

Card  
Rev.  
Jan 2/18

2nd. DEPOT BATTALION,

Eastern Ontario Regiment

Regiment

3

M. D.

Regtl. No. 4025041

3320041



# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)



DUPLICATE

1. Surname Hall
2. Christian name Sebra
3. Present address Wakefield Que
4. Military Service Act letter and number 257669 SC.
5. Date of birth 12th July 1892
6. Place of birth Wakefield Que.  
(town, township or county and country)
7. Married, widower or single Single
8. Religion Methodist.
9. Trade or calling Carpenter.
10. Name of next-of-kin George Hall
11. Relationship of next-of-kin Father
12. Address of next-of-kin Wakefield Que.
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any Nil.
15. Medical Examination under Military Service Act:—  
(a) Place Hull Que (b) Date 3rd November (c) Category A 11

## DECLARATION OF RECRUIT

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

Sebra Hall (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age 24 yrs. 3 mths.

Height 5 ft. 4 ins.

Chest measurement } fully expanded 37 ins.  
range of expansion 4 ins.

Complexion Fair

Eyes Blue

Hair Fair

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

Nil.

T. B. Power Lt Col

O. 2nd. DEPOT BATTALION Depot, Btln.  
Eastern Ontario Regiment Regt.

Place OTTAWA

Date JAN 8 1918



# PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

PARTICULARS

DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

1. Name of recruit

2. Present address

3. Military service No. (letter and number)

4. Date of birth

5. Height of recruit

6. Height of recruit (feet and inches)

7. Height of recruit (centimetres)

8. Height of recruit (feet and inches)

9. Type of calling

10. Name of next of kin

11. Relationship to recruit of kin

12. Address of next of kin

13. Whether or not a member of the reserve militia

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

15. Medical examination under Military Service Act

16. Date of birth

## DECLARATION OF RECRUIT

I, the undersigned, being the

next of kin of the recruit named above, hereby declare that the

particulars given by me and the recruit

are true and correct.

Signature of Recruit

## DESCRIPTION OF CALLING

1. Name of calling

2. Nature of calling

3. Hours of work

4. Hours of rest

5. Hours of recreation

6. Hours of travelling

7. Hours of waiting

8. Hours of other duties

9. Hours of other duties

10. Hours of other duties

11. Hours of other duties

12. Hours of other duties

13. Hours of other duties

14. Hours of other duties

15. Hours of other duties

16. Hours of other duties

17. Hours of other duties

18. Hours of other duties

19. Hours of other duties

20. Hours of other duties

Date

Place

Signature



C.E.F.

HALL SEBRA

3320041

02983

DEMOB.





Box  
3951



REGT'L. No.

3320041

H. Q. FILE No. 649

NAME

Hall, Lebra

RANK AND CORPS

Plt. 21st Bn (former 2nd)

CABLE

FOLLOWS

No.

FOLLOWS

NO.

DATE

NATURE OF CASUALTY

NO.	DATE	NATURE OF CASUALTY
mox. 699	3-11-18	Hall, George (father) Wakefield K in A. Oct 11th 1918
H.L. 43612	2-11-18	

**LIST No.**

**HOSPITAL**

**DATE OF  
ADMISSION**

**REMARKS**



58P

Number 3320041 Rank Pte

Surname HALL

Christian Name Lebra

Units 2/Bn Can. Inf. Theatre of War France

Date of Service 11-6-18

Remarks Mother

Latest Address Mrs. Margaret Hall  
Wakefield P. Q.

Roll No. B Page 12531

DESP APR 29 1922

REGN. NO. GA12271.



