

ORIGINAL

Fourth M. D. First Depot Battalion 1st Quebec Regiment

Regtl. No. 3080709

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

copy

J. A. M. (Class First)

1. Surname DORAN
2. Christian name James William
3. Present address St. Agnes de Dundee, Huntingdon Co. P. Q. c/o J.P. McCauley
4. Military Service Act letter and number 5477 DR.
5. Date of birth September 18th. 1897.
6. Place of birth Cumberland England.
7. Married, widower or single Single.
8. Religion Roman Catholic.
9. Trade or calling Farming.
10. Name of next-of-kin Mrs. Ann Doran
11. Relationship of next-of-kin Mother
12. Address of next-of-kin Worthington?, England. SUFFICIENT
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any NO ***** g w D
15. Medical Examination under Military Service Act:—
(a) Place Montreal Que. (b) Date Jan. 3rd 1918. (c) Category A2

DECLARATION OF RECRUIT

I, James William Doran, do solemnly declare that the above particulars refer to me, and are true.

James William Doran (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 20 yrs 3 mths.
Height 5 ft 5 ins.
Chest measurement } fully expanded 36 1/4 ins.
range of expansion 2 3/4 ins.
Complexion Ruddy
Eyes Brown
Hair Black
Distinctive marks, and marks indicating congenital peculiarities or previous disease.
L. 20. 40
R. 20. 40
Heavy OR

Lt. Col. O. C. First Depot Btl. 1st Quebec. Regt.

Place Montreal Quebec. Date January 3rd 1918.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname

2. Christian name

3. Present address

4. Military Service Act letter and number

5. Date of birth

6. Place of birth
(Town, township or county and country)

7. Married, widower or single

8. Religion

9. Trade or calling

10. Name of next-of-kin

11. Relationship of next-of-kin

12. Address of next-of-kin

13. Whether at present a member of the Active Militia

14. Particulars of previous military or naval service, if any

15. Medical Examination under Military Service Act—
(a) Place (b) Date (c) Category

DECLARATION OF RECRUIT

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

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age

Height

Chest

Measurement of range of expansion

Complexion

Eyes

Hair

Distinctive marks and marks indicating congenital peculiarities or previous disease

REGIMENTAL DOCUMENTS

NAME Ronan James Williams

REGT. NO. 3180709

UNIT

H. Q. FILE NO.

9

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

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)

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)

