

S

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 1
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 2
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... 1
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

DISCHARGE DOCUMENTS

Name BARIL ^{Card} G.M.L.

Regt, No. 239 Rank Sp. P.

5 Field Co. Eng. 1st Batt

6014

R. O. No.....

H. Q. No.....

6014

H

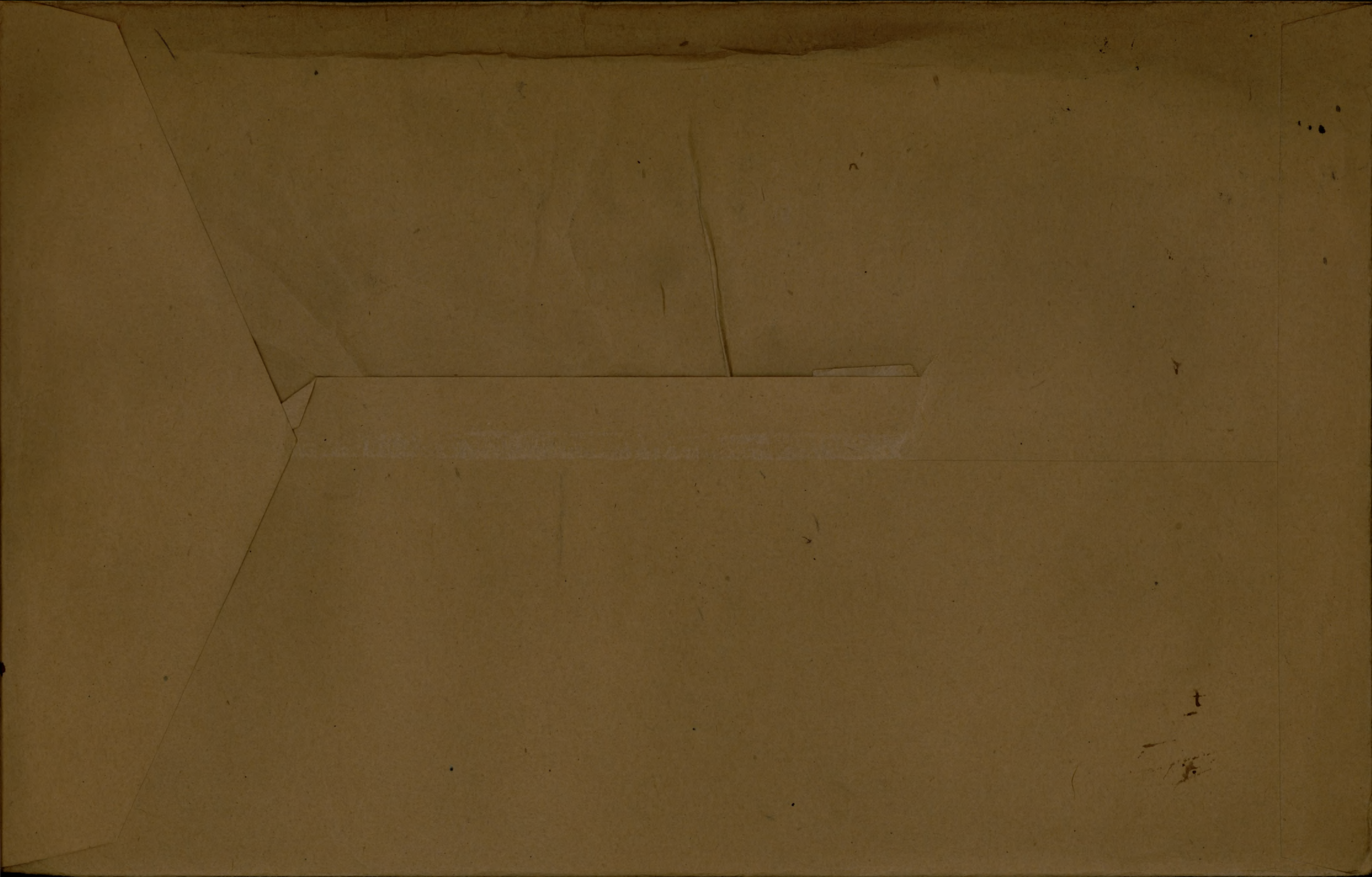
~~Cards, Change of Address~~
KILLED IN ACTION 9-11-15
~~Part II Order~~

1 Casualty

~~Medical 10-20~~

9-23
20-25
28-25
1

MX
161226
1 Cas card
R122



ATTESTATION PAPER.

