REGIMENTAL DOCUMENTS

NAME Baxter Robert Henry REGT. NO. 725091 UNIT 109th Bn H. Q. FILE NO. 5245

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
4 BY	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
/	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	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)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					on Demob
	MEDICAL EXAMINATION (M.F.W. 129)					med. unfit for
/	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					gen. service
	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)					DESERTION
	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	CD3					
1	MFW67					
1	apl for repatriation					
1	AG40435					
5	mac					
2	Dental Cert.					
3	R.O. 1045					
1	R123					

W. 2589
100M-11-18
32-39-1377

B. Coy.

Ok. Jan 3 RG

ATTESTATION PAPER.

No. 725091

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? ..... Robert Henry Baxter
2. In what Town, Township or Parish, and in what Country were you born? ..... Janetville Ontario Canada
3. What is the name of your next-of kin? ..... James Baxter
4. What is the address of your next-of-kin? ..... Janetville Ontario Canada
5. What is the date of your birth? ..... November 21st 1892
6. What is your Trade or Calling? ..... Clerk
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... + inoculated ..... 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

..... (Signature of Man.)

..... (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Henry Baxter, 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.

Robert Henry Baxter ..... (Signature of Recruit)

Date Jan. 3 1916 Geo. Downey Lieut. ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Henry Baxter, 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.

Robert Henry Baxter ..... (Signature of Recruit)

Date Jan. 3 1916. Geo. Downey Lieut. ..... (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 Lindsay this 7th day of January 1916.

..... (Signature of Justice)

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

..... Lt. Col. (Approving Officer)

O. C. 109th Overseas Battalion, C. E. F.

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

Description of Robert Henry Baxter on Enlistment.

Apparent Age 23 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6¼ ins.

Chest measurement: Girth when fully expanded 35 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Dk Blue

Hair Light Brown

Religious denominations:
- Church of England
- Presbyterian Presby
- ~~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).

Small scar over right eye
Little finger on right hand dubbed

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 January 3rd 1916.

Place Lindsay

J. McCullock Capt.
H. O. Boyd Medical Officer
Medical Officer
109th Overseas Battalion, C. E. F.

*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.

Robert Henry Baxter 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.

Lt. Col. (Signature of Officer)
O.C. 109th Overseas Battalion, C.E.F.

Date JAN 17 1916 191 .

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 125091 (Rank) A/S/Sergt.

Name (in full) Robert Henry Baxter enlisted in

the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 3rd

day of January 1916

HE served in England with the C.A.P.C.

and is now discharged from the service by reason of Demobilization. ~~Medical Unfitness.~~

Demobilization - Medically unfit for General Service.

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

Age 27

Height 5 feet 8 ins

Complexion Fair

Eyes Blue

Hair Fair

R H Baxter

Signature of Soldier.

Marks or Scars Scar Forehead

Issuing Officer. Capt. for Lt.-Col. O. C. Clearing Services Command.

Rank

Date of Discharge

QUEBEC, DEPOT SEP 25 1919 Clearing Services Command

Date SEP 25 1919 19

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.

M.F.B. 39A.

B

To be made out in duplicate.

I.Q. 51-21-20-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number 725091

(3) Full Name of Soldier Robert Henery Baxter

(4) Place of Birth Janetville Ontario

(5) Are you married, or not? No

(6) If married, state,
(a) Full name of your wife

(b) Present Postal Address

(7) Are you a widower? No

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address James Baxter Janetville Ont.

(10) Is your Mother alive? Yes

If so, state name and address Sarah Baxter

Janetville Ont

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured? Yes

If so, in what Company? Travellers Of Hartford Connecticut

Have you made arrangements for payment of your Insurance premium

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Lt. Col.
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

Date July 8th 1916

725091 Pay II P.1890 25/Sgt.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Baxter Christian Name Robert Henry

Examined on 3rd day of January 1916 at Lindsay

Birthplace City or Town Jamestown County Ontario

Apparent age 23 years

Trade or occupation Clerk

Height 5 Feet 6 1/4 Inches.

Weight 132. Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 35 inches.

Physical development good

Small-Pox Marks none.

Vaccination Marks Arm Right. none Left. Two Number Two

When Vaccinated last Feb. 2nd 1916.

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Approved by J. McCulloch Capt. Medical Officer

Rank 109th Overseas Battalion, C. E. F.

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.
2.2.16	nil	J. McC. J. McCulloch M.O.
14.3.16	Pitted	J. McCulloch M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
20-4-17		3rd D.F.
12.6.16	good	J. McCulloch M.O.
20.6.16	"	J. McCulloch M.O.
26.6.16	"	J. McCulloch M.O.

Enlisted on 3rd day of January 1916 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt.	725091.		3.1.16.
Transferred to..	C.E.F.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Pay office London	1/12/16	None	Class A. H. Wharton Capt. Clerk
—	12-5-17	T.B.	[illegible]
3 Southampton St. London W.C. 2.	2-5-18.	Defective Vision	Category B1 R. Gibson Capt. Clerk
London	8.8.19	Def Vision	Bonus [illegible] Capt. Clerk

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 [illegible] Christian Name Robert Henry

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				

Form R. & O 6045
1238-130M-29/11/18.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 3.Southampton Street 2/5 1916

No. 725091 Rank A/S.Sgt Name BAXTER R. H.