2 Cas Cert.
1 Will orig
1 " copy
1 " copy

DEATH

Category

21335

H. in A.

DISCHARGE

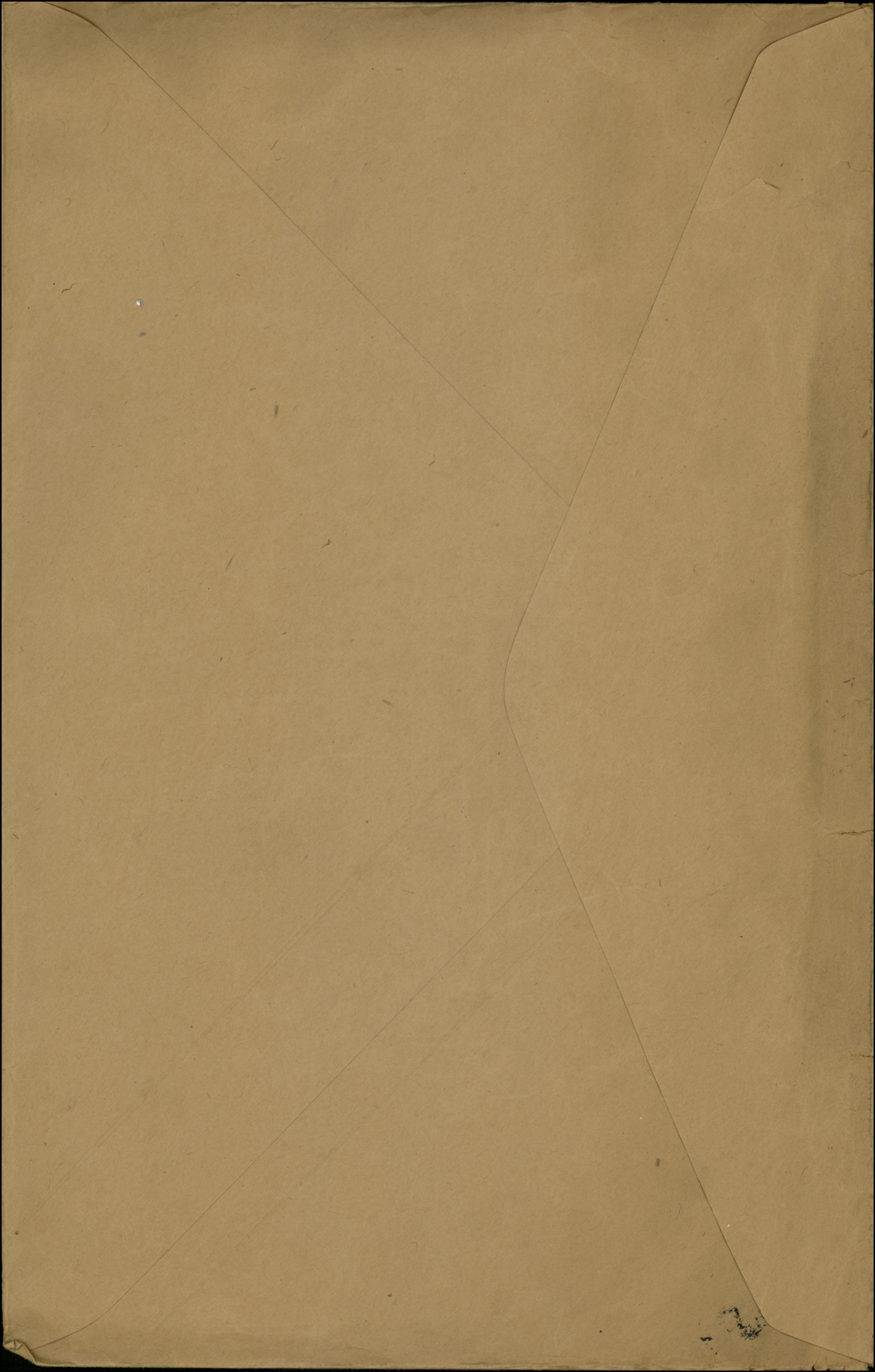
Category

M

H

DESERTION

mx
6/1/50



Date of Enlistment

MILITIA AND DEFENCE *Enlisted 3-1-18*

Date of Assignment

Separation and Assigned Pay Branch

1-2-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

AUTHORITY
FOR
NEW ACC'T.

NR

RATE OF ASSIGNMENT

| | | | |
|--------------|--|--|--|
| <i>15.50</i> | | | |
|--------------|--|--|--|

*92161911
S.K.*

PARTICULARS OF SEPARATION ALLOWANCE

No. *3080709 (3080903)*
 Rank *Pt.* Promoted Reverted Discharge
 Soldier's Name *Doran James*
 Battalion *1st Dpt Bn. 1st Ave. Regt.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Catherine McCauley*
 Address *St Agnes de Dundee*
 Change of Address *Co. Huntington, P.A.*
 1 *x Miss Catherine*
 2 *Mrs Mrs Wright*
 3 *No 1 Lonsdale Terrace*
 4 *Seaton, N. Worthington, Cumberland*
MRO Miss

| Date | Cheque No. | Amount S/A | Amount A/P | Total |
|-----------------|----------------|------------|------------|-----------|
| <i>Mar 1918</i> | <i>M 77358</i> | | <i>30</i> | <i>30</i> |
| <i>Apr</i> | <i>B 82106</i> | | <i>15</i> | <i>15</i> |
| <i>May</i> | <i>D 17402</i> | | <i>15</i> | <i>15</i> |

REMARKS *File 4866-f-18*
x MRO 13 reduced May 8/18 Cw
A/c closed assignment transferred to England effect June 1/18 May 9/18 Cw
MRO 2 B Destroy reduced May 9/18 Cw
Cashly 2 M. Apr 5/18 Cw

