

Fourth. M. D. Depot Battalion Regiment

Regtl. No. 3087178

19/8/18
2.2

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

S.B.

(Class 1.)

1. Surname SMITH.

2. Christian name James Ernest Ernest

3. Present address R.R. No. 5 Lachute Que. Canada.

4. Military Service Act letter and number 1389 DC.
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)

5. Date of birth April 9th. 1896.

6. Place of birth Cushing Que. Canada.
(town, township or county and country)

7. Married, widower or single Single.

8. Religion Presbyteriane

9. Trade or calling Farmer.

10. Name of next-of-kin Mr Walter SMITH.

11. Relationship of next-of-kin Father.

12. Address of next-of-kin R.R. No. 5 Lachute Que. SUPERMENT ADDRESS

13. Whether at present a member of the Active Militia No.

14. Particulars of previous military or naval service, if any None ~~XXXXX~~ Ides

15. Medical Examination under Military Service Act :—
(a) Place Montreal P.Q. (b) Date July 13th. 1918 (c) Category A.

DECLARATION OF RECRUIT

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

James Ernest Smith (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 22 yrs. 3 mths. } Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height 5 ft. 4 ins. }

Chest measurement } fully expanded 34 ins. Vision R. 20. L. 30.
range of expansion 4 ins. }

Complexion Med. Hearing R. OK. L. OK.

Eyes Blue.

Hair Dk. Brown.

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

Place Montreal P.Q. Date July 13th. 1918.

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

1. Name of recruit
2. Christian name
3. Present address
4. Military service
5. Date of birth
6. Place of birth
7. Marital status
8. Religion
9. Trade or calling
10. Name of employer
11. Relationship to employer
12. Address of employer
13. Whether he is a member of the armed forces
14. Particulars of previous military service, if any
15. Special Examination under Military Service Act
16. How he acquired his education

DECLARATION OF RECRUIT

I, the undersigned, being the person named in the above particulars, do hereby declare that the above particulars are true and correct to the best of my knowledge and belief.

DESCRIPTION OF CALLING BY

1. Name of the calling
2. Nature of the calling
3. Description of the calling
4. Whether the calling is a trade or calling
5. Whether the calling is a profession or occupation
6. Whether the calling is a service of the public
7. Whether the calling is a service of the State
8. Whether the calling is a service of the Government
9. Whether the calling is a service of the Army
10. Whether the calling is a service of the Navy
11. Whether the calling is a service of the Air Force
12. Whether the calling is a service of the Indian Army
13. Whether the calling is a service of the Indian Navy
14. Whether the calling is a service of the Indian Air Force

Signature of Recruit
Signature of Employer
Date

REGIMENTAL DOCUMENTS

NAME **SMITH JAMES EARNEST**

REGT. NO. **308 7178**

UNIT **1st Apo Bn 8th R** H. Q. FILE NO.

3
S

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)

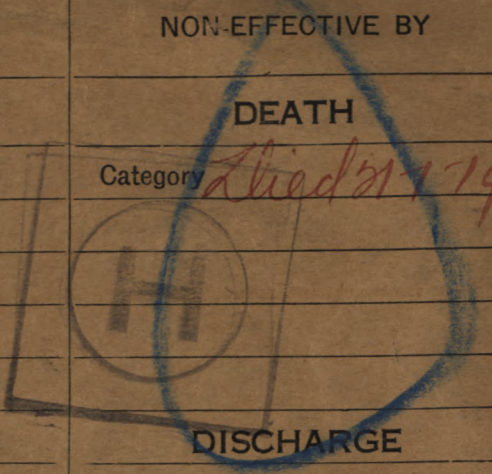
LAST PAY CERTIFICATE (M.F.W. 44)