Local Unit C.A.PAY CORPS Overseas Unit 109th Battn. Age 25

Examination held at 3.Southampton Street,Strand.London.

DISABILITY.
~~Overseas~~—Local.
(scratch one out)

DEFECTIVE VISION.

PRESENT CONDITION.

O.D.6/36. improved to 6/9X
O.S.6/36 " " 6/6 SPECIALISTS REPORT.
Heart and Lungs-Normal.
General bodily condition-good.

BOARD RECOMMENDS:—

1. ~~Fit for Duty~~ B.i
2. ~~Fit for duty after~~ ..... weeks' physical training.
3. ~~Fit for Temporary Base Duty~~ ..... weeks.
4. ~~Fit for Permanent Base Duty~~
5. ~~Discharge~~

Signatures:—

Members
R Gibson — President.
Captain.C.A.M.C.
C Anderson
Captain.C.A.M.C.

APPROVED

6 MAY 1918

Dated at ..... 1916.

R. Arthur Fraserwood
MAJOR, C.A.M.C.
for A.D.M.S., Canadian, LONDON Area.
For A.D.M.S.

L. L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs. Sarah Bayley
Address Janetville, Ont.
Rate $15-00

AUG 1 1916

By Whom Assigned Bayley, R. H.
Regtl. No. 725-091
Rank Pte.
Corps 109th Batt.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT 3

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Sarah Bayles.

Name of Soldier Bayles, R. H.

L. L. Job 310.—Req. 6574.

725091 Pte. 109th Batt.

$15.00

AUG 1 1916

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.		A15755	15		
Sept.		R17457	15		
Oct.		R22189	15		
Nov.		A24928	15		
Dec.		A35867	15		
Jan.	1917	C38190	15		
Feb.		C43258	15		15
March		D48859	15		15
April		D570	15		15
May		C6226	15		
June		F13135	15		15
July		D10077	15		
Aug.		G.26978	15		
Sept.		F38289	15		
Oct.		N47424	15		$210
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.		Remarks.	
Aug.	1918					
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1919					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1920					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						

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

M. F. W. 54. (F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 125091 Rank Private Name Baxter Robert Henry

Enlisted (a) 3.1.16 Terms of Service (a) D. of W. C. E. F. Service reckons from (a) 3.1.16

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) Clerk.

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				
		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	H.M.T. 2810.
					R.H. Anderson Major 109th Overseas Battalion, C. E. F.
18-8-16	Ofc No. 1. Det C.A.P.C.	Attached as Clerk	London	16-8-16	Part II 202.
5-10-16	"	To be A/Sgt while emp C.A.P.C.	"	28-9-16	" " 245.
10-9-17	"	TOS on trans from 12th Res Bn	"	4-4-17	" " 214
30.10.17	— " —	Granted permission to marry	"	24.10.17	" " 257.
10-4-18	— " —	Appt. Staff Sgt. Clerk, P.S.C.	— " —	1-4-18	— " — 83.
29.8.19	CAPC.1.	SOS to Can.Disch.Depot. Buxton, for demobilization. (Auth.C.O.69.d.2.9.19)	London	29.8.19	Pt.2.D.O.198. To Owner

CAPTAIN
OFFICER COMMANDING
No. 1 DETACHMENT,
C.A.P.C., O.M.F.C.

(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.

[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				
	30.8.19	C.D.D. Buxton for return to Canada, Part 11 Order No. 201.			
19=9=19		~~C.D.D. Buxton for return to Canada, Part 11 Order No.~~ C.D.D. Buxton on proceeding to Canada Part 11 Order No. 216.			
		John J. Verney Lt. for Lt. Col. Commanding Canadian Discharge Depot.			
		17-9-19 Embarked Liverpool 26-9-19 Disembarked Quebec Nilling B-50 R.M.S. Melita A. Bracey Lt.-Adjt.			
18-9-19		T. O. S. Quebec Depot Clearing Services Command Part 11. Order No. 269 Dt. 26-9-19.			
		S. O. S. Quebec Depot, Clearing Services Command, on being discharged from the Service under Demob'n. B01420			
25-9-19		Daily Orders Pt. 11 No. 269 D. 26-9-19.			

OFFICER IN CHARGE ... CLEARING SERVICES COMMAND

C.A.D.C. 5609A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) BAXTER. R.H.

REGIMENT C A P C RANK S/Sgt No. 725091

Date of Examination in England 7/8/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 17
3. CROWNS
4. DENTURES Proph.
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada —
- (b) In England Yes
- (c) In France —

Signature of Dental Officer H. B. Findlay Capt.

OTTAWA. 20-1-21

From;

The Adjutant-General,
Canadian Militia.

To ; R. H. Baxter
Suite "H." Adelaide St.
Ft. Rouge
Ont

Sir;-

Enclosed herewith please find Military Will executed by you while in the C.E.F., and returned, the same being your own property.

Lieutenant.
for Lieut,Col..
Director of Records
for Adjutant-General.

