card written

DUPLICATE

ATTESTATION PAPER.

No. ~~1066238~~

Folio. 724658

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Robinson
1a. What are your Christian names? ..... Richard Ormond
1b. What is your present address? ..... Markdale, Ont.
2. In what Town, Township or Parish, and in what Country were you born? ..... Govan, Scotland
3. What is the name of your next-of kin? ..... Mrs Chas. Hodgkinson
4. What is the address of your next-of-kin? ..... 30 Govan St., Govan, Scotland.
4a. What is the relationship of your next-of-kin? ..... aunt
5. What is the date of your birth? ..... 6th May 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? .....
10. Have you ever served in any Military Force? If so, state particulars of former Service. ..... 45th Bn. C.E.F. 15 mos.
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, Richard Ormond Robinson, 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.

R O Robinson (Signature of Recruit)

Date March, 7th 1917. H. J. Price, Lieut. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Richard Ormond Robinson, 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.

H.J.P.

R O R R O Robinson (Signature of Recruit)

H.J.P. Date March, ~~7th~~ 22nd 1917. H. J. Price, Lieut. (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Owen Sound this 22nd day of March 1917

(Signature of Justice)

J. Edward Kirk LT.-COL.
O.C. 248TH BATTN., C.E.F.

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

Description of Richard Ormond Robinson on Enlistment.

Apparent Age 19 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement:
- Girth when fully expanded 35 ins.
- Range of expansion 3½ ins.

Complexion Fair

Eyes Blue

Hair Light

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).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date March 7th 1917.

Place Toronto, Canada.

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE
C. H. A. Stuart M.O.
PRESIDENT

CERTIFICATE OF OFFICER COMMANDING UNIT.

Richard Ormond Robinson 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. Hickman Rose (Signature of Officer)
LT.-COL.
O.C. 248TH BATTN., C.E.F.

Date March 22nd 1917.

109TH BN. A. Coy.

Card S.S

ATTESTATION PAPER.

No. 724658

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.) DUPLICATE

1. What is your surname?	Robinson
1a. What are your Christian names?	Richard
1b. What is your present address?	R.R. 1 Mountain Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Havelock Terrace London Eng.
3. What is the name of your next-of kin?	Arthur Williams
4. What is the address of your next-of-kin?	R.R. 1 Mountain Ont
4a. What is the relationship of your next-of-kin?	Bro
5. What is the date of your birth?	Nov 6th 1894
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? If so, state particulars of former Service.	No
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, Richard Robinson, 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.

Richard Robinson (Signature of Recruit)

Date Dec 1st 1915. F. H. Godson Capt. (Signature of Witness)

ADJUTANT 109th Overseas Battalion C.E.F.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Richard Robinson, 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.

Richard Robinson (Signature of Recruit)

Date 1st Dec 1915. F. H. Godson Capt. (Signature of Witness)

ADJUTANT 109th Overseas Battalion C.E.F.

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 22nd day of December 1915.

(Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Richard Robinson on Enlistment.

Apparent Age 18 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 3¼ ins.

Chest measurement:
- Girth when fully expanded 34 ins.
- Range of expansion 2 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Religious denominations:
- Church of England C of E.
- 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 Shin

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 December 1st 1915.

Place Lindsay

J. McCullock 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.

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

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

Date DEC 29 1915 191 .

#4. A 2. Scotch. CCo.

DUPLICATE

Rd 16-7-18

ATTESTATION PAPER.

No. 724658

1st Depot B'n 1st Central Ontario Reg't.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	ROBINSON
1a. What are your Christian names?	Richard Ormond.
1b. What is your present address?	44 Spadina Ave. Toronto, Can.
2. In what Town, Township or Parish, and in what Country were you born?	Glasgow Scotland.
3. What is the name of your next-of kin?	Kathleen Hodgkinson,(Mrs)
4. What is the address of your next-of-kin?	30 Govern Rd. Glasgow, Scotland.
4a. What is the relationship of your next-of-kin?	Aunt.
5. What is the date of your birth?	May 6th 1898.
6. What is your Trade or Calling?	Munitions.
7. Are you married?	Single.
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~~ Naval or Force? If so, state particulars of former Service.	Yes 45 Batt. 724658 2 yrs 8 mos Pte. R & R
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.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	Yes.
14. If so, what was the nature of the disability?	Wounded.
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No.
16. If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Richard Ormond Robinson, 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.

R O Robinson (Signature of Recruit)

Date May 31st 1918. 191 . (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Richard Ormond Robinson, 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.

R O Robinson (Signature of Recruit)

Date May 31st 1918. 191 . (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 Toronto, Can. this 31st day of May 191 8.

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

C

weight 117½

Description of Richard Ormond Robinson, on Enlistment.

Apparent Age 20 years months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 5½ ins.

Chest measurement:
- Girth when fully expanded 35 ins.
- Range of expansion 4 ins.

Complexion Med.

Eyes Blue

Hair Fair.

Religious denominations:
- Church of England C of E.
- 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 size 10ct piece inside lt leg 6 in above knee 5 large Vacc marks lt arm.

Eyesight R D 30 L D 30.
Hearing R Normal L Normal.
Nose deflected septum Throat Normal.

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.

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE

Date May 31st 1918. 191

Place Toronto, Ont Can.

Geo Harvey Capt M.O.
Medical Officer. PRESIDENT

*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.

Richard Ormond Robinson, 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.

C. S. Pote (Signature of Officer)

O.C. 1st Depot Bn 1st C.O.R.

Date June 1st.1918. 191

ROBINSON, RICHARD ORMOND 724658 1 D.B. 1 C.O.R. 18782

2 DD.

GEN. DEMOB

PR

RC
Coll

Number 724658. Rank Pte.

Surname ROBINSON

Christian Name Richard

Units 19th Bn Can Inf Theatre of War England.

Date of Service 31-7-16

Remarks

Latest Address Markdale Ont.

Roll No A Page 2049

~~200m.-2-21 M.~~

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

Return per 2457 26

DESP. APR 27 1926

REGN. No. 22427

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

No. 724658 RANK Pte. NAME Robinson, R. O. R. C.

T. O. S. UNIT Composite Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 June 1	1917 June 30	c	24th Bn. Cert for "Pay." 29-8-17	DO 152 of 27-6-17
July		n		
Aug.		c		
Sept 1	Sept 8	n	Transfd to "B" unit M.H. C.C. 8.9.17	AH 223 29.9.17.

No 724658. RANK Pte NAME Robinson R.

T. O. S. 1-12-15. UNIT 109th. Battalion.
S.O.13. 4-12-15

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 1.	1915 Dec 31	✓		
1916 Jan.	1916	✓		
Feb.		✓		
Mar.		✓		
April.		✓.		
May.		✓.		
June.		✓.		
July.		✓.		

UNIT SAILED
JUL 23 1916

No. 724658 RANK Pte. NAME Robinson, C. O.
1066238

T. O. S. 8-3-17. UNIT 248th Battalion, C.E.F.
(D.O. 59 of 20-3-17)

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Mar. 8	Mar. 31	✓		
Apr		✓		
May 1	May 28	✓	Trans to Casualties 28/5/17	D.O. 115 of 'man paylist'

R. 149.

Name Robinson, Richard. Rank Pte. Reg. No. 724658

Unit 10 Q. Bde H.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-8-16.	Connaught.	Aldershot	G.W.D.	8		
2-11-16	Dis		~~Hydralgia~~	29.		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

M. D. No. 2 2

Surname Robinson

T. O. S. May 31st 1918

Christian names Richard Ormond

D. O. Pt. II 151 of 31/5/18

Regtl. No. 724658 Rank Pte

S. O. S. Dis 8/10/19 19

Unit ~~1st Tees Ont Regt~~ 1st Dep Bn #2 Dist Dep.

Reason Demob.

Auth. D.O. 4 of 4-1-19

Next of kin Hodgkinson, Mrs R.

Relationship Aunt

Address 30 Glovern Rd. Glasgow Scot.

Also notify:

BORN—Place Scotland Glasgow Date May 6th 1898

ATTESTED—Place Toronto Ont Date May 3rd 1918

O/S 9-6-18

R/C 28/11/18 231 5th

W. 22—75M-5-18. 1772-39 839.

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
724658	Pte	Robinson Christian Names (1) Ormond Richard (2) ..... (3)	A2 Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Toronto	31/5/18	21 CDR	C of E		14
Province: Ontario	Age on 20	Date 192 21.6.18		Vaccination	

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

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

Married or Single S

Address of Next of Kin Aunt

Mr. Hodgkinson

30 Gordon Rd

Country Glasgow

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.
	Nov. 1-10-18	Nov 7-18-18	2 Years

A.G. 10434.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
192	21.6.18				

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	6-8-18.
Lewis Gun	
Rapid Wiring	23-8-18

Special Training Courses, etc.

H. Q. .....

M. D. No. 9

Surname Robinson

T. O. S. ..... 19.....

Christian names Richard

D. O. Pt. II ..... of .....

Regtl. No. 724658 Rank Pte.

S. O. S. ..... 19.....

Unit 109th Bn.

Reason .....

Auth. .....

Next of kin Williams Arthur

Relationship None

Address R. R. #1, Mountain, Ont.

Also notify: .....

Terrace London

BORN—Place England, Havelock

Date Nov 6th 1897

ATTESTED—Place Lindsay, Ont.

Date Dec 1st 1915

O/S .....

R/C .....