SURNAME. *Hald*CHRISTIAN NAMES *Sebra*REGL. NO. *3320041*. RANK *Pte.*UNIT *East Ont Regt. 2<sup>nd</sup> Dps. Bn. (1<sup>st</sup> RD)*FORMER CORPS *Nil*

FOLL.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Hall George*RELATIONSHIP TO SOLDIER *Father*ADDRESS *Wakefield P.Q.*COUNTRY OF BIRTH *Canada*PLACE OF ATTESTATION *Ottawa Ont.*DATE *July 12<sup>th</sup> 1892*DATE *Jan. 8<sup>th</sup> 1918.**From Halifax per St. Lafland 1/2/18*



MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

*Carpenter*

RELIGION

*Methodist*

DESCRIPTION.

APPARENT AGE

*24.*

YEARS

*3.*

MONTHS

HEIGHT

*5*

FEET

*4 1/2*

INCHES

CHEST MEASUREMENT

*37.*

INCHES

EXPANSION

*4.*

INCHES

COMPLEXION

*Fair*

EYES

*Blue.*

HAIR

*Fair*

DISTINGUISHING MARKS

*Nil*

MEDICAL EXAMINATION.

PLACE

*Hull. P. Q.*

DATE

*Nov 3<sup>rd</sup> 1917.*

*Present Address*

*Wakefield P. Q.*



No. 3320041

RANK

Pvt.

NAME

Hall Sebra

T. O. S. 3-1-18

UNIT

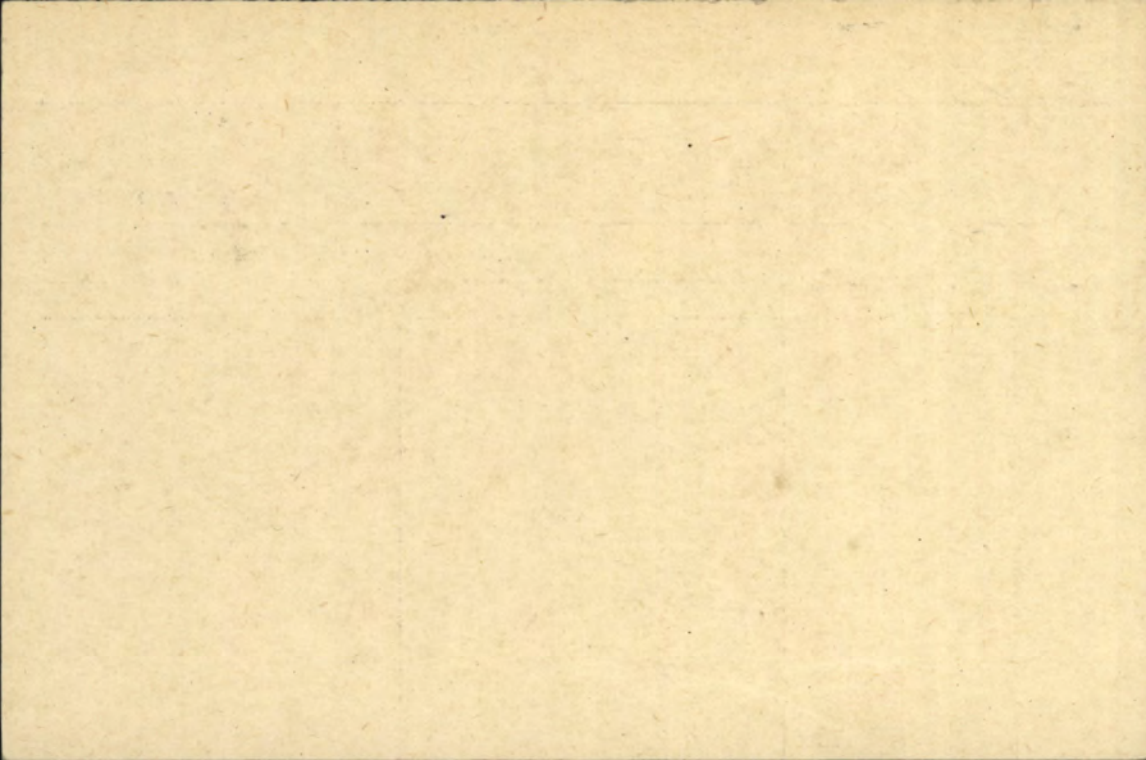
2nd. Depot Battalion E.O.R.

