

No. 4 Co.

II

M. D.

2nd

Depot Battalion

B.C.

Regiment

Original

2nd DEPOT BATT. B.C. REGT Regtl. No. **2139392**

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class **I**)

- 1. Surname..... **McIver.**
- 2. Christian name..... **Charles William.**
- 3. Present address..... **Kinkara, Prince Edward Island, Canada.**
- 4. Military Service Act letter and number..... **310016.**
- 5. Date of birth..... **May 3rd, 1891.**
- 6. Place of birth..... **Kinkara, Prince Edward Island, Canada.**
(town, township or county and country)
- 7. Married, widower or single..... **Single.**
- 8. Religion..... **Roman Catholic.**
- 9. Trade or calling..... **Book-keeper.**
- 10. Name of next-of-kin..... **Hugh Louis McIver.**
- 11. Relationship of next-of-kin..... **Father.**
- 12. Address of next-of-kin..... **Kinkara, Prince Edward Island, Canada.**
- 13. Whether at present a member of the Active Militia **No.**
- 14. Particulars of previous military or naval service, if any..... **82 Regt, about 2 years.**
- 15. Medical Examination under Military Service Act:—
(a) Place..... **Victoria B.C.** (b) Date..... **26-11-17** (c) Category..... **A2**

SUFFICIENT ADDRESS

COM hsh.

DECLARATION OF RECRUIT

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

Charles William McIver (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... **26** yrs..... **7** mths.
 Height..... **5** ft..... **3 1/2** ins.
 Chest measurement } fully expanded..... **37 1/2** ins.
 } range of expansion..... **3** ins.
 Complexion..... **Ruddy**
 Eyes..... **Grey**
 Hair..... **Black**

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

H. V. H. Lewis, Major
for O. C. absent on duty

O.C..... **2nd** Depot Btl.

B.C. Regt.

Place..... **Victoria, B.C.** Date..... **Apr. 11 30th, 1918.**

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1916

Class: _____

1. Name: Charles William
 2. Present address: _____
 3. Date of birth: _____
 4. Date of enlistment: _____
 5. Name of parent or guardian: _____
 6. Name of employer: _____
 7. Name of occupation: _____
 8. Name of service: _____
 9. Name of regiment: _____
 10. Name of company: _____
 11. Name of platoon: _____
 12. Name of section: _____
 13. Name of post: _____
 14. Name of barracks: _____
 15. Name of depot: _____

DESCRIPTION OF CALLING UP

1. Name: Charles William
 2. Present address: _____
 3. Date of birth: _____
 4. Date of enlistment: _____
 5. Name of parent or guardian: _____
 6. Name of employer: _____
 7. Name of occupation: _____
 8. Name of service: _____
 9. Name of regiment: _____
 10. Name of company: _____
 11. Name of platoon: _____
 12. Name of section: _____
 13. Name of post: _____
 14. Name of barracks: _____
 15. Name of depot: _____

1. Name: _____
 2. Present address: _____
 3. Date of birth: _____
 4. Date of enlistment: _____
 5. Name of parent or guardian: _____
 6. Name of employer: _____
 7. Name of occupation: _____
 8. Name of service: _____
 9. Name of regiment: _____
 10. Name of company: _____
 11. Name of platoon: _____
 12. Name of section: _____
 13. Name of post: _____
 14. Name of barracks: _____
 15. Name of depot: _____

MADE IN CANADA

M. D. Depot Battalion Regiment

Regtl. No. 2139392

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class.....)

1. Surname Mc Ivor

2. Christian name Charles William

3. Present address Kinkora Prince Edward Island Canada.

4. Military Service Act letter and number 310016

5. Date of birth 3 May 1891

6. Place of birth Kinkora Prince Edward Island Canada
(town, township or county and country)

7. Married, widower or single Single

8. Religion R.C.

9. Trade or calling Bookkeeper

10. Name of next-of-kin Hugh Louis Mc Ivor

11. Relationship of next-of-kin Father

12. Address of next-of-kin Kinkora Prince Edward Island Canada

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

14. Particulars of previous military or naval service, if any 82nd Regt about 2 years.

15. Medical Examination under Military Service Act:—
 (a) Place..... (b) Date..... (c) Category A2

DECLARATION OF RECRUIT

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

Charles W. Mc Ivor (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... yrs..... mths.	} Distinctive marks, and marks indicating congenital peculiarities or previous disease.
Height..... ft..... ins.	
Chest measurement } fully expanded..... ins.	
} range of expansion..... ins.	
Complexion.....	
Eyes.....	
Hair.....	