*G. A. McInerney 5-3-18
M. F. W. 128
400M-6-17-1772 39-1141
L. L. 22220-M & D. 7883*

McCauley H-3-1

KILLED IN ACTION }
 DIED OF WOUNDS } DATE *1/10/18*
 C. L. No. *345 (folio 7)* DATE *28/10/18*
1st list
 M. R. O. TO DESTROY RENDERED
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
4866-f-18
 CLERK *C. S. Johnston* DATE *31/10/18*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

RATE OF ASSIGNMENT

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|------|------------|------------|------------|-------|---------|
|------|------------|------------|------------|-------|---------|

M. P. W. 128
 400000-6-17-1772-38-141
 L. L. 22320-M. & D. 7553.

Surname

Christian Name or Names

Reg. No.

Rank *Doran.*
16.

Unit *J. W.*
43 Bn Man.

2080709

Cas. List.

16.10.18 *A346* *Killed in Action* *1.10.18*

A.M.D. 2 DEPT.

Boh. of D.G.M.S. O.M.F.C. London.

Number

3080409

Rank

PTE

Surname

DORAN

Christian Name

James William

Units

40th Bn Gen Div

Theatre of War

France

Date of Service

14.8.18

II

Remarks

(Aunt) Mrs. Catherine Wright

Latest Address

Honsdale Terrace

Seaton, Workington

Roll No.

Cumberland

200m.-2-21.M.

Page 15-982 England.

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM

IT

IN CATEGORY

INVALID

WHERE TO

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

REGN. AM. 9 1923
 DESP. JAN 9 1923
 66791-16799

REGT'L. No. 3080709

NAME Doran James William

H. Q. FILE NO. 649

RANK AND CORPS Pl. 43rd Bn Form

FOLLOWS
No. 149 R.
FOLLOWS

CABLE

NO. 58.2 DATE

NATURE OF CASUALTY

N 39718-10-18 E. 29. in a Oct 1st 1918 (NK 2346 1)
16-10-18

LIST NO.

HOSPITAL

**DATE OF
ADMISSION**

REMARKS



James William 3080409

Name **DORAN**Rank **Pte**

Reg. No.

Unit

43rd Bⁿ

Next of Kin

~~Mrs Anne Doran (Mother)~~
~~Workington England~~ **25-D-3202**

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|--------------|--------------------------|-------|----------|---------------|-----------------|---------------|
| 1918. | | | | | | |
| 1-10. | Killed in Action. | | | A. 846 | | |
| | | | | | H. 899 | 4180 C |
| | | | | | | |

N/K. Mrs Thos Wright (Aunt)
1 Lonsdale Terrace
Seaton near Workington
Cumberland
(Aunt on 4/10)

Doran, Pte. Jas. Wm., #3080709, 43rd Bn., H.Q. 649-D-18263.

M. & D. (Aunt)

Mrs. Catherine Wright,
1 Lonsdale Terrace,
Seaton, Workington,
Cumberland, England.

P. & S.

Ditto.

Serial No 793129

Mem. C. Nil.

Scroll Desp.

MAR 19 1921

Repon. No

230076

Telegram Desp.