D-1a.
L.H.P.

3

ORDER FOR TREATMENT

NUMBER 725091 NAME Baxter R. H. UNIT

DATE OF DISCHARGE Sept 23 PLACE OF DISCHARGE C.B.C. QUE.

HOME DISTRICT Sudbury

DISEASE Eye

TREATMENT RECOMMENDED Glasses

Lt Earnell Lieut.
for a/A.D.M.S. Embarkation,
Clearing Services Command.

TO:-
A.D.M.S.,
M. D. NO.

Date 1919.

EYE, EAR & NOSE & THROAT CLINIC
Sub-Staff, Canadians,
5 Southampton St.,
Strand, W.C.

Date 8-8- 1915

No.	Rank	Name	Unit	For Eye ... Repor
72591	S/Sgt	Baller R.H.	6 APB	

Vision

R.V. 6/24 c̄ glasses 6/6

L.V. 6/24 c̄ glasses 6/6.

Myopia

Defect present before enlistment
not aggravated by service

Bi for eyes

R Stewart
Captain, CAMC.

com.

Date.
Number 725091. Remarks. Rank Q.M.S. Sgt.

Surname BAXTER

Christian Name Robert Henry

Units 109th Bn. Can. Inf. Theatre of War ENG.

Date of Service 31-7-16.

Remarks

Latest Address P.O. Lindsay.
Ont

Roll No. a Page H026

200m.-6-21.

.....Rank.....Regtl. No.....

Fyle Depot.....

.....M. or S. Age.....Religion..... Ref. H.Q.....

.....

.....

.....

.....

Character on

te.....discharge.....

Date and place of

.....enlistment.....

Date of Medical

.....Boards .....

Remarks	Pt. 2 Order No.

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
725091	a/S/Sgt ~~A/Sgt~~	Baxter R.H.	B1	
		Christian Names (1) Robert		
		(2) Henry (3)	Date 6-8-18	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Lindsay	3-1-16	13th Res	Pres	12-6-16 12-5-17 20-6-16 26-6-16 20-1-17	R
Province: Ontario	Age on 23½	Date 16-8-18		Vaccination 2-2-16 14-3-16	

On Command	Hospital	Permanent Cadre	Employed as
		Date taken on	Clerk
Date Proceeding	Date Admitted		

Record of Overseas Service:	Profession or Trade (Civil)
Nil	Clerk
	Transferred or Posted to
Reason for Return:	Date

Married or Single Married

Address of Next of Kin Wife

84 Killie Rd. West. Brompton

Mrs D. Baxter, ~~24 Conway Rd.~~

~~Barnicot Lambeth~~

Country Eng London S.W.

LEAVE.

No. of Pass Issued	From	To	Free Transportation
T 12	Rec 1-8-18	Left 6-8-18	

A.G. 10435.

Part 2 Order Entries.

R

S.

No.	Date EFF	Ref.	No.	Date	Ref.
202 18.8.16	16.8.16	A7			
214 10.9.17	4.4.17	SI			
245 5.10.16	28.9.16	A4			
257 30.10.17	24.10.17	M			
40 20-2-19	1-4-17	D			
83 10.4.18	1.4.18	A4			
141 17-6-18	21-7-16	SC B 2			
147 31-7-18	1-8-18	L			
183 7-8-18	21-7-18	SC B 3			
45 22-2-19	24.2.19	L			

No. 725090 RANK Pte NAME Baxter R. H.

T. O. S. 3-1-16
D.O. 37. 3-1-16

UNIT 109th. Battalion.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.		App. Prov. A/Sgt. without pay. 13-1-16	D.O. 46. 13. 1-16
Jan 3	Jan 31	✓		
Feb.		✓		
Mar.		✓		
April.		✓.		
May.		✓.		
June.		✓.		
July.		✓.		

UNIT SAILED
JUL 23 1916

H 3. CARD NO.

FOLL.

SURNAME. Baxter

CHRISTIAN NAMES Robert Henry

REGL. No. 725091 RANK Sgt. (Act.)

UNIT 109th Batt

FORMER CORPS Nil

NEXT OF KIN

NAME Baxter. Mrs C. M. (Wife)

RELA

ADDR 84 Lillie Rd, W. Brompton, London. S.W. Eng.

54-2138.1. 19/6/18.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Janetville, Ont DATE Nov 21st 1892

PLACE OF ATTESTATION Lindsay DATE Jan 7th 1916

Sailed from Halifax 29/7/16 per S.S. "Olympic". M 625 9/19416 3a/8/591.

L. L. 90589.—M. & D. 6312. 488/5

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Clerk. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 23 YEARS 1 MONTHS

HEIGHT 5 FEET 6¼ INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Dk Blue HAIR Lt Brown

DISTINGUISHING MARKS Small scar over right eye Little finger on right hand dubbed.

