

Fourth M. D. First Depot Battalion First Quebec Regiment

CSH

Regtl. No. 3081605

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class

M
6 leaf

1. Surname FLYNN
2. Christian name John
3. Present address 25 Coursol St. Montreal, P.Q.
4. Military Service Act letter and number 126383 DC
5. Date of birth 27th. February 1896
6. Place of birth Montreal, P. Q.
7. Married, widower or single Single
8. Religion Roman Catholic
9. Trade or calling Driver
10. Name of next-of-kin James Flynn
11. Relationship of next-of-kin Father
12. Address of next-of-kin 25 Coursol St. Montreal, P. Q.
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any None *****
15. Medical Examination under Military Service Act:—
(a) Place Montreal, P. Q. (b) Date Jan. 22nd 1918 (c) Category A2

DECLARATION OF RECRUIT

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

John Flynn (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs. 11 mths.
Height 5 ft 7 ins.
Chest measurement fully expanded 36 ins.
range of expansion 3 ins.
Complexion Fair
Eyes Blue
Hair Dark Brown

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

RS 40
LS 120
Ears OK

Major
for O.C. 1st Depot Bn 1st Quebec Regiment
O. C. First Depot Btl.
First Quebec Regt.

Place Montreal, P. Q. Date January 22nd. 1918

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1913

Class

1. Name of recruit: James H. ...

2. Christian name: James

3. Present address: ...

4. Military Service Act form number: ...

5. Date of birth: ...

6. Place of birth: ...

7. Married 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 Army Medical ...

14. Particulars of previous military or naval service: ...

15. Medical examination under Military Service Act: ...

16. Place of examination: ...

DECLARATION OF RECRUIT

I, the undersigned, do solemnly declare that the above particulars are true to the best of my knowledge.

Signature of Recruit: ...

DESCRIPTION OF CALLING UP

Height: ...

Weight: ...

Chest measurement: ...

Completion: ...

Eyes: ...

Hair: ...

Previous disease: ...

REGIMENTAL DOCUMENTS

NAME

Thyrum John

REGT. NO.

3081605

UNIT

H. Q. FILE NO.



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 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)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3 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)					
<i>2 case card</i>					
<i>1 15172</i>					
<i>mt 11-3-20</i>					

TH



11123

DEATH
Category
Krima

DISCHARGE
Category

DESERTION

Box # 3162

9-30
9-30
2-30



3081605
I.D. number
No. d'identification

FLYNN
Surname
Nom de famille

JOHN
Given names
Prénoms

KIA 27-9-18

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

3162

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»

E.M.W.

Number

3081605 ✓

Rank

Pvt ✓

Surname

FLYNN ✓

Christian Name

John ✓

Units

14th Bn Can Inf ✓

Theatre of War

France ✓

Date of Service

7/6/18 ✓

Remarks

(M) Mrs. J. Flynn ✓

Latest Address

409 B. St. Antoine St.
Montreal, P.Q. ✓

Roll No.

13 Page 16535- ✓

200m.-2-21.M.

DATE

HISTORY

CASUALTY BRANCH

(FILES)

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

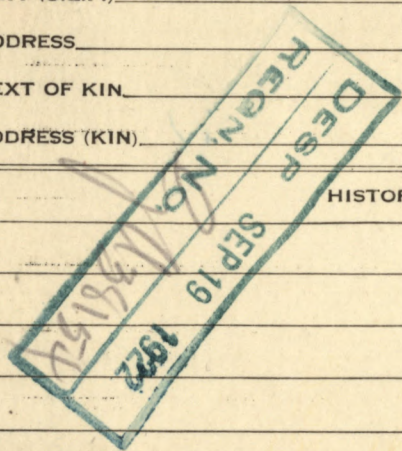
ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

HISTORY

DATE



SURNAME.

Flynn.

CARD NO. X

CHRISTIAN NAMES

John.

REGL. NO. 3081605.

RANK

~~Pte~~ 2/Cpl.

UNIT

1st Que. Regt. 1st Div. Br (5th R. 10)

FORMER CORPS

Nil.

FOLL.

NEXT OF KIN.

NAMES IN FULL

Flynn, James.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

~~25 Courcel St., Montreal,~~
P.Q.

401 - B. St. Antoine St.

(auth. S.A.A. 6/5/18)

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada. Montreal, P.Q.

DATE

Feb. 27th 1896.

PLACE OF ATTESTATION

Montreal, P.Q.

DATE

Jan. 22nd 1918.

S.S. Saxonia fr. Halifax 18-2-18.



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

NAME

Flynn John

REGT'L. No.

