

ATTESTATION PAPER.

No. ~~737~~ 2124

Folio. 224

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... Geoffrey Duncan Stephens
- 2. In what Town, Township or Parish, and in what Country were you born?..... Longway Eng
- 3. What is the name of your next-of-kin?..... J. A. P. Stephens father
- 4. What is the address of your next-of-kin?..... Mr. Beecher, Ship Lake, Upper Eng
- 5. What is the date of your birth?..... Oct 30 1890
- 6. What is your Trade or Calling?..... Barber
- 7. Are you married?..... no
- 8. Are you willing to be vaccinated or re-vaccinated?.....
- 9. Do you now belong to the Active Militia?..... y
- 10. Have you ever served in any Military Force?.....   
 If so, state particulars of former Service. .... Capt. James Kaye Ryan
- 11. Do you understand the nature and terms of your engagement?..... y
- 12. Are you willing to be attested to serve in the }   
 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } .....

G. D. Stephens (Signature of Man).  
 C. McClapham (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Geo. D. Stephens, 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.

G. D. Stephens (Signature of Recruit)  
 C. McClapham (Signature of Witness)

Date April 12 1914.5

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Geo. D. Stephens, 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.

G. D. Stephens (Signature of Recruit)  
 C. McClapham (Signature of Witness)

Date April 12 1914.5

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 12 day of April 1914.5

[Signature] (Signature of Justice)

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

R. P. Campbell (Approving Officer)  
 O. C. 6th Field Ambulance C. E. F.

# Description of Geoffrey Duncan Stephens on Enlistment.

Apparent Age.....24 years 7 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5 ft. 10 1/2 ins.

Chest measurement { Girth when fully expanded.....36 1/2 ins.  
 Range of expansion.....3 ins.

Complexion.....fair

Eyes.....brown

Hair.....brown

- Religious denominations. { Church of England.....  
 Presbyterian.....  
 Wesleyan.....  
 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).

*ragged linear scar 2" long ulnar side left wrist*  
*Small scar on flexor surface of forearm 3" above wrist*  
*2 faint vaco marks left upper arm*  
*Discussed*

## 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.....April 9.....1915

Place.....Montréal

.....*[Signature]*.....  
 .....Capt Th 6 F.A......  
 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.

.....Geoffrey D. Stephens.....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.

.....*[Signature]*.....(Signature of Officer)

Date.....MAY 10 1915.....1914.

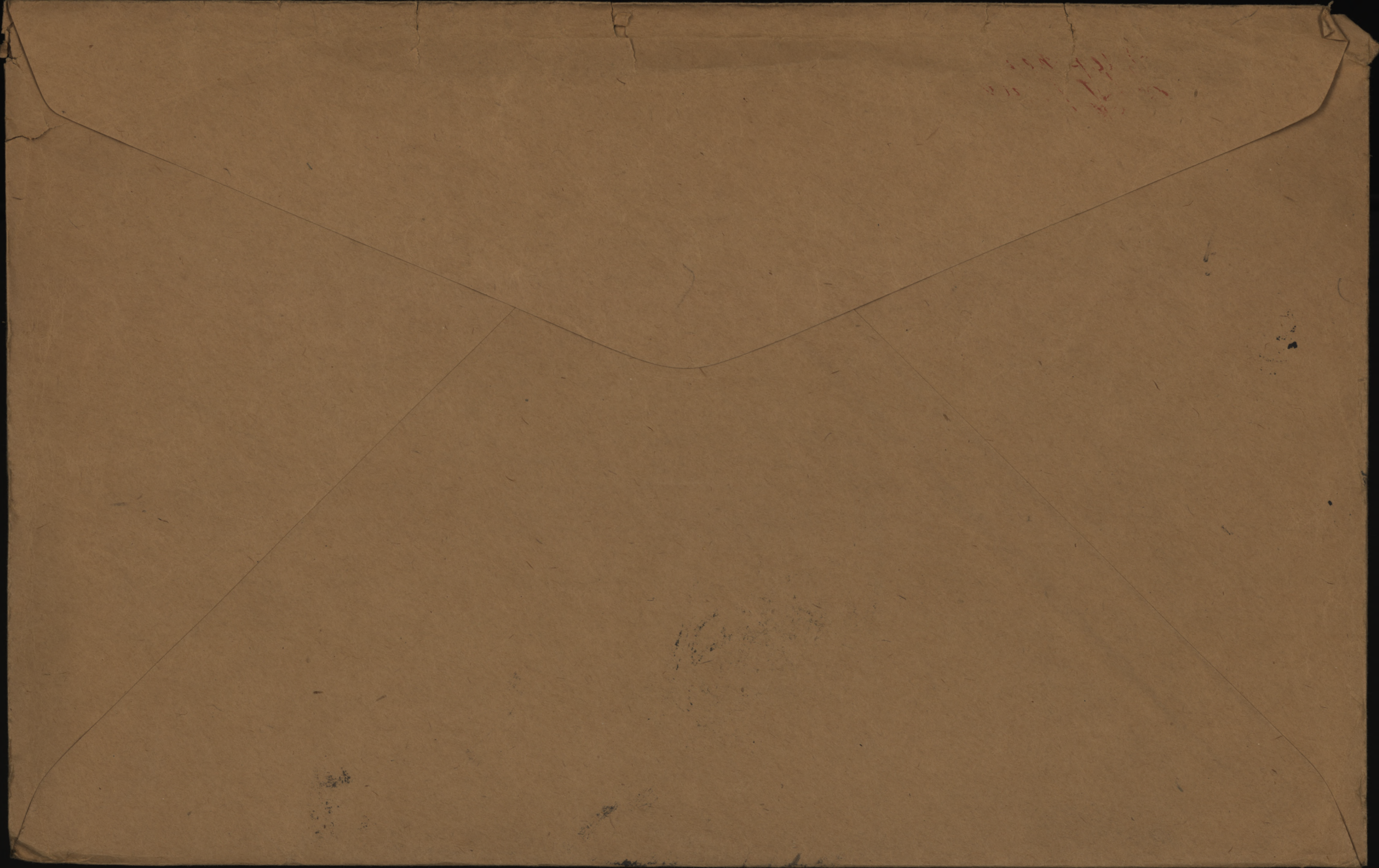
.....Lieut. Col......  
 O. C. 6th Field Ambulance C. E. F.