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 Form of Will



Category *Killed 1/19*

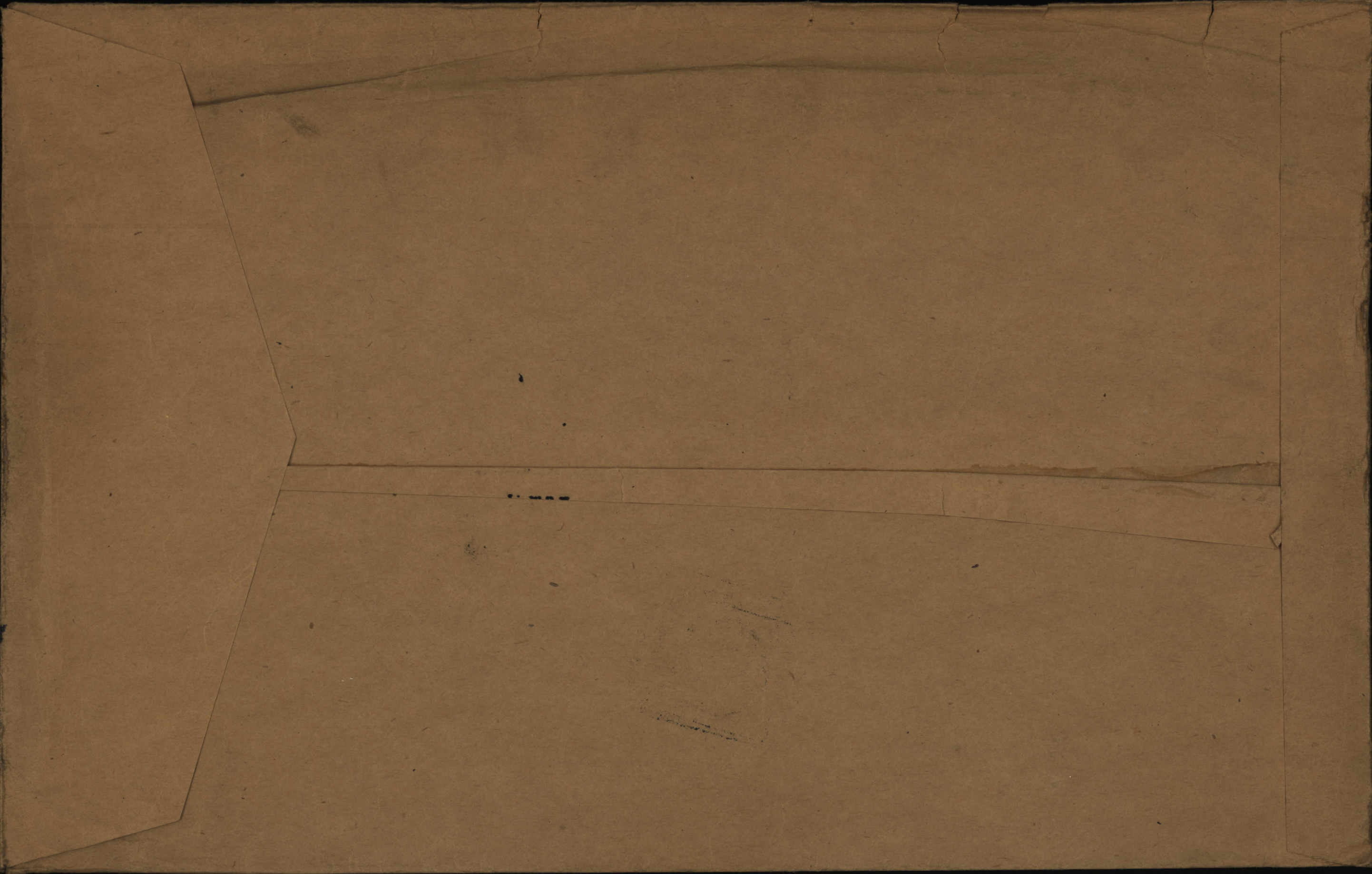
Category

DESERTION

28749



1
29-26
18-26
3-26





H. Q.

M. D. No. 2

Surname Smith

T. O. S. July 13th 1918

Christian names James Earnest

D. O. Pt. II 1913 of 12/7/18

Regtl. No. 2087178 Rank Pte.

S. O. S. 21-1-1919.4

Unit 1st Que. B. Regt. 1st Dep. Bn. Reason Death

Auth. DD. 77 718-3-19
13. 11. 12. 1918

Next of kin Smith, Walter Relationship Father

Address P. Q. n^o 8, Lachute, Also notify:

.....

.....

.....

BORN—Place Canada, Cushing, P. Q. Date Apr 9th 1896

ATTESTED—Place Montreal, P. Q. Date July 13th 1918

O/S..... R/C.....

10

1870

1870

1870

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

1. Surname SMITH. Christian name Jmaes Ernest
 2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule 1389 DC.
 3. Consecutive number on schedule of men reporting for service (if he appears on it)
 4. Address (including street and number if any) R.R. No 5 Lachute Que. Canada.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 13th day of July 1918, by the undersigned medical board sitting at Montreal Que.

5. Age as stated 22 Years 3 Months. 6. Apparent age 22 Years 3 Month
 7. Height 5 Feet 4 Inches. 8. Weight 134 Pounds.
 9. Chest measurement (Minimum 35 Ins. Maximum 34 Ins.) 10. Complexion Med. (Eyes Blue. Hair Dk. Brown)
 11. Physical development Good (Good Fair Poor) 12. Smallpox marks

13. Number of vaccination marks (Right arm Left arm) 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, Nervous or Mental disorder. Epilepsy Syphilis, Asthma. We find no evidence of past (Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma)
 (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 FIT CATEGORY "A-17"
 (a) Vision. R. 10 L. 10
 (b) Hearing. R. 11 L. 11
R. B. Malcolm Capt. President.
R. Fontaine Lt. Member. Ernest Chatelet Member.

Signature of Man

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M. O.			M. O.
		M. O.			M. O.
		M. O.			M. O.

Joined 13th day of July 1918 at Montreal Que.

