

ATTESTATION PAPER.

No. 725577

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your surname? Peacock
- 1a. What are your Christian names? Robert Henry
- 1b. What is your present address? Cavan Ont.
- 2. In what Town, Township or Parish, and in what Country were you born? Cavan tp. Durham County
- 3. What is the name of your next-of-kin? William Peacock
- 4. What is the address of your next-of-kin? Cavan Ont. Canada
- 4a. What is the relationship of your next-of-kin? Father
- 5. What is the date of your birth? July 1st 1898
- 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? Yes
- 10. Have you ever served in any Military Force? 4-5 Regt. 7 yrs
- 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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Henry Peacock, 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.

Robert Henry Peacock (Signature of Recruit)

Date Jan 10 1916 W. J. Thorn Capt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Henry Peacock, 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 Peacock (Signature of Recruit)

Date Jan 10 1916 W. J. Thorn Capt. (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 14 day of January 1916

[Signature of Justice] (Signature of Justice)

13
31
9
53

Description of Robert Henry Peacock Enlistment.

Apparent Age. 27 years 6 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height. 5 ft. 7 ins.

Chest measurement. { Girth when fully expanded. 41 ins.
 Range of expansion. 39 ins.

Complexion. Fair
 Eyes. Blue
 Hair. Dark Brown

Scar of hernia operation on right side

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

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 declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date. Jan. 14th 1916

Place. Lindsay

J. McCulloch
 Capt.
 Medical Officer
 109th Overseas Medical Officer C.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 Peacock having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

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

Date. JAN 14 1916 1916

REGIMENTAL DOCUMENTS

NAME PEAROCK ROBERT HENRY REGT. NO. 25577 UNIT C 46 H. Q. FILE NO. _____

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 9 RESISTANCE PAPER (M.F.W. 23, 133, or 51)	<i>RS-57-19</i>				DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
1 TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				<i>9211</i>	
1 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
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>lemb.</i>
1 MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1 LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
1 PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2+ <i>ata22</i>					
1 <i>ms1375</i>					
3 <i>ms1394</i>					
1 <i>ca 265009</i>					
1 <i>ca 3</i>					
1 <i>m r. 267</i>					
1 <i>copy card</i>					
1 <i>papers</i>					

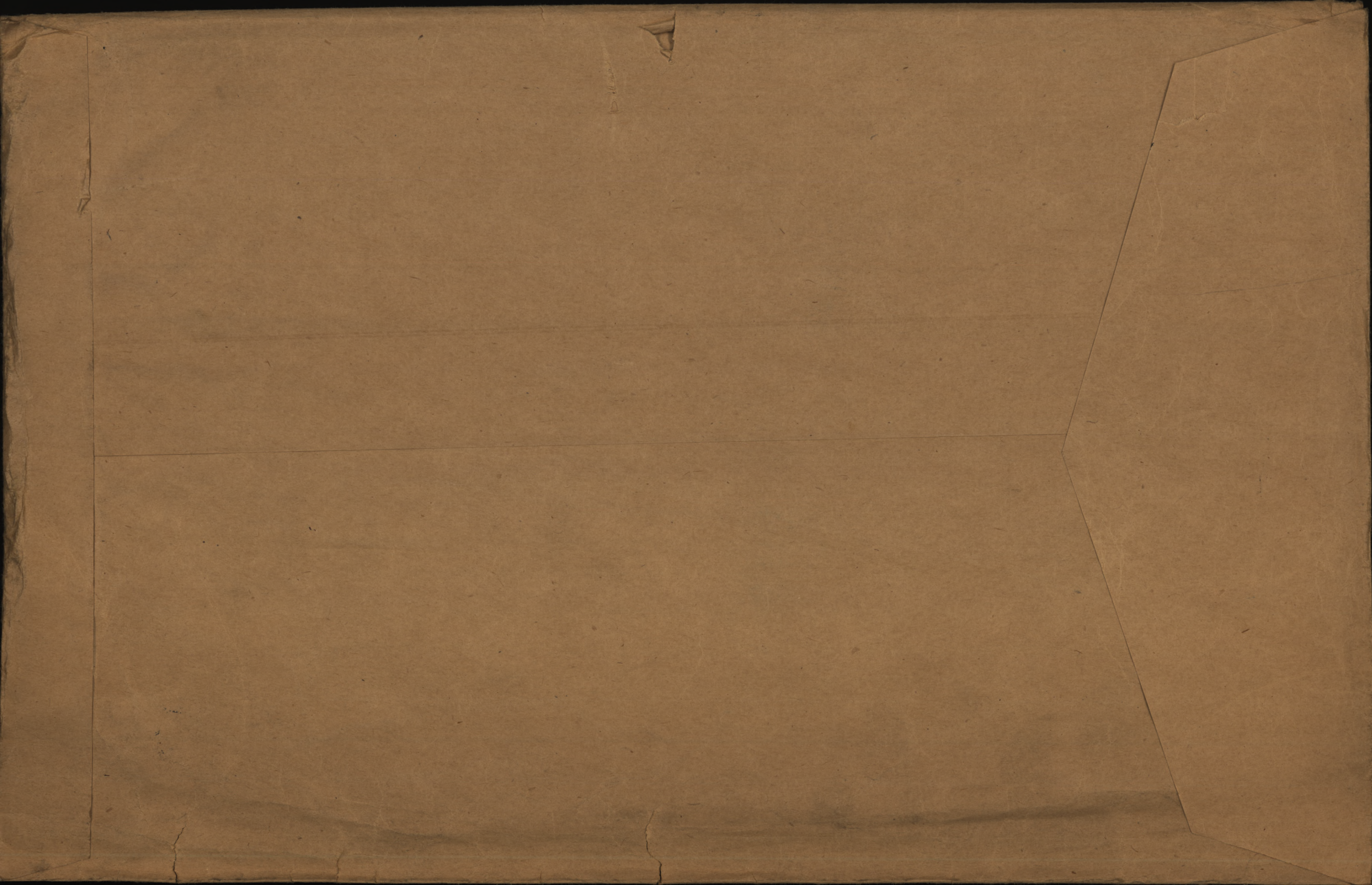
DEATH
Category

DISCHARGE
Category
lemb.

DESERTION

H

~~1
1-11
2-15~~



No. 725577. RANK

File

NAME *Peacock. R.*

H.