No. H34

Folio. 239

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... CONRAD M.L. BARIL.
- 2. In what Town, Township or Parish, and in what Country were you born?..... ARTHABASKAVILLE, QUEBEC.
- 3. What is the name of your next-of-kin?..... Joseph A. Baril, (father)
- 4. What is the address of your next-of-kin?..... #94 St Andrew Street, Ottawa.
- 5. What is the date of your birth?..... 16th January 1891.
- 6. What is your Trade or Calling?..... Draughtsman.
- 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?..... No.
If so, state particulars of former Service.
- 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.

Conrad M. L. Baril (Signature of Man).
 J. Oag (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Conrad M. Baril, 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.

Conrad M. L. Baril (Signature of Recruit)

Date April 1915 J. Oag (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Conrad M. Baril, 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.

Conrad M. L. Baril (Signature of Recruit)

Date April 1915 J. Oag (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 Ottawa this 14th day of April 1915

J. P. Barilson (Signature of Justice)

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

Geo. Jamieson (Approving Officer)
 Major, C. E.
 O. C. 5th Field Company, Engineers
 Canada.

Description of CONRAD BARIL on Enlistment.

Apparent Age 24 years 2 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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.)

Height 5 ft. 4 ins.

Chest measurement { Girth when fully expanded 33 ins.
 Range of expansion 2 ins.

1 vaccination scar on left arm.

Complexion Dark.

Sundry marks over body.

Eyes Brown.

Hair Dark Brown.

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

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 MARCH 29th 1915 191 .

Place OTTAWA, Ont.

[Signature] Lt-Col. A.M.C.
 Medical Officer.
 M.O. Divisional Engineers.

*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.

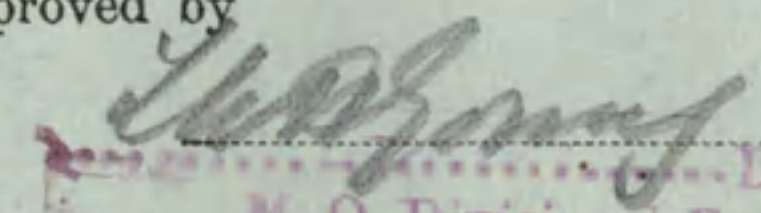
Conrad M Baril having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Date April 1915.

[Signature] (Signature of Officer)
 Major, C. E.
 O. C. 5th Field Company, Engineers
 Canada.

MEDICAL HISTORY SHEET.

Surname Basil Christian Name Conrad M.L.

Examined { on <u>29</u> day of <u>March</u> 191 <u>5</u> at <u>Ottawa</u> Birthplace { City or Town <u>Arthursville</u> County <u>Quebec</u> Apparent age <u>24 Years 2 months</u> Trade or occupation <u>Wrightsman</u> Height <u>5</u> Feet <u>4 1/2</u> Inches. Weight <u>120</u> Lbs. Chest measurement { Minimum <u>33 1/2</u> inches. Maximum expansion <u>2</u> inches Physical development Small-Pox Marks <u>Nil</u> Vaccination Marks { Arm Right / Left Number <u>1</u> When Vaccinated last (a) Marks indicating congenital peculiarities or previous disease <u>Nil</u> (b) Slight defects but not sufficient to cause rejection <u>Sundry moles over body</u>	Approved by  M. O. Divisional Engineers. Rank M.O. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Fit or Unfit</th> <th>EXAMINED FOR RE-ENGAGEMENT,</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Result</th> <th>VACCINATIONS.</th> </tr> </thead> <tbody> <tr> <td><u>21 8/15</u></td> <td> </td> <td><u>[Signature]</u> M.O.</td> </tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Result</th> <th>ANTI-TYPHOID INOCULATIONS, ETC.</th> </tr> </thead> <tbody> <tr> <td><u>28/7/15</u></td> <td> </td> <td><u>[Signature]</u> M.O.</td> </tr> <tr> <td><u>7/8/15</u></td> <td> </td> <td><u>[Signature]</u> M.O.</td> </tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table>	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.	<u>21 8/15</u>		<u>[Signature]</u> M.O.			M.O.			M.O.	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	<u>28/7/15</u>		<u>[Signature]</u> M.O.	<u>7/8/15</u>		<u>[Signature]</u> M.O.			M.O.
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		M.O.																																															