Joined on enlistment	CORPS	REG'TL NUMBER	HABITS	DATE
	<u>1st DEPOT BN. 1st QUEBEC REG'T.</u>	<u>3087178</u>		
Transferred to.....				

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.

If raised in category, record category in a square. The M. O. will initial and date.

Prepared by *RC*Checked by *WCC*

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44
154 (D.P.) 150M-2-19.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 3087178 Rank Pte. Name Smith J. E.
(Surname first)
Unit 1st. D. B. Co. 1 who was* S.O.S.
On January 21st 1919, to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/1/19 to 21/1/19 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....		33.00
Regimental Pay..... <u>21</u> days at \$..... <u>1.00</u>		21.00
Field Allowance..... <u>21</u> days at \$..... <u>c. 10</u>		2.10
Separation Allowance		
Clothing Allowance		
Post Discharge Pay.....		
*Other Credits		
Advances		
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges <u>C.I. of A. 2/12/19 to 21/1/19 chg 50 days P. & A 55.00</u>		
Balance on transfer or on discharge, cheque No..... <u>Cr. Balance</u>		1.10
Total.....		<u>56.10 56.10</u>

*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of
Assigned Pay for the month of.....191..... }
and Separation Allee. for month of.....191..... } (to) Assignee

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

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment..... 13/7/18 married or single... Single.....
(2) Separation Allowance, entitled or not..... not (3) Reason for discharge..... Deceased.....
(4) Authority for discharge or transfer..... Court of Inquiry

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer,
or soldier.

Date March 19/19

Place Montreal. Que.

Beaus
Capt. & Paymaster,
1st Depot Bn. 1 Paymaster, Regiment C

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.

- (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

FORM OF WILL

I, SMITH James Ernest (Name in full)
 Regimental Number 3087178 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

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

absolutely, and my personal estate I bequeath to
13-9
Mr Walter SMITH Name and Address
 of person or
 persons to receive
 personal estate*
R.R. No 5,
Lachute Que. (See note).

NOTE

This space for the
 appointment of
 Executor if
 necessary.

IMPORTANT
 NOTE

this 13 day of July A.D. 1918

This must be signed
 and Dated by
 THE SOLDIER
 HIMSELF.

James Ernest Smith 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 Harold Dawson
 Address of Witness Guy St. Barracks Montreal
 Occupation of Witness Soldier. All

Signature of Second Witness 98 12 Yertau.
 Address of Witness Guy St Barracks Montreal.
 Occupation of Witness Soldier. All

THE TWO
 WITNESSES
 MUST
 SIGN HERE

Estates Branch,



M. & D.
A.M. MAR 28 1919

Occurrence of Value

Value of Annuity

Percentage of Total Annuity

Occurrence of Annuity

Jan. 1919

Value of Annuity

Percentage of Total Annuity

For the purpose of this computation, the amount of the annuity is assumed to be \$100,000.

For the purpose of this computation, the amount of the annuity is assumed to be \$100,000.

Subject to the provisions of the will, the annuity is to be paid to the surviving spouse for life.

JOHN J. MOORE

SOLE

8000

SOLE

1919

(200,000)

Balance carried

to the next page

of the account

of the estate

of the decedent

For the purpose of this computation, the amount of the annuity is assumed to be \$100,000.

200,000

Balance carried

to the next page

of the account

of the estate

of the decedent

For the purpose of this computation, the amount of the annuity is assumed to be \$100,000.

For the purpose of this computation, the amount of the annuity is assumed to be \$100,000.

For the purpose of this computation, the amount of the annuity is assumed to be \$100,000.

#

FOR NO. 1003

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

M. F. W. 54. (A. F. B. 10s.)

500M.—9-16

H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps. *1st DEPOT BN. 1st QUEBEC REG'T*

Regimental No. *3087178* Rank *Pte* Name *SMITH James Earnest*

C. E. F.

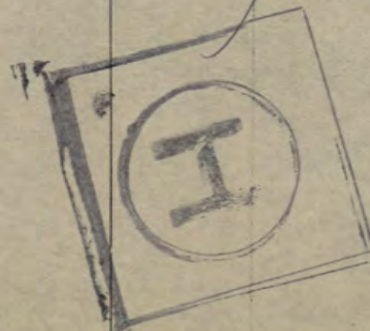
Enlisted (a) *13-7-18* Terms of Service (a) *C.E.F.* Service reckons from (a) *13-7-18*

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) *Farmer*

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				
<i>21-1-19</i>	<i>M.D.</i>	<i>S.O.S. with effect 21-1-19. Authority Court of Inquiry dated 18-3-19 = "Death"</i>	<i>Montreal</i>	<i>21-1-19</i>	<i>D.O. part 11 # 77</i>

W. R. Rubenstein ADJT.
for O. C. 1st Depot Bn. 1st Quebec Regiment.



(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.

Casualty Form - Active Service

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				