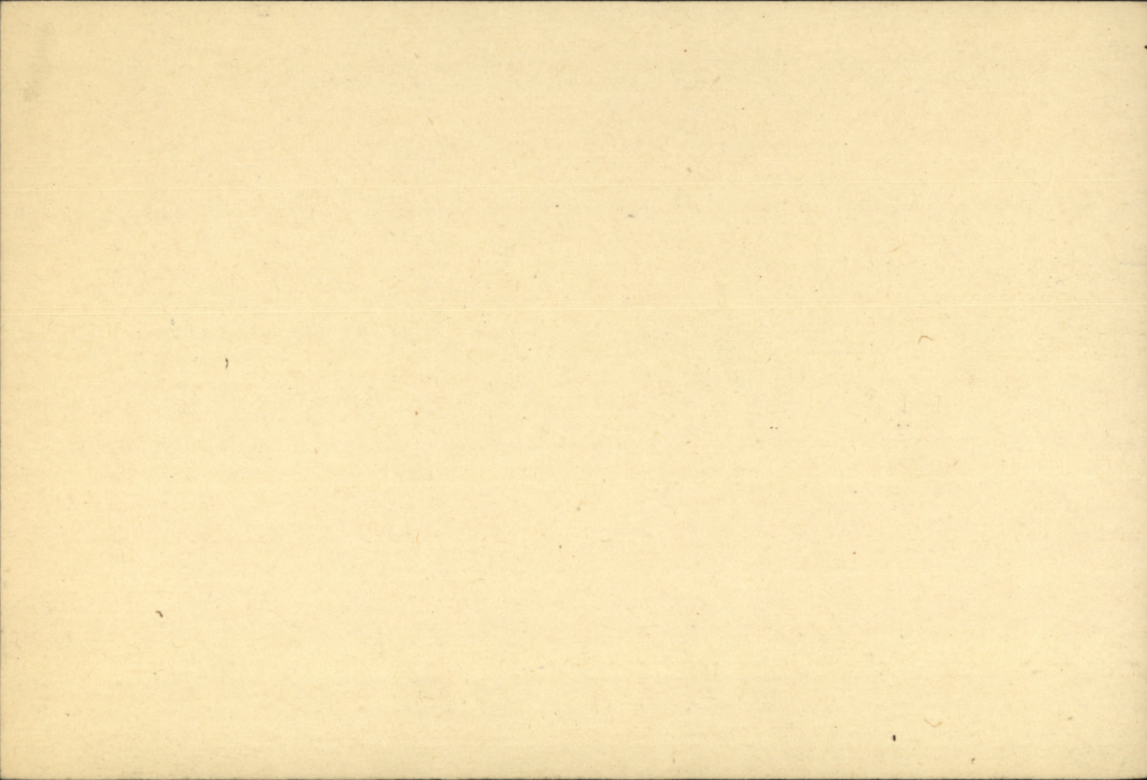
T. O. S.

UNIT *109th. Battalion.*

M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Jan. 14</i>	<i>1916.</i> <i>Jan. 31</i>	<i>✓</i>		
<i>- Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>April.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>		
<i>June.</i>		<i>✓</i>		
<i>July.</i>		<i>✓</i>		

UNIT SAILED
JUL 23 1916



Reg. No. **725-577** Rank **Pte** Surname **PEACOCK** Category _____ Dentally Unfit. _____
 Christian Names (1) _____ (2) _____ (3) _____ Date _____

Place of Enlistment: **Sindray** Date of Taken on from **17.9 H.A.** Religion _____ Inoculations **18.5.25.5.4.6.22/16** Company _____
 Province: **Cent** Age on Date **10.1.16 1.12.17** Vaccination **13-3-16** **Mesh**

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

Record of Overseas Service: _____ Profession or Trade (Civil) **Farmer**
 Transferred or Posted to _____ Date _____
 Reason for Return: _____

Married or Single Married	No. of Pass Issued	LEAVE.		Free Transportation
		FROM	To	
Address of Next of Kin Mrs. Julia Peacock				
29 Bradgate Rd		7.6.18	13.6.18	
Leamford				
Country London S.E. 6				

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
14.3	17-12-17	5.1			
26	25-2-18	x			
61	31-5-18	x			Permission to marry 7-6-18 to 13-6-18 J. O. Married Strength 8-6-18
65	13-6-18	L.			
68	21-6-18	x			
5	30-1-19	S.O.			

SURNAME.

Peacock

CARD NO.

m D 2 "g"

CHRISTIAN NAMES

Robert-Henry

FOLL.

REGL. No.

725577

RANK

Pte

UNIT

109th

Batt.

FORMER CORPS

45th Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Peacock, William

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Cavan, Ont.

Also notify:
Mrs N. Peacock
c/o P.O. Cavan
Ont

auth. S.O.A.P. 5-4-19

COUNTRY OF BIRTH

Canada, Cavan, Ont.

DATE

July 1st 1898

PLACE OF ATTESTATION

Lindsay

DATE

Jan. 14th 1916

Sailed from Halifax per S.S. Olympic

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

27

YEARS

6

MONTHS

HEIGHT

5

FEET

7

INCHES

CHEST MEASUREMENT

41

INCHES

EXPANSION

2

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

dk. Brown

DISTINGUISHING MARKS

Scar of Hernia operation on right side.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

Jan. 14th 1916

NAME

Peacock R. H.

REGT'L. No.

725577

RANK AND CORPS

Pvt. H.Q.C.C. (San Forestry Corps)

H. Q. FILE NO. 649

FOLLOWS
NO.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

Law For. Corps

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

C 15	Mil. Rochester Row. ^{SW F}	17 9, 17	Ven.	"Q"
C 52 ^I	Civ. Spec. Witley Camp	30-10-17	V. D. S.	
C 54	" " " " " " " "	9-11-17	" "	
60.	Inst C. 59 should read C. 60.			

W. W. W.

B

Number *725577* Rank *Pte*

Surname *PEACOCK*

Christian Name *Robert Henry*

Units *109th Am Can Coy* Theatre of War *England*

Date of Service *31-7-16*

Remarks

Latest Address ~~*Lawson Ont*~~

204 Gliddon Ave.

Roll No. *a* *Page 1865* *Oshawa Ont.*

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued Yes No Date..... Character on discharge.....

Previous occupation..... Date and place of enlistment.....

Diagnosis..... Date of Medical Boards.....

Date	Remarks

DESP NOV 20 1922
REGN. NO. 1183999

*—Name will be given in full; surname first.

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

PEACOCK.

R H.

725577

RANK

UNIT

Co.

TROOP

BATTY.

Pte.
HOSPITAL

CAN FORR.

HQCFG.

DATE OF ADMISSION

Rochester. Row. Mil.

17-9-17.

1.

Can. Spec. Witley Camp

HOSP.

30-10-17

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

Ven. "Q"

1.

V. D. S. 140

2.

3.

DISPOSITION

C.L. 21-9-17. C15.

Dis 9-11-17

DATE

REMARKS

*3-11-17 652
13-11-17 659*

M D 2 Dept.

Bch. of D. G. M. S. O. M. F. C. Lond.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

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 **725577**.....

(3) Full Name of Soldier **Robert Henry Peacock,**.....

(4) Place of Birth **Millbrook, Ontario, Canada**.....

(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? **Nil**.....

If so, give number of boys and girls **Nil**.....

Also their names and ages **Nil**.....