Enlisted on 29 day of March 1915 at Ottawa

CORPS.	REG'T NUMBER.	HABITS.	DATE.
<u>5th Fd Co Ck.</u>	<u>239</u>	-	<u>Mar 29th 1915</u>
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.

631

SMR
2nd Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Jos. A. Paril*
Address *94. 5th Andrew Street
Ottawa
Ont.*

By Whom Assigned *Paril C. M. L.*
Regtl. No. *239*
Rank *Spr*
Corps *5th Field Co Dev. Eng^{rs}*

Rate ~~\$10⁰⁰~~ APR 1 1915

Cancelled Dec 1st 1915 3m 26th 1915

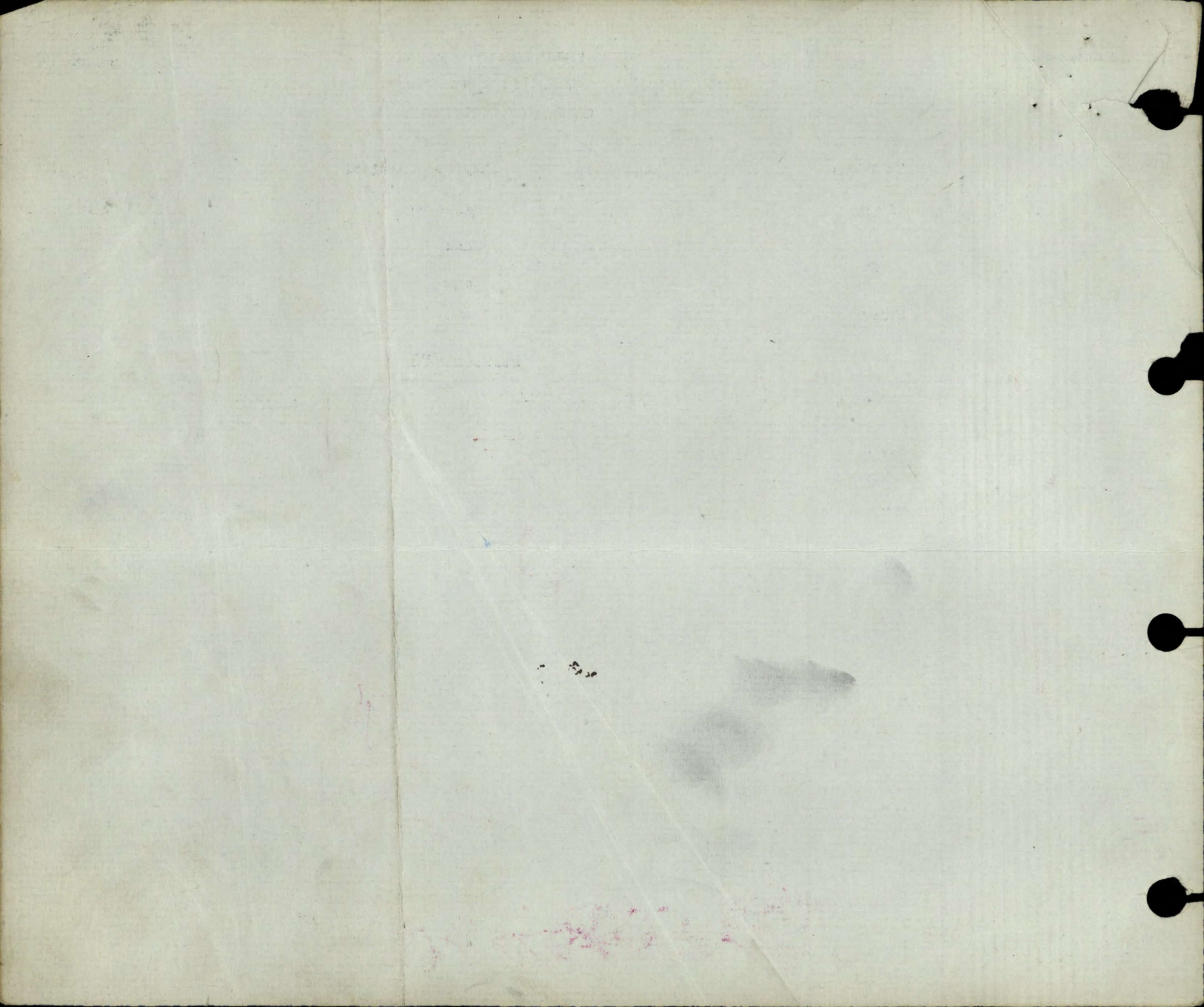
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April		<i>N. 104.</i>	<i>10 -</i>	
May		<i>0 629</i>	<i>10 -</i>	
June		<i>Q 1341</i>	<i>10 -</i>	
July		<i>T 508</i>	<i>10 -</i>	
Aug.		<i>V 2775</i>	<i>10 -</i>	
Sept.		<i>3 558</i>	<i>10 -</i>	
Oct.		<i>K 2160</i>	<i>10 -</i>	
Nov.		<i>N 8939</i>	<i>10</i>	
Dec.		<i>0 11329</i>	<i>10</i>	<i>cancelled.</i>
Jan.	1916			
Feb.				
March				

