D Coy 60 Battalion C E F

ATTESTATION PAPER.

No. A 57814

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? Duncan Mason
2. In what Town, Township or Parish, and in what Country were you born? Williamstown Ont.
3. What is the name of your next-of-kin? Mrs B. Mason Brother
4. What is the address of your next-of-kin? Cornwall Ont.
5. What is the date of your birth? 1875 May 20th
6. What is your Trade or Calling? Millwright
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated? yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? If so, state particulars of former Service. 3 years B. Bat. Kingston
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

D Mason (Signature of Man).

A B Cochrane (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Duncan Mason do solemnly declare that the above answers made by me to the above questions 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.

D Mason (Signature of Recruit)

Date 8 July 1915 A B Cochrane (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Duncan Mason, 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.

D Mason (Signature of Recruit)

Date 8 July 1915 A B Cochrane (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 Montreal this 8 day of July 1915

(Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

(Approving Officer)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Present Address

Cornwall Ont.

60

Description of Duncan Mason on Enlistment.

Apparent Age 40 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement: Girth when fully expanded 42 ins.
Range of expansion 2½ ins.

Wt. 175 lbs.

Complexion fair

Eyes Brn

Hair Grey

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic Yes
- Jewish

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).

1 vaccination mark left arm

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 8th July 1915

Place Montreal

J. A. Faure
Lieut A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

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.

D. Mason 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.

M Murcoque (Signature of Officer)

Date July 8 1915.

ATTESTATION PAPER.

No. 748200

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? — Duncan Mason
2. In what Town, Township or Parish, and in what Country were you born? — Williamstown Ont.
3. What is the name of your next-of kin? — ~~John~~ Ben Mason Co.
4. What is the address of your next-of-kin? — Cornwall Ont.
5. What is the date of your birth? — May 20th 1875
6. What is your Trade or Calling? — Laborer
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated? — Yes
9. Do you now belong to the Active Militia? — No
10. Have you ever served in any Military Force? If so, state particulars of former Service. — No
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

Duncan his x mark Mason (Signature of Man.)

H. Chognette (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Duncan Mason, do solemnly dec'are that the above answers made by me to the above questions 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.

Duncan his x mark Mason (Signature of Recruit)

Date Dec. 20th 1915. H. Chognette (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Duncan Mason, 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.

Duncan his x mark Mason (Signature of Recruit)

Date Dec. 20th 1915. H. Chognette (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 Sherbrooke this 20th day of December 1915.

J. K. Edwards Act. Alderman (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

J. E. Smith Lt (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of Duncan McLean on Enlistment.

Apparent Age 40 years 5 mos months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 4 ins.

Chest measurement: Girth when fully expanded 42 ins.
Range of expansion 2 ins.

Complexion Fair

Eyes Brown

Hair Grey

Religious denominations:
~~Church of England~~
Presbyterian
~~Wesleyan~~ Methodist
~~Baptist or Congregationalist~~
~~Other Protestants~~
(Denomination to be stated.)
Roman Catholic ✓
~~Jewish~~

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).

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 Dec. 20th 1915. E. E. Locke

Place Sherbrooke Que Capt. A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

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.

Duncan McLean 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.

L. J. Gilbert Lt. Col. (Signature of Officer)

DEC 21 1915

Date 191 .

S

C

DISCHARGE DOCUMENTS

R. O. No. X

H. Q. No.

Name Mason, Duncan.

Regt. No. (1) 457814 (2) 748200 Rank Pte.

Corps 117th Bn. C.E.F.

(2) Death.
(1) Medically unfit

11174

Proceedings of Court of Inquiry or on men reported Missing on Active Service	2
Attestation Papers	1
Declaration of change of name	
Authority for special enlistments	
Documents of re-enlisted men	
Regimental Conduct Sheet	1
Compulsory Stoppages	
Casualty Forms	
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	1
Proceedings of Regt. Court Martial	
Copies of Convictions by Civil Power	
Company Conduct Sheet	1
Clothing Transfer Certificate	
Inventory of Kit	
Last Pay Certificate	

1 Pay Book

~~Sent to B.P.C. 8.3.18.~~ Ret

H

M X
2-9-21

26 : 2
17 - 2
8 - 3
1

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

No A 57814
457814.

RANK Pte.

NAME Mason D.

T. O. S. 8-7-15.
Do 30-9-7-15.

UNIT 60 ch. Battalion

M. D. Cal

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 July 8	1915 July 31.	c.		
Aug Sept 1.	Sept 1.	n.	Discharged 1-9-15. Medunfit	Do 88 of 9-15.

UNIT SAILED
NOV 6 1915

a/c closed by charge n.

H. Q. .....

M. D. No. 5

Surname Mason

T. O. S. ..... 19.....

Christian names Duncan

D. O. Pt. II ..... of .....

Regtl. No. 457814 Rank Pte.

S. O. S. 1-9- 19 15

Unit 60th Bn

Reason Dn U

Auth. Doc on file

Next of kin Mason Mr. B. Relationship Brother

Address Cornwall, Ont.