(9) Is your Father alive?..... **Yes**
If so, state name and address..... **William Peacock, Cavan, Ontario, Canada**

(10) Is your Mother alive?..... **Yes**
If so, state name and address..... **Sarah J. Peacock, Cavan, Ontario, Canada**

(11) If your Mother is a widow..... **No**
Are you her sole support, or not?..... **Nil**

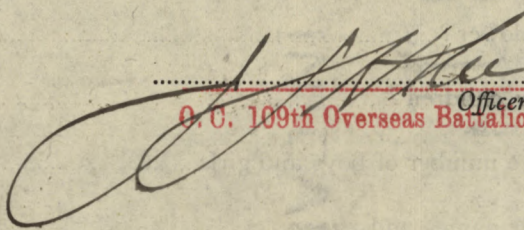
(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
Nil

(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.
Nil

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

Date..... **5th July 1916.**


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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 725577 (Rank) Pte.

Name (in full) Robert Henry Peacock enlisted in
the 109th Batta.

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 14th
day of January 1916

HE served in England, Head Quarters. C.M.

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

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

Age 29 years

Height 5' 9 1/2"

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars Scar.

Right Groin

Leg

R.H. Peacock
Signature of Soldier

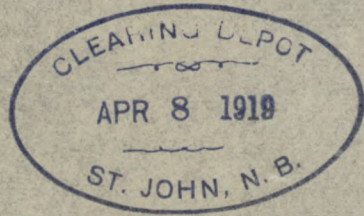
H.H. Smith

Issuing Officer MAJOR

O. C. Clearing Depot, St. John, N. B.

Rank

Date of Discharge



Date APR 8 - 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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____

enlisted in _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____

day of _____ 19____

HE served in _____

and is now discharged from the service by reason of _____

Demobilization _____

Medical Unfitness _____

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

Age _____	Height _____
Complexion _____	Build _____
Eyes _____	Hair _____
Signature of Soldier _____	Date of Discharge _____
Signature of Officer _____	Date _____
Marks or Scars _____	

If B.C.A. no duplicate of this Certificate will be issued, any person holding same is requested to forward it in an unopened envelope to the Secretary, British Council, Ottawa, Canada.

725577 Pte Peacock. R. H 109th Bn C.E.F.

FORM 100
1917
MILITARY

Will removed by Regt. Paymaster

H. J. Williams CAPT.
Paymaster, 109th Overseas Battalion, C.E.F.

78133

Lawson, Ont.
do

MSP 3

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 725577

Name Robert Henry Peacock

Unit C Coy 109th Bn Can Inf

Military Will.

I hereby give and bequeath,
all my personal belongings
and effects to my father
William Peacock, Lawson,
Ontario, Canada

H. J. Williams
witness

Signature R. H. Peacock

Rank and Regt. Pte 109th Bn Can Inf

Date Ont. 1st 1916

MEMORANDUM

From

From

To

To

ANSWER

.....19

.....19

725577
 5577

c. Coy.

MEDICAL HISTORY SHEET ORIGINAL

Surname Peacock Christian Name Robert Henry

Examined { on 14th day of January 1916
 at Lindsay

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

Birthplace { City or Town Lavan, Durham County
 County Ontario

Apparent age 27 years

Trade or occupation farmer

Height 5 Feet 7 Inches

Weight 162 Lbs.

Chest measurement { Minimum 37 inches
 Maximum expansion 41 inches

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right none Left one
 Number one

When Vaccinated last March 13th 1916

(a) Marks indicating congenital peculiarities or previous disease none

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

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		<u>cat. B. III</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS
<u>13.3.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>15.5.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>25.5.16</u>	"	<u>J. McCulloch</u> M.O.
<u>4.6.16</u>	"	<u>J. McCulloch</u> M.O.
<u>22.9.16</u>	"	<u>H. Boyd</u> M.O.

Enlisted on 14th day of January 1916 at Lindsay

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725577</u>		<u>14.1.16</u>
Transferred to.....	<u>C. E. F.</u>			
	<u>124th OVERSEAS BATTALION C.E.F.</u>			
	<u>Canadian Forestry Co.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Summingdale</u>	<u>12/11/17</u>	<u>Painful Scar</u>	<u>B. Two</u>
<u>Summingdale</u>	<u>10.2.19</u>	<u>Def. Vision</u>	<u>Cat. B. Two</u>
<u>"</u>	<u>10/2/19</u>	<u>"</u>	<u>Cat. B. Two</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.

Robert Murray

Christian Name

Robert

Surname



STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In 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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
		17	9	17	29	10	17	Syphilis	13	Complete treatment (started on 17/10/17)	<i>Amstrong</i> Captn RMC
	Can Spc Hosp. Witley	29	10	17	9	11	17	"	27 12	Scattered syphils. Free from infection. Discharged as an out-patient. Stoppage as per dates.	<i>McL. Sutherland</i> Capt.

Leave & A B2

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 ROBERT H. Surname PEACOCK.
Unit or Corps C. F. C. (If a soldier) Regtl. No. 72557Y.
Born at CAVON. ONT. on, date 2nd JULY. 1889.
Signature (for identification) R. H. Peacock

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

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

Weight 160 lbs.
Height 5 ft. 9 1/2 ins.

2. **NUTRITION AND DIATHESIS** P

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

3. **NERVOUS SYSTEM** P

4. **RESPIRATORY SYSTEM.**

5. **HEART** P

Abnormal Sounds?
Abnormal Size?
Pulse Rate? Intermittence or irregularity?

6. **ARTERIES.**—Any hardening?

7. **DIGESTIVE SYSTEM** P

8. **GENITO-URINARY SYSTEM** P

Urinalysis—s.g. ? Reaction ? Albumen ? Sugar ?

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

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

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

Examined at..... Signed..... M.O.
Date..... Signed..... M.O.

If any disease or impairment of health or physical condition is discovered, 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.

*Feb 1/14
For a 703 174. JSM
By J. J. J.*

Medical Examination Report for the

Officer in the general service of a

Police Department of the City of

San Francisco, California

Examination
by
Physician

Name

Rank

Division

Station

Address

City

State

Country

Date

Time

Place

Weather

Remarks

Physical

Mental

Character

Disposition

History

Present Illness

Diagnosis

Prognosis

Treatment

Follow-up

Signature

Capacity

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

Remarks

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) PEACOCK, R.H.
REGIMENT 6. F.C. RANK PTE. No. 725577

Date of Examination in England 8-2-19 Date of Examination in France _____



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.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS none
2. EXTRACTIONS none
3. CROWNS none
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower
 } none.

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 J.H. Reid capt.

PRESENT DENTAL REQUIREMENTS

DIRECTIONS TO
DENTAL OFFICERS

1. This form will be
made out for each
individual at the
time of dental
examination in
order to

2. Figures as to
dental work done
and dental
requirements

3. In addition to
dental work done
and dental
requirements

PERCOK, R.H.