W. 22—50M.-3-19. 1772-3 -839.

REGT'L No 724658

NAME Robinson Richard C

H. Q. FILE No. 649-

RANK AND CORPS Pte. 109th Battn.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
T309	16-1-17	Sailed from Liverpool for Canada per the S.S. Northland Jan. 13th. 1917. (Rheumatism)

6 or 2

40)

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1712-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
8	Connaught Alderhot	18-8-16	N.Y.D.
29	" "	2-11-16	Kyalqua
232	M.H.C.C. Halifax	8-9-17	Adm. pier II
243	" " " "	21-9-17	Pier II to Clayton
329.	M.H.C.C. Halifax.	6-12-17.	To Out P. Clayton. (with Sub)
9	" " " "	17-12-17	In Clayton to Orenet
354.	M.H.C.C. Toronto.	18-12-17.	Trans. to Spadina from "B" unit.
365	" " " " "	28-12-17	Out P. Spadina with Subs
67	" " " " "	3-1-18	In P. " " "
9	" " " Halifax	[illegible]	To Inf. Clayton
9	" " "	17-12-17	

S Robinson

3 SOS Dis

14/3/18 - 75/1 - 2

CHRISTIAN NAMES Richard Osmond

REGL. No. 724658 RANK Pte

UNIT ~~109th~~ ~~248th~~ 1st. Dpt. Bn. 1st. C.O.R. Bn.

FORMER CORPS 45th Bn. (15 mm)

NEXT OF KIN.

NAMES IN FULL Hodgkinson, Mrs. Charles

RELATIONSHIP TO SOLDIER Aunt

ADDRESS 30 Govon Rd., Govon, Scot.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Scotland, Govon,

DATE May, 6th 1898

PLACE OF ATTESTATION Owen Sound, Ont.

DATE Mar. 2nd. 1917.

Prev. Att. in 109th Bn. Lindsay, Ont. 22-12-15.

O/S. 28/7/16 488/29

~~O/S. 7/6/18. 1275/15~~

~~O/C. 28/11/18 29/54~~

L. L. 10137. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-330.

S26-3-18

Sailed from Halifax per S.S. Olympic 23-7-16

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Farmer RELIGION Church of England

DESCRIPTION.

APPARENT AGE 19 YEARS MONTHS

HEIGHT 5 FEET 4 INCHES

CHEST MEASUREMENT 32 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Blue HAIR Light

DISTINGUISHING MARKS not stated

MEDICAL EXAMINATION. PLACE Toronto, Ont. DATE Mar. 7th 1917.

Present Address Markdale, Ont.

*Name L ROBINSON, Richard O Rank Pte Regtl. No. 724658

Original unit Present unit 20th D. COM. or S. Age 20 Religion CE Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Aquitania, Que. 28-11-18

Next of kin Aunt, K Hodgkinson, 30 Govern Rd. Glasgow, Scotland

Address on leave Same

Address on discharge 44 Spadina Ave. Toronto.

Transportation issued Yes No Date Character on discharge

Previous occupation Munitions Date and place of enlistment Toronto May 31/18

Diagnosis Gen.Demobilization Date of Medical Boards 23-12-18.

Date.	Remarks	Pt. 2 Order No.
T.O.S. 22-11-18	Posted to Cas. Co. 28-11-18 (Ex. Camp)	
	Leave from 4-12-18 to 18-12-18	
	Subs. " " "	232
	Referred to Pay Dr. marks (Was found Pay Dr.)	

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

(over)

Date.	Remarks.	Pt. 2 Order No.
AWL 3-1-19	AWL cancelled 6-1-19.	
8-1-19	S.O.S. DISCHARGED "DEMOBILIZATION"(Not entitled to clothing all'ce) or PDP.) Re Enlisted)	4

M.F.W. 192
150M—6-18.
1772-39-1243.

Name HOBINSON. R. Rank Pte. Regt. No. 724658 Unit B/D.

Battn. 248th Camp or O. S. File M. H. C. C. H. Q. File 649-R-4657

Next of kin Mrs. C. Hodgkinson. 30 GOVERN Rd. Glasgow, Scotland.

Discharged to Class D. of D. Conduct Good

Pension awarded Date of first payment

Address on discharge Gen. Del. Toronto, Ontario. 44 Spadina Avenue. Toronto.

Diagnosis Date boarded

DATE	CLASS	REMARKS	Part 2 Order
8-9-17	2	Pier 2	#232
21-9-17	2	Clayton.	#243
17-12-17	2	Trans. to "D" Unit.	B#9
17-12-17	2	Spadina from "B" Unit	D-354
22-12-17	2	Spadina Out. (Xmas Leave)	365.
3-1-18	2	Spadina	#5.
7-1-18			
9-1-18		A.W.L. Case dismissed.	#10 #12
22-1-18			
24-1-18		A.W.L. Ffts. 3 dasy' pay & 3 days' C.B.	#31

L. L. Job 24571 M.H.C. F. 29. 75-7-17.—50M.

DATE	CLASS	REMARKS	Part 2 Order
5-2-18			
6-2-18		Overstaying pass. Ffts. 1 days' pay	#39
26-2-18		Boarded for Discharge	#60
14-3-18		DISCHARGED	#73
T.O.S. 22-11-18		Posted Cas.Co 28-11-18 leave to 18-12-18	232
8-1-19		DISCHARGED.DEMOB.	4a.

D.M.S. 1509.

Surname	Christian Name or Names	Reg. No.
Robinson	R	724658

Rank	Unit	Co.	Troop	Batty.
Pte.	109th Bn.			

Hospital: Connaught Aldershot

Date of Admission: 18.8.16

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Diagnosis: ~~N.Y.D. "Q"~~ Myalgia

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

		Date
		Dis 2.11.16.
C. L. 28.8.16	8	
7.11.16	29	

REMARKS

A.M.D. 2 DEPT.

Boh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital	Adm.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1128	724658.	Pte	Robinson	R. O.

Year	Unit.		Age.	Service.
1916	109. C.S.F.	A. Cof.	19.	10/12.

Station and Date. Connaught

Disease Sub Acute Rheumatism

16.8.16	Felt shivered on the 15th with pain in R knee then pain in L ankle which is swollen in front & on inside which has a reddish flush. Tem 100 Pulse 110. Heart no bruit
17.8.16	Ankle not so swollen. Pulse 116 Apex beat of heart inside NL 5th I. space
22nd	Pains all gone - temp normal
25.	Ordinary diet tomorrow
	Mist Sent Co & Mist Sal at bedtime
28.	Normal temp: no pain sent to ABCT
	W. Shurdanyelle ZR RAMC
1.9.16.	Complains of further pain in joints. not swollen. Temp. rising to 102.6.
	Mist. Sod. Sal. c Sod. Bic. 4 hrly.
	Milk diet.
8.9.16	Temp. & general condition improving
10.9.16	Temp normal. No bruit.
18.9.16	To get up, on crutch.
19.9.16	Temp. to 99°. Pain in R knee.
24.9.16	Slight mitral systolic murmur. To stay in bed. Rep mist Sod. Sal. 4 hrly.
30.9.16	To get up. Bruit disappeared. Rep mist tonic

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	
15. 10. 16	Heart rapid (120) on exertion. No murmur or enlargement
30/10. 16	Heart fairly quiet on exertion. Getting about in ordinary way. To Connaught Hosp. 31/10/16 [illegible]
1. 11. 16	Fit for duty [illegible]

CHS

R—122

Rank | Name ROB INSON Richard | Reg'l No. 724658

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

Place and Date of Enlistment Linsay Dec. 1st.1915 | Place of Birth Havelock Terrace London England

Name and Address, Next-of-Kin Arthur Williams

R.R.no/ Mountain Ont. | Relationship

Assigned Pay Monthly $ | Payable to

Re-enlisted and arrived in England with 30th Dft. 1st Bn. 1st C.O.R. on 21.6.18 as 724658 Pte. Robinson R.O. | Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character FC 271

N/E. R.B. No. 7.163
File R.L.
Category Saw Mill

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per H.M.T. 2810 31-7-16			
28.8.16	109th C.L.	Admitted to Hospl	Connaught	18.8.16	C.L.# 8x Pt. II D.O. 241 & Myalgia
3-11-16	"	Disch from Connaught Hospl	Brandsoll	2.11.16	Pt. II. D.O. 308 · C.L. 29.
9.12.16	O.C. 124th	T.O. Sortter fr 109th Bn.	Witley	8.12.16	" 265.
23.12.16.	"	S.O.S and despatched to Discharge Depot C.C.C.	"	23.12.16.	" 279.
16-1-17	C.C.C.	SOS + M Com 109th pending Dis	Hastings	21-12-16	— " — 26
13-1-17	C.D.D	SOS to Can for Dis M.U.	Buxton	13-1-17	Pt II O.11.
19-2-17	C.A.C	S.O.S. proceeding to Canada M.U. & leaves to be attached to 109 Bn	Hastings	13-1-17	P.H.O 85

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
—	Discharge Depot	Finally Discharged.	Quebec Qe.	15-2-17	175 R.R. No 1. Mountains

Form R 122.
10287—65M—28-7-17.

LTR Rank Name ROBINSON, Richard Ormond Reg'l No. 724658

30th Dft 1st Bn 1st C,O,R Unit If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Toronto, May 31st, 1918. Place of Birth Glasgow Scotland.

Name and Address, Next-of-Kin Kathleen Hodgkinson Mrs.

30 Govern Rd, Glasgow Scotland. Relationship Aunt

Assigned Pay Monthly $ Payable to

Relationship

For record of previous engagement O.M.F.C. see:- 724658 Pte. Robinson R. N/E Records 1st C.O.R.

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 15793.
File R.L.
REMARKS Category
Taken from Official Documents.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	Taken from Official Documents.
Arrived in England			21-6-18 S/S ATREUS		
11.7.18	3rd Reo.	T.O S from Canada	Pte Witley	21.6.18 — 192	
7.11.18	✓	S.O.S. to 1CORD	" "	7.11.18 — 311	1CORD 120 31098.11.18
27.11.18 CORD SOS To GAN.CEF WITLEY 28.11.18 DOS 29					

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.					

Fill in 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 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 124658 Rank Private Name Robinson Richard.

Enlisted (a) 1-12-15 Terms of Service (a) D of W. C. E. F. Service reckons from (a) 1-12-15.

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

Extended Re-engaged Qualification (b) Farmer.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Canada	Halifax	24.7.16.	
		Disembarked England	Liverpool	31.7.16.	
					Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
8/12/16	O.C. 109th	Transferred to 124th Bn.	Witley	8/12/16	L.O. Pt II No. 143
					A W Haselline Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
C.C.A.C. 23/12/16		attached C.D.D			J Sleitman, Lt.

