

TRIPLICATE

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 721390.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... *Lamb*
- 1a. What are your Christian names?..... *Russell Arthur Allan*
- 1b. What is your present address?..... *Zenelon Falls*
2. In what Town, Township or Parish, and in what Country were you born?..... *London England*
3. What is the name of your next-of-kin?..... *John Lamb*
4. What is the address of your next-of-kin?..... *Zenelon Falls R.R. 2 Ont Canada*
- 4a. What is the relationship of your next-of-kin?..... *Father*
5. What is the date of your birth?..... *25th August 1899* } *actual age claimed on 18-6-17. Birth Certificate shows date of birth 25th Aug. 1900.*
6. What is your Trade or Calling?..... *Farmer*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated and 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*

LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Russell Arthur Allan Lamb*, do solemnly declare that the above are answers made by me to the above questions and that they 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.

Russell Lamb (Signature of Recruit)

Date *MAY 17 1916* 191 *J. H. Huettschlofer* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Russell Arthur Allan Lamb*, 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.

Russell Lamb (Signature of Recruit)

Date *MAY 17 1916* 191 *J. H. Huettschlofer* (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 *Zenelon Falls* this *17th* day of *May* 191 *Wm. McAllen* (Signature of Justice)

*Disco Section
17-1-18
Ans.*

Description of Russell Arthur Allan Lamb on Enlistment.

Apparent Age.....18 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Chest measurement { Girth when fully expanded.....34 ins.
 Range of expansion.....3 ins.

Complexion.....Fair

Eyes.....blue

Hair.....Fair

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

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).

Scar on left leg one inch long 5/2 inches below the knee on the external side of the calf of the leg.

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.....May 17th 1916

Place.....Fullon Falls

J. McCulloch
 Capt.
 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.

Russell Arthur A. Lamb..... 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.

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

Date..... MAY 17 1916 1916

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.....

Compulsory Stoppages.....

Casualty Forms.....

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.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

a 2 B 122

m 7 W 67

Cert. of Birth

Pay Card - 1 Indian Car

DISCHARGE DOCUMENTS

R. O. No.....

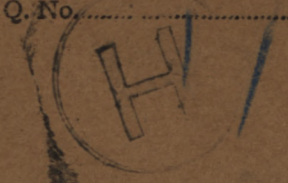
H. Q. No.....

Name *Lamb. Russell arthur allan*

Regt. No. *724290* Rank *Pte*

Corps *EOB 12 form 109th OD Batt CEF*

*Med unpt
(minor)*

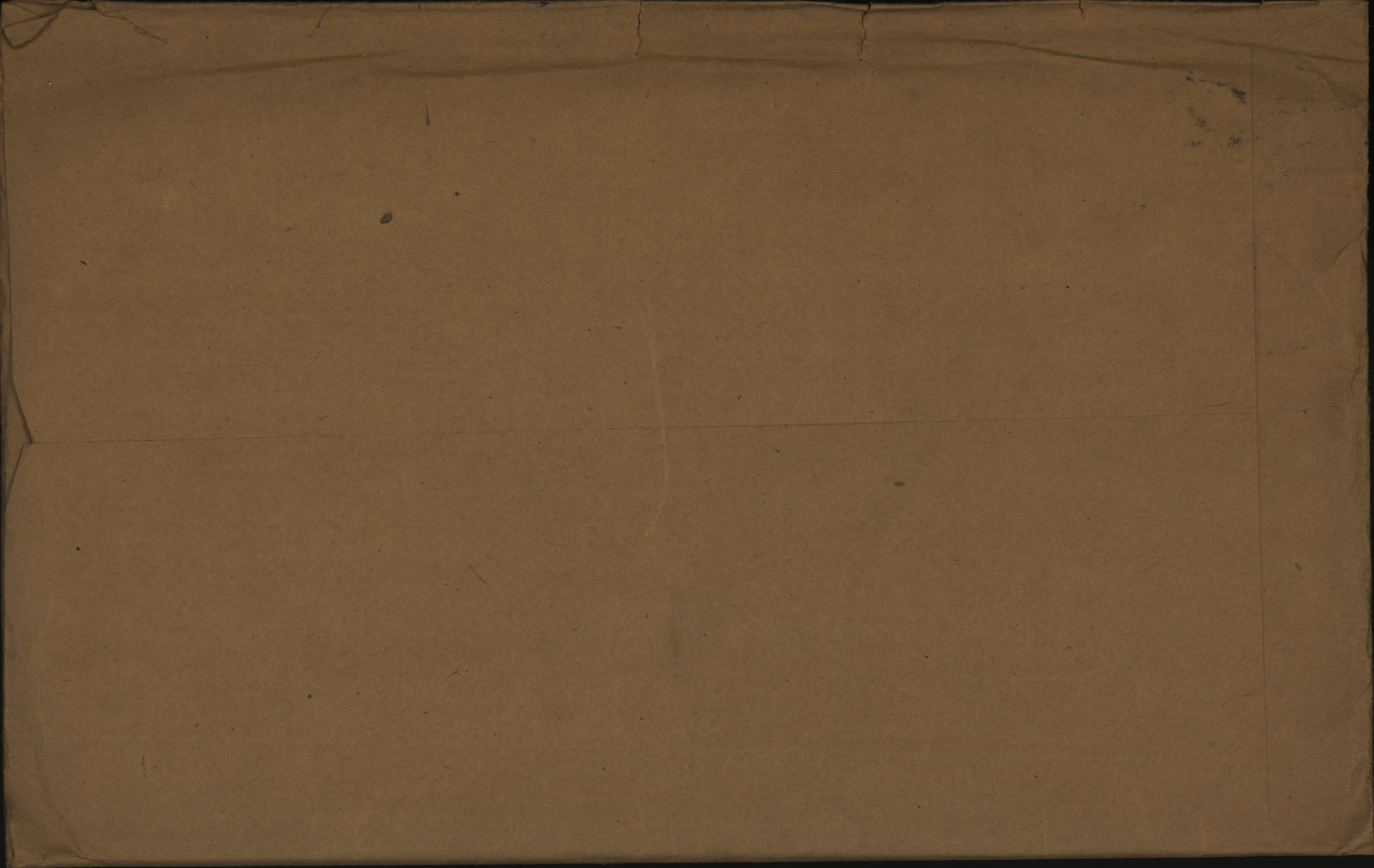


04771



*14 - 10
21 - 10
23 - 10*

*J. K.
M. O. M.*



SURNAME.