7 1957

1. Teeth
2. Filling
3. Crown
4. Bridge
5. Denture

1. Teeth
2. Filling
3. Crown
4. Bridge
5. Denture

PRESENT DENTAL REQUIREMENTS

- 1. Teeth
- 2. Filling
- 3. Crown
- 4. Bridge

- (a) Full Upper
- (b) Full Lower
- (c) Full Upper
- (d) Full Lower

Signature of Dental Officer

J.P

Rank *Plt* Name *PEACOCK. Robert Henry* Reg'l No. *725577*
 Unit *109th Bn.* If in perm. Corps, }
 What Unit? } Married or Single *Single*
 Place and Date of Enlistment *Lindsay 10th Jan. 1916.* Place of Birth *Cavan Tp. Durham Co.*
 Name and Address, Next-of-Kin *William Peacock.*
Cavan Ont. Canada. Relationship *Father.*

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

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.				
<i>Arrived in England per H. M. T. 2810 31-7-16</i>					
<i>8.12.16</i>	<i>Ob 109th Bn</i>	<i>SOS on trans. to 124th Bn</i>	<i>Whitley</i>	<i>8.12.16</i>	<i>Pt II D.O. 343</i>
<i>11.12.16</i>	<i>Ob 124th</i>	<i>T.O.S. from 109th</i>	"	"	<i>264.</i>
<i>19.1.17</i>	"	<i>SOS from 124th Bn.</i>	"	<i>18.1.17</i>	<i>19. Pt II D.O. 26.</i>
<i>1-2-17</i>	<i>124 Bn</i>	<i>Tfd to Can. For. Corps.</i>	<i>Whitley</i>	<i>1-2-17</i>	<i>Pt II D.O. 32.</i>
<i>4.2.17</i>	<i>CFC</i>	<i>T.O.S. from 124th Bn</i>	<i>London</i>	<i>1-2-17</i>	<i>" " 35.</i>
<i>12.5.17</i>	<i>" NA.</i>	<i>On Strength (M.S.)</i>	<i>Plt "</i>	<i>1.5.17</i>	<i>" " 1.</i>
<i>20-9-17</i>	<i>CFC</i>	<i>adm unit Hoop</i>	<i>" Rochester Row</i>	<i>17-9-17</i>	<i>CXC 15 Ven "A"</i>
<i>2-11-17</i>	<i>" "</i>	<i>Trans to Can. Spec. Hoop</i>	<i>" Whitley</i>	<i>31-10-17</i>	<i>CXC 5-2 V.D.S.</i>
<i>12-11-17</i>	<i>" "</i>	<i>Drach " " "</i>	<i>" "</i>	<i>9-11-17</i>	<i>CXC 60 -" -"</i>

N/E. R.B. N3

18079

File R.L.

Category

O R G an

725577 PEACOCK ROBERT HENRY.

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.				
10-11-17	BDCFC	Repts from Can Spec Hoop Wiley and attach from HQSS London for D.P.R.+Q ceases attach BDCFC	St Dale	9-11-17	169
17-11-17	"	Posted to H.Q.S.S. London	"	16-11-17	175
8-12-17	HQ bab	S.D.S. to 53 Dist bab	London	1-12-17	140 (108 1017-12-17 53 Dist CFC)
25-2-18	"	Awarded Que G.C. Badge	"	3-1-18	26
31-5-18	"	Granted Per to marry	"	"	61
21-6-18	"	Married with permission	"	8.6.18	68
9.2.19	"	Sost to B.D.C.F.C.	"	30.1.19	5 pEO.35-4/2/19 To S. BDCFC pt
28-2-19.	B.D.C.F.C.	ON COMMAND TO C.O.D. BUXTON	" S'DALE	28-2-19.	59.
				28-3-19	
23-4-19.	"	leave on hom. S.D.S. to Canada	" S'dale.	28-3-19	113.

Temporary

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

M. F. W. 54. F. B. 103.

330M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *Can. Forestry Corps*
Regimental No. *725577* Rank *Pte* Name *Peacock, Robert Henry*
C. E. F.

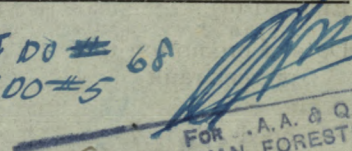
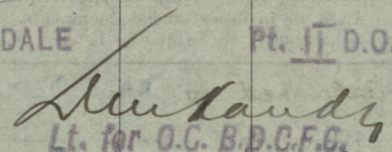
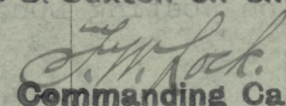
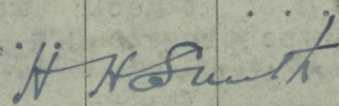
Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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

Extended..... Re-engaged..... Qualification (b).....

Date	Report From whom received	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
10-11-17	<i>OC, C.F.C.</i>	Attached to	BASE DEPOT C.F.C. SUNNINGDALE	<i>9-11-17</i>	PT. II DO. NO. <i>169</i>LT. & ADJ. C.F.C.
17-11-17	<i>OC, C.F.C.</i>	Ceases to be attached on posting to H.Q.S.S.	BASE DEPOT C.F.C. SUNNINGDALE	<i>16-11-17</i>	PT. II DO. NO. <i>175</i>LT. & ADJ. C.F.C. <i>Immunized Capt. for OC.</i>
8/12/17	D.G.T.O.	S.O.S. H.Q.S.S. on posting to Dist 53	London	22/12/17 1/12/17	D.O. Pt 11 No <i>140</i> <i>Shirhan</i> LIEUTENANT FOR D. & A. & Q.M.G. CANADIAN FORESTRY CORPS
19-1-18	Dist:53.	S.O.S. at Mech: Branch on posting from H.Q., C.F.C.,	Egham.	19-1-18	Pt II D.O. No. <i>147</i> , Major.. <i>J.E. Winburne</i>
25-1-18	Dist:53	S.O.S. Dist:53 onposting to Hq. C.F.C.	Egham	19-1-18	Pt. II D.O. No.4 <i>J.E. Winburne</i> Major.
25-1-18	Dist 53 D.G.T.O.	T.O.S. H.Q.S. on posting from Dist 53	London.	<i>9-1-18</i>	Pt II DO #12
35-5-18.	D.G.T.O.	Granted permission to marry.	London	31-5-18.	Pt II DO #61.