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		DISCHARGED. under Para 392, Sec. 16, K. R. & O. 1912. Being no longer physically fit for war service. W. H. Ludlow for Commandant. Canadian Casualty Discharge Depôt,			
Disc Depot		S.O.S. Med. Unfit	Quebec	15-2-17	H.S.649-R-4657 Folio 6

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY. B2

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 274657 Rank Pte Surname Robinson
(Given name in full) Richard Osmond
Unit or Corps No 2 D. depot Birthplace Scotland

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. GENERAL DESCRIPTION:

Physique Good Weight 123½ lbs. Height 5 ft. 5½ in. Colour of Eyes Blue

Nutrition Good

Pulse 76

Condition of arteries Good

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
5 vacc. marks l. arm
Scar left leg in tibia
(axe cut when a boy).

Opinion as to general health and physical condition Good B2

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses Yes Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System Yes Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

1) Otitis media suppurative: discharge from both ears at different intervals. Previous to enlistment. No serious aggravation. See specialist's report.

2) Polyarticular rheumatism: three years ago. Now OK. No new attacks.

APPROVED
23/12/18.
R. Chrichan Capt.
For A.D.M.S., M.D. 2

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ....(Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Exhibition Camp (Canada) Toronto

Date 23/12/18 Signed Leon Fernand Lafrenaye M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature R. A. Robinson Pte.

(If not satisfied, M.F.B. 227 will be completed by a Medical Board).

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 724658

(3) Full Name of Soldier Richard Ormond Robinson,

(4) Place of Birth Govon, Scotland

(5) Are you married, or not? Single.

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

(b) Present Postal Address.....

(7) Are you a widower? .....

(8) Have you any children? .....

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

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address .....

(10) Is your Mother alive? No

If so, state name and address.....

.....

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

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

.....

.....

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

.....

.....

.....

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

.....

15) Are you insured? No

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

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

A. A. Nelson. CAPTAIN
ADJUTANT *Officer Commanding.*
FOR LT.-COL. J. HILLIARD ROBKE, O.C.

Date May 10,1917.

Military Hospitals Commission
COMMAND "D" UNIT

M.D. 2

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

No. 7

WMW.

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 1915, C.E.F., 1916).

Regimental No. 724658 Rank Pte. Name ROBINSON. R. O. 248

Corps MHCC"D"Unit who was* Discharged

On March 14. 1918, to Class 111.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from March 1. 1918, to March 14. 1918, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques: No. 62183.	10	00	Regt'l Pay 14 days at $ 1 c. 00	14	00
Advances by Cheques: No.			Field Allow. 14 days at $ c. 10	1	40
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*	13	00
Payment on transfer or discharge No. 62435	18	40	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	28	40	Total	28	40

*Give particulars.

A monthly stoppage of $ (†) has (‡) been paid on account of Assigned Pay for the month of 191 and Sep'n Allce. for month of 191 (to) Assignee

(Address) NIL

(†) 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 Nil

(3) cause of discharge Class111.O.C. 6/3/18 authority DO.

(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date March 12, 1918.

Place Toronto, Ont.

J. Malcolm Cockburn
CAPTAIN,
PAYMASTER, M.H.C.C. "D" UNIT, C.E.F. *Paymaster.*

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

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.
10M.—1-18.
H. Q. 1772-39-903.

To be made out in duplicate.

I.Q. 51-21-20-53

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 724658

(3) Full Name of Soldier Richard Norman Robinson

(4) Place of Birth Devonshire Road, Eng.

(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.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No!

If so, state name and address Nil.

(10) Is your Mother alive? Yes.

If so, state name and address Doughty Robinson

(11) If your Mother is a widow Yes

Are you her sole support, or not? No.

(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 July 11/16

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

M.S.A. 15.

ORIGINAL

"C"

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname R O B I N S O N Christian name Richard Ormond.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) 44 Spadina Ave. Toronto Can.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 31 day of May 1918. 1917, by the undersigned medical board sitting at Toronto, Ont Can.

5. Age as stated 20 Years Months. 6. Apparent age 20 Years Months

7. Height 5 Feet 5¼ Inches. 8. Weight 117½ Pounds.

9. Chest measurement { Minimum 31 Ins. Maximum 35 Ins. } 10. Complexion Med. { Eyes Blue Hair Fair.

11. Physical development Good { Good Fair Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm Nil Left arm five } 14. When vaccinated last 4 in childhood one in 1915.

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil

16. Slight defects but not sufficient to cause rejection Nil

The man denies having had { Rheumatism Tuberculosis Syphilis } (Strike out disease admitted or suspected.) We find no evidence of past { Rheumatism Tuberculosis Syphilis }

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

Eyesight R D 30 L D 30
Hearing R Normal L Normal.
Nose deflected septum
Throat Normal.

Ed Harry Cook President.

[illegible] Member. [illegible] Member.

Signature of Man R O Robinson

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
2/6/18	[illegible]	RBKennedy Lieut M.O.	2/6/18	RBKennedy Lieut M.O.	
		M.O.			M.O.
		M.O.	6/7/18	CGSutherland Capt M.O.	

Joined 31st day of May 1918 at Toronto, Ont Can.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot B'n			
Transferred to	1st C O R.	724658		
	8th R.B.R.			JUN 21 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Witley	25-10-18	D.A.H. mild	B II Not entitled to cure
do	14/4/18	Def Hearing (ON P.C.)	B II to Investigate Cause

Appro. [illegible] MAJOR, D.A.D.M.S. CANADIAN TROOPS WITLEY

N.B.—This sheet is 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.

Exhibition Camp 23/12/18 O. M. S. 6. B II home [illegible] WITLEY

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

MEDICAL CASE SHEET (EAR, NOSE AND THROAT)

MILITARY HOSPITAL, Ex Camp

DATE 23/12/18

NAME	RANK	NUMBER	UNIT	AGE
Robinson Richard	Pte	724658	1st C.O.K.	20

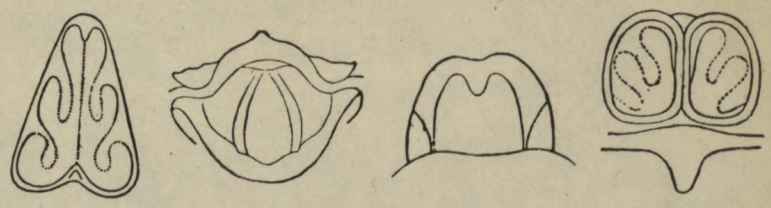
GENERAL HISTORY

TEMP. PULSE DIGEST. LUNGS COUGH

ACCESS. SIN.

POST NASAL DISCH. VOICE

RIGHT	IMPAIRED HEARING	LEFT
21'		21'
	TINNITUS	
	DISCHARGE	
	PAIN	
	VERTIGO	



BEFORE	AFTER		BEFORE	AFTER
		VOICE		
		ACOUMETER		
		TONE LIMITS UPPER		
		TONE LIMITS LOWER		
		BONE CONDUCTION		
		SIEGLE		
		SCHWABACH		
		EUST. TUBE		
		WEBER		
		LABYRINTH		
		MEATUS		
		MASTOIDS		
		DIATHESIS		
		PARACUSIS		
		DIAGNOSIS		
		PROGNOSIS		

TREATMENT AND SUBSEQUENT HISTORY:

History of defective hearing both ears for past three years.

M.T. = Rt. small perforation present retracted, dulled.

M.T. left. scarred slightly retracted

Diagnosis. Otitis Media Suppurative chronic both ears.

Condition preceded second enlistment but has not been aggravated by service.

Recommend B2.

J. P. MacMahon Capt

M. F. W. 143.
15M.—6-18.
1772-39-1172.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

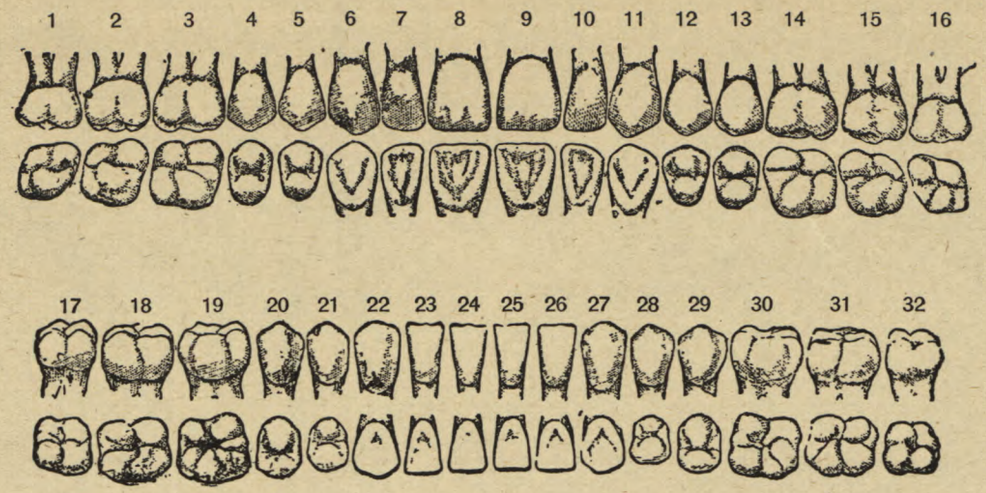
District 2

Name of Soldier Robinson Richard Conner

Rank Pte.

No. 724658

Regiment



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	Operator	Military District	Remarks
Condition on first Examination																						
DISCHARGE EXAM. EXHIBITION CAMP DEC 23 1918 DATE	CERTIFICATE ISSUED FOR																					

~~DENTALLY FIT~~

Extraction.
Prophylaxis.

G. Cleverdon, Capt.

M.F.B. 465.
200M.—6-18.
1772-39-950.

C.A.D.C.5009. 50M-3-5-18.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No. 724658* NAME Robinson R.O. RANK Pte UNIT 1st. C.O.R.R.