9-111-1-66

Place..... Date.....

O. C..... Depot Btln.
..... Regt.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

M. D. Depot Battalion Regiment

Regt. No.

Class

1.	Surname <input type="text"/>
2.	Christian name <input type="text"/>
3.	Present address <input type="text"/>
4.	Military number <input type="text"/> (if any)
5.	DOB <input type="text"/>
6.	Place of birth <input type="text"/>
7.	Marital status <input type="text"/>
8.	Religion <input type="text"/>
9.	Trade or calling <input type="text"/>
10.	Name of last employer <input type="text"/>
11.	Relationship of next of kin <input type="text"/>
12.	Address of next of kin <input type="text"/>
13.	Whether or not a member of the Forces Militaires <input type="text"/>
14.	Particulars of previous military or naval service, if any <input type="text"/>
15.	Medical examination under Military Service Act, 1917 <input type="text"/>
16.	Particulars of previous military or naval service, if any <input type="text"/>

DECLARATION OF RECRUIT

I, do solemnly declare that the above particulars are true and correct.

Signature of Recruit

DESCRIPTION ON CALLING UP

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Height	Build	Complexion	Hair	Eyes	Build of hands	Build of feet
inches	inches	fully exposed	inches	inches	inches	inches
marks indicating congenital peculiarities or previous disease						

Depot Date

Recd. Libr.

PLEASE RETURN TO THE LIBRARY

MADE IN CANADA

REGIMENTAL DOCUMENTS

NAME: McIVOR CHARLES WILLIAM REGT. NO. 21 8992 UNIT 1st Signal Bn H. Q. FILE NO.