(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, Shoing Smith, etc. etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
21-6-18	OETO.	Marriage approved.	LONDON.	8 2/3	 For .A.A. & Q.M.G. CANADIAN FORESTRY CORPS
30-1-19	-	505 H.Q.M.S on posting to Base Depot	"	30 4/9	
2-19	-	O.C. C.F.C. Base Depot, C.F.C. Sunningdale from H2M5	SUNNINGDALE	30-1-19	
	B.D.C.F.G.	S.O.S. BASE DEPOT C.F.C. on posting to	SUNNINGDALE	Pt. II D.O.	
				 Lt. for O.C. B.D.C.F.G.	
1-3-14		Attached C.D.D. Buxton for return to Canada, Part II Order No. 51			
28 MAR 1919		Ceases to be attached C.D.D. Buxton on embarking for Canada.			
				 Commanding Canadian Discharge Depot.	Lt. for Lt. Col.
	ST. JOHN, N. B.			 MAJOR O. C. Clearing, Depot, St. John, N. B.	
	8. 4. 19 DISCHARGED				

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 100th OVERSEAS BATTALION, C. E. F.

Regimental No. 25547 Rank Private Name Redcock Robert Henry
C. E. F.

Enlisted (a) 14.1.16 Terms of Service (a) D. of W. Service reckons from (a) 14-1-16

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) Harmer.

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.	
8/2/16	O.C. 1094 Bn	Disembarked England. Transferred to 124th	Liverpool Witley	31.7.16. 8/2/16	D.O. Pt. II. # 843
					<u>A. W. Eastwood</u> Capt. ADJUTANT 100th Overseas Battalion, C. E. F.
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8-12-16	Part III Orders 265
19-1-17	124th. Bn.	Transferred to Garrison Duty Battalion	Witley	18-1-17	D.O. Pt. 11 No. 19. <u>A. W. Eastwood</u> Lieut. Asst. Adjt. 124th. Battalion, C. E. F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
2-17-17	124th. Bn. Forestry Corps.	Transferred to Canadian Forestry Corps.	Witley Camp.	1-2-17	Part. 11. Orders No 132. <i>He Ben Kishor</i> Capt Adjt. 124th. Can. Par. Bn.
9.2.17	D. of T.O.	T.O.S. Can. Forestry Corps	London	1.2.17	D.O. Pt II NO. 35. Lt. & Asst/Adj. C.F.C.

Prof. Wilson

1-2-17

1-2-17

1-2-17

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mr. Wm Peacock* By Whom Assigned *R. H. Peacock.*
Address *Caran. Ont.* Regtl. No. *725577.*
Rank *R 2/1st Lt.*
Corps *109th Battⁿ*

Rate *\$ 15⁰⁰/_{XX} Aug. 1. 1916*

2 m 8⁹/₁₀ Oct. 28¹⁰/₁₆.

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				



1880
1881
1882
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1880
1881
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1884
1885
1886
1887
1888
1889
1890

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-G-13.
 1772-39-819.

Sheet No. 2.

William Peacock

PAYMENTS.

Name of Soldier

R. H. Peacock

L. L. Job 4503. -Req. 6832.

725577

109th Battⁿ

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$ 15⁰⁰/_{xx} Aug 1. 1916.</i>
April	1916		-	
May			.	
June			.	
July			.	
Aug.			.	
Sept.			.	
Oct.	✓	<i>024202</i>	<i>45</i>	<i>to reg'</i>
Nov.		<i>B36070</i>	<i>15</i>	
Dec.		<i>S34647</i>	<i>15</i>	
Jan.	1917	<i>T40823</i>	<i>15</i>	
Feb.		<i>T46775</i>	<i>15</i>	
March		<i>152924</i>	<i>15</i>	<i>15-L</i>
April		<i>44142</i>	<i>15</i>	<i>15-W</i>
May		<i>H10991</i>	<i>15</i>	
June		<i>F 16786</i>	<i>15</i>	<i>21</i>
July		<i>G 24447</i>	<i>15</i>	<i>22</i>
Aug.		<i>U 30831</i>	<i>15</i>	
Sept.	<i>mc</i>	<i>W 40289</i>	<i>15</i>	<i>03</i>
Oct.		<i>Q 44085</i>	<i>15</i>	
Nov.		<i>J 51861</i>	<i>15</i>	
Dec.		<i>W 58311</i>	<i>15</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

2255-1

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.				

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA: ENGLAND	SEPARATION ALLOWANCE.	ENGLAND or CANADA: ENGLAND				
EFFECTIVE DATE:-	<i>1.7.18</i>	EFFECTIVE DATE:-	<i>June 5th 1918</i>				
AMOUNT:-	<i>15.00</i>	AMOUNT:-	<i>20.00</i>				
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.					
<i>Mrs Nellie Newton</i>							
<i>29 Bradgate Road</i>							
<i>London W.C.1</i>							
<i>Widow</i>							
<i>Mrs. R. H. Peacock</i>		<i>Sailed to Can 26/3/19</i>					
<i>29 Bradgate Road</i>		<i>Can. add.</i>					
<i>Depford S.E.6.</i>		<i>G.P.O. Cavan. Ont.</i>					
<i>Widow</i>		<i>Canada 1/1/19</i>					
<i>Stopped effective 1-4-19</i>							
PARTICULARS OF RANK OR APPOINTMENT							
AUTHORITY		DATE EFFECTIVE	RANK OR APPOINTMENT				
			<i>S/S</i>				
UNIT AND TRANSFERS							
ORIGINAL UNIT:- <i>109th Bn</i>							
DATE ACCOUNT FIRST OPENED:- <i>1.8.16</i>							
AUTHORITY		DATE EFFECTIVE	DATE LEDGER SHEET T'S'D				
			<i>4416 Bn</i>				
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT	
<i>10/2-19</i>		<i>24005</i>		<i>L.O.R.</i>		<i>17 39</i>	
<i>11-2-19</i>		<i>7962</i>		<i>L.F.L. B.D.</i>		<i>2 14 60</i>	
<i>10-2-19</i>		<i>8362</i>		<i>L2</i>		<i>9 72</i>	
						<i>24 72</i>	
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY		PAY	F.A.	P.F.A.	SUBS'CE ALL'GE		
		<i>1.00</i>	<i>10</i>				