Also notify: .....

BORN—Place Canada, Wellington Ont Date May 20th 1875

ATTESTED—Place Montreal P.Q. Date July 8th 1915

O/S .....

R/C .....

W. 22—100M-7-18. 1772-39-839

649-M-2593. 748200 Pte. Duncan Mason. CEF. 117th Bn

1st enl. 457814 - 60th Bn.
2nd enl. 748200 - 117th Bn.

Medals & Dec. (Brother) Ben Mason, Esq.,
Cornwall, Ont.,

Placque & Scroll (Brother) Same as above.

Der # 806190

Memorial Cross.---Nil.

OCT 13 1921 Regd. No. 2583+9

Scroll Desp. APR 1 1922 Regd. No. 83968

56137

Canada on Ptte Desp.

28

No 748200. RANK Pte. NAME Mason, Duncan

T.O.S. 20-12-15. (D.O. 17 of 21-12-15.) UNIT 17th. Battalion.

M. D. H.

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. Dec. 20.	1915. Dec. 31.	✓	S.O.S. Deceased. 2-1-16.	D.O. 2 of 3-1-16.

UNIT SAILED
AUG 14 1916

a/c closed by payment. S.

NAME Mason, Duncan Over.

RANK & No. Pte. 748200

CORPS 117th Batt.

ENLISTMENT, PLACE Sherbrooke DATE Dec. 20th, 1915.

FORMER CORPS Nil

COUNTRY OF BIRTH Canada, Williamstown, Ont.

NEXT OF KIN Mason, Ben.

ADDRESS OF NEXT OF KIN Cornwall, Ont.

DISCHARGE, PLACE DATE

Previously enlisted with 60th Bn. at Montreal on July 8, 1915. Was disc. and reenlisted with 117th Bn.

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011.

H. Q. 1772-39-839.

REMARKS:

COPY.

V.C. C-5-4-60

Camp Headquarters,

Valcartier Camp, August 31st. 1915.

To/
The Officer Commanding
60th. Battalion, C.E.F.
Valcartier Camp.

Discharges - Medically Unfit,
A57542 Pte. Geo. Lockwood
A57814 Pte. Duncan Mason.
60th. Overseas Battalion, C.E.F.

Sir,

I have the honor to inform you that authority has been granted for the discharge of the marginally named man, as medically unfit, under H.Q. 60-L-211 and H.Q. 60-M-460 respectively, and to request you please , to carry out these discharges with the least possible delay.

Kindly report date of discharge in each instance.

I have the honor to be,

Sir,

Your obedient Servant,

(Signed) J.D. Doull Lt.Colonel,

A.A.G. Valcartier Camp.

MEDICAL HISTORY OF AN INVALID.

1.—Station. Valcartier

2.—Regiment of Corps. 60th Battalion

3.—Regimental No. and Rank. A 57814 pte.

4.—Name. Duncan Mason

5.—Age last Birthday. 40

6.—Enlisted { on July 8/15 / at Montreal

7.—Former Trade or Occupation. Millwright

8.—General remarks on his :—

(a) Conduct. good

(b) Habits. good

(c) Temperance. temperate

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date July 21/15

9.—Service.	Years.	Days.
	PERIODS.	
	From	To
60th Battalion	July 8/15	July 21/15

10.—Disease or Disability. Asthma. Excessive Areolar tissue

11.—Date of origin, cause, present condition and whether the same is the result of service or climate.

1. Four weeks ago. H.W.E.
He says he never had asthma before he came to camp. H.L.P.
4 ~~[illegible]~~ Due to service. H.W.E. ~~[illegible]~~
Present condition — Short of breath, cough. H.L.P.
2. Debility following inoculation, with slight exposure and overexertion.
3. Shortness of breath, cough, dyspnoea, rales in both lungs. H.W.E.
4.

Has it been aggravated by intemperance, vice or misconduct? No

M. F. B. 227.

20m.—5-15.
H. Q. 1772—39—117.

[OVER]

12.—In gunshot wounds, or other injuries, state how caused ; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held ?

Not applicable

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

~~Not due to exposure~~.
Due to ordinary exposure doing duty — not exceptional.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

~~Not aggravated by service~~ —
Aggravated by service (mouldering, drill exercises etc) to extent of 25% of the disability. H.W.E.

15.—Is the disability permanent ? If not, state its probable duration. To what extent will it prevent his earning a full livelihood ?

1 No. 2. Three months H.W.E.
~~Yes, more or less permanent~~.
~~Earning capacity as good as prior to enlisting~~
~~It depends on where he works at. Perhaps 25%~~ H.W.E.
3. 25% for 3 months. H.W.E.

16.—Full particulars of medical treatment of case up to date of invaliding.

Sedative expectorants etc.