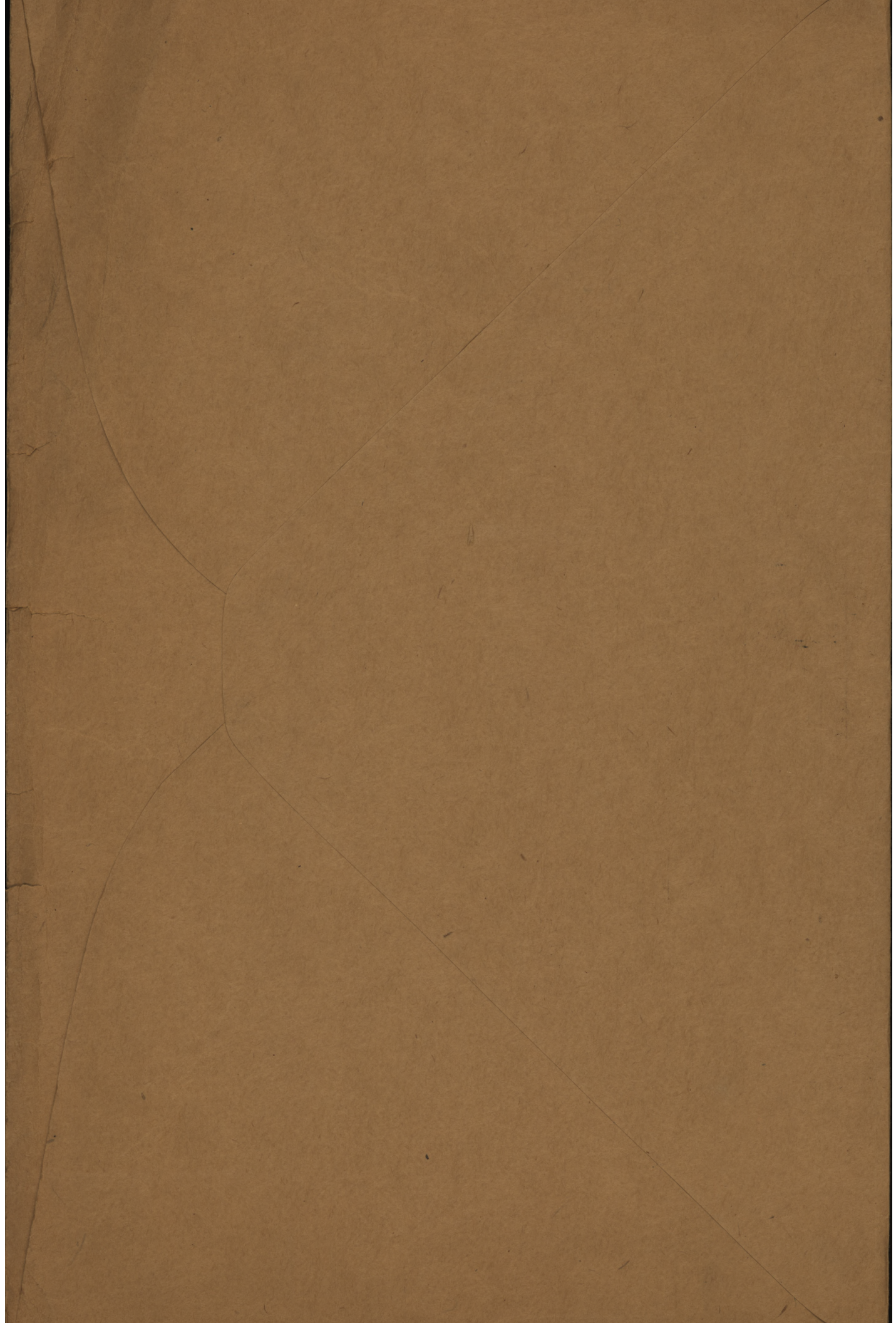
CONTENTS

NON-EFFECTIVE BY DEATH

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	Category
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.B.W. 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)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
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TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
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COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					



W. 2509
100M41-19
1772-33-1377

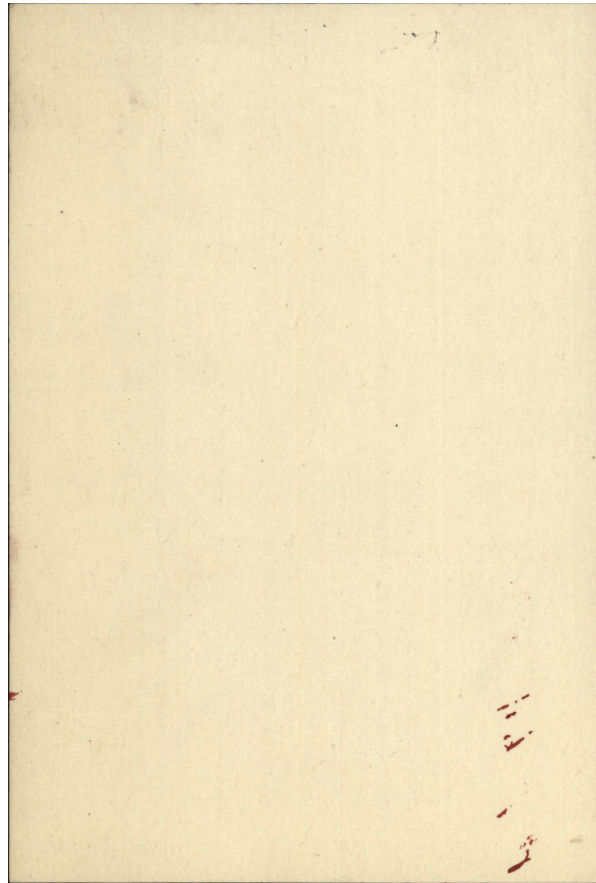


H. Q. *✓*
 M. D. No. *11*
 T. O. S. *May 9, 1918*
 D. O. Pt. II. *1.27* of *11.5.18*
 S. O. S. *1.3.5* 19*18*
 Reason *8. handbook in P. R. 7*
 Auth. *P. R. 18.9.15-5-18.1*

Surname *McGeoch*
 Christian names *Charles William*
 Regt. No. *217999* Rank *Private*
 Unit *B. C. Regt. 2nd. Div. i. B. N.*

Next of kin *McGeoch Hugh Louis* Relationship *Father*
 Address *Manitoway P. O.*

BORN—Place *Manitoway P. O.* Date *May 3rd 1891*
 ATTESTED—Place *Manitoway P. O.* Date *April 30th 1918*
 O/S..... R/C.....



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

Casualty Form—Active Service.