Lamb.

16-L 173

✓ CARD NO.

CHRISTIAN NAMES

Russell, Arthur, Allan

305 D's 31-12-17 3

REGL. No.

724 290

RANK

Pte

M. with U.A. and D's
card.
Bn

UNIT

109th

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Lamb, John.

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Kenelon Halls, Ont.

COUNTRY OF BIRTH

England. London

DATE

Aug 25th. 1899

PLACE OF ATTESTATION

Kenelon Halls, Ont.

DATE

May 17. 1916

Sailed from Halifax Per

S. S. Emb. 13-9-17

L. L. 94504. M. & D. 6512.

"Olympic". 23-7-16 ⁴⁸⁸/₂₀

M. F. W. 22. 250M.-2.16. H. Q. 1772-39-339.

Ret. to law per "Transport" 5261 13/9/17 Spec Auth I 349,

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Church of England,

DESCRIPTION.

APPARENT AGE

18

YEARS

MONTHS

HEIGHT

5

FEET

5 1/2

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

0

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Fair

DISTINGUISHING MARKS

Scar on left leg 1" long 5 1/2" below the knee on the external side of the calf of the left leg.

MEDICAL EXAMINATION.

PLACE

Kenelon Falls, Ont

DATE

May 17th 1916.

Present Address.

Kenelon Falls, Ont.

No. 724290- RANK *Ste.*

NAME *Lamb. R. a. a.*

T. O. S. *17-5-16.* UNIT *109th Battalion.*
(S.O. 168 of 3-5-16)

M. D. *3.*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

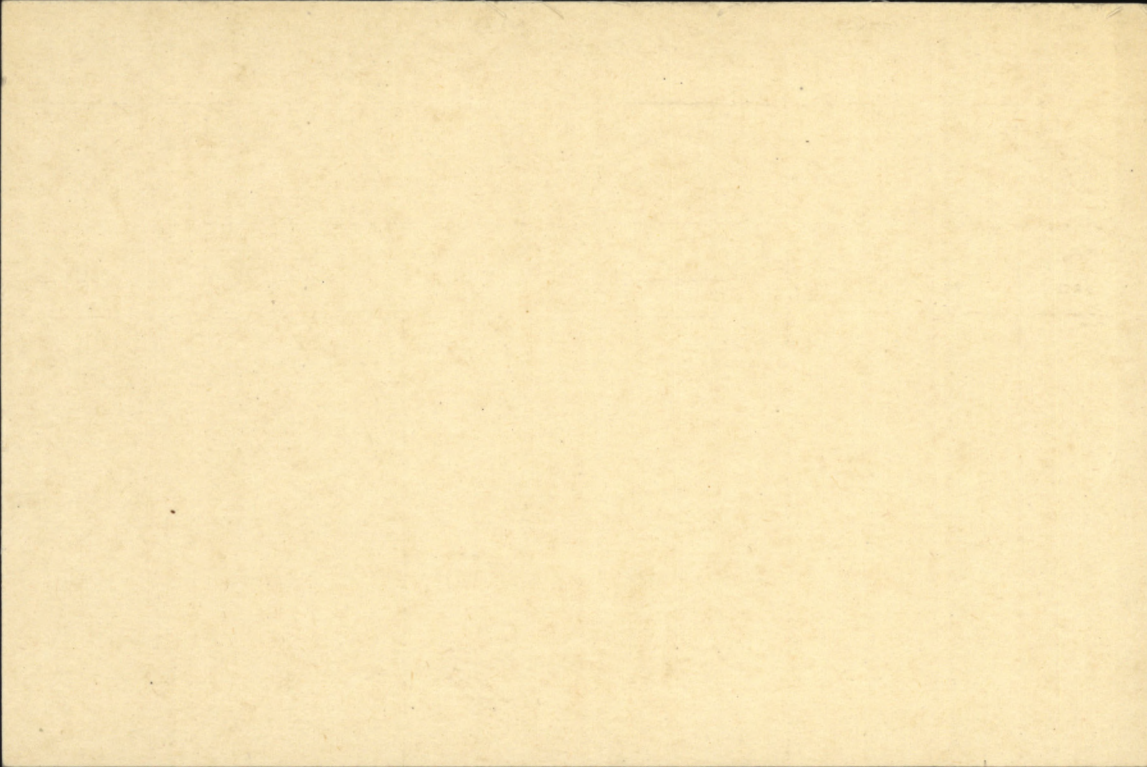
PAID FROM PAID TO SIG. OR REC'T

1916.
May 14
fully.

1916.
June 30

v.
v.

UNIT SAILED
JUL 23 1916



43001

REG. NO. 724290 NAME Hamb R. A.
(SURNAME FIRST)

RANK Pte. CORPS 109 Batt. 12

AGE 17 SERVICE

NAME OF HOSPITAL Queen's Military PLACE Kingston, Ont.