DEC 28 1921

21146

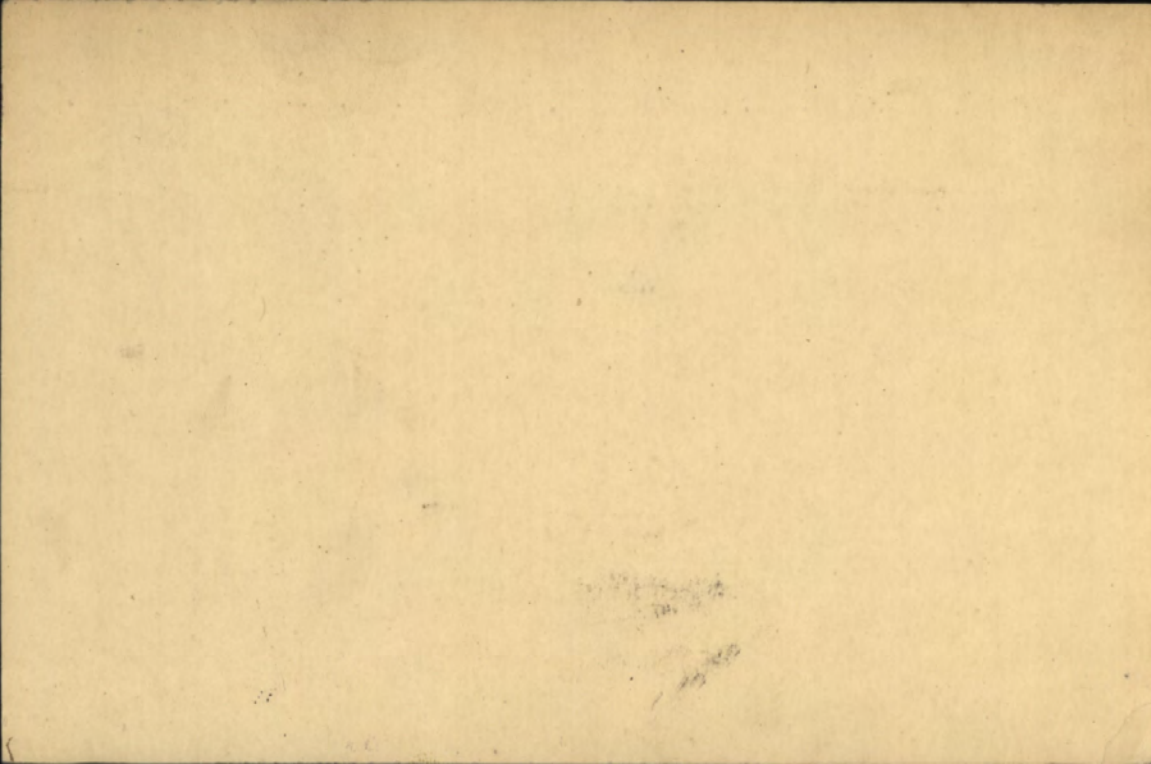
PA 1519

Intelig. 14/15 Star.

Beig. V.M.

H. " B.W.M.

B.



^{1/10}
SURNAME.

Doran.

CARD NO.

4

CHRISTIAN NAMES

James William.

REGL. NO.

3080709.

RANK

Private

UNIT

1st Que. Regt. 1st Dps. Bn (5th R.W.)

FORMER CORPS

Nil.

FOLL.

NEXT OF KIN.

NAMES IN FULL

Doran Mrs. Ann.

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Worthington, Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England.

Cumberland DATE *Sept. 18th 1897.*

PLACE OF ATTESTATION

Montreal, P.Q. DATE *Jan. 3rd 1918.*

6/8. 21/2/18

*1088
4*

SS. Saxonia from Halifax 18-2-18.

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

Farming.

RELIGION

Roman Catholic.

DESCRIPTION.

APPARENT AGE

20 YEARS

3. MONTHS

HEIGHT

5 FEET

5 INCHES

CHEST MEASUREMENT

36 1/4 INCHES

EXPANSION

2 3/4 INCHES

COMPLEXION

Ruddy.

EYES

Brown.

HAIR

Black.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

Jan. 3rd 1915.

*Present Address - C/o J. F. Mc. Cauley
St. Agnes de Dundee, P. Q.*

No 3080709 RANK *Pte*NAME *Horan John William*T. O. S. *3-1-18*

UNIT

*1st Depot Bn**1st A. I. Regt.**(D.O. 4 of 4-1-18)*M. D. *4*

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-----------------------------|--|------------------------|---|----------------------------|
| | | | PARTICULARS | AUTHORITY |
| <i>1918</i> <i>Jan 3</i> | <i>1918</i> <i>Jan 31</i> <i>Feb</i> | <i>71</i> <i>71</i> | <i>Proc ops 15-2-18</i> | <i>D.O. 46 of 15-2-18.</i> |