Regimental No. 2139292 Rank PTE Name Mc Ivor Charles William
 Unit, Regiment or Corps 1st Depo. Bn. B.C. Regt.

Enlisted (a) Terms of Service (a) C & F Service reckons from (a)
 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)

Date	Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 38, or other official documents
	From whom received	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			
		<u>1st Depo. Bn. B.C. Regt.</u>	<u>Vancouver B.C.</u>	<u>20-4-18.</u>	<u>FAA 120.</u>
		<u>1st Depo. Bn. B.C. Regt.</u>	<u>"</u>	<u>13-5-18.</u>	<u>P. 11 B.C. 35.</u>

Quitch Major
 District Record Officer, M. D. II

(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, Shoelace Smith, etc., etc., also special qualifications in technical Corps duties.
 P. T. O.

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				

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

M. D. 11

No. 15

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2139392 Rank Pte Name MC IVER C.W.

Corps. 2nd Depot Bttn, B.C. Regt. who was* Discharged

On 13th May, 1918 191 to Join Royal Flying Corps

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 30-4-18 191 to 13-5-18 191, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques } No.			Regt'l Pay <u>14</u> days at \$ <u>1.00</u>	<u>14.00</u>	
} No.			Field Allow. <u>14</u> days at \$ <u>.10</u>	<u>1.40</u>	
Assigned Pay and Sep'n Allee. No.			Separation Allowances* (Monthly)		
Other charges <u>lv without pay</u>	<u>14.30</u>		Other Allowances*		
Payment on transfer or discharge No <u>2220</u>	<u>1.10</u>		Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	<u>15.40</u>		Total	<u>15.40</u>	

* Give particulars.

A monthly stoppage of \$ (†) has (†) been paid on account of Assigned Pay for the month of 191 and Sep'n Allee. for month of 191 (to) Assignee
 (Address)

(†) 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 30-4-18
- (2) if married and if a Separation Allowance Card has been submitted no - no
- (3) cause of discharge to join R.F.C. authority DCO 11 M.D.
- (4) authority for transfer 99-147 d/ 2-5-18

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 13th May 1918

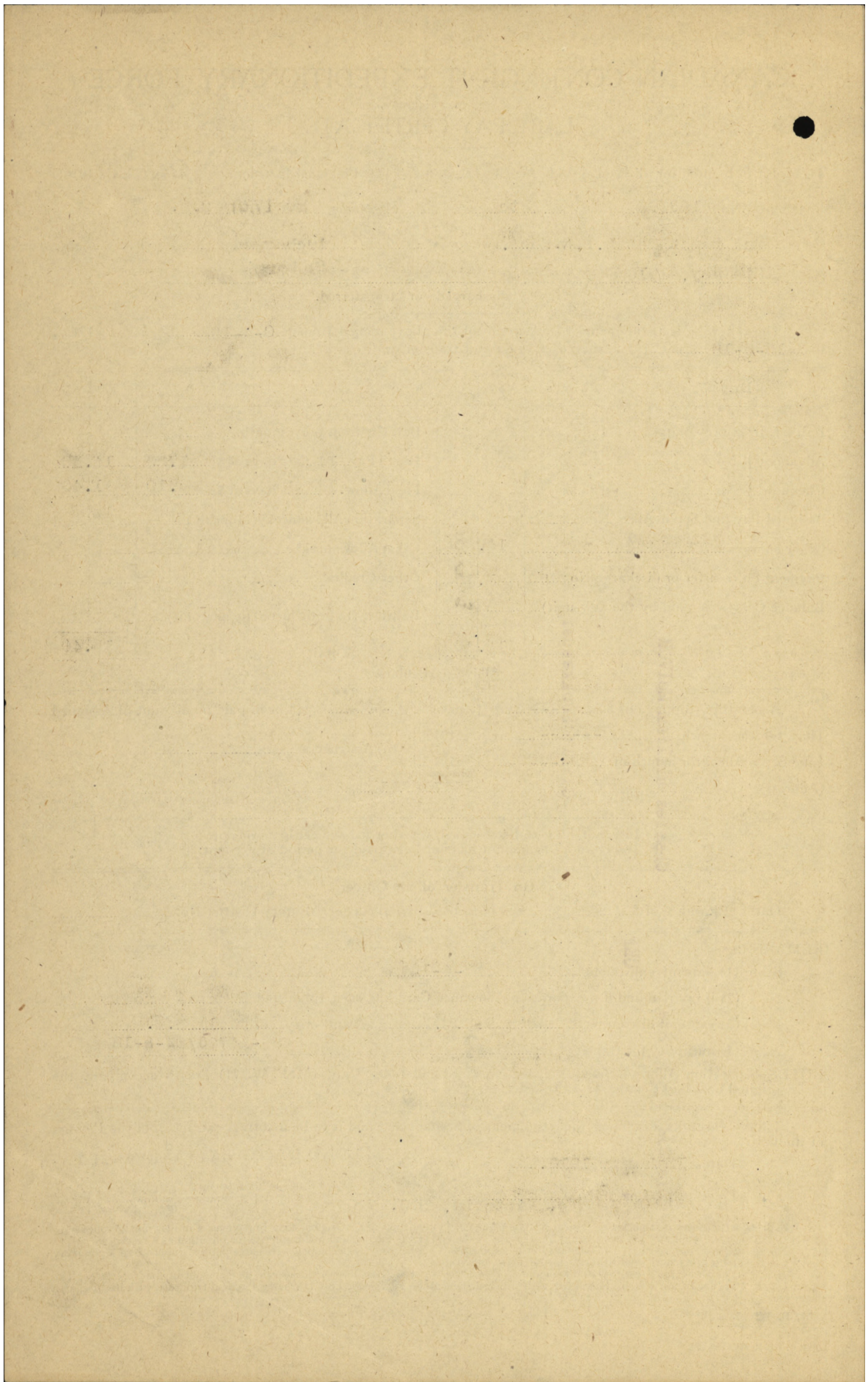
SECOND DEPOT BATTALION, C.E.F.