MEDICAL EXAMINATION. PLACE Lindsay DATE Jan 3rd 1916.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment Aug. 1, 1916

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 725091

Rank Pte. Promoted Reverted Discharge

Soldier's Name R. H. Baxter

Battalion 109th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name ~~Mrs. Sarah Baxter~~

Address ~~Janetville, Ont.~~

Change of Address

1 Mrs. C. M. Baxter (Wife)

2 24a Comeragh Road

3 Barons Court

4 London Eng.

REMARKS 1088-R-12

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Sept. 30-17			210	$210 00	
Oct	N. 44474		15	15	
Nov.	D 53554		15	15	
Dec.	C ~~61824~~ 61825		15	15	M
~~Jan~~	~~C 66317~~		~~15~~	~~15~~	Br.
			255	255	

Duplicate sheet sent to England for future payments — 2M 22 12/17

Effective 1st. Dec./17 C 61824 Canc. 8 N. 3/18

2M arrived too late to cancel Dec. chg.

C 66317 Cancelled W

ENGLISH

JAN 11 1918

A/c Closed 31/12/17

Ret'd per Melita

Date 25/9/17. M.F.W. 19 9/10/19

Clerk M. D. 3. Hollins

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22220—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22620—M. & D. 1903.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment ~~1-Aug-17~~ 1st. Dec. 1917

Pay

RATE OF SEPARATION ALLOWANCE

Duplicate Sheet

RATE OF ASSIGNMENT

~~15~~ 20	20.00		

PARTICULARS OF SEPARATION ALLOWANCE

No. 725091

Rank Pte. Promoted Reverted Discharge

Soldier's Name R. N. Baxter

Battalion 109th. Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. C. N. Baxter (Wife)

Address 24a Comeragh Road

Change of Address

1 Barons Court

2 London Eng.

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917 Sept 30			210	210		Paid in Canada:- To Mrs. Sarah Baxter Janetville Ont.
Oct. N	47424		15	15		a/c. transf. to Eng. effective 1st. Dec. 1917 - 2M 22/12/17
Nov. D	53554		15	15	✓	2M arrived too late to cancel Dec. chg.
Dec. C	61825		15	15		
				255		

M. F. W. 128.
400m.—5-17—1772 39-1141
L. L. 22820—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

A.G.D. Pay II.
Canadian Pay Office
Received by Pay II.
FEB 28 1918
and Passed for Action
Date
Sub-Div.
A.
B.
C.
Accts.
Bank
Disch.
Invest
Obs.
P. Bks.
P. & S.S.
Sep/C
N.

M. F. W. 128.
400m.—6-17—1772 39-1141
L. L. 22320—M. & D. 7693.

R—122

.R. Rank Name BAXTER, Robert Henry Reg'l No. 725091

Unit 109th Bn. If in perm. Corps, What Unit? Married ~~or Single~~ ~~Single.~~

Place and Date of Enlistment Lindsay, 3rd Jan., 1916. Place of Birth Janetville, Ont., Canada.

Name and Address, Next-of-Kin Mrs. C. M. ~~James~~ Baxter, 84 Lillie Rd. W. Brompton, London S.W. ~~Janetville, Ontario, Canada.~~

Relationship WIFE. Auth. R.L. 29 v. 9/11/5/18.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship X 259

Discharge, Date and Place Reason Character

N/E. R.B. No. 3049 File R.L. Category CAN. OR

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	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.
		Arrived in England per H.M.T. 2810 31-7-16			
18.8.16	London Pay Office	S.O.S. ~~struck~~ Pay Off. London	Deney	16.8.16	Pt. II D.O. 202 (Pay Office)
5-10-16	"	To be A/Sgt. while emp. in Pay O. London.	London	28-9-16	" " 245
9-10-16	109th Bn.	To be A/Sgt. while emp. Pay O. London.	S'cliffe	"	" " 283
		NOW KNOWN as ★I☆C A PAY Corps D.C.S. 1916 D 0-1			
18.12.16		★I C A P C T O S L-don D.T.S. 1916 DO★-T			
		1 COR.D. To S'ton Comm. to Ca. R.C.	B'Shott	8.12.16	Pt II DO 186
		Entries Prior-To-5 4 17, Should. Read. To. Show. On Strength Of 109th Bn. &			
		To C A P C-Authy Office-Instruction ★154-Dated 24/2/17			

REMARKS. Taken from Official Documents.

Date. Place. Report. Date. From whom received. Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Officers' Pay Book.
27.8.17	1st C.O.R.D.	SOS. to C.R.R.	A/Sgt. Sandling	4.4.17	Pt. II O. 211
10-9-17	C.A.A.C.1.	SOS on transfer from 17th Res Bn	" London	4-4-17	" 214
30.10.17.	do.	Permission to marry.	" do.	24.10.17	— 257
10.4.18.	C.A.P.C.1.	Appd A/S/Sgt. Clerk. with hay allt.	" do.	1.4.18	— 83.
HQR.E		D50 — H — 2		17.9.19	
17.9.19.	C.D.D.	S.O.S. to CANADA	A/S/Sgt. Buxton.	17.9.19.	D.O. 216.
29-8-19.	C.A.P.C.I.	S.O.S. to 1.C.D.D.	" London	29.8.19.	D.O. 198.

Name

If in perm. Corps, What Unit?

and Date of Enlistment

e and Address, Next-of-Kin

Reg'l No.