COPIED FOR 2 CASUALTIES.

F.X 29/6/16 a.k.

SMR



Rank *Div. Eng.* Name *BARIL, Conrad M.L.*
 Unit *5th Field Co. C.E.* If in perm. Corps, What Unit? *X*

Reg'l No *239.*
 Married or Single *Single*

Place and Date of Enlistment *Ottawa. 14th April. 1915.* Place of Birth *Arthabaskaville. Que*

Name and Address, Next-of-Kin *Joseph A Baril. 94. St Andrew St., Ottawa.*

Relationship *Father.*

Assigned Pay Monthly \$ *10.00* Payable to *next of kin*

Relationship

Separation Allowance \$ Payable to *Killed in action 9-11-15 sl. as pay 25/11/15*

Relationship

Discharge, Date and Place Reason Character



Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						
<i>May 1</i>	<i>31</i>	<i>31</i>	<i>100</i>	<i>31.</i>	<i>31</i>	<i>10</i>	<i>310</i>			<i>20</i>	<i>10</i>		<i>30</i>	<i>410</i>	
<i>June 1</i>	<i>30</i>	<i>30</i>	<i>"</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>410</i>		<i>20</i>	<i>10</i>		<i>30</i>	<i>710</i>	
<i>July 1</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>310</i>	<i>710</i>		<i>20</i>	<i>10</i>		<i>30</i>	<i>1120</i>	
								<i>1120</i>							
								<i>160</i>		<i>60</i>					<i>Diff in Exchange July 31</i>
<i>Aug 1</i>	<i>31</i>	<i>31</i>	<i>✓</i>	<i>31.</i>	<i>31</i>	<i>✓</i>	<i>310</i>	<i>1280</i>		<i>1946</i>	<i>10</i>	<i>110</i>	<i>3056</i>	<i>1634</i>	<i>7 sup. 1 day pay #157</i>
<i>Sep 1</i>	<i>30</i>	<i>30</i>	<i>-</i>	<i>30</i>	<i>30</i>	<i>-</i>	<i>3</i>	<i>1634</i>		<i>10</i>		<i>880</i>	<i>1880</i>	<i>3054</i>	<i>7 sup 8 day pay #165</i>
<i>Oct 1</i>	<i>31</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>310</i>	<i>3054</i>		<i>702</i>	<i>10</i>		<i>1702</i>	<i>4762</i>	
<i>Nov 1</i>	<i>9</i>	<i>9</i>	<i>✓</i>	<i>9.</i>	<i>9</i>	<i>-</i>	<i>90</i>	<i>4762</i>		<i>524</i>	<i>10</i>		<i>1524</i>	<i>4228</i>	<i>Killed in action 9/11/15 P. 10.</i>
								<i>4228</i>							
<i>N.E. March 16</i>								<i>Cash in effects 764</i>						<i>4992</i>	
<i>N.E. June 16</i>										<i>4992</i>			<i>4992</i>		<i>Forwarded to Ottawa for settlement</i>