PARTICULARS OF RENDERING NON-EFFECTIVE:- <i>Discharged to Canada 28-2-19 M.R. 33, 6516/2 S. Dale M. Dr. 4416</i>												
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION	
<i>1918</i>												
<i>Mar 31</i>	<i>Retal Forward</i>								<i>24 66</i>			
<i>April</i>	<i>P Pay</i>	<i>33</i>		<i>A.P. April. K4. 2. 2. A52051</i>			<i>20</i>					
				<i>44154 15. 4. 18 Colford</i>	<i>4 89</i>							
		<i>33</i>		<i>" 4255 29. 4. 18 "</i>	<i>21 30</i>		<i>20</i>		<i>25 49</i>			
<i>May</i>	<i>✓ ✓</i>	<i>34 10</i>		<i>B11856. K4. 2. 2</i>			<i>20</i>					
				<i>Med 350. 16. 5. 18 Col</i>	<i>9 43</i>							
				<i>V 466 28. 5. 18 ✓</i>	<i>2 43</i>				<i>24 43</i>			
		<i>34 10</i>					<i>20</i>					
<i>June</i>	<i>✓ ✓</i>	<i>33</i>		<i>B54662 F4-2-2</i>			<i>20</i>					
				<i>C.P. 8903 4. 6. 18 C.P.O.</i>	<i>29 20</i>							
				<i>M 1507. 14. 6. 18 Colford</i>	<i>7 30</i>							
				<i>V V 692 29. 6. 18 ✓</i>	<i>4 89</i>							
		<i>33</i>					<i>20</i>		<i>9 4</i>			
<i>July</i>	<i>" "</i>	<i>34 10</i>		<i>B92671 K12. 3. 2.</i>			<i>15</i>				<i>44 16</i>	
				<i>Col 005. 14. 6. 18 Colford</i>	<i>5 18</i>							
				<i>M 8324. 16. 7. 18 ✓</i>	<i>9 43</i>							
				<i>V V 897 25. 7. 18 ✓</i>	<i>2 43</i>				<i>22</i>			
		<i>34 10</i>					<i>15</i>					
<i>Aug</i>	<i>" "</i>	<i>34 10</i>		<i>C 619275 F 8. 4. 5</i>			<i>15</i>				<i>25</i>	
				<i>M 1049 Colford 13. 8. 18</i>	<i>9 43</i>							
				<i>V 1141 ✓ 29. 8. 18</i>	<i>4 89</i>				<i>4 42</i>			
		<i>34 10</i>					<i>15</i>					
<i>Sept</i>		<i>33</i>		<i>b. 98544 F 8. 4. 5</i>			<i>15</i>		<i>839</i>	<i>25</i>		
				<i>of R. 1357. 12. 7. 18 C.F.O.</i>	<i>9 73</i>							
				<i>15. 18. 26. 7. 18</i>	<i>14 60</i>				<i>16. 7.</i>			
		<i>33</i>					<i>15</i>				<i>25</i>	
									<i>11/18</i>			

P850 agreed as at 30 Sept 18.

NUMBER 425544 RANK

Pte

NAME

Peacock

RH

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sept	Balance fwd.								161		
Oct	P. Pay	34	10	50942 L. 8. 4. 5			15				25
				AR 1712 - Bedford - 14/10/18	943						
				AR 2161 - " 29/10/18	730				46		
		34	10		1703		15				25
Nov		33		628900 - L. 11. 6/ =			15				40
				AR 2301 - Bedford - 14/1/18	943						
				AR 3712 - " 27/1/18	243						
Dec		34	10	683144 L. 9. 4. 11			15				30
1919				AR 2872 - Bedford - 12/12/18	1460						
Jan		34	10	735930 - L. 9. 4. 11			15		2990		30
		16	20		2676		45				100
Feb		30	80	AR 3245 - " 8/1/19	730						
				AR 3546 - " 23/1/19	943						
				784447 - L. 9. 4. 11			15				30
				879744 mch 9 4 11			15		1367		30
				AR 4942 - " 12/2/19	1460						
				AR 5365 - " 18/2/19	973						
				AR 4008 - Buxton - 4/3/19	243						
				" 5009 Bux. 18/3. End. on L.P.B.	487				1796		60
		30	80		4862		30				
				OH005# 78. 10. 2. 19. 626	- 38				1874		
					- 38						

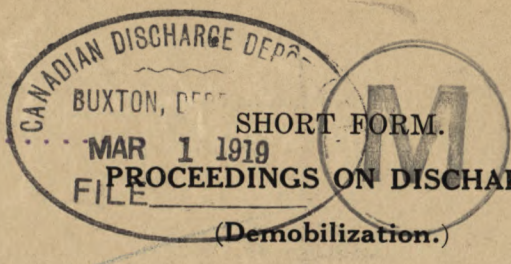
A 3 M. FORM REN'D Stopped EFFEO. 1-4-19
 DISCHARGED TO Canada DATE 28-2-19
 PAY BOOK VERIFIED 21-2-19
 Dr. BAL. 11.05 L.P.B. REN'D 21-2-19
 AUTHY. N.A. 3365 18/2 Sidale M.D.2

10/18.3 PL 28

COMPILED BY LaPorte
 CHECKED BY Robinson

Enclosed 4/3/19 Debit 243
 Dr Balance 1348
 Enclosed 18/3/19 Debit 487
 Dr Balance 1835

NUMBER OF DEPENDENTS. *2*
Inneth



Dispersal Area, *I 2*
Next of Kin, *Wife*

1. No. *425544*

2. Rank. *Pfc*

3. Name. *PEACOCK Robert Hewes*

4. Unit. *C. Y. B. 109th Batt.*

5. Date of Discharge *APR 8 - 1919* Place *ST. JOHN, N. B.*

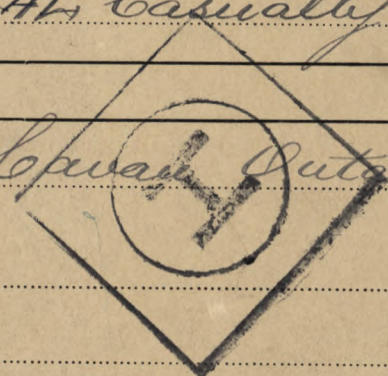
6. Reason for Discharge *Category BI*

Trade *Farmer* Occupational Group *1*

Service in France. *Wounded Casually*

7. Authority.

8. Proposed Residence after Discharge *Canada Ontario*

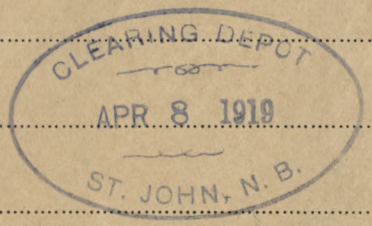


9. CERTIFICATE TO BE SIGNED BY SOLDIER.
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.? *31*

R. Peacock
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.

Place.....
Date..... *APR 8 1919*
ST. JOHN, N. B.



Signature..... *[Signature]* MAJOR
O. C. Clearing Depot, (O. C. Discharging Unit.), N. B.

PROCEEDINGS OF DISBURSEMENT

Department of the Interior

Ruled ledger page with columns for Date, Description, and Amount.

Department of the Interior

The disbursements for the above period are hereby certified

(G. C. Disbursement List)

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. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178);
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental certificate (C.A.D.C. 5403a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (A.F.B. 218a)
8. Discharge certificate (M.F.W. 89)
(Enclosed in special envelope (BOM)).
9. Copy of Discharge Certificate (M.F.W. 89a).
10. Dispersal Certificate (D.C.).
11. Equipment and Clothing Statement (G.O.C. 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. 2595).
15. Sundry Documents.

Reserved for M.H.C.