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps. — Not previously proposed for discharge

18—State if for discharge on account of unfitness for service. — yes

H. L. Pavey, Major A.M.C.
M.O. 60th Battalion B.E.F.
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

The Board having examined no A.57814 Pte Duncan Mason 60th Bns. C.E.F. concurs in the above and recommends his discharge as unfit.

Signatures :— H. C. Manicom Captain President.

Station Valcartier — C. R. Bourne Lieut A.M.C. } Members.

Date July 22nd 1915 — Herbert H. Eyres. Lieut. A.M.C.

Date July 23rd 1915. — Gaiviniers Major
Assistant Director of Medical Services.

Approved.

Date 28.8.15 — Jeff Nicl Major
Director of Medical Services.

[OVER]

(At Station or Hospital where finally disposed of.)

Station and Hospital ..... Arrived from .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. .....

Administrative Medical Officer.

Militia Form B. 227.

20 m-5-15.
H. G. 1772—38—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.

This space to be for numbers.

H

D

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.).

No.	457814
Rank	Private
Name NOTE.—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Mason, D
Corps (Squadron, Battery or Company)	60th BATTALION C. E. F.
Date of Discharge	1/9/15
Place of Discharge	Valcartier, Que.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 40 years 2 months.
Height 5 feet 4 inches.
Complexion Fair.
Eyes Brown.
Hair Grey's L.
Trade Millwright
Intended place of residence. (To be given as fully as practicable.)

Descriptive Marks.

Vacc. L. Arm

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

Medically unfit.

N.B.—The causes 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.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

OVER

M. F. B. 218.

5m.—2-15.
H.Q. 1772-39-113.

Carded.
G. G.

17/12/15

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

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

6. Medals and Decorations.....

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) Valcartier

(Date) Oct 12 1915

D Wessey Capt

60TH BATTALION, C.E.F.

Commanding D COMPANY

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).....(*Signature of Soldier.*)

(Date).....(*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.

.....(*Signature of Soldier.*)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) Valcartier

(Date) OCT 20 1915

OFFICER COMMANDING 60th Battn. C.E.F.

(*Signature*) F. A. Buscombe, Lt. Col.

60th BATTALION C. E. F.

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.)

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia Form	B. 263.
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a.
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia Form	B. 313.
Medical Report for Invalid*	"	B. 227.
Settlement of Man's Account on Transfer and Last Pay Certificate,	"	D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form	B. 235.
Proceedings on Discharge,	"	B. 218.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(*a*) Proceedings on Discharge.

(*b*) Attestation.

(*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.

W. a

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.	748 200
Rank	Private
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Duncan MASON
Corps (Squadron, Battery or Company)	117th Battalion
Date of Discharge	January 2nd 1916
Place of Discharge	SHERBROOKE P.Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....years.....months. Height..... feet.....inches. Complexion Eyes Hair Trade Intended place of residence (To be given as fully as practicable.)	Descriptive Marks

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

DEATH

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.

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier 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.—6-16.
H. Q. 1772-39-113

(OVER)

Disbelieve
28/6/17
BY

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

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

6. Medals and Decorations.....

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).....

(Date)..... *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).....*(Signature of Soldier.)*

(Date)..... *(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.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place).....

(Signature) .....

(Date) .....

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.)

(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		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(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.

60. Batt card in 22

A. 57814

MEDICAL HISTORY SHEET.

Surname Mason *Christian Name* Duncan

Examined { on 8th day of July 1915
at Montreal

Birthplace { City or Town Williamstown
County Ont

Apparent age 40 years & 1 mos

Trade or occupation Mill - wright

Height 5 Feet 4 Inches.

Weight 175 Lbs.

Chest measurement { Minimum 37 1/2 inches.
Maximum expansion 42 inches

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left. 1
Number 1

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by J. A. Fairie

Rank Lieut A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 8 *day of* July 1915 *at* Montreal.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
July 21st Valcartier	July 21	Asthma	Unfit

N. B.—This sheet 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.

M. F. B. 313.

100M.—5-15.
H. Q. 1772-39-439

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				

no card CR77

ORIGINAL

748300

MEDICAL HISTORY SHEET.

Surname Mason *Christian Name* Duncan

Examined { on 20 day of Dec 1915 at Sherbrooke Que

Approved by E. E. Sodke

Rank Capt. A.M.C. M.O.

Birthplace { City or Town Williamstown County Ontario

Apparent age 40 yrs 5 mos.

Trade or occupation Labourer

Height 5 Feet 4 Inches.

Weight 185 Lbs.

Chest measurement { Minimum 40 inches. Maximum expansion 42 inches.

Physical development Fair

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. ✓ Number 1

When Vaccinated last Infancy

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Umbilicus rad - can see figures

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 20 *day of* Dec 1915 *at* Sherbrooke

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B.—This sheet 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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

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

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
Sherbrooke	Dec 27/15	27	Dec	15	2	Jan	16	Pneumonia & Bronchitis	7	Patient suffered from a severe attack of Bronchitis and Pneumonia from which he died Jan 2/16 at General Hospital	J B Cummer Capt AMC