Sch 131
 Cash found in effects *7.64*

Statement of
 MAY 11 1915
 Account rendered

Rank _____ Name **BARIL. Conrad M L** Reg'l No. **239.** *CW*
 Unit **5th Field Co. C.E.** If in perm. Corps, }
 What Unit? } Married or Single **Single**

Place and Date of Enlistment **Ottawa. 14th April. 1915.** Place of Birth **Arthabaskaville. Que**

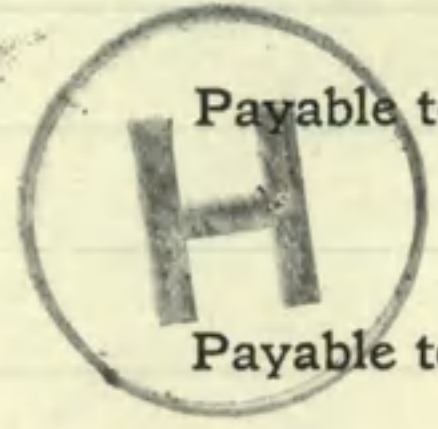
Name and Address, Next-of-Kin **Joseph A Baril. 94. St Andrew St., Ottawa.**
 Relationship **Father.**

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

Discharge, Date and Place **9.11.15 France.** Reason **Killed in action** Character _____

*MX
161220
21*



+

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				
	<i>G</i>				
	<i>O.C. C.E.</i>	<i>Arrested in U.K. s/o "Northland"</i>		<i>29/4/15.</i>	<i>Information form.</i>
<i>2. 9. 15</i>	<i>---</i>	<i>5 days C.B. + 1 days pay for "Smoking on parade"</i>	<i>Dibgate</i>	<i>18.8.15</i>	<i>P.O. #157.</i>
<i>13. 9. 15</i>	<i>---</i>	<i>Admtd + 1 dys. pay { Drunk + Wilful damage. Embarked for France</i>	<i>---</i>	<i>3. 9. 15</i>	<i>P.O. # 165.</i>
				<i>16 SEP 1915</i>	<i>N.R.</i>
<i>20. 11. 15.</i>	<i>O.C. C.E.</i>	<i>Killed in action</i>	<i>France.</i>	<i>9.11.15</i>	<i>P.O. Orders #10</i>
		<i>Buried 10.11.15. at R.E. Farm Bailleul Ambray</i>			<i>Rep # B213. 12.11.15</i>
<i>23. 11. 15</i>	<i>W.O.</i>	<i>Reported from Base. Killed in action</i>		<i>8.11.15</i>	<i>Cas list 46. O.N.</i>

Casualty Form—Active Service.

CERTIFIED CORRECT.
Canadian Record Office
Westminster House,
7, Millbank, S.W.

Regiment or Corps 5 Field Co Canadian Engineers

Regimental No. ~~1131~~ ²³⁹

Rank Sapper

Name Baril Conrad

M. L.

Enlisted (a) ~~29/3/15~~ ^{14/4/15}

Terms of Service (a) Duration of war

Service reckons from (a) ~~29/3/15~~ ^{14.4.15}

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. 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				
12/11/15	O. C. 5th Field Coy	Killed in action Hit in back of neck by shrapnel while on works in trenches	Field	9/11/15	B. 213.
12/11/15	O. C. 5th Field Coy	Buried	R. E. Farm	10/11/15	B. 213
					(Martin) Lieut for Lieut Col. Daaly Cansec. G.D. 3rd Echelon.

(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.

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				

Surname

Christian Name or Names

Reg. No.

Baril

C M L

230

Rank

Unit

Co.

Troop

Batty.