DATE OF ADMISSION 6-10-17

DISEASE Debility

DISCHARGE 31-12-17

OPERATION

DISCHARGED TO DUTY yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

P P P 724290 RR Pto 3
Number Rank

Surname LAMB

Christian Name Russell Arthur Alan

Unit 2/1st Bn. Can. Inf. Theatre of War France

Date of Service 5-10-16

Remarks

20138 Fenelon Falls

Latest Address Cnt

Roll No. B Page 4861

DESP. SEP 20 1926
REG. NO. 24776

Number.

Surname.

Christian Name.

Unit.

Date of Service.

Remarks.

Rank.

Theatre of War.

1092 724290 Pli Lamb 7th & CanOR 15 27 EOR 3A

Certificate of Baptism

Diocese of Toronto

Child's Name *Russell Arthur Allen* April 20th 1917

Date of Birth *August 25th 1900*

Date of Baptism *April 10th 1903*

Parents' Name *Home child adopted by Mr & Mrs John Lamb*

Quality, Trade or Profession *Farm labourer*

Abode *Township of Verulam, Co Victoria, Ontario*

Sponsors *Mr & Mrs John Lamb*

Officiating Minister *"R. Macnamara"*

I Certify that the above particulars are truly extracted from the Register of Baptisms kept in *Fenelon Falls, Ontario.*

Witness my hand this *21st* day of *April* 1917

Henry Grasett Kingstone
Rector

Fenelon Falls, Ontario

CANADIAN CONTINGENT EXPEDITIONARY FORCE

TRIPPLICATE LAST PAY CERTIFICATE

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

Regimental No. 724290 Rank _____ Pte. _____ Name Lamb, R.A.A.

Corps 21st Battalion who was* discharged

On December 31st 1917, to Class 3, Medically unfit.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from December 1st 1917, to December 31st 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances } No. _____			Regt'l Pay <u>31</u> days at \$ <u>1</u> c	<u>31</u>	<u>00</u>
by } No. _____			Field Allow. <u>31</u> days at \$ <u>10</u>	<u>3</u>	<u>10</u>
Assigned Pay No. <u>3788</u>	<u>15</u>	<u>00</u>	Other Allowances* <u>Clothing</u>	<u>13</u>	<u>00</u>
Other Charges*			D.O. <u>352</u> Subs.	<u>12</u>	<u>00</u>
Payment on transfer or discharge No. <u>4478</u>	<u>44</u>	<u>10</u>	Other Credits* <u>17/12/17</u>		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	59	10	Total	59	10

*Give Particulars.

A monthly stoppage of \$ 15.00 (†) has _____ (‡) been paid on account of Assigned Pay for the month of December 1917 to (Assignee) Mrs. A. Lamb,
 (Address) _____ Fenelon Falls, Ont.

POST DISCHARGE PAY
MILITARY DISTRICT No. 3

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

On Transfer of an Officer.

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

REMARKS:—

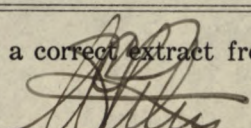
- State (1) date of enlistment _____
 (2) if married and if a Separation Allowance Card has been submitted _____
 (3) cause of discharge and authority 3 MD. 88-L-121.

If discharged from the Contingent, state if Stop Payment advice 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 December 20th, 1917.

Place Kingston, Ont.


Paymaster, "C" Unit M. H. C. C. Capt.

Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

cheque #4478 attached.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all ranks (Vide Articles 122, 130 and 131, Financial Instructions, 227150, C.E.F. 1916)

Regimental No. Name

Company who was

On duty to

Insert "discharged" or "transferred"

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

Table with columns for Debit (Dr) and Credit (Cr) amounts, listing various pay items like Bal. Dr. from prev. month, Next Pay, Field Allowance, Other Allowances, Other Credits, and Total.

Give Particulars

A monthly stoppage of \$ () has been paid on account of Assigned Pay for the month of () to (Assigned) ()

(Address)

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

On transfer of an Officer

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

REMARKS

State if date of enlistment

(2) If married and if a Separation Allowance Card has been submitted

(3) Cause of discharge and authority

If discharged from the Contingent state if Stop Payment advice for Assigned Pay has been forwarded, and has

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

Date

Place

NOTE - For purpose of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay list at the end of the month; and one for retention as a record. For purpose of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay list at the end of the month; and one for retention as a record.

6

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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 724290.....

(3) Full Name of Soldier Russell Arthur Allan Lamb.....

(4) Place of Birth London England.....

(5) Are you married, or not? No.....

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

 (b) Present Postal Address Nil.....

(7) Are you a widower? No.....

(8) Have you any children? No.....
 If so, give number of boys and girls Nil.....
 Also their names and ages Nil.....

M. F. W. 67.

200M.-3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No.

If so, state name and address Nil.

(10) Is your Mother alive? No.

If so, state name and address Nil.

(11) If your Mother is a widow Nil.

Are you her sole support, or not? Nil.

(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.

Nil.

(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.

John Lamb R.R.#2 Fenelon Falls Ontario Canada

(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.

Nil.

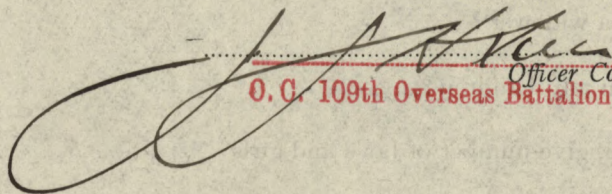
(15) Are you insured? No

If so, in what Company? Nil.

Have you made arrangements for payment of your Insurance premium? No.

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

Date July 4, 1916.


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

ORIGINAL

ORIGINAL

724290

MEDICAL HISTORY SHEET.