Married or Single

Place of Birth

Relationship

gned Pay Monthly $

Payable to

Relationship

uration Allowance $

Payable to

Relationship

harge Rank and Place

Reason

Character

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. [illegible] Attestation Paper (M.F.W. 23). or
2. [illegible] (M.F.W. 133).
3. [illegible] Form (C.F.B. 103).
4. [illegible] Sheet (M.F.B. 313 or A.F.B. 178).
5. [illegible] Medical Board (M.F.B. 227 or M.F.W. 129)
6. [illegible] Certificate (C.A.D.C. 5001.).
7. [illegible] Sheet (A.F.B. 122.)
8. Discharge (M.F.B. 218a)
   Attached to special envelope (280 M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate ([illegible] 5).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2325).
15. Sundry Items.

Group 6

Checked by No. 9

Date 15/9/19

WITH DEPENDANTS.

(3)

NO. OF DEPENDENTS ..... 4 ..... SHORT FORM. DISPERSAL AREA .....

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

RELIGION ..... Presby ..... NEXT OF KIN ..... wife .....

CANADIAN DISCHARGE DEPT. DOUXTON, DEPT. AUG 30 1919 FILE

3

1. No.	225091
2 Rank.	a/ S/ Sgt
3. Name.	Baxter Robert Henry
4. Unit.	CARC. 109th Bn
5 Date of Discharge	SEP 25 1919 — Place QUEBEC
6 Reason for Discharge	Demobilization - Medically unfit for General Service — CATEGORY B. I
TRADE	Accountant — OCCUPATIONAL GROUP 3
SERVICE IN FRANCE	Nil
7. Authority.	Routine Order 1420
8. Proposed Residence after Discharge	~~Jarvis Ont~~ P.O. Lindsay, Ont

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. ? 39

R H Baxter

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Medical Documents Forwarded to ~~S.C.R. or~~ B.P.C. on Date OCT 17 1919

Place QUEBEC

Date SEP 24 1919

Signature ..... (O. C. Discharging Unit.)

Capt. for Lt. Col.
O. C. Clearing Services Command.

M.F.B. 218a—300M.-11-18—1772-39-113.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes Specialists report attached

19. Is the invalid fit for

(*a*) General service,	(Category A)	(~~Yes or~~ No.) no
(*b*) Service abroad, not general service,	(" B)	(Yes ~~or No.~~) yes Bone
(*c*) Home service (Canada only),	(" C)	(~~Yes or No.~~) Sinus.
(*d*) Temporarily unfit.	(" D)	(~~Yes or~~ No.) no
(*e*) Unfit for service in Categories A, B and C	(" E)	(~~Yes or~~ No.) no

20. It is certified that the invalid
(*a*) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control.~~
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged~~. (When not for discharge add special recommendation.)

Boarded for return to Canada Auth Als, tel 9083 - 1.11.18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

F. Sutherland Lt Col AMC — President.

PLACE London

DATE 8-8-19

D. McLaren Major — Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....President.

PLACE.....

DATE.....

.....Members

APPROVED BY

.....
Assistant Director of Medical Services.

DATE.....

APPROVED BY

.....
Director-General of Medical Services.

for DATE.....

Capt., S.M.C.
D.M.S., Canadians, London

12 AUG 1919

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION 9 Smith Sq London DATE 8-8-19

1. 1 (*a*) Unit C.A.P.C. (*b*) Regimental No. 225091 (*c*) Rank A/S/SGT.

(*d*) Surname BAXTER (*e*) Christian name ROBERT HENRY

(*f*) Home address JANETVILLE ONT.

(*g*) Next of Kin C. M. BAXTER (*h*) Relationship WIFE

(*i*) Address of Next of Kin SAME

2. Age last birthday 26 Date of birth 21-11-92

3. Enlistment, or Appointment (if an Officer) (*a*) Place LINDSAY ONT. (*b*) Date 3-1-16

4. Personal description:

(*a*) Height 5' 8" (*b*) Weight 135 LBS. (stripped) (*c*) Complexion FAIR

(*d*) Colour of hair FAIR (*e*) Colour of eyes BLUE (*f*) Identification marks, Scars, etc. SCAR FOREHEAD

5. Former trade or occupation ACCOUNTANT

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	216

	Periods From	Periods To
Canada	3-1-16	31-July 1916
England	31-7-16	—
France or other theatres of War	Nil	

7. Original disease, or injury MYOPIA

(*a*) Date of origin CIVIL LIFE (*b*) Place of origin CANADA

(*c*) Cause CONDITIONS OF CIVIL LIFE

M. F. B. 227.
400M.—11-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

DEFECTIVE VISION — partial loss of function of eyes.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective Specialists report attached as follows
Vision — RV. 6/24 with glasses 6/6
LV. 6/24 " " 6/6, Myopia
Defect present before enlistment, not
aggravated by service — B(one) for eye
8.8.19. (sgd) R. J. Hundertpf Capt CAMC

Subjective — Defective vision

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No — Cardio-Vascular System (If pulse rate is abnormal, B. P. will be taken.): No — Genito-Urinary System (Albumen and Sugar will be excluded.): No

Special Senses: No — Respiratory System: No — Integumentary System: No

Disturbances of Mentality: No — Digestive System: No — Muscular System: No

Osseous and Joint Systems: No — Any other general condition: No

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

Subj — States that he has had defective vision for years - but only used glasses for reading previous to enlistment - now he must wear glasses all the time - states that the defective vision has been ~~[illegible]~~ aggravated by service
Obj — Eye report 9.4.18 OD 6/36 - 2.00 OS 6/9
OS 6/36 - 2.00 " 6/6 (sgd) W.H. Coulter Capt.
BTi Boarded BTi for defective vision on 2-5-18

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

None

(*c*) (Here give a description of wounds, scars and deformities.