5th Inf. En, 1st Quebec

Rank _____ Name DORAN, James William Reg'l No. 3080709
 Unit _____ If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Montreal, Que. Jan. 3rd 1918 Place of Birth Cumberland, Eng:
 Name and Address, Next-of-Kin Mrs Ann Doran,
1 Housdale Terrace, Seaton,
Worthington, England. near Worthington Cumberland Relationship Mother Aunt
 Assigned Pay Monthly \$ (auth Rt 25 D. 3202 of 6.11.18) Payable to _____

m x
6/11/20
21

Man

Separation Allowance \$ _____ Payable to _____ Relationship _____
 Relationship _____

N/E. R.B. No. 13084
 File R.L. 25 D-3202
 Category KA

Discharge, Date and Place _____ Reason _____ Character _____

H. W. & V., Ltd.-9546-16.

| 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. | | | | |
| | | | <u>Arrived in England</u> | <u>4-3-18</u> | <u>S/S SAXONIA</u> |
| <u>15 3 18</u> | <u>23rd Res</u> | <u>Taken on Strength</u> | <u>Bshott Pt</u> | <u>5 3 18</u> | <u>NO 74</u> |
| <u>18. 8. 18</u> | <u>--</u> | <u>S O S to 5th Bn R Osea</u> | <u>--</u> | <u>17. 8. 18</u> | <u>Pt 28230 100889/10/11/12/13/14/15/16/17/18/19/20/21/22/23/24/25/26/27/28/29/30/31/32/33/34/35/36/37/38/39/40/41/42/43/44/45/46/47/48/49/50/51/52/53/54/55/56/57/58/59/60/61/62/63/64/65/66/67/68/69/70/71/72/73/74/75/76/77/78/79/80/81/82/83/84/85/86/87/88/89/90/91/92/93/94/95/96/97/98/99/100</u> |
| <u>6. 9. 18</u> | <u>5th Clnk.</u> | <u>S.O.S. to 43rd Bn</u> | <u>Fuld</u> | <u>26. 8. 18</u> | <u>93. P.I.C.O. 84 d/7-9-18</u> |
| <u>12.10.18</u> | <u>43rd Bn</u> | <u>Killed in action</u> | <u>Ficzo Pt</u> | <u>1.10.18</u> | <u>98</u> |

AUG 1918

B.

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

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

5-4 Aft. 1st DEPOT BN. 1st QUEBEC REGT.

Regimental No. 3080709 Rank Private Name DORAN James William

C. E. F.

Enlisted (a) 3-1-18 Terms of Service (a) 3 Yrs. 20 W. Service reckons from (a) 3-1-18

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)

| 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 | 18-7-18 | Saxonia |
| | | | DISEMBARCKED | England | 4-3-18 ✓ |
| 15.3.18. | 23rd Res. Batt'n. | Taken on strength from Canada | Bramshott. | 5.3.18. | D.P.11 I.74 ✓ |
| 18-8-18 | 23rd Can Res Bn. | Posted to 5th Bn. BEF | Bramshott | 17-8-18 | D. Pt II O. No 230 |
| 19-8-18. | C.I.B.D. | Landed and T.O.S. of 5th C.M.R.B. 23rd Canadian Reserve Battalion | Captain & Adjutant | 18-8-18. | N.R.A. 731. Part 11. 88 d/26-8-18. |
| 23.8.18. | C.I.B.D. | Left for CCRC | | 23.8.18. | N.R.A. 1354. |
| 23.8.18 | C.I.B.D. | Arrived C.I.B.D. | | 23.8.18 | N.R.A. 1312 |
| 26-8-18. | A.A.G. | S.O.S. of 5th. CHR. on transfer to 43rd .Cdn. Inf. Bn. | CCRC | 26-8-18. | N.R. K.R.29. Pt. II Ord. 93 |

(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.]