Surname Lamb

Christian Name Russell Arthur Allan

Examined { on 17 day of May 1916.
at Fenelon Falls

Approved by J McCulloch Capt.
Rank Medical Officer M.O.
109th Overseas Battalion, C. E. F.

Birthplace { City or Town London
County England

Apparent age 18 years

Trade or occupation Farmer

Height 5 Feet 5 1/2 Inches

Weight 130 Lbs.

Chest measurement { Minimum 31 inches.
Maximum expansion 34 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right None Left One
Number One

When Vaccinated last May 17th 1916

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		<u>18 JUN 1917</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	VACCINATIONS.
<u>17.5.16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>12.6.16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
<u>16.6.16</u>	<u>"</u>	<u>J McCulloch</u> M.O.
<u>20.6.16</u>	<u>"</u>	<u>J McCulloch</u> M.O.
<u>T.A.B 22.9.16</u>	<u>"</u>	<u>H Boyd</u> M.O.

Enlisted on 17 day of May 1916 at Fenelon Falls

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn C.E.F.</u>	<u>724290</u>		<u>17.5.16</u>
Transferred to	<u>21st Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Seaford</u>	<u>25/6/17</u>	<u>Was born Aug City G.O. Wood Colch</u> <u>21st 1900</u>	

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.

88-L-121

CANADIAN

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

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

Rank Pte. Name Russell A. A. Surname Lamb.
Unit of Corps 21st. Battalion. (If a soldier) Regtl. No. 724290
Born at London England. on, (date) Aug. 25th. 1907
Signature (for identification) R A A Lamb

DEPT
MILITARY & DEFENCE
NOV 25 1917
H.Q.
CANADA

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight

Colour of eyes

158

lbs.

Blue

Height

Identification Marks

5

ft.

10

in.

Vaccination marks.

2. NUTRITION AND DIATHESIS?

Good.

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

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

No.

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

Was gassed at Vimy Ridge, May 1917.

Debility following especially dyspnoea.

5. HEART?

Abnormal Sounds?

NO

Abnormal Size?

NO

Pulse Rate?

80

Intermittence or Irregularity?

No

Muscular Tone?

good.

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

No

(b) Blood Pressure.

Sy. 118

Diast. 58.

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

Good.

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.?

1018

Reaction?

acid

Albumen?

none

Sugar?

none.

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

Good.

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

No

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

1/20 decreasing.

Examined at A. M. H. Kingston.

Signed

M. O.

Date Nov. 7th. 1917.

Signed

M. O.

Signature note of Soldier.

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

2326

711/11/19
4
9
2

of an Officer in foreign service or a Soldier for duty.

Rank: Captain
Name: [illegible]
Date of Commission: [illegible]

AT-T-1-2000



1. PHYSICIAN - [illegible]
2. [illegible]
3. [illegible]

4. NERVOUS SYSTEM - [illegible]

5. RESPIRATORY SYSTEM - [illegible]

6. HEART - [illegible]

7. BLOOD - [illegible]

8. DIGESTIVE SYSTEM - [illegible]

9. CENTRAL NERVOUS SYSTEM - [illegible]

10. SKIN - [illegible]

11. [illegible]

12. [illegible]

13. [illegible]

14. [illegible]

AC Rank Name LAMB, Russell Arthur Allan Reg'l No. 724290
 Unit 109th. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Fenelon Falls, May 17th. 1916. Place of Birth London, England
 Name and Address, Next-of-Kin John Lamb.
Fenelon Falls, RR #2 Ont., Canada Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 4796
 File R.L. _____
 Category Can. O.R.

Discharge, Date and Place Reason Character
 H. W. & V., Ltd.—7165-16.

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.				
Arrived in England per H. M. T. 2810 31-7-16					
5-10-16	109 th Bn	S.O.S. to 21 st Batta	Bramsall	5-10-16	Pt II. 50-279
9-10-16	21 st Bn	Taken on strength.	Field	6-10-16	" 58
13.6.17	EOR.A	S.O.S from Base Canada	Seaford	12.6.17	Pt II 093.
20-6-17.	21 st Bn.	transf to Eng. as a minor for disch ⁿ	Seaford.	11-6-17.	Pt 064.
29-8-17	EOR.D.	Embom'd G.D. for disch ⁿ to Canada etc	"	28-8-17.	Pt 0170
19-9-17	"	ceases to be G.D. Buxton vis G.D. on proceeding to Canada for discharge (Authy/KR+O Para 392 see 6a).	Seaford.	15-9-17.	Pt 0191.
Dis Depot To Com. Home			Kingston	25-9-17	NR352.
<i>Minor Born 25th Aug 1900</i>					

A.F.B. 103 C
 10 OCT 1917

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

29484/588

010348-R-1

Name Lamb, R.A.A.
Surnames

Christian Name

Regimental Number 724290

Rank Pte.

Address (in full) Fenelon Falls,

Unit 21st Bn.

Ont.

Original Unit

District where paid M.D.3.

Date of Discharge 31-12-17.

P. D. P. Filing Number 10-47-3.

Rates:—Regimental pay \$ 1.00 per diem; Field Allowance \$.10 per diem. Separation Allowance \$ _____ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	941	9-1-18	33 00	924	9-2-18	33 00	921	11-3-18	34 10		100 10
793 W. G. 432956 15/4/19 70 00											

M. F. W. 127.
50M-617.
1772 39-1140.

Remarks:

Dec'n No. 29484/588 S. G. File No. 10548/RH

Award days at \$ 70.00 per day \$ 280.00

S. A. months at \$ per mo. \$ \$ 100.10

Less P, D. P. Credited \$ \$

Less further debit balance \$ \$

Net due paid as below 179.90

TO SOLDIER		TO DEPENDENT	
Dr	Cr	Dr	Cr
Ag. No	Ch No	Ag. No	Ch No
Amount		Amount	
15/4/19	2793 432906	70.00	
17/4/19	21230 433847	70.00	
19.4.19	19870 437542	39.90	
4			
5			
6			
Total		Total	

155 Geneva St.

St. Catharines,
Ont.