REGIMENTAL DOCUMENTS

NAME Stephens Geoffrey Duncan REGT. NO. 2154 UNIT \_\_\_\_\_ H. Q. FILE NO. \_\_\_\_\_

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 X / ATTESTATION PAPER (M.F.W. 23, 133, or 51)					<b>DEATH</b>
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 / FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					2d Lt. 5 R. Fus.
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					ICA-9 JUL 6
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					<b>DISCHARGE</b>
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Born
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)					<b>DESERTION</b>
LAST PAY CERTIFICATE (M.F.W. 44)					
1 / 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)				40476	
2 / Misc.					





CARD NO.

SURNAME.

*Stephens.*

CHRISTIAN NAMES

*Geoffrey, Duncan.*REGL. No. *2124*

RANK

*Pt.*

UNIT

*No. 6 Fld. Amb.*

FORMER CORPS

*Cadet & Training Corps. 5 yrs.*

NEXT OF KIN.

NAMES IN FULL

*Stephens, J. A. P.*

RELATIONSHIP TO SOLDIER

*father.*

ADDRESS

*"The Beeches" Shippake  
Oxon, Eng.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*England, Torquay*

DATE

*Oct. 30th. 1890*

PLACE OF ATTESTATION

*Montreal, P.Q.*

DATE

*Apr. 12th 1915.**O/S. 18-4-15.  $\frac{54}{4}$ .*

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

*Painter*

RELIGION

*Church of England*

DESCRIPTION.

APPARENT AGE

*24*

YEARS

*4*

MONTHS

HEIGHT

*5*

FEET

*10 1/2*

INCHES

CHEST MEASUREMENT

*36 1/2*

INCHES

EXPANSION

*3*

INCHES

COMPLEXION

*fair*

EYES

*brown*

HAIR

*brown*

DISTINGUISHING MARKS

*Linear scar 2" long left wrist. Small scar on surface rt. forearm, 3" above wrist. 2 faint vacc. marks left upper arm. Circumcised.*

MEDICAL EXAMINATION.

PLACE

*Montreal, P. Q.*

DATE

*Apr. 9th. 1915.*

Re

Number, . . . 2124 . . . . . Rank, . . . Pte . . . . .

Surname, S.T.E.P.H.E.N.S. . . . .

Christian Name, Geoffrey Duncan . . . . .

Unit, . . . C.A.M.C. . . . Theatre of War, England.  
505. Com. Imp. Army. 30-6-17.

Date of Service, Auth. Cdt. Hdqrs. D.O. 21. d/ 4-7-15.