D.O. 3073-1-18

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Jan. 3	1918 Jan. 31	n n	O/S 8-2-18	D.O. 3988-2-18.
Feb.				





Hall, Sebra 3320041 649-H-

21<sup>st</sup> Bn  
*[Handwritten signature]*

*was 2eig. for 14/15 Star.*

Medals & Decorations: Mother: Mrs Margaret Hall

Scroll Desp. DEC 17 1920 Reqn. No. 25513 Wakefield, P.C.

Plaque Desp. SEP 6 1921 Reqn. No. P5149 7383

Plaques & Scrolls: Father: Mr. George Hall,  
Wakefield, P.C.

*Serial No. 761761*

Cross of Sacrifice: Mother: See Above.

Desp **MAY 15 1920** 67450



Ms.







Surname

Christian Name or Names

Reg. No.

*Hall.*  
Rank

*J.*  
Unit

3320041

*Pte.*

*Co (2)*

Cas. List.

*R. F. Base.*

*2. 11. 18 asd/h*

*Billed in action 11. 10. 18.*

A.M.D. 2 DEPT.  
Bch. of D.G.M.S. O.M.F.C. London

A.M.D. 2 DEPT.  
Bch. of D.G.M.S. O.M.F.C. London



Cas. List.



NOI Drft 2nd Depot Bn E O R To 6th Res Bn

TLH Rank Name HALL Sebra Reg'l No. 3320041  
 Unit If in perm. Corps, } Married or Single Single  
 What Unit? }

Place and Date of Enlistment Ottawa, 8th. Jany. 1918 Place of Birth Wakefield, Que

Name and Address, Next-of-Kin George Hall, Wakefield, Que Relationship Father

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 8374  
 File R.L. 25-H-5046  
 Category KA



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		24-2-18	S/S LAPLAND
26 <sup>th</sup> 18.	6 <sup>th</sup> Res Bn.	T.O.S. from Canada	Seaforth	25 <sup>th</sup> 18	Pt. II D/O. 48. 21st Bn D/O 44
11. 6. 18	"	Posted to 21st Bn O/S.	"	10. 6. 18	137. d/15-6-18.
2. 11. 18	EOR	Killed in action	Field	11. 10. 18	CA361.
30. 10. 18	21st Bn.	Killed in action	"	"	PI D/O 90.







23.9

# FORM OF WILL

I, Sebra Hall (Name in full)  
 3320041  
 Regimental Number ~~4022041~~ serving in 2nd. DEPOT BATTALION,  
~~4075041~~ Eastern Ontario Regiment.  
 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

.....  
*[Signature]*  
 .....  
 Name and Address  
 of person or  
 persons to whom  
 it is to go.

absolutely, and my personal estate I bequeath to

George Hall (Father)  
Wakefield  
P. Que.  
 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 4 day of January A.D. 191

Sebra Hall. 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 [Signature]

Address of Witness 2nd. DEPOT BATTALION, OTTAWA  
Eastern Ontario Regiment.

THE TWO WITNESSES

Occupation of Witness 2nd Soldier C.B.F.

MUST SIGN HERE

Signature of Second Witness [Signature]

Address of Witness 2nd. DEPOT BATTALION, OTTAWA  
Eastern Ontario Regiment.

Occupation of Witness Soldier C.B.F.