760

GEN'L AUDITOR
Posting checked by
Weber
Date 1.8.19

Re Name Lamb Ross

M. F. W. 41
1 OM-7-16
1772-39 889
P. C. No.
1257

Regimental No. 724.290.

Home
Name and address of next-of-kin Fuelon Falls. out.

Unit 109 Bu. N

Date of enlistment May 1916.

M.B. 28.9.17. D. 3 + four Home.

Place of Fuelon Falls.

Married (yes or no) No.

Date and place discharged

Amount of pay assigned monthly \$ 15 1.8.16 - 31.10.17

225⁰⁰
Reason for discharge

To whom payable Miss Amy Lamb.
Justitia 25.9.17. Fuelon Falls.
out.

Character on discharge

Discharged 31/10/17.
D. II.
H. & 649-16-L-173.

Form 5351-M. & D. 6880.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
	10.8.17						104 20							Ed.P.C.
11/8/17	31/10/17	82	1 ⁰⁰	82 00	82	.10	8 20					9 73	194 40	AR 9599.
												9 73		" 23.
												110 00		C.D. Hal.
												30 00		Sep roct.
												159 46		L.P. Creed 12/17
												34 94		show afc ady to 31.10.17
													194 40	afc to '6' unit
														On Bal.
														Pensioned.
														B.F.C. 20138 Jul 1-18 - # 30 00
														12 71-17.
														S.A. recovery aff.
														15 ⁰⁰ per mo Sept. Oct/17.
														Ed.Pchgd 18/76 - 31/17 195 ⁰⁰

ORR
NOV 12 1917

a.p. no 96

L- L. Job M. & D. 6374.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

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

To Whom Miss Amy Lamb
Address Fenelon Falls
R. R. # 2. Ont.
Rate \$5.⁰⁰

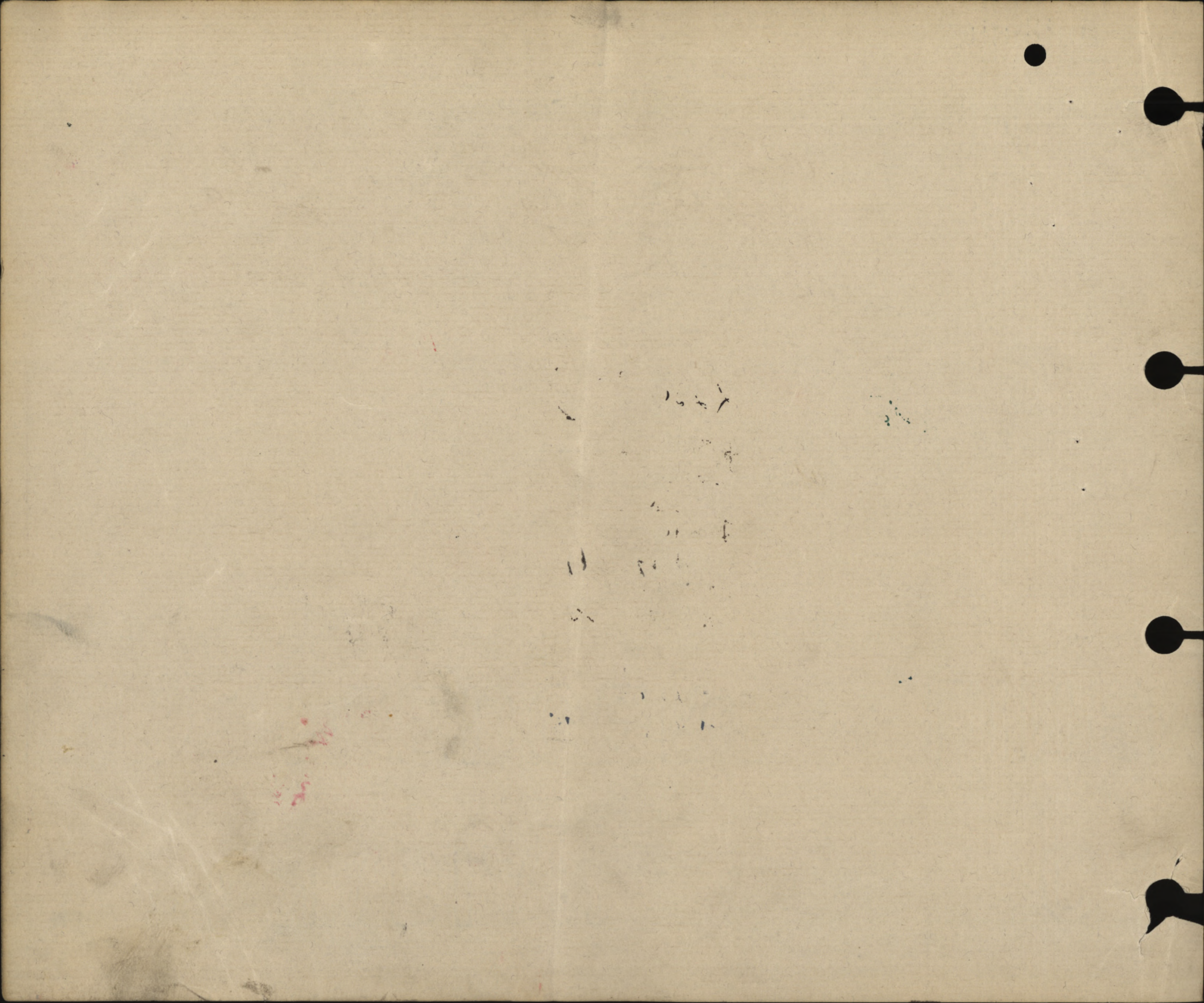
By Whom Assigned Lamb. R. A. A
Regtl. No. 724290
Rank Pte
Corps 109 Bn "C Coy"

AUG 1 1916

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				





a. p. no 96

MILITIA AND DEFENCE

M. F. W. 12a.
50m.-4-16.
1772-39-819.

ASSIGNED PAY

Sheet No. 2.