Place Willows Camp, Victoria, B.C.

[Signature]
 PAYMASTER

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
 If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.



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

Casualty Form—Active Service.

2nd DEPOT BATT. B. C. REGT.

Unit, Regiment or Corps.....
 Regimental No. **2139392** Rank **Pte** Name **Charles William McIVOR**
 Enlisted (a) **30 4 18** Terms of Service (a) **OLF** Service reckons from (a) **30 4 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) **Civil; Bookkeeper**

Report		Place	Date	Remarks
Date	From whom received			
13. 5-18	Det 11 MA	Michigan	13/2/18	taken from Army Form B. 213, Army Form A. 36, or other official documents
	S.D.S. 2nd Depot Batt. B. C. Regt. in discharge of N. G. 9.		13/2/18	4.2.0 # 155 15-5-18

(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 [P.T.O.]
 (b) e.g. Signaller, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.

ARMY FORM 213 (REV. 1953)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B, 213, Army Form A, 39, 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, 39, or other official documents
Date	From whom received				
	6177	6177: Bookkeeper			

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 2139398 (Rank) Private
Name (in full) Charles William MC IVER enlisted in
the 2nd Depot Batt. B.C. Regt.
CANADIAN EXPEDITIONARY FORCE at Victoria, B.C. on the 30th
day of April 19 18
HE served in Victoria, B.C., Canada.
and is now discharged from the service by reason of A.G. Telegram No. 997, dated
6-2-18. D.C.O. 11 M.D. 99-147, dated 2-5-18.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age <u>27 years</u>	Marks or Scars
Height <u>5 feet 4½ incher</u>	
Complexion <u>Buddy</u>	
Eyes <u>Grey</u>	
Hair <u>Black</u>	

Signature of Soldier *C. W. Mc Iver*

W. H. M. ... Lt. Col.
O/C 2nd Depot Batt. B. C. Regt.
Issuing Officer

Date of Discharge 13-5-18 Rank _____
Appointment _____

Signed at Victoria, B.C. this 13th day of May 1918
in Military District No. X1
File Reference No. _____

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. 2139392 (Rank) Private Name Charles William MC IVER

Unit 2nd Depot Batt. B.C. Regt.

Address on Discharge R.A.F. Training Depot, Toronto, Ont.

Character and Conduct Very Good

Former Occupation Book-keeper

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at Victoria, B.C. this 13th day of May 19 18

W. H. M. G. J. G. J. Lt. Col.
O/C 2nd Depot Batt. B.C. Regt.
Name of Officer

Rank

Appointment

McCard CR 111

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 McIVER Christian name CHARLES WILLIAM
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 310016
3. Consecutive number on schedule of men reporting for service (if he appears on it) 306
4. Address (including street and number, if any) Headquarters B.C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 26 th day of November 1917, by the undersigned medical board sitting at Headquarters B.C.