Remarks, *Imp: Comm: WO. Roll no 2. Page 76.*  
*auth: WO. N/W/9/1783 of 5-5-20* . . . . . 1 . . . . .

Latest Address, . . . . .

Roll No. *A*

*Page 2/10*





Rank

Name **STEPHENS Geoffrey Duncan**Reg'l No. 2124 *O JV*Unit **No. 6 P.A.**If in perm. Corps,  
What Unit?Married or Single **Single**Place and Date of Enlistment **Montreal P.Q. 12th April 1915** Place of Birth **Torquay, Eng.**Name and Address, Next-of-Kin **J.O.P. Stephens, The Beeches, Shiplake, Oxon, Eng.**Relationship **Father.**Assigned Pay Monthly \$ *✓* Payable to *✓*

Relationship

Separation Allowance \$ *To England 24/7/15* Payable to

Relationship

Discharge, Date and Place *Otterpool 30/6/15* 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			No.	Date							
12/4/15	30/4/15	19	1	19	19	10	190		2090			1010	-	-	10	2010	80 <sup>10</sup> Clothing etc	
15.15	31.5.15	31	1	31	31	10	310	80	2490			25				25	990	
16.15	30.6.15	30	1	30	30	10	300	90	4290			25				25	1790	Discharged part II 21.
								160				6010					1950	
								2640				4430				4430	160	NO PMS. cleff July p.l. cheque 2689 cancel date of discharge 24/7/15 \$106.60 for payment 14/11/17 by \$160.00
								160										NO PMS. cleff July p.l. cheque 2689 cancel date of discharge 24/7/15 \$106.60 for payment 14/11/17 by \$160.00
																		NO PMS. cleff July p.l. cheque 2689 cancel date of discharge 24/7/15 \$106.60 for payment 14/11/17 by \$160.00

*W.S. Dec 9.*  
*Feb 11/15*  
*NO PMS. cleff*  
*July p.l. cheque*  
*2689*  
*cancel date of*  
*discharge 24/7/15*  
*\$106.60 for*  
*payment 14/11/17*  
*by \$160.00*

*160 Exchange to be paid.*

*P.T.O.*

*Cash payment of \$44.32 Paid at \$486.25 to P.*

*A.C.B. Cancelled 22/8/15  
Unable to locate whereabouts  
J.B. 2/17*

CHECKED BY.....

DATE.....



Rank Name STEPHENS Geoffrey Duncan

Reg'l No. 2124

Unit No. 6 F.A.

If in perm. Corps,  
What Unit?

Married or Single Single

Place and Date of Enlistment Montreal P.Q. 12th April 1915 Place of Birth Torquay, Eng.

Name and Address, Next-of-Kin J.O.P. Stephens, The Beeches, Shiplake, Oxon, Eng.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place *Otterpool Camp, Eng. 30 6/15* Reason *Corn in New Army* Character *Good*

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>14-7-15</i>	<i>J.C. 6 F.A.</i>	<i>Arrived in England per S.S. Northland</i>		<i>29.4.15</i>	
		<i>Discharged on taking commission in the New Army</i>	<i>Otterpool Camp.</i>	<i>30.6.15</i>	<i>Pt O # 21. Authority P.O. 2nd Canadian Div. 401. 7. 1915. Military Secretary W.O. 28. June 1915. See letter. D.O. 17-7-15. R.L. 6.16.23</i>



Casualty Form—Active Service.

Regiment or Corps 6TH FIELD AMBULANCE,

Canadian Expeditionary Force.

Regimental No. 2124 Rank Pte. Name Stephens G. A.

Enlisted (a) Apr 12/15 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) Apr 12/15

Date of promotion to } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on } \_\_\_\_\_  
present rank } to lance rank } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) C. E. F.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, 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. 218, Army Form A. 36, or other official documents.
Date	From whom received				

*Discharged from Canadian Expeditionary Force on being granted a commission in the New Armies*

*G. G. Campbell*

*Lieut. Col. C. E. F.*

*6th Field Ambulance*

(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				

# MEDICAL HISTORY SHEET.

Surname *Stephens* Christian Name *Geoffrey D.*

Examined { on *9* day of *April* 1915  
 at *Montreal*

Approved by *A. B. Walker*

Birthplace { City or Town *Laguardy*  
 County *Duron Eng*

Rank *Capt came* M.O.

Apparent age *24*

Trade or occupation *Bank Clerk*

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Height *5* Feet *10 1/2* Inches.

Weight *150* Lbs.