Regt. No. 425577 Rank Pte Surname Peacock Christian Name Robert Henry
 Unit or Corps—(a) Overseas from United Kingdom None (b) in United Kingdom Q. Coy. Conps
 Born at—Town CHATHAM County or Province Ontario Country CANADA
 Date of Birth—Day 1st Month July Year 1889 Age 29 yrs. 9 months.
 Joined at Lindsey Ont. Canada Date 14th Jan 1916
 Former trade or occupation farmer
 Permanent Marks or any peculiarity that will serve for future identification:—

Operation Scar on Serbia Pt

Height—feet 5 inches 7 Colour of eyes Blue
 Signature of Soldier (for identification purposes) Robert Henry Peacock

Medical Report

Read carefully the instructions on last page of this form.

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a)

DEFECTIVE VISION

Disabilities Group (b)

Disabilities Group (c)

2. CAUSE OF DISABILITY

	Place of origin.	Date of origin.
(i.) As to Group (a) above.	<u>CONDITIONS OF CIVIL LIFE CANADA childhood</u>	
(ii.) As to Group (b) above.	—	—
(iii.) As to Group (c) above.	—	—

3. Is the disability due to disease contracted or injuries received prior to Active Service?

- (i.) As to Group (a) above? YES If yes, has Active Service aggravated it? NO
- (ii.) As to Group (b) above? L If yes, has Active Service aggravated it? L
- (iii.) As to Group (c) above? L If yes, has Active Service aggravated it? L

4. Is the disability due to disease contracted or injuries received while on Active Service?

- (i.) As to Group (a) above? NO
- (ii.) As to Group (b) above? L
- (iii.) As to Group (c) above? L

5. MEDICAL HISTORY. Enlisted 14.1.16 - O/s Aug. 1916 England since. Farmer. Had right herniotomy prior to enlistment no other serious illnesses in civil life. Entered on M.H.S. Rochester Row 17.9.17 - 29.10.17 Syphilis - Do. 29.10.17 to 9.11.17 "scattered syphlides".

States he has had defective vision since childhood. Has no disability from herniotomy scar at present.

6. PRESENT CONDITION.

Subj. appetite good. bowels regular, sleeps well. Vision poor since childhood, improved with glasses.

Obj. Specialists Report - Peacock R.H.#725577

Myopia - Vision $\left\{ \begin{array}{l} RT \frac{6}{60} \\ LT \frac{6}{60} \end{array} \right.$ Condition present prior

to enlistment. Not aggravated by service Cat A
(Signed) J.A. Stewart
Capt. R.A.M.C.

Pay book entry - Vision $\left\{ \begin{array}{l} RT \frac{6}{60} \bar{c} \frac{1}{4} \\ LT \frac{6}{60} \bar{c} \frac{1}{4} \end{array} \right.$ signed W. E. Ainley Capt.

Other systems normal.

7. OPERATION. (i.) Was one performed? *no* (ii.) If so, state what. *n.a.*
(iii.) Was one advised and declined? *no.*

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? *yes*
(ii.) If so, describe. — *all upper teeth & four lower due to caries.*

9. DO YOU RECOMMEND:—
(a) Fit for duty? *B (one)*
(state category)
(b) Invalid to Canada? *no*
(c) Discharge from the Service as permanently unfit? *no*

Date of Report... *10.2* 191*9*

Station... *Sunningdale*

Signed *J. Stetherland* Capt. R.A.M.C.
Officer in medical charge of ass.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

not in Hospital

{ Officer i/c Hospital } Strike out one
{ S.M.O. Brigade } of these

Dated at Station, on 191.....

*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

Yes

11. Is the cause of the disability fully described in Part I. (2)?
If not, describe it.

Yes

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? *no*
Aggravated? *no*

(b) Misconduct of the Soldier { Caused? *no*
Aggravated? *no*

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent?
(ii.) If not permanent, what is its probable minimum duration (in months)?

na

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

17. Can the former trade or occupation be resumed?

Yes.

18. REMARKS:—

Authority A.G. Lel 9083 11.11.18

19. RECOMMENDATION:—

(a) Fit for duty? *Bone*
(state category)

(b) Invalid to Canada?

(c) Discharge from Service as permanently unfit?

Date of Board

10/2/19

Station

Sevingale

Signatures of the Board

H. J. Downman President.
J. D. ...

Approved

J. H. ...

Dated at

*Captain, C.A.M.C.
for A.D.M.S., Canadians, London Area.*

A.D.M.S.

Station

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIAN LONDON AREA. FEB 11 1919 13 BERNERS ST. LONDON, W.1

PROCEEDINGS OF A MEDICAL BOARD.

8781 111 50

Dated at Yon 12th 1917

No. 725377 Rank PTE Name PEACOCK R.H.

Local Unit La F. C. Overseas Unit — Age 28

Examination held at Stunningdale

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

Pumbe Scar

PRESENT CONDITION.

Had operation for Rt Inguinal
hernia. He states that
wound is still tender & that
he cannot lift. Hernia
well healed.

BOARD RECOMMENDS:-

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

Signatures:-

R.P. Borden Capt. 61116
President.

Members

Blairwood
Cap. 10006

APPROVED

Dated 15 NOV 1917 1917 For A.D.M.S.

[Signature]
Captain C.A.M.C.,
for A.D.M.S., Canadians, London Area.

PROCEEDINGS OF A MEDICAL BOARD

8191 JUL 22

BTT J.W.B.

1918 SEP 19

BTT J.W.B.

Date of ...
 Rank ...
 Local Unit ...
 Overseas Unit ...
 Examination held at ...
 DISABILITY:
 Overseas-Local
 (attach one out)

PRESENT CONDITION

.....

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
- Signatures:

.....

 Members
 President

APPROVED

For A.D.M.S.

[Handwritten signature]

Dated

MD 2
BUXTON
1. 3.19

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Nov 12th 1917

No. 725577 Rank PTE Name PEACOCK R H

Local Unit 6 F.C. Overseas Unit — Age 28

Examination held at Sunningdale

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

Punch Scar

PRESENT CONDITION.

Has operation for Rt. Inguinal
hernia. He states that
wound is still tender that
he cannot lift. Hernia
well healed.

BOARD RECOMMENDS:-

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

Signatures: R.P. Borden Capt C.M.S. President.

Members J. Phelan Capt C.M.S.

APPROVED

Dated 15 NOV 1917 1917 For A.D.M.S.

[Signature] Captain C.A.M.C.,
for A.D.M.S., Canadians, London Area.

PROCEEDINGS OF A MEDICAL BOARD

Name of patient held at _____
Address _____
City _____

PATIENT'S CONDITION

BOARD RECOMMENDATIONS

Signature

President

Secretary

APPROVED

For A.D.M.S.