Date of Examination	
Present Dental Condition	
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	
Has he ever declined Dental Treatment?	
Recommendation	

Date.....

A.D.D.S., WITLEY
18 NOV 18
CANADIAN ARMY DENTAL CORPS

Station.....

Signature of Examining Officer H R Conway Capt. C.A.D.C.

* Name should be entered in block letters.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 724658 (Rank) Pte.

Name (in full) ROBINSON RICHARD ORMOND. enlisted in

the 1st Depot Bn. 1st C.O.R.

CANADIAN EXPEDITIONARY FORCE at Toronto Ont. on the 31st.

day of May 1918.

HE served in England and;;;;;;;;

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

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

Age 20

Height 5' 5½".

Complexion Medium.

Eyes Blue.

Hair Fair.

Marks or Scars

Vacc. scars on left arm.

Pte R O Robinson
Signature of Soldier

W H Joliffe Capt
Issuing Officer

Rank

Appointment

Date of Discharge Jan 8th 1919.

Signed at Toronto Ont. this 8th day of Jan 1919

in Military District No. 2.

File Reference No.

No. 2
JAN - 8 1919
DISTRICT DEPOT

M.B.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the certificate called for on the back of this certificate will not be completed.

Uniform not to be worn after 30 days of discharge unless written authority has been granted by the G. O. C. of district.

G. O. C. Discharge Sec.
No. 2 District L.

* N. B—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Medical Board

assembled at Toronto, Armouries.

on the 7th day of March 1917.

by order of A. D. M. S. No. 2 Military District

for the purpose of examining as to the physical fitness of Richard Ormand Robinson

PRESIDENT.

Robt. S. Sheard Capt.

DEPT MILITIA & DEFENCE MAR 13 1917 H.Q. CANADA

MEMBERS.

E.R.Frankish Lieut.

D.H. Boddington Lieut.

The Board having assembled pursuant to order, proceed to examine this man and find him physically fit and recommend he be accepted for active service.

This man went Overseas with the 45th O.S. Batn. in April 1916 and was discharged in Oct. 1916 on account of nervous debility. He has been examined at the Armouries and shows no signs of nervous trouble. As it is nearly a year ago since he was discharged from the service, and as he has been taking it easy since that time. We think he has completely recovered and is fit for Overseas service.

10-3-17 approved C.A. Warren Lt Col

Robt S Sheard Capt.

E.R. Frankish Lieut

D.H. Boddington Lieut

M. F. B. 303.

150M.—7-16.

H. Q. 1772—39—133.

noted 10/5/17 [illegible]

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

1st DEPOT BATTALION

Unit, Regiment or Corps 1st C.O.R.

Regimental No. 724658. Rank Pte Name ROBINSON, Richard Ormond.

Enlisted (a) 31.5.18. Terms of Service (a) C. E. F. D of W Service reckons from (a) 31st May.1918.

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) Munitions.

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	JUN 3-1918		H. M. T. "Antonia"
		Arrived	21-6-18		
11/7/18	O.C. 3rd. Res. Bn.	T.O.S. from Canada.	Witley.	21/6/18	Pt.11.D.O.192.
7/11/18	O.C. 3rd. Res. Bn.	S.O.S. to 1st C.O.R.D.	Witley	7/11/18	Pt II D.O. 211 Chas. G. Carlton Lieut Lt. Col. for O.C. 3rd RESERVE BN. C.E.F
8.11.18	1st CORD	T.O.S. from 3rd Res. Bn.	Witley	7.11.18	Pt II D.O. 310.
23-11-18	1st CORD	ceases to be Att Depot Coy on proceeding to Pof C	Witley	22-11-18	D.O. 220 J. Stanton LIEUT. OFFICER i/c RECORDS,
29-11-18.	Disembarked Canada.				

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
NOV 22 1918	O/S.	T.O.S. No.2 District Depot, Part II, D.O. No. 222			J. Johnston Lieut. Capt. F&F S.E. No. 2 District Depot
		Dis #2 D.D. Jan 8th 1919 Ptll #2. Demob			
					W.E. Hart Capt. O. C. Discharge Sections, No. 2 District Depot

724658

XIII

Bishop

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Robinson Christian Name Richard

Examined on 4th day of December 1915 at Lindsay

Birthplace City or Town London County England

Apparent age 18 years

Trade or occupation Farmer

Height 5 Feet 3¼ Inches.

Weight 113 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 34 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. None Left. 4 five Number five

When Vaccinated last January 25th 1916

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Slightly flatfooted

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

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

1

Date	Result	Vaccinations.
25.1.16	Good	J. McCullock Med. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
18.4.16	Good	J. McCullock M.O.
25.4.16	Good	J. McCullock M.O.
2.5.16	Good	J. McCullock M.O.

Enlisted on 1st day of December 1915 at Lindsay

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Batt C.E.F.	724658		1.12.15.
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott Camp, Hants. 21 DEC. 1916 APPROVED.	22-11-16	Subacute Rheumatic Fever.	Discharge (E) C.O. Cooperable Mapulmonary
	21-12-16	as above	Discharged permanently unfit. C.O. Cooperable
	Colonel A.M.S. Canadian Troops, Bramshott Camp.		PRESIDENT MEDICAL BOARD, BRAMSHOTT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

50M—8-14.
H. Q. 1772—39—439.

Surname Robinson Christian Name Richard

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
Commanded Aldershot		16	8	16	~~29~~	~~8~~	~~16~~	Subacute Rheumatism	~~18~~ 76	Left ankle main joint affected Come back from A. H. & fit for duty DISCHARGED. under Para 392, Sec. 16, K. R. & O. 1912. Being no longer physically fit for war service. W. H. Tied Capt for Commandant. Canadian Casualty Discharge Depot,	W. Shaw Sanpont R.C.A.M.C. W. Shaw Sanpont
					1	11	16				

ORIGINAL

MEDICAL HISTORY SHEET

Surname Robinson Christian Name Richard Ormond

Examined { on 7th. day of March 1917 / at Toronto Mobilization Centre.

Approved by

Birthplace { City or Town / County Renfrewshire, Scotland.

Rank M.O.

Apparent age 19.

Trade or occupation Farmer.

Height 5' 4" feet --- Inches

Weight 124¼ lbs.

Chest measurement { Minimum 32 - 35 inches / Maximum expansion 3 inches

Physical development Fair.

Small-pox Marks ------

Vaccination Marks { Arm Right Left 5. / Number 5.

When Vaccinated last 1916.

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Hearing Good.

Vision. Rt.Eye. D20 Left.D30.

Date	Fit or Unfit	Examined for Re-Engagement	
		DECLARED FIT BY MEDICAL BOARD TORONTO MOBILIZATION CENTRE	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
2/5/16	Ok	Jas Barnett Capt	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
2/5/16	Ok	Jas Barnett Capt	M.O.
25/5/16	Ok		M.O.
27/5/16	Ok		M.O.

Enlisted on ..... *day of* ..... *191* ..... *at* .....

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	248th.Btn.	~~1066238~~		
Transferred to		~~759053~~ 724658		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname ROBINSON. Christian Name RICHARD ARMOND.

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

D.M.S. 1348 (Revised).

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

22-11- 1916.

No. 724658 Rank Pte. Name Robinson, R.

Local Unit 109th Bn ~~Overseas Unit~~ Age 17+

Examination held at Bramshott, Hants.

DISABILITY.

~~Overseas~~—Local.
(scratch one out)

Subacute Rheumatic Fever. (1)

PRESENT CONDITION.

Says he had rheumatism aet. 15 in ankles laid up 5 months. Has had small recurrences since then and has been in hospital here for the condition. Heart is clear.
He enlisted aet. 18. and looks the part.

Board recommends:

1. ~~Fit for Duty.~~
2. ~~Fit for duty after~~ ..... ~~weeks physical training.~~
3. ~~Fit for Base duty~~ ..... ~~weeks.~~
4. ~~Fit for Permanent Base Duty.~~
5. Discharge. yes E (underage) B 179

Signatures:

C. E. Cooper Col. Major C.A.M.C. Pres.

Members { H. Macharen Capt.
W. Thompson Capt.

Approved.

Bramshott 22-11- 1916.

for A.D.M.S. Col.
Canadian Troops, Bramshott.

FORM OF WILL

83c

I, RICHARD ORMOND ROBINSON. (Name in full)

Regimental Number 724658 serving in "C" CO. 1ST DEPOT BN. 1ST C. O. R.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

	Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

(Aunt) Mrs., Kathleen Hodgkinson, 30 Goven Road Glasgow, Scotland.	Name and Address of person or persons to receive personal estate* (*See note*).

NOTE
This space for the appointment of Executor if necessary.

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 2nd day of June A.D. 1918

Pte R O Robinson Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Hasson

Address of Witness "C" CO. 1ST DEPOT BN. 1ST C. O. R.

Occupation of Witness SOLDIER

Signature of Second Witness H E Hall Lieut.

Address of Witness "C" CO. 1ST DEPOT BN. 1ST C. O. R.

Occupation of Witness [redacted] Officer 18th R.C.

M. F. W. 82.
300M.-12-16.
1772-39-983.

M. F. W. 41
1 0M—7-16
1772-39 889.

633

Name Robinson O L R A

Regimental No. 724658

Unit 109th Bn

Date of enlistment 1-12-15?

Place of " Lindsay Ont

Married (yes or no) No

Amount of pay assigned monthly $ 15 4/11/16 31/1/17 $45

To whom payable SA Mil

Northland 23-1-17

Name and address of next-of-kin RR #1 Mountain Ont

Re-enlisted in 248th Bn.