Chest measurement { Minimum *34* inches.  
 Maximum expansion *2 1/2* inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right Left   
 Number *one*

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<i>16 5/15</i>		<i>D. W. McEachern</i> M.O.
<i>26 5/15</i>		" " M.O.
		M.O.

Enlisted on *12* day of *April* 1915 at *Montreal*

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<i>No 6 Field Amb C. E. F.</i>	<del><i>927</i></del> <i>2124</i>		<i>April 12-15</i>
Transferred to.....				

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
		<i>Discharged from service on being granted a commission in the</i>	<i>Lieut. Col.</i>
		<i>H. D. Campbell</i>	<i>C. E. F.</i>

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.





# Canadian Contingent—Expeditionary Force.

## LAST PAY CERTIFICATE.

This Form to be used for all Ranks (*Vide* Article 71, Financial Instructions, C.E.F., 1914), and in the case of Officers and men returning to Canada, one copy must accompany the individual.

REGIMENTAL No. 2124 RANK pte NAME Stephen J. G.  
 CORPS 6th Field Amb who was\* discharged  
 on June 30 1915, to new army  
 \* Insert "discharged" or "transferred."

The following is a statement of the account of the above-named to date of transfer or discharge inclusive:—

DR.		CR.	
	\$ Cts.		Cts.
Balance Dr. from previous month ...		Regtl. Pay <u>30</u> days at \$ <u>1</u> Cts. ✓	<u>30</u> ✓
Total payments during period from <u>June 1</u> to <u>June 30</u> ✓		Field Allowance <u>30</u> days at \$ <u>1</u> Cts. ✓	<u>10</u> <u>3</u>
Assigned Pay ...		Other Allowances ...	
Other Charges (give particulars) ...		Other Credits (give particulars)	
		<u>Balance on 31st</u>	<u>990</u>
		<u>BY CHEQUE NO.</u>	<u>840</u>
		<b>PAID</b>	
		<u>£9-2-0</u>	
		<u>24/7/15</u>	
Balance Cr. on discharge or transfer ...	<u>44</u> <u>30</u>	Balance Dr. on discharge or transfer...	
	<u>17</u> <u>90</u>		
<b>TOTAL</b> ...	<u>44</u> <u>30</u>	<b>TOTAL</b> ...	<u>44</u> <u>90</u>
	<u>69</u> <u>30</u>		<u>69</u> <u>30</u>

The amount shown as Balance Cr. due on discharge or transfer has\* rather paid.

Monthly stoppage on account of assignment of pay is \_\_\_\_\_, and has been charged in Pay List for month of \_\_\_\_\_

\* Insert "been" or "not been," as case may be.

### REMARKS:—

State cause of discharge and authority Commission in new army

If discharged from the Contingent, state if Stop Payment form for Assigned Pay has been forwarded, and date \_\_\_\_\_

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

DATE July 7/15  
 PLACE London

H. J. Davison  
 Paymaster. Capt.



# Canadian Contingent - Expeditionary Force

## LAST PAY CERTIFICATE

This form is to be used for all Ranks (Under Article VI, Financial Instructions, C.E.F., 1914) and in the case of Officers and men returning to Canada, one copy must accompany the individual.

REGIMENTAL NO. \_\_\_\_\_ RANK \_\_\_\_\_ NAME \_\_\_\_\_  
 Corps \_\_\_\_\_ who was \_\_\_\_\_  
 on \_\_\_\_\_ to \_\_\_\_\_  
 last "discharged" or "transferred"

The following is a statement of the account of the above named to date of transfer or discharge inclusive:

Date	Particulars	Debit	Credit
	Balance Brought Forward		
	Total payments during period from		
	to		
	Assigned Pay		
	Other Charges (give particulars)		
	Balance C.T. on discharge or transfer		
	<b>TOTAL</b>		
	Health Pay		
	Unpaid Arrears		
	Other Allowances		
	Other Credits (give particulars)		
	Balance Brought Forward		
	<b>TOTAL</b>		

The amount shown as Balance C.T. due on discharge or transfer has been paid.

Monthly savings on account of assignment of pay to \_\_\_\_\_ and his \_\_\_\_\_

been charged in Pay List for month of \_\_\_\_\_  
 have been paid to \_\_\_\_\_

Signature: \_\_\_\_\_  
 State cause of discharge and authority: \_\_\_\_\_

If discharged from the Contingent, state if stop payment form for Assigned Pay has been forwarded, and date \_\_\_\_\_

I have carefully examined this statement of account and find it correct except for the Pay List of the month \_\_\_\_\_

Date \_\_\_\_\_  
 Place \_\_\_\_\_  
 Signature \_\_\_\_\_

This space to be left blank for the Chelsea Number.