3080709

Doran JW

| 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 | | | | |
| 7.9.18 | 43rd | Jos | 43rd Cdn Bn | 27.8.18 | Pt. 84 |
| 31-8-18 | " | | Armd 43rd | 26 8 18 | 8213 |
| 4.10.18 | " | | Killed in action | Field | 1.10.18 |
| | | | | | Letter edu Sec 17/1185 |
| | | | | | A. 98/18 |
| | | | | | for Lt.-Col., A. A. G. |
| | | | | | Canadian Section, G. H. Q. 3rd Echelon, B. E. F. |

ORIGINAL

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 DORAN Christian name John William.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 5477 DR.
3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
4. Address (including street and number, if any) St. Agnes De Dundee, Huntington Co, P. Q. c/c J. P. McCauley

Man

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the third day of January 1918; ~~1917~~, by the undersigned medical board sitting at Montreal Quebec.

5. Age as stated 20 Years 3 Months. 6. Apparent age _____ Years _____ Months
7. Height 5 Feet 5 Inches. 8. Weight 123 Pounds.
9. Chest measurement { Minimum 33 1/2 Ins. Maximum 36 7/8 Ins. 10. Complexion Ruddy { Eyes Brown Hair Black.
11. Physical development Good { Good Fair Poor 12. Smallpox marks 0
13. Number of vaccination marks { Right arm 0 Left arm 1 14. When vaccinated last Child
15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

16. Slight defects but not sufficient to cause rejection Dental
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

A-2

W. G. B. ... President. Amel Roy Capt Member.
M. G. ... Member.

| Date | Result | VACCINATIONS | Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|-------------------|--------|-------------------------|---------------------|--------|---------------------------------|
| <u>FEB 5 1918</u> | | <u>J. A. Gaine Capt</u> | <u>3.1.18</u> | | <u>FHB one cap M.O.</u> |
| | | | <u>M.O. 11.1.18</u> | | <u>FHB one M.O.</u> |
| | | | <u>M.O. 21.1.18</u> | | <u>FHB one M.O.</u> |

Joined third day of January 1918 at Montreal Que.

| CORPS | REG'TL NUMBER | HABITS | DATE |
|--|----------------|---------------|-----------|
| <u>1st DEPOT BN. 1st QUEBEC REG'T.</u> | <u>3080709</u> | <u>C.E.F.</u> | <u>23</u> |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION | DATE | DISEASE | RESULT |
|-----------------|---------------------|-------------|-------------------|
| <u>Montreal</u> | <u>3/1/18</u> | <u>None</u> | <u>A-2</u> |
| <u>MONTREAL</u> | <u>FEB 6 - 1918</u> | <u>None</u> | <u>A E Vipond</u> |

Hearing R. Ear L.

Eyesight R. D. = 40
L. D. = 40

Capit

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

Amel Roy

Signature of Man

B.

FORM OF WILL

I, DORAN John William (Name in full)
Regimental Number 3080709 serving in 1st DEPOT BN. 1st QUEBEC REG'T.

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

I devise all my real estate unto

Miss Catherine McAuley
90. Huntingdon
St Agnes, de Dundee, P.Q.
Canada

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

absolutely, and my personal estate I bequeath to

Miss Catherine McAuley
90 Huntingdon
St Agnes de Dundee, P.Q.
Canada

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

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 9th day of January A.D. 1918

James William Doran Signature of Soldier.

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

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

Signature of First Witness John R. Dineley

Address of Witness Guy St. Bonaventure

THE TWO
WITNESSES

Occupation of Witness Lieut. O. G.
B Co'y. 1st Depot Bn., 1st Quebec Reg't.

MUST
SIGN HERE

Signature of Second Witness Richard Fournier

Address of Witness Guy St. Bonaventure Montreal

Occupation of Witness Lieut. "B" CO'Y. 1st DEPOT BN. 1st QUEBEC REG'T.

FORM OF WILD

DONALD JOHN WILLIAM

BOBBER

BRITISH AIR MAIL

MADE IN CANADA

POSTAGE

PAID

RECEIVED

NOV 1950

1000

1000

MILITARY SERVICE ACT, 1917.