Date and place discharged Due Lo 15-2-17

Reason for discharge

Character on discharge Civilian Clothing Issued

I 649-R-4657

Form No. 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	3/1/17							89 83								LPC
4/1/17	15/2/17	43	100	43 —	43	10	4 30	9 —	146 13					124 24		Due Lo to Pd.
														2 43		AR 8570
														9 73		346
														9 73	146 13	adv on Ship
								75.								Int on def Pay See P. 10

PDP. 8/1/17 Ldn

Cert 4/11/16 31/1/17 $45

M. F. W 41
1 0M—7-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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			No.	Date					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Arthur Williams (Assignee)

Name of Soldier Robinson R.O. 724658 Pte 109th Bn

15.00 Nov 1917/16.

I. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				Returned S.S. Northland 13-1-17. 23/1/17.
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				Sp. Req 23-1-17 L.
Jan.	1917	V37540	30	30.00 Jany Pf to Adj. for Nov + Dec.
Feb.				a/c Closed Jany 1st 17
March		T50524 3	~~15.00~~	15-L. to close a/c 8/8/17 Sp. Req.
April				
May				
June				P.D.P. 8/8/17 A.K
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 19/6/19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Pte Robinson R. O.

Regimental No. 724658.

Unit 248 Bn.

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged sc March 6/18

Reason for discharge Class III.

Character on discharge Do/13.

5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
											Dec					— SA —
										483	12	10 00				Spad from "B" Unit Dec 17/854.
																Out Dec 22/365
Jan 1	31	31	1	31	31	10	3 10	9 60		52567		10 00		10 00		In Jan 8/5
														2 20		A.W.L. 11 pm 6 pm 7/10
									43.70	560	95	18 20	Taken	3 30	43 70	Forfeits 2 days pay/12
																A.W.L. Jan 22
Feb 1	28	28	1	28	28	10	2 80			582	83	10 00		1.10		25 Overstayed Pass.
									30 80	609	45	19 70	~~Spd.~~		30.80	Forf. 1 day pay /39
										575	78	5 00	Taken			
													Dr. Bal	5		
Mar 1	14	14	1	14	14	10	1 40	13 00		621	83	10 00		5		
									28 40	624	35	18 40			28 40	
													Dr Bal	5		
														5 00		Ob. 99 Mar/18

M. F. W. 41
1 0M—"-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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			No.	Date					

R.P. - 015498-R-12

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. R. 376

Name Robinson, R.D.

Regt'l No. 724658 Rank Private File Numbers { R.M. 25-85 / R.M. 25-Ro.

Former Units 3rd Reserve Original Unit 1 b.D. R.D.

Date of arrival in Canada 28.11.18 Boat Aquitania Port of Disembarkation Halifax

Rates of Pay:—Regt'l. $1.00 Field 10¢ Date of arrival in M.D. 2.

Separation Allowance. Date paid to nil Rate nil If continued by Chief Paymaster, England nil

Assigned Pay. Date paid to 31.1.19 & closed Rate $15.00 If continued by Chief Paymaster, England nil

Name and address of Beneficiary { Arthur Williams / R.R. #1, Mountain, Ontario

Pay claimed on English L.P.C. to 30.11.18 to be paid by new Unit from 1.12.18

Name of new Unit #2 District Depot Date L.P.C. forwarded to new Unit 14/12/18

R.P. changed on English L.P.C. to nil.

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out: On Boat		~~At Cl. Depot~~ R.P. &c.		OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT: Credit		Debit		REMARKS
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	
99	80			99	80													Temla. - 11.12.18. 13/12/18
						20	00											24.11.18.
						30	00											Quebec - 1.12.18.
												50	00					
						Credit Balance						49	80					
				99	80							99	80	49	80			

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers { .....
.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate..... If continued by Chief Paymaster, England
.....

Assigned Pay. Date paid to.....Rate..... If continued by Chief Paymaster, England
.....

Name and address of Beneficiary { .....
.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

15498-R-8

Name Robinson, Richard Ormond
Surname Christian Name

Regimental Number 724658 Rank Pte.

Unit 248th Bn.

Original Unit

District where paid M.D.2.

Date of Discharge 14-3-18.

P. D. P. Filing Number 2-374-2.

Address (in full) Dominion Hotel, London, Ont.

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

~~L. L. 22573—M. & D. 8069.~~

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
100	10	6255	14-3-18	33	00	6120	13-4-18	33	00	5868	13-5-18	34	10			100	10

Remarks: Debit balance of $5.00 is outstanding on account of the above Soldier from M.H.C.C. Toronto file 015498-R-12
GJ 10/9

M. F. W. 127.
60M—6 17.
1772 39-1140.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Clerk .....

Dec'n No..... W. S. G. File No .....
Award.....days at $..... per day $
S. A.....months at $..... per mo. $.....
Less P, D. P. Credited
Less further debit balance
Net due paid as below

TO SOLDIER			TO DEPENDENT		
Ag. No	Ch. No	Amount	Ag. No	Ch. No	Amount
Total			Total		

Dependent.....

Address.....

.....

.....

$.....
$.....
$.....
$.....

Pay Dependent $.....

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.....

Net.....

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

L-L. Job 5170—M. & D. 6888

75/

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

186

To Whom Arthur Williams

Address R.R. #1 Mountain
Ont. ~~Ont~~

Rate 15.00 Nov 1st/16

By Whom Assigned Robinson R.O.

Regtl. No. 754658

Rank Pte

Corps 109th Bn

2 M. 4/12/16 a 22/1/17

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				

Disch to Canada 1/2/17
Stop Pay
3 M 1/1/17

CANADIAN ASSIGNED PAY AUDITED
AUDIT CLERK
DATE

CANADIAN ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 19/6/17

Name Pte Robinson R. O.

M. F. W. 41
100M-1-18.
1772-30-889.

Regimental No. 724658.

Unit 1 C.O.R.D.

Date of enlistment

Place of "

Married (yes or no) no

Amount of pay assigned monthly $ nil

To whom payable

Name and address of next-of-kin

Aquilania

Date and place discharged

Reason for discharge

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Dec 1	31	31	1	31 00	31	10	3 10	12 00		82566		10 00				Y.O.S. 22/11 to Postal Clerk 30/11
								49 60	95 90	83772		50 00				Sub. 4/12 - 18/12 D.O. 232.
										84262		35 90			95 90	

TRANSFER

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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			No.	Date					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2.

L. L. Job 4503. - Req. 6332.

Miss Lillian Sherer.

Name of Soldier Robinson, R. O.

PAYMENTS.

724658 - Pte - 248th Bn -

$15.00

JUN 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				P.D.P. 7/8/17 O.K.
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 19/6/19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom Miss Lillian Sherer,
Address 44 Spadina Ave, Toronto. Ont
Rate $15.00

JUN 1 1917

By Whom Assigned Robinson, R.O.
Regtl. No. 724658
Rank Pte
Corps 248th Btn.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Did not proceed O.S. Struck M.D. 6 Jan 17 Fell. 14.6.17.
Sept.				
Oct.				
Nov.				
Dec.				P.D.P. 8/5/17 O.K
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Discharge

CANADIAN ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 19/6/17

P. 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH: Havelock Terrace London Eng

NAME AND ADDRESS OF NEXT OF KIN: Arthur Williams Mountain Ont Can

RELATIONSHIP OF NEXT OF KIN: Uncle

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
	31-1-17		

45.00 75 cents

REG'L No. 724658 RANK Pte NAME Robinson Richard

IF IN PERMT. CORPS WHAT UNIT: UNIT 109th TRANSFERRED TO C.C.A.C. DATE 4-1-17 AUTHORITY 6611 623-31-12-16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION: Lindsay Ont — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION: Dec 1st 1915 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $15 00/100 R.S.A. DATE EFFECTIVE 1st Nov 1916

PAYABLE TO: Arthur Williams R.R. #1 Mountain Ont Can — RELATIONSHIP: Uncle

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 4-1-17 EFFECTIVE 1-2-17 REASON Discharge to Canada

DISCHARGE DATE AND PLACE 3-1-17. Canada REASON AND AUTHORITY C.C. 1 L. 623. 31-12-16

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 4/1/17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index

Checked by ... 1917

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31													Balance from Canada																		1253				
Aug. 31	31	1.00	31			10	310								1253 / 5410	11	9/6/16							974						974	3689				
Sep.	30		30				3								33																6989				
Oct	31		31		31		310.								3410. / 1137 3														48	974	10399		45		19
Nov	30		30				3								33													15	101	20 49	11650		46		
Dec.	31		31				310								3410 / 1803	233 / 218 / 286	15/4/16 / 15/11/16 / 20/11/16							933 / 1947 / 487 / 3381				15		2407 / 2430	10153 / 8983				
Checked	Jany	3	100 / 10	3	30			31						12 53	330 / 1843													15 / 45	549	15 / 9430					
				156			15	60																											

Balance transferred to N. E. Branch. 8983.

																8570		9078						2/28 243		3/14 973				1216	7767				
1917	Feb																												7767	7767					
	Sepd. 1917.														-75														-75	-75	Nil				

Transd to "Canada Disc'ge a/c"

Transd to "Canada Disc'ge a/c"

2 4005-262 - 14-11-16
2 4005-225 - 2-11-16

2fd to C.C.A.C. 6611 4-1-17. 623-31-12-16
Aff 4-1-17
Ca 3m 4-1-16
effect 1-2-16
Discharged to Canada 3-1-17 C.C. L 623 31-12-16

Pay Book Compared
P.R. sent 2.1.17
C.R. Balance 8983
g 12.16 Adv by P.M. Burton
Vouchers H 2078 & 113. S.P.L. #26. 13-1-17

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount		No. of Days	Rate	Amount		No. of Days	Rate	Amount					1		2		3		4		1	2	3	4				Credit	Debit			
			$	c.			$	c.			$	c.				No.	Date	No.	Date	No.	Date	No.	Date												

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:–		AMOUNT:–	

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.