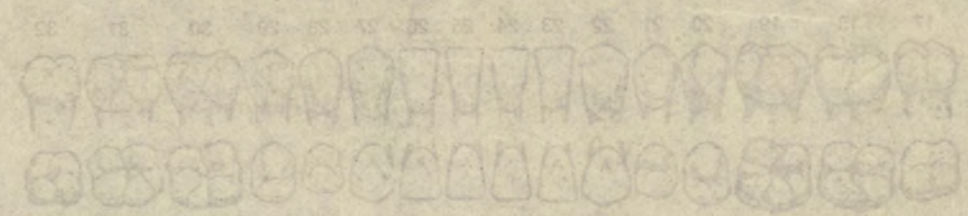
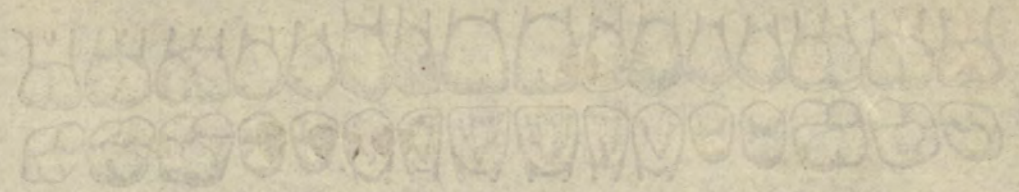






INSTRUCTIONS

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 time 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.



1000  
1000

1000

1000

1000

1000

1000

1000

1000



















\* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA.

SEPARATION ALLOWANCE. \* C

EFFECTIVE DATE:- 1.3.18

EFFECTIVE DATE:-

AMOUNT:- 10<sup>XX</sup>

AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

WHEN PAYEE OF A.P. IS THE SAME AS PA  
WORD "SAME" ONLY TO BE WRITTEN IN

*Geo Hall.  
Wakefield 2us  
father*

Stopped Off 1-11-18

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES V  
BY INSERTION OF DATE CHARGED IN RED

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY

PARTICULARS OF RENDERING NON-EFFECTIVE:-

Killed in Action 11

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PAR
Mar 31	Bal forward			
Apr	P/P	33		
				AR 39. 6 R
				" 272 "
May	P/P	34 10		
				AR. 592. 6 R
				" 948 "
June	"	34 10		
		33 -		v.a.p.
				AR 1281. 6 R
July	"	33		
				AR 852. 6 R
				a.p.
		34 10		AR 1078 4/7
				✓ 1305 16/7
Aug	"	34 10		
				a.p.
		34 10		AR 1567 3/7
				✓ 938 2/7
Sept	-	33		
				" 1104, 2/7
				Gen R, 2/7
				AR 1241, 2/7
Oct	-	33		
		34 10		Ca
		34 10		
Nov	Int. Dep Pay to 31/3/17	154		
		1 54		
May				D. 75598















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

M. F. W. 54. (A. F. B. 403.

500M.—9-16

H. Q. 1772-30-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. *No 1 Coy 2nd. DEPOT BATTALION Eastern Ontario Regiment. to 6 Res Bn*

Regimental No. *332004H 402504H*

Rank. *Pte*

Name. *Hall George Sebra*

Enlisted (a) *83.1.18*

Terms of Service (a) *28 4 wks*

Service reckons from (a) *83.1.18*

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) *Carpenter*

Report Date	From whom received	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
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CERTIFIED CORRECT,  
 JUN 14 1918  
 CAN. RECORDS, CONDON.

		Embarked Disembarked T.O.S. 6th Res. Batt.	Canada England. Seaford	12-2-18. 25-2-18. 25-2-18.	H.M.S. Lapland. Pt-11-B.O. 48.
		DRAFTED TRANSFERRED TO	21st Bn SEAFORD.	JUN 10 1918 PART II No. 137	
	C.O.B.D.	Arrived & Taken on Strength 21st Canadian Battalion.	C.O.B.D.	11-6-18	Part II Ord. 44 @ 15-6-18
	C.I.B.D.	Left for C.C. Rein C.	Field	17-6-18	N.R. 1275.
	C.C. Rein. C.	Arrived. Can. Corps Rein. Camp.	Field	17-6-18	N.R. 910.
	Do.	Left for Unit	Field	6-8-18	N.R.
10/8 -	21st BATTALION	Arrived	Field	7-8-18	B-213.
19/10	Do	Missing after action	Field	11-10-18	B-213
18/10	B.O.C.C	Killed in action	Field	11-10-18	14 B.A.C (14A-18/243) Part II Ord. 90 @ 30-10-18.