5. Age as stated 26 Years 7 Months. 6. Apparent age 26 Years 7 Months
7. Height 5 Feet 5 1/2 Inches. 8. Weight 151 Pounds.
9. Chest measurement { Minimum 34 1/2 Ins. 10. Complexion Ruddy { Eyes Grey
Maximum 37 1/2 Ins. { Hair Black
11. Physical development Good { Good
Fair
Poor 12. Smallpox marks none
13. Number of vaccination marks { Right arm _____
Left arm _____ 14. When vaccinated last childhood
15. Distinctive marks and marks indicating congenital peculiarities or previous disease none

16. Slight defects but not sufficient to cause rejection none
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 A.2 Vision D.20 Both eyes
Hearing normal

A. J. Fuller Capt President.
E. Harrison Capt Member. S. P. Goeder Capt Member.

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

Joined _____ day of _____ 1917 at _____

CORPS	REG'TL NUMBER	HABITS	DATE

Joined on enlistment _____
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.

[Handwritten Signature]
Signature of Man

STATION.	Date of Arrival at the Station.	DATES OF						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 general cases state nature of primary disease, and whether mercury has been used. Particulars of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.		Discharge from Hospital.		Day	Month				
	Day	Month	Year	Day	Month	Year	Day	Month	Year		

Christian Name

Surname

**Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Private Name Charles William Surname MC IVER
 Unit of Corps 2nd Depot Batt. B.C. Regt. (If a soldier) Regt. No. 2139392
 Born at Kinkara, P.E.I., Canada. on (date) 3-5-91
 Signature (for identification) *[Handwritten Signature]*

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. No

Weight	Colour of eyes
<u>151</u> lbs.	<u>Grey</u>
Height	Identification Marks
<u>5</u> ft. <u>5 1/2</u> in.	<u>No</u>

2. NUTRITION AND DIATHESIS?

Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

No

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

No

5. HEART?

No

Abnormal Sounds?

No

Abnormal Size?

No

Pulse Rate? m 80

Intermittence or Irregularity?

No

Muscular Tone? No

6. ARTERIES.—(a) Any hardening or nodulation?

No

(b) Blood Pressure.

112

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

No

8. GENITO-URINARY SYSTEM?

No

Urinalysis—S.G.? 1004

Reaction? Acid

Albumen? No

Sugar? No

9. SKIN, MIDDLE EAR, EYE or any other part?

No

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

No

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Victoria, B. C.