NAME:– ROBINSON. RICHARD ORMOND

NUMBER:– 724658

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D.P.H. Canada	1-6-18	Pte

UNIT AND TRANSFERS

ORIGINAL UNIT 30 Dep. 1 Dep & 1 Coy

DATE ACCOUNT FIRST OPENED:– 1/6/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			3rd Res

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
11/11/18		Q.M. Chgs. £1-7-8.	6 78				
12/11/18	9904	Witley £2-0-0	9 73 ✓				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 –	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis & Can. off. 1/12/18 with N.R. 110. 19/11/18 L.P.C. Cr. Bal = 99.80

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31-5-18	Balance from Canada								1 90		
July	June Pay	33 –		AR 432 8/7/18 Der Trenchen	4 87 –						
	July Pay	34 10		AR 1392 26/7 3 Res	4 87 –				59 26	30	
		67 10			9 74						
Aug	PP	34 10		~~AR~~ Q 159 B. 21/8/18 "	– 32						
				AR 1588 10/8/18 "	4 87						
				1669 28/8/18 "	4 87				83 30	45	
		34 10			10 06						
Sep.	"	33 –		1902 14/9/18 "	4 87						
				2075 26/9/18 –	43 80						
				3088 19/8/18 "	1 20				66 43	60	
		33			49 87						
Oct	✓	34 10		AR 2016 11/9 3 Res	4 87				100 53		
				QJ 388 – 23.9.18 ✓	30						
				" ✓ 26.9.18 "	87						
				AR 2448 29/9 ✓	12 17				82 32	75	
		34 10			18 21						
Nov.	✓	33 –		9904 14/11 Cy D	9 73						
	Int. on Def. Pay	.94		Q-361 C. 6/11 3 Res.	6 74				99 79	90	
		33 94			16 47						

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

724658

Unit, Regiment or Corps 248th BATTN., C.E.F.

Regimental No. ..... Rank Pte. C. E. F. Name ROBINSON, Richard Ormond

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
8/9/17		Taken on Strength "B" Unit M.H.C.C. Part II D.O. 329	Halifax	8/9/17	W. B. Whitford CAPT. & ADJUTANT FOR MAJOR O. C. "B" UNIT M. H. C. C.
14/12/17		Transf'd to "K" Unit M.H.C.C. Part II D.O. 9	do	14/12/17	W. B. Whitford CAPT. & ADJUTANT FOR MAJOR O. C. "B" UNIT M. H. C. C.
	"D" Unit		Taken on strength		Toronto.

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
April 1918	P. Unit M.H.C.C.	205 Medical Unit	Toronto	20-3-18	HS 649-RC-4657 2. M.P. 34 RO-231 d/ 3/4/18

D. Surtees
Capt for [illegible]

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Witley Oct. 12th 1917

No. 724658 Rank Pte Name ROBINSON, ~~R. O.~~ RICH'D. ORMOND

Local Unit 3rd Can Res Bn Overseas Unit — Age 20.

Examination held at Witley

DISABILITY. Overseas—~~Local~~ (scratch one out). DEFECTIVE HEARING II. A. H.

PRESENT CONDITION.

O. M. P. C. Right M.T. small perforation
Hearing 2' left 12' right
Condition has existed for three years
Stated he enlisted first Dec 1, 1915, and was in France 4 mos; has invalided with "rheumatism" and was in Connaught Hosp. 7 months, then in Brankholme Hosp. 3 weeks then in Bn 2 mos. and was discharged medically unfit March 1918 "rheumatism". Board proceeding of 21-12-16 recommend discharge. Reenlisted in Canada Jan 31-5-18. Gets out of breath on exertion. Exam — Heart sounds irregular. 100 going to 130 on exertion and returning to 100 three minutes later.

BOARD RECOMMENDS:—

BII Rdy

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:—

President .....

Members { .....
.....
.....

APPROVED

Dated 16/10/17 1917. .....

For A.D.M.S.

170/23

EYE, EAR, NOSE AND THROAT CLINIC.
Witley Camp,
Surrey.

AUG 8 1918

UNIT 3 Res

Regimental No. 72465 Rank Pte Name Robinson R O

DIAGNOSIS:- O.M.P.E. Right M.T.

REMARKS:- Small perforation. Condition has existed for three years

170/23

EYE, EAR, NOSE AND THROAT CLINIC.
Witley Camp,
Surrey.

HEARING:-	Rt	Lt	Rt.	Lt.
	15' Voice	1'	Rinne.	
	Whisper.		Weber.	
	Watch.		Schwaback.	
			Form 256.	
			Form 2048.	
			Bone Condition.	

Category recommended:- B

Treatment recommended:-

170/23

EYE, EAR, NOSE AND THROAT CLINIC.
Witley Camp,
Surrey.

HEARING:-	Rt	Lt	Rt.	Lt.
	Voice		Rinne.	
	Whisper.		Weber.	
	Watch.		Schwaback.	
			Form 256.	
			Form 2048.	
			Bone Condition.	

Prescription R x.

AUG 15 1918

Continue

OCT 8 1918

Return for further examination and treatment on.....
and bring this paper.

R E Ratimer
Capt

Category recommended:-

M.D. 2
No. 56

CANADIAN CONTINGENT EXPEDITIONARY FORCE

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. 724658 Rank Pte Name Robinson R. O

Corps H. 2 D. D who was* Discharged

On 8 / 1 / 191 9, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1 / 1 / 191 9, to 8 / 1 / 191 9, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month		
Advances by Cheques } No.			Regt'l. Pay 8 days at $ 1 c.	8	00
Advances by Cheques } No.			Field Allow. 8 days at $ 1.10 c.		80
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clo. all.	35	00
Payment on transfer or discharge No. 84631	43	80	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	43	80	Total	43	80

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of Assigned

Pay for the month of 191... and Sep'n Allce. for month of 191... (to) Assignee

(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.

Out 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 No

(3) cause of discharge authority D.O. 4

(4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date 6 / 1 / 19

Place Toronto

R. Gordon Evans CAPT.
PAYMASTER, No. 2 DISTRICT DEPOT
Paymaster.

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

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

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

Reserved for M.H.C.

Regt. No. 124658 Rank PTE. Surname ROBINSON Christian Name RICHARD ORMOND

Unit or Corps—(a) Overseas from United Kingdom NOT OVERSEAS (b) in United Kingdom I.C.O.R.D

Born at—Town GLASGOW County or Province — Country SCOTLAND

Date of Birth—Day 6 Month MAY Year ~~1899~~ Age 20 yrs. 2 months.

Joined at TORONTO - ONT CANADA Date MAY 31, 1918.

Former trade or occupation SHELL INSPECTOR

Permanent Marks or any peculiarity that will serve for future identification :—

Height—feet 5 inches 4 Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) R O Robinson

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY. DEFECTIVE HEARING.

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

Disabilities Group (*a*)

Disabilities Group (*b*)

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	O. M. P.C. (RIGHT)	Canada	3 yrs ago
(*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 ? Yes

(*ii.*) As to Group (*b*) above ? n.a. If yes, has Active Service aggravated it ? n.a.

(*iii.*) As to Group (*c*) above ? n.a. If yes, has Active Service aggravated it ? n.a.

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 ? n.a.

(*iii.*) As to Group (*c*) above ? n.a.

PART I. (continued).

5. MEDICAL HISTORY.

Pte Robinson states that he joined up on Dec. 1st 1915. Arrived in England the following July 1916. He states that he was admitted to Hospital (Connaught) Aug 10th 1916. Was there three months. Then went to Witley Convalescent Home for 3 months. Went then to Bath at Beaumont. He suffered from "Rheumatism" while in Hospital. Eventually returned to Canada discharged. Was never in France or at the front. Reinlisted 31-5-18. Worked at light jobs around Camp. Has had ear trouble for about 3 years with occasional discharge.

6. PRESENT CONDITION.

Cannot hear very well in right ear. Complains of noise in ear. Has not had a discharge from ear for about 10 days.

Specialists Report.

"R. M. P. B. Right M. E. small perforation. Condition has existed for 3 years."

Sgd. E. Fetherstonhaugh Capt.

Heart beat 100 increasing on exertion. all other systems normal.

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what. n. a.

(iii.) Was one advised and declined? n. a.

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? no

(ii.) If so, describe. n. a.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) A 11

(b) Invalid to Canada? n. a.

(c) Discharge from the Service as permanently unfit? n. a.

Date of Report Nov. 14 1918

Station Witley Camp

Signed [signature] Capt.
Officer in medical charge of case.

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

Sgd. F. L. Fuller Capt.
Officer i/c Hospital / S.M.O. Brigade — Strike out one of these

Dated at Camp Witley Station, on 14-11 1918

*Delete if inapplicable.

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

10. Is the diasbility 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.*) none

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.*) none

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

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

17. Can the former trade or occupation be resumed? yes

18. REMARKS :—
Pulse 120 on lying, rose rapidly ten times
Previously (12/10/18) marked B II "Def Hearing & D. A. H."
Only slight tachycardia now
Hearing (W.C.) R. - 6/6 L. - 21 Sgt. B. Latimer Cpl Cane 8/8/18.
He states he had discharge from ear prior to enlistment.

19. RECOMMENDATION :— (a) Fit for duty? (*state category*) B II (b) Invalid to Canada? (c) Discharge from Service as permanently unfit?

Date of Board 14/11/18

Signatures of the Board { Lieut. Colonel Cane for President. / Jas. H. Hammond Capt. Cane }

Station Witley

Approved [signature] A.D.M.S.

Dated at MAJOR, D.A.D.M.S. CANADIAN TROOPS, WITLEY. Station 191

A.D.M.S. CANADIAN TROOPS 14 NOV 1918 WITLEY

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

.....

Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

MEDICAL HISTORY OF AN INVALID.

1. Station. Halifax, N.S.

2. Regiment or Corps. 248th Batt. $\frac{11}{22}$

3. Regimental No. and Rank. 724658-Pte

4. Name. Robinson, R.O.

5. Age last Birthday. 20

6. Enlisted on 1-12-15

at Toronto, Ont

7. Former trade or occupation. Farmer

8. General remarks on his:—

(a) Conduct. Sheets not available

(b) Habits.

(c) Temperance.

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

Date. 25-11-17

9. Service.	Years. Days. PERIODS From	To
24th Batt.	1-12-15	Aug. 1916
124th Batt.	Aug. 1916	Sept. 1916
248th Batt.	Sept. 1916	May 1917

10. (a) Disease or disability. Rheumatic Fever, effects of.