3081605

RANK AND CORPS

Pte. 14th Bn. form 1st Que

H. Q. FILE NO 649

CABLE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

H200345 15-10-18

H396 10-15-18 K. in A. Sept 27-1918

M of K. James Flynn "father"

401 B. St. Antoine. St. Montreal P. Q.



LIST No.

HOSPITAL

**DATE OF
ADMISSION**

REMARKS



649-T-9569

✓ ✓ ✓ ✓
FLYNN, Pte. John No. 3081605

14th - 12th

Not elig. for 1914-15 Star

MEDALS

Mother, Mrs. J. Flynn,

M 1029

409 B. St. Antoine St.,
Montreal, P.Q.

Decorations.

P. & S.

Father, John Flynn,
as above

(Serial no. 766577.)

C. OF S.

Mother, as above



resp. 1/4/20 C. 4024

*OK
H.P.S.*

Scroll Desp. JAN 13 1921 Reqn. No. 29721

Plague Desp. JAN 27 1922 Reqn. No. P 24962

W

Surname

Christian Name or Names

Reg. No.

Flynn

J.

3081005

Rank

Unit

Pte. (14)

Cas. List.

P.S.B. -

Killed in Action

27. 9. 18

18. 10. 18 A 345



*A.M.D. Dept.
Beh. of D.G.M.S. O.M.F.C. London*

Cas. List.

40.5

FORM OF WILL

I, John FLYNN (Name in full)

Regimental Number 3081605 serving in 1st DEPOT BN. 1st QUEBEC REGT.

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

N I L

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

absolutely, and my personal estate I bequeath to

Mrs. Mary Flynn (mother)

25 Coursol Street

Montreal, P. Q.

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 22 day of January A.D. 1918

John Flynn

Signature of Soldier.

*N.B. Personal estate includes pay, arrears, interest, and other benefits payable to the soldier, and 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 Louis Berjean

Address of Witness Guy St. Bn. Montreal Que

THE TWO WITNESSES

Occupation of Witness Soldier

MUST SIGN HERE

Signature of Second Witness (J. Kemp)

Address of Witness Guy St. Barreys. Montreal P.Q.

Occupation of Witness Soldier

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 FLYNN Christian name John
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 126383 DC
3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
4. Address (including street and number, if any) 25 Coursol St. Montreal, P. Q.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 22nd. day of January 1918 ~~1917~~, by the undersigned medical board sitting at Montreal, P. Q.

5. Age as stated 21 Years 11 Months. 6. Apparent age _____ Years _____ Months
7. Height 5 Feet 7 Inches. 8. Weight 125 Pounds.
9. Chest measurement { Minimum 32 Ins. 10. Complexion Fair { Eyes Blue
Maximum 35 Ins. Hair Fair
11. Physical development. { Good
Fair
Poor 12. Smallpox marks _____
13. Number of vaccination marks { Right arm _____
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 Bad teeth
The man denies having had { Rheumatism We find no evidence of past { Rheumatism
Tuberculosis Tuberculosis
Syphilis 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

R. D. 40
L. D. 120
R. Ear OK
L. Ear OK

Signature of Man
CORPUS ARCHIVE

(sgd) C. L. Brown, Capt President.

(sgd) H. P. Stockwell Capt Member. (sgd) J. R. Gauthier Capt Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
FEB 5 1918		Malaria M.O.	23/1/18		T. G. Flynn M.O.
		M.O.	27/1/18		T. G. Flynn M.O.
		M.O.			T. G. Flynn M.O.

Joined 22nd day of January 1918 at Montreal, P. Q.

CORPS	REG'TL NUMBER	HABITS	DATE
<u>1st DEPOT BN 1st QUEBEC REGT.</u>	<u>3081605</u>		<u>23rd RESERVE BATTAL</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>6.2.18</u>	<u>Nil</u>	<u>A. G. Flynn</u> Capt

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.

5th Dist En, Is¹ Quebec

E.E.

Rank

Name FLYNN John

Reg'l No. 3081605

Unit

If in perm. Corps, }
What Unit? }

Married or Single Single.

Place and Date of Enlistment Montreal P.Q. Jan. 22nd 1918

Place of Birth Montreal P.Q.

Name and Address, Next-of-Kin James Flynn,

25, Coursol Street, Montreal, PQ

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 14708

File R.L. 2057 222

KILLED IN ACTION

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—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.				
		Arrived in England		4-3-18	S/S SAXONIA
15 3 18	23 rakes	Taken on Strength	Briott Pt	5 3 18	2074
6-6-18		S.P. 14 Bu		5-6-18	107
11. 10. 18	14 Bu	Killed in Action	Field P.	27.9. 18	138

P.B. 103 CHECKED 8 JUN 1918



Do 75 11-6-18
1472

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

M. F. W. 54. (A. F. B. 105.

500M.—9-16

H. Q. 1772-39-9-0.

Casualty Form—Active Service.