DUPLICATE

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 DORAN Christian name John William.
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3. Consecutive number on schedule of men reporting for service (if he appears on it)
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6. Apparent age Years Months
7. Height 5 Feet 5 Inches
8. Weight 123 Pounds
9. Chest measurement { Minimum 33 1/2 Ins. Maximum 36 1/4 Ins.
10. Complexion Ruddy { Eyes Brown Hair Black
11. Physical development { Good Fair Poor
12. Smallpox marks
13. Number of vaccination marks { Right arm 0 Left arm 4
14. When vaccinated last Child
15. Distinctive marks and marks indicating congenital peculiarities or previous disease

16. Slight defects but not sufficient to cause rejection Dental
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



Signature of Man

Handwritten signatures of H. B. ... President, W. ... Member, and ... Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes entries for J. A. Jamie Capt. M.O. and FtHc one dose M.O.

Joined third day of January 1918 at Montreal Que.

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Includes 1st DEPOT BN. 1st QUEBEC REG'T. 3080709

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT. Includes Montreal MONTREAL, 3/1/18, None nil, a-2, a E beyond

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

Handwritten signature: Capt ... President Board

| | | | | | | | |
|--|----------------|---|-------------------|---|----------------|----------------|--------|
| ASSIGNED PAY | ENGLAND | SEPARATION ALLOWANCE | ENGLAND OR CANADA | NAME: DORAN Jas. William | | | |
| EFFECTIVE DATE: 12.18.16.18. | | EFFECTIVE DATE: -- | | NUMBER: 3080989 | | | |
| AMOUNT: 15.00 | | AMOUNT: -- | | PARTICULARS OF RANK OR APPOINTMENT | | | |
| 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. | | AUTHORITY | | | |
| <i>Mrs. Catherine McQuibban, Mrs. Thos Wright, (Aunt) 1, Lonsdale Terrace, Seaton, nr Worthington, Cumberland.</i> | | | | DATE EFFECTIVE | | | |
| | | | | RANK OR APPOINTMENT | | | |
| | | | | <i>Plc.</i> | | | |
| | | | | UNIT AND TRANSFERS | | | |
| | | | | ORIGINAL UNIT: <i>1st Depo Bn. 1st A.R.L.</i> | | | |
| | | | | DATE ACCOUNT FIRST OPENED: -- | | | |
| | | AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'S'FO | | | |
| | | | | UNIT TRANSFERRED TO | | | |
| | | <i>84</i> | <i>7.9.18</i> | <i>1.9.18 20.9.18</i> | | | |
| | | | | <i>4^{3rd} Battl</i> | | | |
| | | <i>Killed in Action 1.10.18.</i> | | | | | |
| | | <i>b.L. A346. 16.10.18.</i> | | | | | |
| 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 |
| | | | | | | | |
| | | DAILY RATES OF PAY AND ALLOWANCES | | | | | |
| | | AUTHORITY | PAY | F.A. | P.F.A. | SUBS CE ALL'CE | |
| | | | <i>1</i> | <i>-</i> | <i>10</i> | | |