(b) Date of origin. 1903

(c) Place of origin. Workdale, Ont.

(d) Cause. Infection.

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.) Well nourished man, states that when at the age of six years he had acute rheaumatic feverm with thei he was three weeks in bed. In france summer of 1916, for five months evecuated from there ill with "Rheumatism" Discharged camt to Halifax May 1917 Rockhead Hospital May 1917 with gonorrhoeal urethritis. ungs regative, Heart first wound at apex roughened no enlargement. Pulse 8 at times irregular, no definite tenderness in joints, altho he complains of pain on the elbow joint.

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

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

M. F. B. 227.

200M. 8-16.
1772-39-117.

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

Round scar on left shin

(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 ?

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.

Exposure to cold and dampness
Not exceptional

14. Treatment. Connought Hospital, England, Yatley Convalescent Hospital, England, Rockhead Hospital, Halifax, two eeks; Station Hopsital alifax, two months; Clayton Convalescent Home six weeks.

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

50%

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

Permanent with improvement

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.

50%

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

No for further treatment

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. This man states that he has pain in both knees and right elbow and of markednerousnesss. He states that these symptoms have been worse since the attack of gonorrhoea in May 1917. No physicial signs of gonotthoea of its effects are present Cardiac impluse increased second sound accentuated at base.

12. A. No
B. Yes

15. Yes 5%

16. Yes

17. Yes-50%

18. Is he unfit for Military Service. Yes

Recommendations: That #724658 Pte. Richard Ormond Robinson, 248th Battalion be given further treatment at Convalescent Home Category D III

Signatures :—

J.R. Corston Major ..... President.

F.U. Anderson C.S. } Members.

Station. Halifax, N. S.

Date. 26-11-17

Date. 28-11-17 Oscar A. Cannon Major
Asst. Director of Medical Services.

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.

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Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.

200m. 8-16.
H. Q. 1772-89-117.

DETAILED MEDICAL HISTORY OF INVALID.

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.

NAME OF NEXT OF KIN Mrs Gladys Doughty
ADDRESS OF NEXT OF KIN 30 Joven Road Scotland
MAN'S ADDRESS 44 Spadina Avenue Toronto
RELATIONSHIP Aunt

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

No. 2 MILITARY DISTRICT MAR 1 1918 34-Ro-231

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Spadina Military Hosp DATE Feb 12th 1918

1. (a) Unit D Unit M.H.C.C. (b) Regimental No. 424658 (c) Rank Pte
(d) Surname ROBINSON (e) Christian name Richard Ormond
2. Age last birthday 22 Date of birth May 6th 1896
3. Enlisted at Owen Sound Ont on April 1st 1917

4. Personal description :—
(a) Height 5'5" (b) Weight 121 lbs (stripped) (c) Complexion Fair
(d) Colour of hair Light (e) Colour of eyes Blue (f) Identification marks
Scar over left tibia result of shrapnel wound

5. Address after discharge (for the use of the Board of Pension Commissioners.)
44 Spadina Ave Toronto

6. Former trade or occupation Farmer

7. (a) Service

	Years	Days	Periods From	Periods To
Discharged			31st Jan 1917	
Re-enlisted			April 1st 1917	
248th Battalion			April 1st 1917	May 25th 1917
B. Unit. M.H.C.C.			May 25 1917	Dec 17th 1917
D. Unit. M.H.C.C.			Dec 17th 1917	to date

(b) Has he been Overseas? Not since re-enlisting.

8. Present disease or disability (use authorized nomenclature if possible). V. D. H.
(a) Date of origin Since Aug 30th 1917 (b) Place of origin Canada
(c) Cause* Mitral Regurgitation due to Rheumatic fever previous to enlistment
*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Subjective Symptoms
Complains of shortness of breath on moderate exertion.

Objective Signs
Heart not enlarged. There is a mitral systolic murmur present transmitted to left. The murmur nearly disappears on standing but increases on exercise. S.B.P. 140. D.B.P. 80. Pulse rate lying down 84 respirations 18. After flight of stairs pulse rate 94 respirations 24. After 1 min rest pulse 86

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

150M.-6-17.
1772-39-117.

See page 4.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

States he had Rheumatic fever when 6 yrs of age and that he has had recurring attacks nearly every year since. He was discharged on Jan 31st 1917 with Rheumatism. Re-enlisted April 1st 1917. In June 1917 he had another attack of Rheumatism and was admitted to Hospital where he has remained ever since. His mitral regurgitation was apparently not evident until he was admitted to this Hospital on Jan 29th 1918. There is no evidence subjective or objective of Rheumatism at present time.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

10 %

12. Did the disability arise on or off duty? On duty while in Hospital.

13. Was a Court of Inquiry held? Not applicable.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes Not applicable. No

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

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

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

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

Hosp in Canada 8 mos

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations

That he be discharged as medically unfit for further service

Robt E. Johnston Capt AMC,

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned P.B.R.O. Robinson have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

P.B.R.O. Robinson

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

We concur

22. Is the soldier fit for

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

23. It is certified that the soldier

~~(a) Does require treatment.~~
(b) Does not require treatment.
(c) Should pass under his own control.
~~(d) Should not pass under his own control.~~

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

We recommend discharge on account of physical unfitness

C J Cameron Maj — *President.*
F W Hughes Capt
J D Loudon, Lt — *Members.*

STATION Spadina Military Hospital, Toronto

DATE Feb. 25th 1918

APPROVED BY

DATE [illegible] — *Assistant Director of Medical Services.*

APPROVED BY

DATE — *Director-General of Medical Services.*

All other organs normal

Incapacity due to partial loss of function of heart.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

MEDICAL HISTORY OF AN INVALID.

1. Station Halifax, N.S.

2. Regiment or Corps. 248th Batt.

3. Regimental No. and Rank. 724658-Pte.

4. Name. Robinson, R.O.

5. Age last Birthday 20

6. Enlisted on I-I2-I5.

at Toronto, Ont.

7. Former trade or occupation. Farmer.

8. General remarks on his:—

(a) Conduct Sheets not available.

(b) Habits.

(c) Temperance.

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

Date. 25-II-I7.

9. Service.

	Years.	Days.
	PERIODS	
	FROM	TO
24th Batt.	I-I2-I5.	Aug. I9I6.
I24th "	Aug. I9I6.	Sept. I9I6
248th "	Sept. I9I6.	May I9I7.

10. (a) Disease or disability Rheumatic Fever, effects of.

(b) Date of origin. I903.

(c) Place of origin. Workdale, Ont.

(d) Cause. Infection.

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.)

Well nourished man, states that when at the age of six years he had acute rheumatic fever, with this he was three weeks in bed. In France summer of I9I6, for five months evacuated from there ill with "Rheumatism." Discharged the service in Canada Jan. I9I7, reenlisted March I9I7, came to Halifax May I9I7, ~~xxxx~~ Rockhead Hospital May I9I7 with gonorrhoeal urethritis. Lungs negative. Heart, first sound at apex roughened, no enlargement. Pulse 88, at times irregular, no definite tenderness in joints, altho he complains of pain in the elbow joint.

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

(b) Has it been aggravated by intemperance, vice or misconduct? Aggravated by attack of gonorrhoea.

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

Round scar on left shin.

(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 ?

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.

Exposure to cold and dampness, Not exceptional.

14. Treatment. Connought Hospital, England; Yatley Convalescent Hospital, England; Rockhead Hospital, Halifax, two weeks; Station Hospital, Halifax, two months; Clayton Convalescent Home, six weeks.

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

50%.

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

Permanent with improvement.

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.

50%.

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

No, for further treatment.

D. J. Macdonald 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. This man states that he has pain in both knees and right elbow, and of marked "nervousness." He states that these symptoms have been worse since the attack of gonorrhoea in May 1917. No physical signs of gonorrhoea or its effects are present. Cardiac impulse increased. Second sound accentuated at base.

12. A.No.
B.Yes.

15. Yes-5-%.

16. Yes.

17. Yes-50%.

18. Is he unfit for Military Service. Yes.

Recommendations : that No. 724658, Pte Richard Ormond Robinson, 248th Batt., be given further treatment at a Convalescent Home. Category D.III.

Signatures :—

J R Costin Major ..... President.

F. W. Anderson C.S. .....

Station. Halifax, N.S. ..... Members.

Date. 26-II-17. .....

Date. 28.11.17 Oscar H Cannon, Major

Asst. Director of Medical Services.

APPROVED A.D.G.O.C.M.D.

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.

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Date of final Medical Board or decision. .....

Administrative Medical Officer.

Militia Form B. 227.

200m. 8-16.
H. Q. 1772-39-117.

DETAILED MEDICAL HISTORY OF INVALID.

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.

Witley Camp.

....Dec. 22/16 DATE.

This is to certify that I have examined this man and find him free from any contageous disease or infectious disease and vem vermin and fit to travel.

Pte. Robinson R.
724658.

S. MacPherson
.....CAPT.
M.O. 124th. Bn. C.E.F.

Reserved for M.H.C.

DEPT. MILITIA & DEFENCE FEB -8 1917 H.Q. CANADA

Regt. No. 724658 Rank Pte. Surname Robinson Christian Name Richard

Unit or Corps—(a) Overseas from United Kingdom 109th Bn. C.E.F. (b) In United Kingdom

Born at—Town London. County or Province Country England.

Date of Birth—Day 6 Month May. Year 1899. Age 17 yrs. 6. months.

Joined at Lindsay Ontario. Date Dec. 1st/15.

Former Trade or Occupation Farmer.

Permanent marks or peculiarities that will serve for future identification :—

Cut on left shin.

(1)

Height—feet 5 inches 3¼. Colour of eyes Brown.

Signature of Soldier (*for indentification purposes*) Pte R Robinson

Medical Report.

☛ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted.*)
(*Follow the official nomenclature as far as possible.*)

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

Disabilities Group (*a*).