1st DEPOT BN 1st QUEBEC REGT

C.

Unit, Regiment or Corps

Regimental No. 3081605 ✓ Rank Private Name FLYNN John ✓

Enlisted (a) 22-1-18 ✓ Terms of Service (a) Army War ✓ Service reckons from (a) 22-1-18 ✓

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. 38, 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. 38, or other official documents
Date	From whom received				
			<u>Embarked Canada</u>	<u>18/2/18</u>	<u>Saionia</u>
			<u>DISEMBARKED</u>	<u>England</u>	<u>4-3-18</u> ✓
<u>15.3.18</u>	<u>23rd Res. Batt'n.</u>	<u>Taken on strength from Canada</u>	<u>Bramshott.</u>	<u>5.3.18.</u>	<u>D.P.11 I.74</u> ✓
<u>6/6/18</u>	<u>do</u>	<u>Posted to 14th Batta</u>	<u>do</u>	<u>5/6/18</u>	<u>DP 157</u> <u>1st Lt</u> <u>23rd Can. Res. Batta</u>
	<u>G. B. D.</u>	<u>ARRIVED G. B. D.</u>	<u>FRANCE</u>	<u>7.6.18</u>	<u>N. R. D. 7.6.18</u> <u>PART II ORDERS</u> <u>No. 7 D. 11.6.18</u>
	<u>C. B. D.</u>	<u>LEFT C. B. D. FOR</u>	<u>14 Bn</u>	<u>13/8/18</u>	<u>N. R. D. 1343</u>
	<u>14</u>	<u>ARRIVED 14 BN.</u>	<u>FIELD</u>	<u>15.8.18</u>	<u>B. 213 D. 17.8.18</u>

CERTIFIED CORRECT.
 10 JUN 1918
 CAN. RECORDS, LONDON.

(1) 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.
 (2) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]



SEPARATION ALLOWANCE.		ENGLAND OR CANADA.	NAME: <i>FLYNN John</i>	
EFFECTIVE DATE:-			NUMBER: <i>3081605</i>	
AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT		
TY } WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.		AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
				<i>Private</i>
		UNIT AND TRANSFERS		
		ORIGINAL UNIT: <i>1st Inf Bn 1st BRD.</i>		
		DATE ACCOUNT FIRST OPENED:-		
		AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S&D
		<i>75 Eff.</i>	<i>1-7-18</i>	<i>14 Bn</i>
		<i>H. in A.</i>	<i>1-2-19</i>	<i>24-1-19</i>
				<i>N.E."D"</i>
KS } 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	
DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY		PAY	F.A.	P.F.A.
		<i>1.00</i>	<i>-10</i>	

VE:-

Cr. 1	Cr. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		<i>C.A.P.</i>				<i>20</i>	<i>-30</i>		
<i>33</i>		<i>AR. 64. 23 Res. 15.4.18</i>	<i>243</i>				<i>1970</i>		
		<i>" 169 " 30.4</i>	<i>243</i>				<i>1084</i>		
<i>33</i>			<i>486</i>			<i>20</i>	<i>844</i>		
<i>34 10</i>		<i>C.A.P.</i>				<i>20</i>			
		<i>AR. 346 " 15.5.</i>	<i>243</i>				<i>20 3/1</i>		
		<i>" 549 " 31.5.</i>	<i>243</i>				<i>1768</i>		
<i>34 10</i>			<i>486</i>			<i>20</i>			
<i>33</i>		<i>C.A.P.</i>				<i>20</i>	<i>3068</i>		
		<i>Du. 842 C.B.R.D. 15.6.</i>	<i>446</i>				<i>2622</i>		
		<i>" 1024 " 28.6</i>	<i>446</i>				<i>2176</i>		
<i>33 -</i>			<i>892</i>			<i>20</i>			
<i>34 10</i>		<i>A.P. ban (July)</i>				<i>20</i>	<i>3586</i>		
		<i>AR. 1211 C.I.B.D. 11.7.18</i>	<i>446</i>				<i>3140</i>		
		<i>" 1394 " 24.7.18</i>	<i>446</i>				<i>2694</i>		
<i>34 10</i>			<i>892</i>			<i>20</i>			
<i>34 10</i>		<i>A.P. ban (Aug)</i>				<i>20</i>	<i>4104</i>		
		<i>AR 1561 - C.I.B.D. 7.8.18</i>	<i>446</i>				<i>3658</i>		
		<i>" 516 3rd Inf Bde 24.8.18</i>	<i>357</i>				<i>3301</i>		
<i>34 10</i>			<i>803</i>			<i>20</i>			
<i>33</i>		<i>A.P. ban</i>				<i>20</i>	<i>4601</i>		
		<i>AR 572 - 1st D. Detail 5.9.18</i>	<i>357</i>				<i>4244</i>		
		<i>" 619 - 3rd Inf Bde 12.9.18</i>	<i>357</i>				<i>3887</i>		
<i>33</i>			<i>715</i>			<i>20</i>			
<i>34 10</i>		<i>C.A.P.</i>				<i>20</i>	<i>5297</i>		
<i>34 10</i>						<i>20</i>			
<i>22 c</i>		<i>O/c. Det pay. H. in A. 27.9.18.</i>	<i>34 10</i>						
			<i>21 10</i>						
							<i>1887</i>		
							<i>3887</i>		
							<i>3887</i>		