Miss Amy Lamb

OVERSEAS CONTINGENTS

Name of Soldier

Lamb, P. A. A.

L. L. Job 310.-Req. 6574.

PAYMENTS.

724290 - Pte "C" 109 Bn
15⁰⁰
Remarks. AUG 1 1916

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		P 15390	15
Sept.		Q 18925	15
Oct.		R 23627	15
Nov.		W 27498	15
Dec.		Y 35502	15
Jan.	1917	S 39258	15
Feb.		P 42882	15
March		L 51037	15
April		K 9863	15
May		H 9214	15
June		H 5537	15
July		G 23177	15
Aug.		T 31384	15
Sept.		L 37194	15
Oct.		T 43133	15
Nov.		W 48106	15
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

Root

WKE

30⁰⁰ overpayment for Sept. & Oct. 1916
recovered by Cas. authy P.M.S.
19/11/17 H. Q. 16-d-173 on file
10548-13-4 reg. 20-11-17

15⁰⁰

W 48506
225⁰⁰

W-48506. Cancelled.
A/c Closed
Ret'd per 408 8261
Date 13/10/17 F. X. 29/10/17
Clerk. P. Collins

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 724290		I
Rank Private		
Name Russel Arthur Allan Sault <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company) 21st Battalion		
Date of Discharge Dec 21st 1917		
Place of Discharge Kingston Ont		
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age..... 15years..... 4months. Height..... 5feet..... 5 1/4inches. Complexion Fair Eyes Blue Hair Fair Trade Farmer Intended place of residence } Genelon Falls (To be given as fully as } Ont practicable.)	Descriptive Marks Scar on left leg 1" long 5 1/4" below knee External side of leg	
2. The above-named man is discharged in consequence of Being Medically unfit for further service		
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>		
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc. <div style="text-align: center; font-size: 2em; font-family: cursive;">Good.</div>	
	<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		

Dissection
17-1-18
ms

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Kingston.....

J. Budsall Major
O. C. "C" Unit, M. H. C. C.
Commanding

(Date) 21-12-17.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place)..... R. A. G. Lamb (Signature of Soldier.)

(Date)..... (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

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

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 1...years 228 days.

Total 1...years 228 days.

11. Confirmation of Discharge.

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

(Place) Kingston.....

(Signature) J. Budsall Major
O. C. "C" Unit, M. H. C. C.

(Date) 21-12-17.....

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.)

*paid in full to November
30/11/14.*

X R. A. A. Lamb X

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
---	--

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

MEDICAL HISTORY OF AN INVALID.

1. Station. Queen's Military Hospital. 8. General remarks on his:—
2. Regiment or Corps. 21st, Batt. (a) Conduct.
3. Regimental No. and Rank. 724290, pte. (b) Habits.
4. Name. R.A.A. Lamb. (c) Temperance.
5. Age last Birthday. 17 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
6. Enlisted on May 17th 1916. Address;— Fenelon Falls, Ont.
at Fenelon Falls.
7. Former trade or occupation. farmer Date. Nov. 7th 1917

9. Service.	Years.	Days.
	PERIODS	
	FROM	To
<u>109th Batt.</u>	<u>May 1916</u>	<u>Oct. 1916.</u>
<u>21st, Batt.</u>	<u>Oct. 1916</u>	<u>date.</u>

10. (a) Disease or disability. Debility following gassin. Under-age.
- (b) Date of origin. May 1917.
- (c) Place of origin. Vimy Ridge.
- (d) Cause. Gas.

11. Present condition. (Most Important.) Man gassed May 1917. At present complains of dyspnoea after severe exertions, says can do ordinary work without any trouble. Objective Boy well nourished & looks robust, wt. 158 lbs, 5'10" chest 35-37, aft r $\frac{3}{4}$ min. marking time at double becomes very short of breath. Pulse at rest 80, after exercise 120 in 2 mins. normal. took 3 mons. for dyspnoea to disappear. Heart apex 5th interspace, inside nipple line. Lungs apparently normal. B.P. Sy 118, Diast 58, Urinalysis, S.p.G.R. 1018, acid, no alb. no sugar. Nephritis test shows normal. resul. 2. Under-age, boy looks age stated. "Canadian Record Office, Green Arbour House, Old Bailey, London. E.C

This is to certify that the correct statement of birth of the soldier marginally noted has been produced, and I certify that he was born on 25th August 1900. Signed, W.F. Bary, Cap. for Lt.-Col. i/c Records, C.O.M.F.

12. (a) Is the disability the result of service or climate? Service.
- (b) Has it been aggravated by intemperance, vice or misconduct? No.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Vaccination marks left arm.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

In action,

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

14. Treatment. Hospital, England. Q.M.H.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

6 months decreasing.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

1/20 decreasing.

18. State if for discharge on account of unfitness for Service.

Yes.

H.S. Angrove, Capt. AMC
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. YES

11. "

12. "

15. "

16. "

17. "

18. Is he unfit for Military Service. Yes.

Recommendations : On account of slight disability as a result of gassing and particularly on account of his being under age, man should be placed in Category "E". Man requires no further hospital treatment. Man able to pass under his won control

Signatures :—

Wm. Gibson Capt. AMC President.