Spr

2nd Div Engineers

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: if more than one state present

DISPOSITION

Date

Killed in Action 8-11-15

REMARKS

Rep from Base

C.L. 23-11-15

#46

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London,

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

No. 1134

RANK *1st Lt.*

NAME *Baril C.*

T. O. S.

UNIT

*11th Engineers
5th Field Coy.*

M. D. *31*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1915. Mar. 29th.</i>	<i>1915. Mar. 31st.</i>	<i>✓</i>		



R.R. - 14

Number, 229 Rank, Spv **B**

Surname, BARIL **V**

Christian Names, Leonard M. L. **V**

Unit, C-E Theatre of War, France

Dates of Service, 16-9-15 **D**

Remarks, *Spv*

Latest Address, Joseph A. Baril,
94 St. Andrew St.

Roll No. *B*
Page 1886 Ottawa, Ont.

G 11494 Keep APR 1 4 1921

GA 38425 Dirp SEP 13 1921

SURNAME. *Baril,*

CARD NO.
1926

CHRISTIAN NAMES

Conrad M. L.

FOLL.

D

REGL. No. *239*

RANK *Sapper*

UNIT *No 5 Co. Engineers, 2nd. Div.*

FORMER CORPS *nil*

old no. 1134

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Baril, Joseph A.*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *94 St. Andrew St., Ottawa
Ont.*

COUNTRY OF BIRTH *Canada, Arthabaskville*

DATE

PLACE OF ATTESTATION *Ottawa*

DATE *14/4/15*

o/s 18/4/15 ⁵⁵/₂

MARRIED

SINGLE

yes

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 Baril, C.M.L. Rank Spr. Reg. No. 239.

Unit 5th Fld Coy. 2nd Divisional Engineers.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915. 9-11.	<u>KILLED IN ACTION.</u>	<i>John R. A. 4</i>		46	2189 ^M	26/11/15.

H.Q. 649-B-1649.

✓ ✓ ✓ ✓ ✓
BARIL, Spr. Conrad M.L., #259, 5th Fld. Co. Div. Eng'rs.

M. & D. (Father) Joseph A. Baril
94 St. Andrew St., Ottawa Ont.

P. & S. " ditto.

Rec # 800671
Mem. C. (Mother)

Mrs. Joseph A. Baril,
(address as above) ✓

APR 1 1922

Reqn. No

2-36666

3915

Reqn. No

p33722

MAR 29 1922

Req. 14/15 Star Spr. 5th Fld. Co. C. ?
U.S.M.
B.W.M.

635-

M

637762

DEC 21 1920

637762

NAME *Barib. C. M. L.* H. Q. FILE No. 649-
 RANK AND CORPS *Sapper 5th. Tld Coy. Riv. Engineers* REGT'L. NO. *239.*
 CABLE

NO.	DATE	NATURE OF CASUALTY
<i>n 2, 89</i> <i>Army Form.</i>	<i>23/11/15</i> <i>B2090A.</i>	<i>Killed in action Riv. 9th 1915.</i> <i>Can. Sect. G. H. Q. 3rd. Echelon.</i> <i>B. E. F. 20-11-15. Killed</i> <i>in action 9-11-15</i>

355.
 FOLL.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

46. Rep. from Base 9-11-15 Killed in action

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
21.8.15	Vaccination
28.7.15	Anti-Typhoid Inoculation.
7.8.15	" " L.W.H. Young, M.O.

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet prepared by the Officer in Charge of Records Canadian Contingents. C.A.M.C.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname BARIL Christian Name Conrad, M.L.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Arthabaskaville County Quebec

Examined ... (on 29th day of March 1915 at Ottawa)

Declared Age ... 24 years 2 month days.

Trade or Occupation ... Draughtsman

Height ... 5 feet, 4½ inches.

Weight ... 120 lbs.

Chest Measurement { Girth when fully Expanded. 35½ inches. Range of Expansion 2 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left Number 1

When Vaccinated ...

Vision ... { R.E.—V= L.E.—V=

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

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

Approved by (Signature) L. W. H. Young, (Rank) Lt. Col. Medical Officer.

Enlisted ... (at Ottawa on 29th day of March 1915)

Corps.	Regtl. No.
<u>5th Fd. Co. C. E.</u>	<u>239</u>

Transferred to ...

Became non-effective by ...

on ... day of ... 1915

(Signature) ... (Rank) ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.