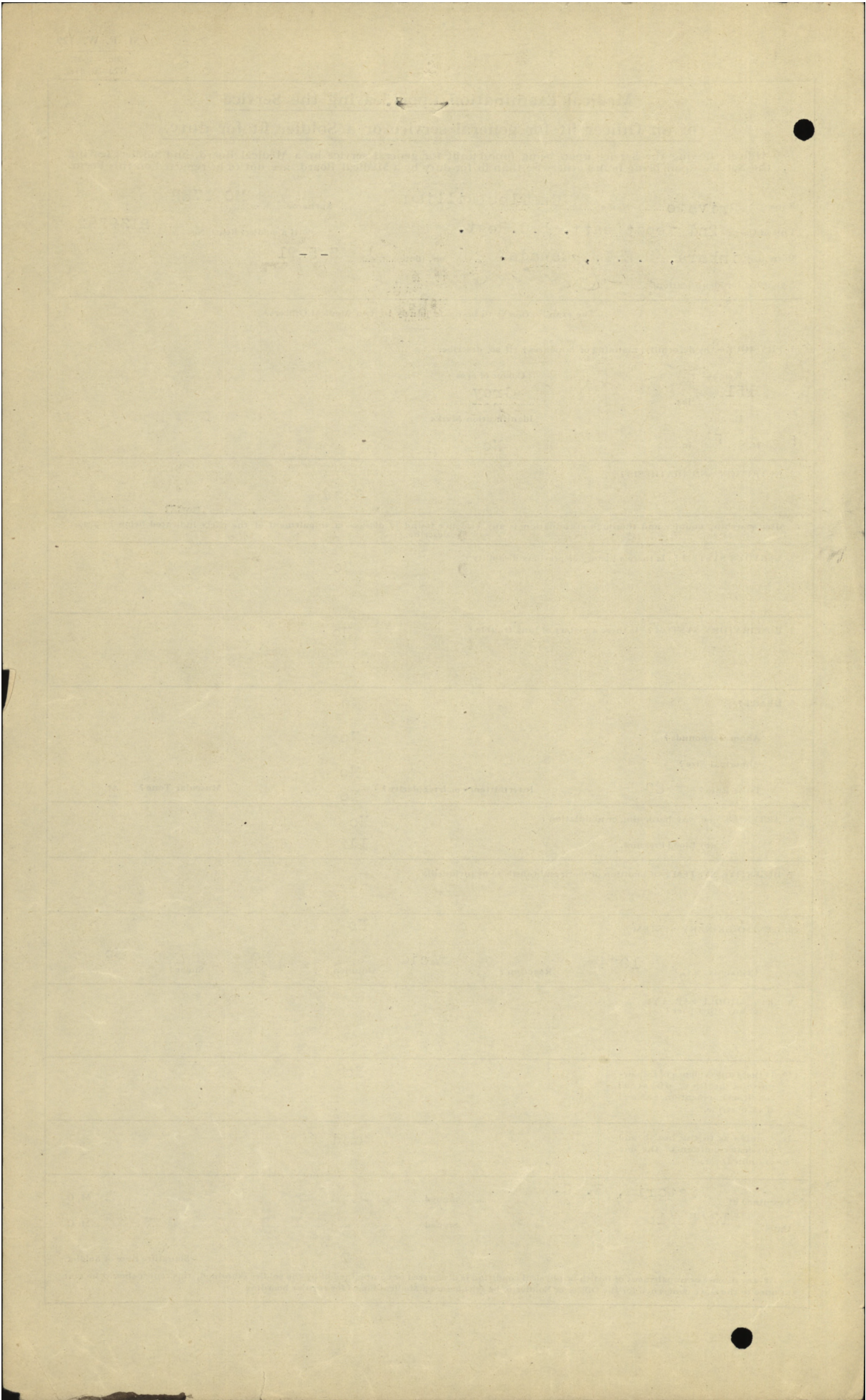
Signed *[Handwritten Signature]* M. O.

Date 13/5/18

Signed *[Handwritten Signature]* M. O.

[Handwritten Signature]
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.



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.	2139392
Rank	Private
Name	Charles William MC IVER
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	2nd Depot Batt. B.C. Regt.
Date of Discharge	13-5-18
Place of Discharge	Willows Camp, Victoria, B.C.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....27.....years.....months.	Descriptive Marks
Height.....5.....feet.....4 $\frac{1}{2}$inches.	
Complexion Ruddy	
Eyes Grey	
Hair Black	
Trade Book-keeper	
Intended place of residence } R.A.F. Training Depot, (To be given as fully as } Toronto, Ont. practicable.) }	
2. The above-named man is discharged in consequence of A.G. Telegram No. 997 dated 6-2-18. D.C.O. 11 M.D. 99-147, dated 2-5-18.	
<small>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.</small>	
To be in the handwriting of the Commanding Officer, who will certify the entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	<i>Very good</i> <i>Wm</i>
<small>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:</small>	
To be in the handwriting of the Commanding Officer, who will certify the entries on the character certificate and initial them.	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)
	<i>Book-keeper</i> <i>Wm</i>

M. F. B. 218.

100m.-6-16.
H. Q. 1772-39-113

(OVER)

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 the 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).....Victoria, B.C.....

Major Col.
C/O 2nd Depot Bnt. B. C. Regt.
Commanding

(Date).....13-5-18.....

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).....Victoria, B.C..... (Signature of Soldier.)

(Date).....13-5-18..... (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.....13.....days.

Total.....years.....13.....days.

11. Confirmation of Discharge.

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

(Place).....Victoria, B.C.....

Major Col.
C/O 2nd Depot Bnt. B. C. Regt.
(Signature)

(Date).....13-5-18.....

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.)

Me

J. W. [unclear]

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263. Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Attestation Paper, Militia Form B. 235. 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 Cer- tificate, " D. 877.	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.)
*Only if discharged "Medically unfit."	

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.