Small scar over rt eyebrow.

11.—(*a*) Did the disabling condition have its origin before enlistment? Yes

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

No.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a or b) No.

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

None

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? None
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why)

17. Recommendations. N.A.

C. J. McLeod Capt CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, R. H. Baxter have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

RHB

R. H. Baxter Sgt Rank.
Signature of invalid examined.

AUDITOR | PAYMASTER

M. OR S.

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 725691 RANK S/Sgt. NAME (IN FULL) Baxter Robert H (BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT C.E.F. 109th Bn. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 3-1-16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 20.00 DATE EFFECTIVE

PAYABLE TO Mrs L M Baxter RELATIONSHIP Wife

ADDRESS Janetville Ont.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Kingston DATE 27-9-19 REASON Demob AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

NEXT OF KIN Mrs L M Baxter RELATIONSHIP Wife

ADDRESS Janetville Ont.

IS SEPARATION ALLOWANCE PAID? Apl 48. DATE EFFECTIVE

TO WHOM PAID 108 Mary St RELATIONSHIP

ADDRESS Hamilton

A.P. 1088-R.12 d/15/3/20

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Robt H Baxter		
Janetville		Ont.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.
BALANCE FROM PREVIOUS ACCOUNT							235	69	235	69																			~~235~~	~~69~~	~~235~~	~~69~~			235	69
Oct.	2	2.10	4	20	85 90				109	20							4	69	5	00	335	02									344	69				
																											10	50	15	00	25	50	25	50		
18-3-20							50	—	50	—											50	—									50	—				
											War Time Gratuity																									
					48	00																	48	00												
165	Days Min		420	00	180	00			600	00													70	00							70		350		180	
																											25	50			95	50	324	50		
																											3	00			98	50	324	50	177	
																							44	50							143		280		177	
																							70								213		210		177	
																							70								283		140		177	
																							70								353		70		177	
																							70								423		0			
																									144						600		0		0	
1921 May	4	9.4	15						15																						15					

PARTICULARS OR REMARKS

~~366~~

Returned Melita

~~Pub. on King's P. G.~~

~~Children Allow. and Int. Payment W. S. G.~~

~~Pay to Widow date of discharge~~

~~Address Mrs Baxter~~

~~Janetville Victoria County~~

Overpaid 3 days on discharge

O/P a/c

O/P S.A. Sept debited in error.

CR 422134

1st pay't a/c Gasoline

Dixat

Overpaid S.A. Oct.

2nd Payment - wrong

C.R. 1373858 - 7/11/19

1334447 NOV 25 1919

1851342 DEC 20 1919

1841626 JAN 22 1920

1842686 FEB 18 1920

1844653 MAR 19 1920

Ag'd of for Dec 1919

A.G.O.L.A. 7-2-28

issued 17-5-28

Mailed 12-5-20

J Graham

200M-3-19.—L. L. 58788-L. & D. 9985.
M. F. W. 2596.
1772-29-1398.

Married or Single: ~~Single~~ Married

Place of Birth: Janetville Ont.

Name and Address of Next of Kin: ~~James Baxter Janetville Ont~~

Relationship of Next of Kin: ~~Father~~

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ 25.00 Effective (Date) 28/11/17

Payable to Wm. C. M. Baxter 24a Comeragh Rd, Barons Court W

Relationship of Dependant:

Permission to Marry 24.10.17. DO 257 P.L. 25.B.1890

Casualties, Promotions, &c

Particulars	Effective Date	Authority
Promoted a/Sgt 28-9-16		DO 245-8 5/10/16
		a PA 6283 9/10/16
		109th Btn
Granted Sgt Clerk	1/4/17	AOO 44 5 20/7/18
app Staff Sgt. "	1.4.18	AO. 83

Admissions to Hospital, &c

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 72509 / Rank ~~Pte~~ S/Sgt Name Baxter, Robert Henry (6)

If in Perm. Corps What Unit: Unit 109th Btn

Transferred to	6 A.P.C. Details	Date Aug 4th	Authority PC 107
Transferred to	Ptl. London	Date 16/8/16	Authority A.O. 115.
Transferred to		Date	Authority
Transferred to		Date	Authority

Permanent Force Allowances

Place of Attestation: Lindsay Ont

Date of Attestation: Jan 3/1916

Assigned Pay Monthly $ ~~50.00~~ Date Effective ~~Aug 1st~~

Payable to ~~Mrs Sarah Baxter Janetville Ont~~ Relationship ~~Mother~~

Assigned Pay Monthly $ 20.00 Date Effective Dec 1st 1917.