H 39-5-75.

Army Form B. 268.



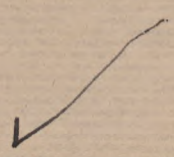
# Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>2124</u>	Army Rank <u>Private</u>
Name <u>Geoffrey Duncan Stephens</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
<b>6TH FIELD AMBULANCE,</b>	
Corps <u>Canadian Expeditionary Force.</u>	
Battalion, Battery, Company, Depôt, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge <u>JUN 30 1915</u>	
Place of discharge <u>Ottawa Camp</u>	
1. <u>Description at the time of discharge.</u>	
Age <u>24</u> years <u>8</u> months Height <u>5</u> feet <u>10 1/2</u> inches Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins. Complexion <u>Fair</u> Eyes <u>Blue</u> Hair <u>Light Brown</u> Trade <u>Bank Clerk</u> Intended place of residence <u>R.M.C. Cambury Bay and 5th Batt. Royal Fusiliers Dover</u> <small>(To be given as fully as practicable)</small> <small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>	Descriptive marks.  <u>Half moon scar about 1/2" on outer side left wrist.</u>
2. The above-named man is discharged in consequence of <u>being granted a commission in the New Armies (5th Batt. Royal Fusiliers Dover)</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
To be filled in on the soldier quitting the Colours.	3. Military character:— <u>Good</u>
	4. Character awarded in accordance with King's Regulations:— <u>Very Good</u>
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
<u>R.D. Campbell</u> Lieut. Col. O. C. 6th Field Ambulance C.E.F. <small>Initials of Commanding Officer.</small>	
Army Form B. 2088 has been issued to*	

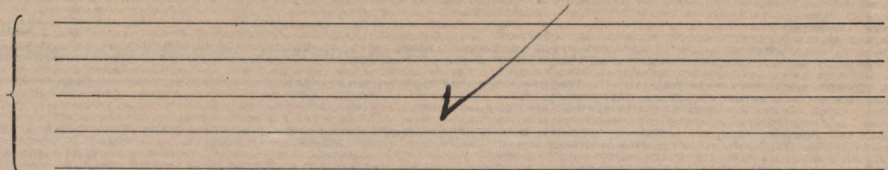
5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?



Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations



Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) Ottawa Camp

R. D. Campbell Lieut. Col.  
O. C. 6th Field Ambulance C. E. F.

(Date) JUN 30 1915

Commanding Battn. Regiment.

8. Certificate to be signed by the soldier on discharge.

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page. (1)

(Place) Ottawa Camp

G. S. Stephens (Signature of Soldier.)

(Date) JUN 30 1915

A. J. Quinn (Signature of Witness.)  
Sergeant Clerk

(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 at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

G. S. Stephens (Signature of Soldier.)

10. Statement of service.

Service towards engagement to \_\_\_\_\_ (the date to which the record of service is completed) \_\_\_\_\_ years \_\_\_\_\_ days.

Further service " " \_\_\_\_\_ (the date of confirmation of discharge) ... .. " "

Total ... .. " "

11. Confirmation of discharge.

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

June (date) 30th 1915

(Place) Ottawa Camp

Signature R. D. Campbell

(Date) June 30th 1915

O. C. 6th Field Amb.

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

---

*Exempt balance as shown by pay book*  
*R.D.C.*

LIST OF DISCHARGE  
DOCUMENTS.

1. Proceedings on discharge  
(Army Form B. 268)
2. Proceedings on transfer to re-serve (if any)  
(Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name  
(if any)
6. Re-engagement paper (if any)  
(Army Form B. 136)
7. Authority for continuance, or extension, of service (if any)  
(Army Form B. 221)
8. Court of Inquiry on an injury  
(if any)  
(Army Form A. 2)
9. Regimental conduct sheet  
(Army Form B. 120)
10. Company conduct sheet  
(Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet  
(Army Form B. 178)
13. Medical report on invalid (if any)  
(Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge)
18. Descriptive return (Army Form D. 400), where required  
See section 11 on second page
19. Active service casualty form  
(Army Form B. 103)
20. Employment sheet  
(Army Form B. 2066)

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

1. Duplicate attestation.  
(On third page the date and cause of discharge will be entered and signed by the competent military authority)
2. Medical history sheet (if any)  
(Army Form B. 178)

Instructions as to the preparation, despatch,  
and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.