E C. D. MacCallum Capt. AC

Members.

Station. Kingston.

L.N. Armstrong Lieut. AMC

Date. Nov. 15th 1917

Date.

E.E. Latta Major. AMC

Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

FILE NO.
 MILITARY HOSPITALS COMM'H
 HEAD OFFICE OTTAWA
 RECEIVED

REPORT

DEC 3 11 02 AM '17

REFERRED TO NOTED
 REFERRED TO ANS'D

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

If admitted. Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

.....

Date of final Medical Board or decision. }

Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
 200m. 8-16.
 H. Q. 1772-89-117.

Station
 Corps
 Regimental No. Rank
 Name
 Disability
 Date
 Hospital or Station transferred to for final disposal.
 Date of final disposal
 How finally disposed of

The original Report is invariably to accompany the discharge documents of Invalids.

If page 20 with Military Will is removed, state on this page to whom it has been forwarded and date:—

Miss Ethel Beck
28 Arthur St
Hove

Miss Nellie Burn
Keston Hotel
Beckford
W. R. Brighton

Record of Anti-Typhoid Inoculation.

TAB
1 22.9.16

(The Medical Officer is to insert hereon $\frac{T.V.}{3}$, $\frac{T.V.}{2}$ or $\frac{T.V.}{1}$ according to system adopted, with date or dates of inoculation and initial entries.)

T.V.
3

12.6.16.

16.6.16.

20.6.16

H. Boyd. Capt.

U

10.4.16

The space below this line is reserved for Army Form W. 3066, which is to be pasted hereon when man embarks for service.

QUEEN'S MILITARY HOSPITAL—REPORT OF COMMISSION.

Date Dec. 6/17.

No. 724290 Rank *Plt.* Name *R.A. Lamb.*
 Corps *109th Battⁿ Can. 21st.*
 Address *Fenelon Falls Ont.*
 Next of Kin *Mother, Mrs. J. Lamb - same address.*
 Occupation *farmer.*
 Age *17*
 Enlisted *17 May 1916*
 Examined by *Capt. Boyd Johnston*
 Height *5' 10"*
 Chest
 Complexion *light*
 Hair *Fair*
 Eyes *Blue.*
 Religion *C.P.E.*

Debility

History:— *England Aug. 1916 France Oct. 6/1916 gassed June 1917 at Vimy Ridge - sent back to have duty at Entrench, unable to do much work as in place. of this had eye sent to England August 1917 to Seaforth Res. Depot, boarded and sent to Boston Whitchurch Depot - Canada - Arr. Q.M.H. Oct. 4/17.*

Patient complains of shortness of breath on least exertion.

Observation:— *Patient says he's 17 and don't look any more, he is a big well nourished boy.*
Heart & Lungs normal.
Pulse 80

Fit for leave.

Dis:— *1. Debility following gassing. 2. Underage, not applicable. 3. E.*

Discharged Dec. 31st 1917

Pay On Boat
 At Quebec
 Cheque

L.D. Stevenson, Lieut.

Adjutant & Registrar

Received

[Signature]

43001

B

No. 1000
 Name: J. P. Smith
 Rank: Private
 Regiment: 1st Battalion
 Date of Birth: 1845
 Occupation: Soldier
 Height: 5' 10"
 Complexion: Fair
 Hair: Brown
 Eyes: Blue
 Religion: Protestant

Admitted to the Hospital on the 15th of June 1861, suffering from a severe attack of dysentery, which had been present for several days. The patient is now recovering and is able to take food and medicine.

On the 20th of June the patient was discharged from the Hospital, and returned to his regiment. He is now well and is able to perform his duty.

The patient was treated with a course of medicine, and his condition improved. He is now well and is able to perform his duty.

The patient was treated with a course of medicine, and his condition improved. He is now well and is able to perform his duty.

The patient was treated with a course of medicine, and his condition improved. He is now well and is able to perform his duty.

At Quebec
 Charles
 Surgeon

OVERSEAS MILITARY FORCES OF CANADA.

Canadian Record Office,
Green Arbour House,
Old Bailey,
London, E.C.4

No....R..L..22.3 -. Officer i/c R.2.

Minor

No. 724290
Pte. Lamb, Russell
Arthur Allan
21st Can. Battn.

This is to certify that the correct statement of birth of the soldier marginally noted has been produced, and I certify that he was born on the 25th day of August 1900.

To be attached to TRIPLICATE Attestation Paper please.

Signed - W.F.Bray

Captain

for Lieut-Col. i/c Records

C.O.M.F.

Home Address. Fenelon Falls, Ont.

MEDICAL HISTORY OF AN INVALID.

1. Station. Q. M. H. Kingston.

8. General remarks on his:—

2. Regiment or Corps. 21st. Battalion.

(a) Conduct.

3. Regimental No. and Rank. 724290

(b) Habits.

Pte.

4. Name. R. A. A. Lamb.

(c) Temperance.

5. Age last Birthday. 17.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

6. Enlisted on May 17th. 1916.

at Fenelon Falls.

7. Former trade or occupation.

Date. Nov. 7th. 1917.

Farmer.

9. Service.

Years.

Days.

PERIODS

FROM

To

109th. Battalion.

May 1916

Oct. 1916.

21st. Battalion.

Oct. 1916

Date.

10. (a) Disease or disability. (1) Debility following gassing. (2) Underage.

(b) Date of origin. (1) May 1917 (2) Not applicable.