Dated

"MELITA" 5.4.19

P. 1924

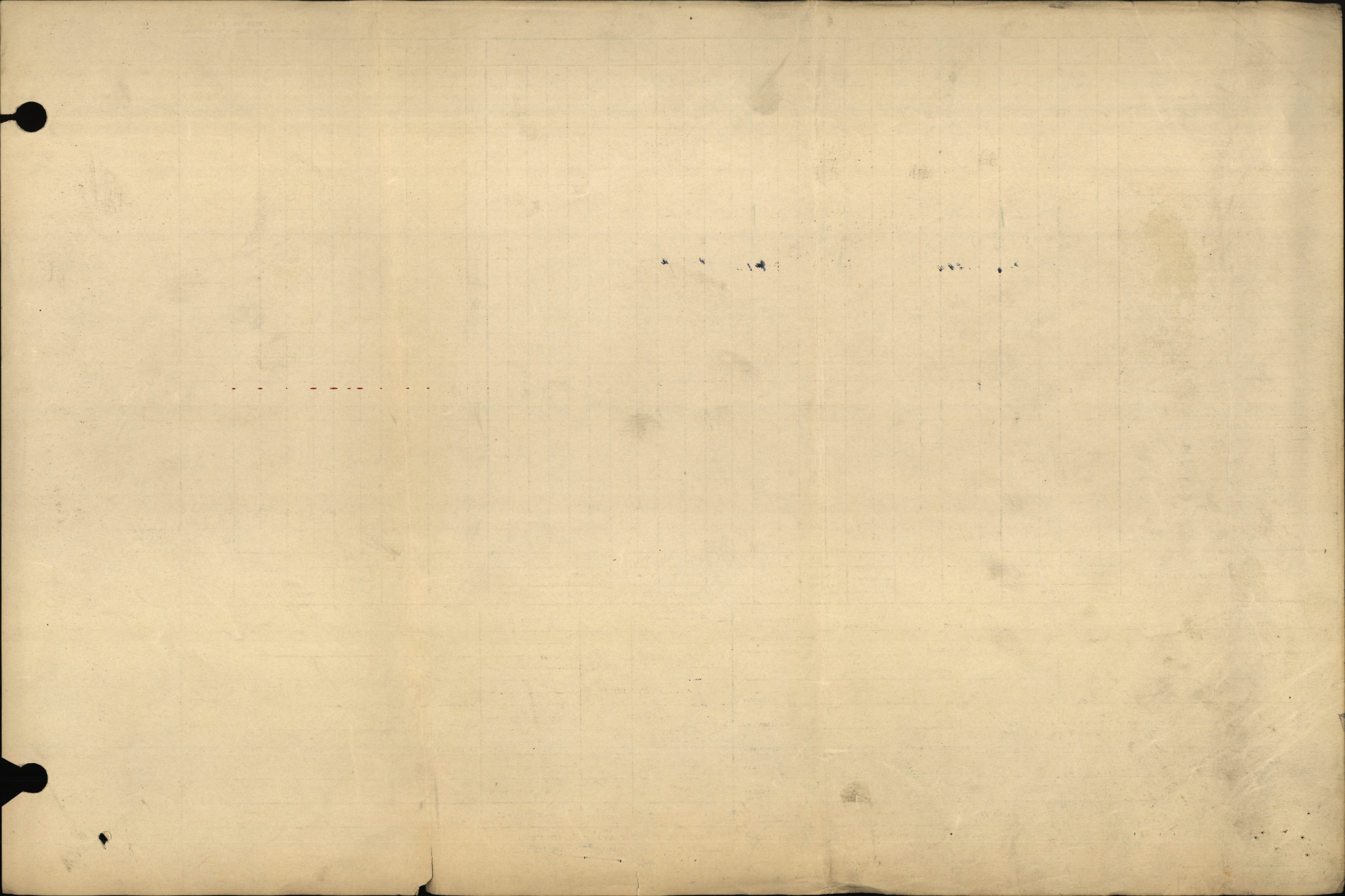
ADDITOR PAYMASTER

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

REGT. NO. 725577 RANK Pte. NAME (IN FULL) PEACOCK, R.H.

Form with fields for M. OR S., NEXT OF KIN, RELATIONSHIP, PARTICULARS, EFFECTIVE DATE, AUTHORITY, ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, TRANSFERRED TO, DATE, AUTHORITY, etc.

Main ledger table with columns for MONTH, NO. OF DAYS, RATE, AMOUNT, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE, and PARTICULARS OR REMARKS.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

March 18/18
Aug. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>75</i>	<i>20</i>		
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2 M. 28/1/18
from 1/3/18

PARTICULARS OF SEPARATION ALLOWANCE

No. *7255-77*
 Rank *L/C.* Promoted Reverted Discharge
 Soldier's Name *R. H. Peacock.*
 Battalion *109 Bn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Wm Peacock*
 Address *Cavan, Ont.*
 Change of Address
 1 *Mrs Nellie Newton*
 2 *29 Bradgate Road, S.C. 16*
 3 *London England*
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Dec 31 1917</i>			<i>255</i>	<i>255</i>
<i>Jan 1/18</i>	<i>G 63531</i>		<i>15</i>	<i>15</i>
<i>Feb</i>	<i>R 72173</i>		<i>15</i>	<i>15</i>
<i>Mar.</i>	<i>P 95682</i>		<i>15</i>	<i>15</i>
			<i>285</i>	<i>285</i>

File 14318-R-2 REMARKS

ENGLISH

P. 95682 cancelled per C.C.O. F.S. 22. 78

Duplicate acct transferred to England for payment from 1/3/18. 2 M. 28/1/18 file 14318-R-2 R.S. 23/3/18

A/c Closed

Ret'd per. *Melita*

Date. *5/4/19* M.F.W. 187 *14/4/19*

Clerk. *Chalvan* *14/4/19*

M. F. W. 128
400M.-6.17-1772-88-141
L. L. 25220-M. & D. 7993.

ACTENCIL
 M. R. O. 2b. P. 2b. P. 2b. P. 2b.
 MAR 19 1919
4.J.

Date of Enlistment

MILITIA AND DEFENSE

Date of Assignment

Separation and Assigned Pay Branch

March 1/18
Aug. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>	<i>20</i>		
-----------	-----------	--	--

Duplicate

from 1/3/18
2m. 28/1/18

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. *725577*
 Rank *L/Capt.* Promoted Reverted Discharge
 Soldier's Name *R. H. Peacock*
 Battalion *109th Bn.*
 Beneficiary
 Relationship
 Address

Name *Mrs. Nellie Newton*
 Address *29 Bradgate Road, S.E. 16, London, Eng.*
 Change of Address
 1
 2
 3
 4

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

<i>Jul. 28/18.</i>			<i>285</i>	<i>285</i>	<i>File 14318-R-2.</i>
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Transferred to you for payment from 1/3/18. 2m. 28/1/18. file 14318-R-2. Lt 24/3/18.

Deductions agree with payments
H. Hooker Lt 24/3/18.
S/Sgt.

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

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
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M. F. W. 128.
 400M. 6-17-1772 98-1141
 L. L. 23320-M. & D. 7893.