*Whogau Major for Lt.-Col. A.A.G.*  
 Canadian Section. G. H. O. 3rd Echelon B.E.F.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.







1868

34370

198512

63. E

20

Perforated sheet for Will from Pay Book of Reg.

No. 3320041  
Name. Pte S. Hall  
Unit. 6th Can Res. Battr.

Military Will

In the event of my death  
I give the whole of  
my personal property and  
effects to my  
mother  
Mrs. Margaret Hall  
Wakefield  
Quebec  
Canada

Signature. S. Hall  
Rank and Reg. Private 6th Can Res.  
Date. April 25<sup>th</sup> 1918

ESTATES BRANCH  
JAN 20 1919  
MILITIA DEPT.

Number. 3320041  
Rank. Pte.  
Name. Hall. S.

Unit. 6th. Canadian. Reserve. Battalion.

CANADIAN. 30 DEC 1918



# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *M.A. 3*

NAME OF SOLDIER

*Levin R. J. Donald*

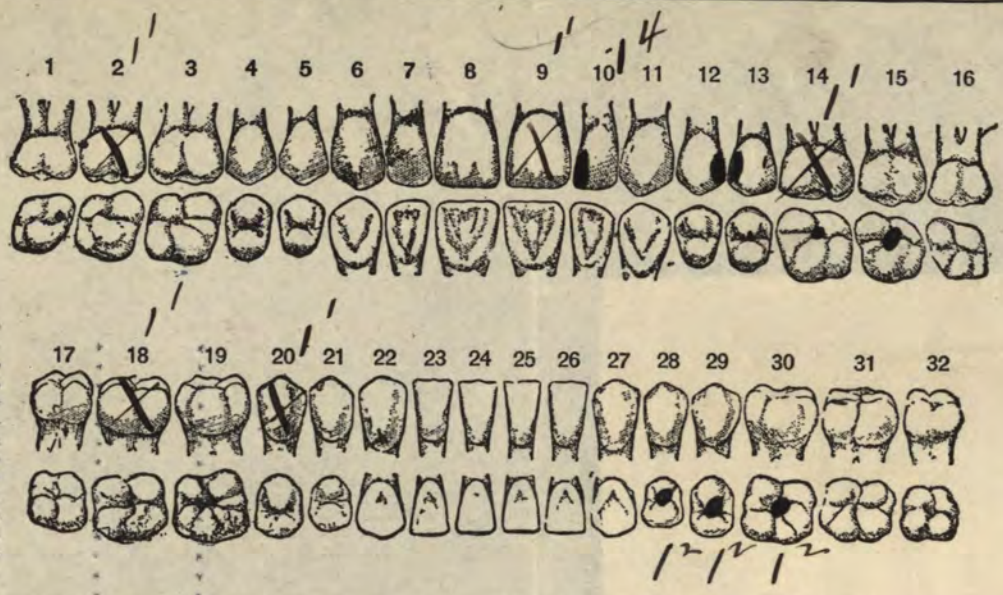
REGIMENT

*252*

RANK

*Pfc*

No. *724590*



## 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	Pyrrhoea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
Condition on first Examination																					
<i>May 09</i>		<i>12</i>	<i>14</i>							<i>1</i>									<i>C. F. McCartney</i>		<i>Complete (Extracting only complete)</i>
		<i>15</i>																			

REGISTERED  
ESTATES, O.M.F.C., LONDON.  
6 MAY 1910  
MILES SECTION



MEDICAL HISTORY SHEET.

257664  
386

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 Hall Christian name Sebra
- 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) Wakefield, Que.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 3rd day of November 1917, by the undersigned medical board sitting at Hull, Que.