Payable to Mrs C. M. Baxter 24a Comeragh Rd Barons Court London Relationship wife

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account transferred to Non-Effective Branch (Date)

Account transferred to Officers' Pay Branch (Date)

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31			1	61											1 61									Bal. from Canada							1 61				
Aug 1	3 1		3		3	10	30								330													15		15		1009				By Billing
4/11	12	1.50	18		12	20	240		12	75	9				29 40	74	17/8/16							2433						24 33		5021			
Aug 16																1396		43	1638					9 93	8	34 07				43 80		4882		8	
Sept 30	46	-	69	-	46	20	9 20		40	1.00	46	-			124 20			1638		1742					29 20	29 20		15		73 40	198				
Oct 1/31	31	-	46	50	31	-	6 20		31	-	31				83 70			1985	14/10	2257	24/10				34 07	34 07		15		83 14	254				
Nov 1/30	30	-	45		30	-	6		30	-	30				81			2276	15/11	2557	20/11				29 20	38 93		15		83 13	41				
Dec 1/31	31	-	46	50	31	-	6 20		31	-	31	-			83 70			2835	21/12						68 13			15 -		83 13	98				
			30	30			30 30																												
Jan 1/31	31	1.70	52	70					31		31				83 70			3090	15/1	3359	31/1				29 20	34 07		15		78 27	641				
Feb 1/28	28	-	47	60					28		28				75 60			3589	15/2	3847	28/2				29 20	29 20		15		73 40	861				
Mch 1/31	31	-	52	70					31		31				83 70			4105	15/3	4432	31/3				29 20	31 63		15		75 83	1648				
Apr 1/30	30	-	51	-					30		30				81 -			85	15/4	315	30/4				34 07	31 63		15		80 70	1678				
May 1/31	31	-	52	70					31	-	31				83 70			566	15/5	768	31/5				34 07	34 07		15		83 14	1734				
			516	61							298	00			814 61									34 06	316 34	296 87		150 00		797 27					

Checked M. Ward

Pay 135 1.60
Fd 50 .50
Ins 100 1.00
285 3.10

Staff Sgt

No 725091 ~~Pte~~ Baxter, Robert Henry. a Pay 20.00 Eng

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits
1st Fwd			516	61							298	00			814 61
June/30	30	1.00	51						30	1.00	30	-			81 -
July/31	31	"	52	70					31	1.00	31	-			83 70
Aug	31	"	52	70					31	"	31				83 70
Sept	30	"	51						30	"	30	-		27 45	108 45

Date	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1st Fwd									34 06	316 34	296 87		150 00		797 27	17 34				
June/30			979	15/6	1223	30/6				34 07	34 07		15		83 14	15 20				
July/31	1572		1467	15/7	1662	31/7			1 46	34 07	34 07		15		84 60	14 30				
Aug			1893	15/8	2112	31/8				34 07	34 07		15		83 14	14 86				
Sept			849	15/9	27	30/9				34 07	58 40		15		107 47	15 84				3745 Offr. Estates 1/4 - 30/9/17 - 153 20. @ 15¢
													210							

Month 1917	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Defer. Sep. Red. Allce. Pay Eng.
Oct 1	Bal. fwd	~~15 84~~							15 84	
Oct	P.A.	88 35		AR 346 15/10/17	34 07			15		
				AR 2527 31/10/17	38 93				16 19	
		88 35			73 00			15		
Nov 1st	L.B.	85 50		Cf 10076 15/11/17	34 07			15		
				v 17234 30/11/17	34 07					
				A 317359 £42-2			20			2
Dec 31	31 Dep 1st Qr $88.35	88 35		C 10758 £5-10-11						25
				CP 22318 15-12-17	34 07					
				28101 31-12-17	34 07				18 76	
		173 85			136 28		20	15		27
1918				A 17110 £9-4-11			20			25
Jany 31	1st Qr	88 35		C 968849 15/1/18	34 07				53 04	
		88 35			34 07		20			25
Feby	1st Qr	79 80		C 10501 £9-4-11			20			25
				C 983506 31/1/18	34 07					
				C 991931 14/2/18	29 20					
				Dec all paid by cheque and Dep all leave shed refd from Oct				15	34 57	
		79 80			63 27		20	15		25
March	1st Qr	88 35		D 24021 £9-4-11			20			25
				C 998913 28/2/18	34 07					
				C 8645 15/3/18	29 20					
				CP 11111. 28-3-18	24 33				15 37	
		88 35			87 60		20			25

15-37
93
148 37

7 April
7

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR ~~CANADA~~.	SEPARATION ALLOWANCE. * ENGLAND OR ~~CANADA~~.
EFFECTIVE DATE:- Dec 1st 1917. Stopped Effective 1.9.19	EFFECTIVE DATE:- 28/11/17. Stopped Effective 1.9.19.
AMOUNT:- 20 00	AMOUNT:- ~~25 00~~ 30

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs C W. Baxter Wife	same
~~244 Camberwell Rd~~	
~~Barnes Court London.~~	
~~C/o Mrs Stewart 84. Lillie Road~~	
~~West Brompton London 1.4.18~~	A.2 M. Form 28/8/19
from 1/9/19 Janetville Ontario wife	
L.P.B. Rendered 2.9.19 Credit	Bal 235.60 30.9.19
Discharged to Canada 1.10.19 N 12817.	2.9.19 MD3. Brockton 15 Burlington

NAME:- BAXTER Robert Henry

NUMBER:- 725091

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D643 20/2/18	1-4-17	Sgt Clerk
D.O. 83	1.4.18	Staff Sgt

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109th Bn.