(c) Place of origin. (1) Vimy. (2) " "

(d) Cause. (1) Gas (2) " "

11. Present condition. (Most Important.)

(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Man was gassed May 1917. At present complains of dyspoena after severe exertion, says he can

do ordinary work without any trouble. Objective. Boy is well nourished and looks robust, weighs 158 lbs, 5 feet, 10" chest 35 - 37. after 3/4 mins. marking time at double became very short of-breath. Pulse at rest 80, after exercise 120 in 2 mins. normal, took 3 mins. for dyspoena to disappear. Heart, apex 5th. interspace inside nipple line. Lungs apparently normal, B.P. Sy. 118, Diast 58. Urinalysis. S.p. G R. - 1018 - acid - no alb.- no sugar. Nephritis test shows normal result. (2) Underage, boy looks age stated. (See Birth Certificate)

12. (a) Is the disability the result of service or climate?

(1) Service (2) Not applicable.

(b) Has it been aggravated by intemperance, vice or misconduct?

(2) No (2) No.

DEPT. MILITIA & DEFENCE
NOV 26 1917
H.Q. CANADA

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Vaccination marks left arm.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

(1) In action.

(2) Not applicable.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

(1) Not applicable.

(2) " "

14. Treatment.

Hospital: England.

Q. M. H.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

(1) Not applicable

(2) " "

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

(1) 6 months decreasing.

(2) Not applicable.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

(1) 1/20 decreasing.

(2) Not applicable.

18. State if for discharge on account of unfitness for Service.

Yes.

Issuing Mr Capt

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. **Yes.**

11. **"**

12. **"**

15. **"**

16. **"**

17. **"**

18. Is he unfit for Military Service. **Yes.**

Recommendations : **On account of slight disability as a result of "gassing" and ^{an} particularly on account of his being under age, this Man should be placed in Category "E". Man requires no further hospital treatment. Man able to pass under his own control.**

Signatures :—

Wm. J. C. ... President.

E. C. ...

Station. **Kingston.**

Members.

Date. **Nov. 15/17.**

L. N. Armstrong Lieut. M.C.

Date. **NOV 23 1917**

C. J. ... Major, A.M.C.
D/ A.D.M.S. Mil. District No. 3
For A.D.M.S. Mil. District No. 3

Approved.

Date.

Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date _____

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } _____ Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
2005m. 8-16.
H. Q. 1772-89-117.

Station	Corps	Regimental No.	Rank	Name	Disability	Date
Hospital or Station transferred to for final disposal. } Date of final disposal } How finally disposed of }						

The original Report is invariably to accompany the discharge documents of invalids.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Seaford June 25 1917

No. 724290 Rank Private Name Lamb R. A. A.

Local Unit E. O. P. D. Overseas Unit 21st Battalion Age 21

Examination held at Seaford

DISABILITY: Overseas Local (scratch one out).

Underage.

PRESENT CONDITION.

Was born Aug. 25th 1900. Has no birth certificate but looks this age. Has no complaints & no disability.

BOARD RECOMMENDS:- AIV

- 1. Fit for Duty.....
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for Temporary Base Dutyweeks.
- 4. Fit for Permanent Base Duty.....
- 5. Discharge

Signatures: McRivost Capt. President.

Members: Gowood. Capt

M. A. Dalton Capt.



Dated 25 JUN 1917 1917.

Major C.A.M.C.
Seaford
 For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

20

Dated at _____
No. _____
Local Unit _____
Examination held at _____

DISABILITY
Certificate

PRESIDENT'S OPINION

[Faint handwritten text, likely the President's opinion]

BOARD RECOMMENDATIONS

- 1. Fit for Duty
- 2. Fit for duty after _____ weeks physical training
- 3. Fit for Temporary Base Duty _____ weeks
- 4. Fit for Permanent Base Duty
- 5. Discharge

Signature

President _____
Members _____

APPROVED

Date _____ 1917



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				
13-6-17	21 st Btn.	IB from Base, France	Seaford.	12-6-17.	P ⁴ Oq3. R.H.W. Reid Capt. LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
29/8/17	A. LORD.	On command from C.O.R.D to Canadian Discharge Depot. Buxton.	Seaford.	29/8/17	Part II D.O. 170 dated 29/8/17 J.E. Wood asst. Lieut + adjt for D.C. East. Ont. Regt Depot P. Wine Lt for Lt. Col Commanding Canadian Discharge Depôt
29 AUG 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 204			
13 SEP 1917		EMBARKED FOR CANADA FROM LIVERPOOL			P. Wine Lt for Lt. Col. Commanding Canadian Discharge Depôt.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Aug. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15.</i>			
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90

PARTICULARS OF SEPARATION ALLOWANCE

No. *724290*

Rank *Pte* Promoted

Reverted

Discharge

Soldier's Name *R. A Lamb*

Battalion *109 Battr "C. Coy"*

Beneficiary

Relationship

Address

R.A.A

PARTICULARS OF ASSIGNMENT

Name *Miss. Amy Lamb,*

Address *Fenelou Falls,*

Change of Address *R.R. #2 Ont.*

- 1
- 2
- 3
- 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i> <i>Dec 31</i>	<i>—</i>		<i>225</i>	<i>225</i>	<i>Retd. Troopship 8261-13/9/17 - FX 29¹⁰/₁₇ apc closed 31/10/17 - P.O. Collins 30⁰⁰ overpayment for Sep. & Oct. 1917 recovered by Cas. Auth. P.M.H. 19/11/17 - H.Q. 16-L-173 on file 10548-B.4 Wgh 20¹¹/₁₇</i>

M. F. W. 128
4001, 6, 17, 1772-38-141
L. L. 2220-M. & D. 1883.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
 400mc-6-17-1772-38-1141
 L. L. 22320-M. & D. 7588.