- 5. Age as stated 24 Years 3 Months.
- 6. Apparent age \_\_\_\_\_ Years \_\_\_\_\_ Months
- 7. Height 5 Feet 4 1/2 Inches.
- 8. Weight 133 Pounds.
- 9. Chest measurement { Minimum 33 Ins. Maximum 37 Ins.
- 10. Complexion Fair { Eyes Blue Hair Fair
- 11. Physical development Good { Good Fair Poor
- 12. Smallpox marks \_\_\_\_\_
- 13. Number of vaccination marks { Right arm None Left arm None
- 14. When vaccinated last \_\_\_\_\_
- 15. Distinctive marks and marks indicating congenital peculiarities or previous disease \_\_\_\_\_

16. Slight defects but not sufficient to cause rejection  
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 11  
R. D. 15  
L. D. 20  
R. E. normal  
L. E. normal

E. S. Aubrey Member. A. H. Parent President. A. W. ... Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
26-1-18		<u>W. Shullington</u> M.O.	26-1-18		<u>W. Shullington</u> M.O.
		M.O.	2-2-18		<u>W. Shullington</u> M.O.
		M.O.	4-2-18		<u>W. Shullington</u> M.O.

Joined 2 day of January 1917 at Ottawa

Corps	Reg'tl Number	Habits	Date
<u>2nd Det. (Cdn. Engrs)</u>	<u>4023047</u> <u>33 20047</u>		<u>3-1-18</u> <u>FEB 25 1918</u> <u>10/6/18.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.			
STATION	DATE	DISEASE	RESULT

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

ORIGINAL  
Signature of Man Sebra Hall

Ord. to Schedule by    
No. 6







Date of Enlistment

*Autho. MR.*

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

**H**

*Feb 1-18*

OVERSEAS CONTINGENTS

834

RATE OF SEPARATION ALLOWANCE

--	--	--	--

*767#2  
80*

RATE OF ASSIGNMENT

<i>10<sup>00</sup></i>			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. *3320041*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name

*Sebra Hall*

Battalion

*#1 Dft. 2nd Depot Bn. E. O. Reg.*

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name

*George Hall*

Address

*Wakefield, Que*

Change of Address

1  
2  
3  
4

GEORGE HALL,

WAKEFIELD,

QUE.

10

10.00

% 3320041 PTE SEBRA HALL

TEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Feb 1918</i>	<i>677219</i>		<i>10</i>	<i>10</i>	<i>X</i>
<i>Mar</i>	<i>H 96396</i>		<i>10</i>	<i>10</i>	<i>EL</i>
<i>April</i>	<i>H 15560</i>		<i>10</i>	<i>10</i>	<i>EL</i>
<i>May</i>	<i>B 10743</i>		<i>10</i>	<i>10</i>	<i>EL</i>
<i>June</i>	<i>A 13654</i>		<i>10</i>	<i>10</i>	<i>EL</i>
<i>July</i>	<i>W 28565</i>		<i>10</i>	<i>10</i>	<i>L</i>
<i>Aug</i>	<i>D 28108</i>		<i>10</i>	<i>10</i>	<i>L</i>
<i>Sept</i>	<i>C 35492</i>		<i>10</i>	<i>10</i>	<i>L</i>
<i>Oct</i>	<i>E 42353</i>		<i>10</i>	<i>10</i>	<i>L</i>
<i>Nov</i>	<i>C 50445</i>		<i>10</i>	<i>10</i>	<i>L</i>
			<i>100.</i>	<i>100.</i>	<i>claud.</i>

*07778-5-19*

KILLED IN ACTION }  
 DIED OF WOUNDS } DATE *11-10-18*  
 C. L. No. *353* Vol. 1. DATE *5-11-18*  
 M. R. O. # *15810* TO DESTROY RENDERED *8-11-18*  
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE  
 CLERK *Eldon* DATE *8-11-18*

*At Stevens, 20/18*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

M. F. W. 128.  
 400M-5-17-1773 89-1141  
 L. L. 22330-M. & D. 7863.