Capt.

Paymaster.

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

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M.—2-18.
H. Q. 1772-39-903.

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.	3040434
Rank	Private.
Surname	TAYLOR
Christian Name	James

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

Corps (Squadron, Battery or Company)	1st. Depot Bn.1st. C.O.R.
Date of Discharge	October 3rd. 1918.
Place of Discharge	Camp Niagara Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	44 years 4 months.	
Height	5 feet 3 inches.	
Complexion	Fair.	
Eyes	Blue.	Nil.
Hair	Brown.	
Trade	Labourer.	
Intended place of residence (To be given as fully as practicable.)	1905 West 34th St. Chicago Ill U.S.A.	

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

"American Citizen"(H.Q.16-T-160-12/9/18)-(C.E.F.M.D.#2. A.S. #232- 1/10/18)

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.

Good

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.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

Nil.

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

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

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Camp Niagara Ont.

(Date) October 3rd. 1918.

Base Co. 1st Depot Bn., 1st C. O. R.
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.

(Place) Camp Niagara Ont. James Taylor (*Signature of Soldier.*)

(Date) October 3rd. 1918. (*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.

James Taylor (*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....66.....days.

Total.....years.....66.....days.

11. **Confirmation of Discharge.**

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

(Place) Camp Niagara Ont.

(Date) October 3rd. 1918.

(*Signature*) ..... Major
1st. Depot Bn. 1st. C.O.R.

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.)

Nil.

Signature of Soldier.....James Taylor.....

Signature of Witness.....[illegible]

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	
Med. Hist. Sheet, Militia Form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Medical Report for Invalid* " B. 227.	*(a)* Proceedings on Discharge.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(b)* Attestation.
*Only if discharged "Medically unfit."	*(c)* Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.