NON EFFECTIVE ACT.

NESTING OF
1887

NAME

N -

Jokti

DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
-------	-------	-------	-------	---------	----------	------------

NON EFFECTIVE ACT.

Date of Enlistment

MILITIA AND DEFENCE

Enlisted 22-12-17

Date of Assignment

Separation and Assigned Pay Branch

F 3244
3849 1-2-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

AUTHORITY FOR NEW ACC'T.

M.R.

RATE OF ASSIGNMENT

20.50			
-------	--	--	--

11/2/10/7/5
S.K.

PARTICULARS OF SEPARATION ALLOWANCE

No. 2081605
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name *Flynn J.*
 Battalion 1st. Dpt. Bn. 1st Ave. Regt.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Mary Flynn*
 Address *25 Laurier St.*
 23-4-18 Change of Address *Montreal, Ave*
 1 *Hol^B St. Antoine St.*
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Mar 9 18	M 77372		40	40	R
Apr 9 18	9 12010		20	20	P
May 0 18	Q 18690		20	20	P
June 11 18	M 21411		20	20	P
July 11 18	M 28764		20	20	P
Aug 11 18	M 36760		20	20	P
Sept 11 18	R 48377		20	20	P
Oct 11 18	R 52909		20	20	M

REMARKS M.R.O. B 23-4-18.

KILLED IN ACTION }
 DIED OF WOUNDS } DATE 27-9-18
 C. L. No. 236 fol 3 DATE 19-10-18
 M. R. O. 17966 TO DESTROY RENDERED 24-10-18
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
 6146-2-16
 CLERK *F. Mabb* DATE 24/18

J. A. Kincaid
 5-3-18
 M. F. W. 128.
 4000c-5-17-1772 39-1141
 L. L. 22520-M & D. 7963

MEDICAL HISTORY SHEET

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service for exemption or a report for service, or, although having made one, he does not know the number, he will be required to attach to his report for service or claim for exemption a medical history sheet (which will be handed to him) must be attached by him to a report for service or claim on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the schedule to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet must be attached to the report for service or claim on application to the District Officer Commanding unless instructions have been given by the latter to the Deputy Registrar.

1. Surname Flynn Christian name JOHN
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)..... 25 Coursol St City

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

5. Age as stated 20 Years 2 Months.
6. Apparent age _____ Years _____ Months
7. Height 5 Feet 7 Inches.
8. Weight 125 Pounds.
9. Chest measurement { Minimum 32 Ins. Maximum 35 Ins.
10. Complexion Fair { Eyes Blue Hair Fair
11. Physical development. { Good Fair Poor
12. Smallpox marks.....
13. Number of vaccination marks { Right arm _____ 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 None
- The man denies having had { Rheumatism Tuberculosis Syphilis } We find no evidence of past { Rheumatism Tuberculosis Syphilis }
- (Strike out disease admitted or suspected.)

R. D. =	<u>40</u>
L. D. =	<u>720</u>
R. EAR	<u>OK</u>
L. EAR	<u>OK</u>

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A11

A. P. Stockwell Capt Member. C. Brown Capt President. A. G. D. ... Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>FEB 5 1918</u>		<u>H. Boone Capt</u>	<u>23/1/18</u>		<u>A. G. D. ...</u>
			<u>27/1/18</u>		<u>A. G. D. ...</u>
			<u>FEB 1 1918</u>		<u>H. Boone Capt</u>

Joined 22nd day of January 1918 at Montreal



CORPS	REG'TL NUMBER	HABITS	DATE
<u>1st DEPOT BN. 1st QUEBEC REG'T.</u>	<u>3081605</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>6.2.18</u>	<u>Nil</u>	<u>A. G. D. ...</u>

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.

Signature of Man John Flynn