| PARTICULARS OF RENDERING NON-EFFECTIVE:-- | | | | | | | | | | | |
|---|----------------------|-------------|------|---|--------------|------|-----------|-----------|-------------|----------|------------|
| MONTH | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR 1 | DR 2 | DR 3 | DR 4 | BALANCE | DEFERRED | SEPARATION |
| <i>Mar 18</i> | <i>Salce Card</i> | | | | | | | | <i>570</i> | | |
| | <i>Apr P & A</i> | <i>3300</i> | | <i>AR 60 23rd Res Bn 13/4/18</i> | <i>487</i> | | | <i>15</i> | <i>930</i> | | |
| | | | | <i>" 164- " 30.4.18</i> | <i>- 243</i> | | | | <i>2370</i> | | |
| | | <i>33 -</i> | | | <i>730</i> | | | <i>15</i> | <i>1640</i> | | |
| <i>May</i> | <i>P & A</i> | | | <i>Can app?</i> | | | | <i>15</i> | <i>140</i> | | |
| | | <i>3410</i> | | <i>AR 341 23 Res Bn 15/5/18</i> | <i>730</i> | | | | <i>2820</i> | | |
| | | | | <i>G4005/36 " 6/5/18</i> | <i>132</i> | | | | <i>2688</i> | | |
| | | | | <i>AR 545 " 31/5/18</i> | <i>730</i> | | | | <i>1958</i> | | |
| | | <i>3410</i> | | | <i>1592</i> | | | <i>15</i> | | | |
| <i>June</i> | <i>P & A</i> | <i>33</i> | | <i>CR 369517 £ 3-1-8</i> | | | <i>15</i> | <i>1</i> | <i>5258</i> | | |
| | | | | <i>AR 732 23rd Res Bn 15/6/18</i> | <i>730</i> | | | | <i>3458</i> | | |
| | | | | <i>" 834 " 22/6/18</i> | <i>730</i> | | | | <i>2298</i> | | |
| | | <i>33</i> | | | <i>1460</i> | | <i>15</i> | | | | |
| <i>July</i> | <i>P & A</i> | <i>3410</i> | | <i>CR 3920 £ 15-3-1-8</i> | | | <i>15</i> | | <i>4208</i> | | |
| | | | | <i>AR 976 23rd Res Bn 13.7.18</i> | <i>730</i> | | | | <i>3478</i> | | |
| | | | | <i>" 1096 " 27.7.18</i> | <i>730</i> | | | | <i>2748</i> | | |
| | | <i>3410</i> | | | <i>1460</i> | | <i>15</i> | | | | |
| <i>Aug</i> | <i>PP</i> | <i>3410</i> | | <i>CR 38329 £ 3-1-8</i> | | | <i>15</i> | | <i>4658</i> | | |
| | | | | <i>AR 1227 " 14/8/18</i> | <i>1947</i> | | | | <i>2711</i> | | |
| | | | | <i>" 996 9th Can Inf Bde 20/8/18</i> | <i>357</i> | | | | <i>2354</i> | | |
| | | <i>3410</i> | | | <i>2304</i> | | <i>15</i> | | | | |
| <i>Sept</i> | <i>P.P</i> | <i>33</i> | | <i>D22045 £ 3 1 8</i> | | | <i>15</i> | | | | |
| | | | | <i>AR 1101 9th Bn 14.9.18</i> | <i>357</i> | | | | <i>3440</i> | | |
| | | | | <i>" 1401 " 22.9.18</i> | <i>357</i> | | | | | | |
| | | <i>33</i> | | | <i>714</i> | | <i>15</i> | | | | |

F D W

NUMBER 3080709 RANK

NAME DORAN J. W.

| MONTH | PARTICULARS | CR. 1. | CR. 2. | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4. | BALANCE | DEFERRED | SEPARATION |
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| | Bal Fwd. | | | | | | | | 34 40 | | |
| Oct | pp | 34 10 | | D65282. | | | 15. | | 53 50 | | |
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| 1919 | June | | | Cheque 5793. 14/5/19 | | | | | | | |
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| PERIOD | | PAY AND FIELD ALLOWANCE | | | WORKING PAY | | | SEPARATION ALLOWANCE | ASSIGNED PAY CREDITS | ANY OTHER CREDITS | TOTAL CREDITS | SEPARATION ALLOWANCE | CASH PAYMENTS DURING THE MONTH | | | | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE CARRIED FORWARD | | NUMBER OF ACQUITTANCE ROLLS | | NUMBER OF S.A. AND A.P. CHEQUE | | REMARKS. | |
|--------|----|-------------------------|------|----|-------------|-------------|------|----------------------|----------------------|-------------------|---------------|----------------------|--------------------------------|---|---|---|--------------|---------------|--------------|-------------------------|-------|-----------------------------|---|--------------------------------|--|----------|--|
| FROM | TO | NO. OF DAYS | RATE | \$ | C. | NO. OF DAYS | RATE | \$ | C. | \$ | C. | \$ | C. | 1 | 2 | 3 | 4 | \$ | C. | CREDIT | DEBIT | 1 | 2 | | | | |
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