DATE ACCOUNT FIRST OPENED:- August 1st 1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
DO 115	16-8-16		L.A.C.O. Pay II
Det DO 198	30/8/19		CCD Burton

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
D643 20/2/18.	1 35	50		1 00
D.O. 83.	1 60	50		1 00
Det DO 198.	1 60	50		

PARTICULARS OF RENDERING NON-EFFECTIVE:- New ASPB #121003 Issued 13/5/19 8:7 8:8

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31				March Bal					15 32		19
Apl 30	a/S Sgt Pay	93		A 58025 £9 4 11			20				25
				AR 1859 15-4 Rao	34 07						
				v 3982 30.4 v	34 07				20 18		
		93			68 14		20				25
May 31	Do Do	96 10		A 71225 £9 4 11			20				25
				AR 6090 15 5 Rao	34 07						
				v 8102 30 5 v	38 93				23 58		
		96 10			73		20				
Jun 30.	3rd	93		Eng. ap. SA. B48050. 9/4/11	—		20				25
				AR 10488. pay 9. 14.6.18	38 93						
				AR 13204 " " 28 6 18.	38 93				18 42		
		93			77 86		20				25
July 31.	3rd	96 10		Eng APSA. a/c 62945. 9/4/11	—		20				25
				AR 16059 12/7/18 group 9.	38 93						
				AR 19984 31/3/18 "	38 93				16 66		
		96 10			77 86		20				25
Aug 31.	3rd	96 10		B79145. 9/4/11	—		20				25
				AR 23985 16.8.18 do.	38 93						
				AR 28691 30.8.18 do.	38 93				14 90		
		96 10			77 86		20				25
Sept 30.		93		Eng. 13246. 9/4/11	—		20				25
				AR 33613. 14 [illegible]	38 93						
				AR 40389. 30 9.18 do	34 07				14 90		
		93			73		20				25
				Over							
					447 72		120				150
		567 00									

NUMBER 725091 RANK NAME BAXTER RA

MONTH	PARTICULARS		CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
			567 30			447 72		120		14 90		150
Oct	31	310	96 10		Eng 657592 9/4/11	—		20				25
					AR 47029 K 15.10.18 Gmt 9	38 93				52 07		
					AR 056787 31.10.18 do	34 07				18	Ver 11/19	
			96 10			73		20				25
Nov		310	93		A 66353 12.6.7	—		20		91		40
Dec			96 10		Dec E32243 20.5.6	—		20		167 10		30
					AR 64365 15.11.18 do	38 93				128 17		
					AR 74156 30.11.18 do	34 07				94 10		
					AR 83739 14.12.18	43 80				50 30		
					AR 88636 31.12.18 9	34 07				16 23		
1919			~~189 40~~			150 87		~~40~~				~~70~~
Jany	31	360	111 60		746039 10.5.6	—		20		107 83		30
			300 70					60				100
Feby	28	360	100 80		Eng 776646			20		188 63		30
					AR 2943 10.1.19 G	48 67				139 96		
					AR 17913 28.1.19 G	38 93				101 03		
					~~Gp 32376 14.2.19 Lao~~	~~38 93~~				~~62 10~~		
					AR 34387 15.2.19 G	53 53				47 50		
					AR 38619 21.2.19	43 80				3 70		
Mch			111 60		Eng 626245 10.5.6			20		95 30		30
					AR 49741 15.3.19	48 67				46 63		
					AR 56294 28.3	43 80				2 83		
			212 40		277.40	277 40		40				60
Apr	30	360	108 -		A 23050 10.5.6	—		20		90 83		30
					AR 62170 Lao 15.4.19	43 80				47 03		
					AR 66118 Lao 30.4.19	38 93				8 10		
May	P.A		111 60		A 70450 £ 10.5.6			20		99 70		30
					AR 69320 Lao 15.5.19	48 67				51 03		
					AR 72072 Lao 30.5.19	48 67				2 36		
			219 60			180 67		40				60
June	P.A		108		B 107249 £ 10.5.6.			20		90 36		30
					B 114048 £ 10.5.6.			20		70 36		30
July	P.A		111 60		nil					181 96		
			219 60					40				60
Aug	—		111 60		B 127034 £ 10.5.6			20		273 56		30
					BA 84827 Lao 21/8/19	77 87				195 69		
			111 60			77 87		20				30
Sep.	P.A. J 2.10		63 ..		5/- Sub allce 30.8.19 to 31.8.19 2 days @ 1.50		3 ..			235 69		
					bal				20 ..	235 69		~~30~~
			63				3		20			

63.00 192.69
63
255.69
20
235.69

20.00

SOS 17/9
D50-3