Disabilities Group (*b*). Rheumatism

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i*) As to Group (*a*) above.			
(*ii*) As to Group (*b*) above.	Natural	London Eng.	1911
(*iii*) As to Group (*c*) above.			

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914)

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

(*i*) As to Group (*a*) above? If yes, has Active Service aggravated it?

(*ii*) As to Group (*b*) above? yes. If yes, has Active Service aggravated it? yes.

(*iii*) As to Group (*c*) above? If yes, has Active Service aggravated it?

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

(*i*) As to Group (*a*) above? Not applicable

(*ii*) As to Group (*b*) above?

(*iii*) As to Group (*c*) above?

noted 7-2-17 HO

2

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i*) While on duty? (*ii*) While off duty? Not applicable

(*iii*) Was a Court of Inquiry held? (*iv*) Where? (*v*) When?

(*vi*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Has had rheumatism for 5 years.
Laid up for 5 months at 18 years of age
Has had recurrences since.
Was laid up in Connaught Hospital & Longport Conv. Home for three months.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Still has pains in ankles and knees.
Allright when free from pain but
is always short of breath.

8. OPERATION. (*i*) Was one performed?

(*ii*) If so, state what. Not applicable

(*iii*) Was one advised and declined?

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

9. (*i*) Is there loss or decay of teeth attributable to Active Service?

(*ii*) If so, describe. Not applicable

10. DO YOU RECOMMEND:—

(*a*) ~~Fit for duty~~?

(*b*) ~~Fit for base duty~~?

(*c*) ~~Invalid to Canada~~?

(*d*) Discharge from the Service as permanently unfit? Yes.

Date of Report Dec. 6 1916. Signed H. O. Boyd. Capt.
Officer in medical charge of case.

Station Detty Camp.

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

P. D. Stewart Maj.
Officer i/c Hospital / S.M.O. Brigade — Strike out one of these.

Dated at Branshott Camp Station, on 18-12-1916

* Delete if inapplicable.

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

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I (1)?
If not, indicate it.

Subacute Rheumatic Fever.

12. Is the cause of the disability fully indicated in Part I (2)?
If not, indicate it.

Yes.

13. Was the disability caused or aggravated by—
(a) Negligence of the Soldier { Caused?) Aggravated?) No.
(b) Misconduct of the Soldier { Caused?) Aggravated?) No.

14. 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, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.*)

None as compared with capacity on ~~xxxx~~ enlistment.

15. THE PENSIONABLE DISABILITY—(*see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, or all*).

Not applicable.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i*) Is it permanent? Not applicable.
(*ii*) If not permanent, what is its probable minimum duration (*in months*)? Not applicable.

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applicable.

18. Remarks.

19. Recommendation:—(a) ~~Fit for duty?~~
(b) ~~Fit for base duty?~~
(c) ~~Invalid to Canada?~~ ~~Yes~~
(d) Discharge from Service as permanently unfit? Yes.

Classification for the Military Hospitals Commission.
Not Classified.

Date of Board 21 ~~NOV~~ 1916

Signatures of the Board: C. R. Cooper Lt Colonel, President. H. Maclaren Capt. W. McJachen Capt.

Station Bramshott.

For G.O.C. & A.D.M.S.

Approved 21 ~~NOV~~ 1916

Dated at Bramshott. Station Bramshott. 21 ~~NOV~~ 1916

PART III.

R. C. FEB - 9 1917

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

President.

Signatures of the Board

COPY

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ROBINSON *Christian Name* RICHARD

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Lond on County England

Examined ... ... on 4th day of Dec. 1915. 191 ,
at Linsday

Declared Age ... ... 18 years days.

Trade or Occupation ... Farmer

Height ... ... 5 feet 3 ¼ inches.

Weight ... ... 113 lbs.

Chest Measurement { Girth when fully Expanded 34 inches.
Range of Expansion 2 inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number

When Vaccinated ... ...

Vision ... ... { R.E.— V=
L.E.—V=

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

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

Approved by (*Signature*) J.M.McCulloch, Capt.
(*Rank*) *Medical Officer.*

Enlisted ... ... at Lindsay, Ont.
on 1st b day of December 1915. 191 .

	Corps.	Regtl. No.
Joined on Enlistment ...	108th Battalion	724658
Transferred to		

Became non-effective by ... DISCHARGED. under Para 392, Sec. 16, K. R. & O. 1912. Being no longer physically fit for war service.

on day of 191 .
(*Signature*) Sgd. R.M.Hazelton, Lieut.
(*Rank*) for Commandant. Canadian Casualty Discharge Depôt.

P.T.O.

(5442.) W. 13920/M39. 400M. 12/15. C. P., Ltd.

Table II.—Only for Admissions to Hospital or to the Sick L

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks, us su be
	Day	Month	Year	Day	Month	Year			

ist in the case of Warrant Officers treated in quarters.

bearing on the cause, nature, or treatment of the case, likely to be of interest or of future e. In cases of syphilis, admissions and re-admissions to hospital will be shown. The bsequent progress, including particulars of treatment out of hospital, transfers, &c., will given in the special syphilis case sheet.	Signature of Medical Officer

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

Date	Brief details, and signature
Bramshott, Dec.	21-16 Rheumatic Fever
	DISCHARGE
	C.E.Cooper, Major
	PRESIDENT STANDING MEDICAL BOARD
	APPROVED
	C. DRum, Colonel A.D.M.S.
	Canadian Troops , Bramshott Camp

Table IV.—Service Table.

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

MEDICAL HISTORY OF AN INVALID.

1. Station. Halifax.
2. Regiment or Corps. Details Comp Batt
3. Regimental No. and Rank. No. 724658 Pte.
4. Name. Richard Ormond Robinson
5. Age last Birthday. 19.
6. Enlisted on 1 Dec. 1915
   at Lindsay, Ont.
7. Former trade or occupation. Farmer

8. General remarks on his :—
(a) Conduct.
(b) Habits.
(c) Temperance.

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

Date. Aug. 30, 1917.

9. Service.	Years. Days. PERIODS FROM	TO
45th Batt.	1 Dec. 1915	Aug. 1916
124th Batt.	Aug. 1916	Sept. 1916
248th Batt.	Sept. 1916	May 1917.
(Composite Batt. Details)	May 1917	

10. (a) Disease or disability. Acute Rheumatism – Convalescing from
    (b) Date of origin. June 22nd.
    (c) Place of origin. Wellington Barracks
    (d) Cause. Had a similar attack eight months ago and was invalided home from France.

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.)

Anemic. Very easily fatigued. Lost in weight 12 lbs. Appetite very poor. Sleeps poorly. Respiratory and circulatory systems apparently free from organic trouble. Generally "run down"

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

M. F. B. 227.

200M. S 16.
1772-39-117.

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

Scar over tibia – left leg, result of shrapnel wound.

(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?

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.

To the damp climate of this District (N.S.) is attributed this second attack – not exceptional.

14. Treatment.

Hospital.

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?

Two months.

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.

At present – 2/3.

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

Not for discharge.

Present Address:
Wellington Barracks
Halifax.

H. W. Stewart
Capt. R.A.M.C.

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. Yes.

12. Yes.

15. Yes.

16. Yes.

17. Yes.

18 Is he unfit for Military Service. ~~Yes.~~ At present.

Recommendations:

The Board recommends that # 724658, Pte. Richard Osmond Robinson, be placed in Canadian D III for treatment, inland, for a period of two months.

Signatures:—

M. A. Curry Lt-Col President.

[illegible] Lt. A.M.C. Members.

Station. Halifax.

Date. Aug. 30, 1917

Date. 1/9/17

C. C. Archibald Capt
Asst. Director of Medical Services.

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.

Militia Form B. 227.

200m. 8-16.
H. Q. 1772-39-117.

DETAILED MEDICAL HISTORY OF INVALID.

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.

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.)

649-R-4657

No. 724658

Rank Private.

Name Richard Ormond, Robinson.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 45th. Battalion.

Date of Discharge 20-3-18 ~~March 14th 1918~~.

Place of Discharge "D" Unit M.H.C.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 19 years months.
Height 5 feet 4 inches.
Complexion Fair
Eyes Blue.
Hair Fair.
Trade Farmer.
Intended place of residence (To be given as fully as practicable.)

Descriptive Marks
Scar over Tibia left leg result of Shrapnel wound.

2. The above-named man is discharged in consequence of

Being no longer fit for war service.

Para. 392. Sec. 16 K. R. & O. 1912

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.

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.

Good

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:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

(OVER)

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

Nil

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

6. Medals and Decorations ~~Service in France~~ & Belgium

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) "D" Unit M.H.C.C. J. H. Wallace Lt for

(Date) MAR 15 1918 O.C. *Commanding* "D" Unit M.H.C.C.

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) "D" Unit M.H.C.C. Pte R. O. Robinson (*Signature of Soldier.*)

(Date) Mar 14-15 J. J. Duffy (*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. Mar 14-15 **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 2 years 103 days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed. Mar 14-15

(Place) "D" Unit M.H.C.C.

(*Signature*) J. H. Wallace Lt

(Date) MAR 15 1918

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.)

R O Robinson

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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.

M.D. - TWO -

(2468) Wt. W. 2280—PP1182 6-18 J.F.W. (E3277)

Aquitania Sa 22 11 18

Army Form W3997.

2

Regtl. No. 724658 Rank Pte

Name Robinson Richard O.
(Christian Names in full) (Surname)

Unit 1st C.O.R.D. Regt. or Corps 30 Draft C.O.R.

CATEGORY B II NEXT OF KIN Aunt

REASON FOR RETURN.

Medical Board held at Witley Surrey 14.11.18

INTENDED PLACE OF RESIDENCE. Toronto

COVER

FOR

DISCHARGE DOCUMENTS.

CAMPAIGNS, MEDALS AND DECORATIONS. Local Casualty

Embarked AQUITANIA 22-11-18

UNITED

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M.B. 22.L19.DD

1. No. 724658

2 Rank. Pte.

3. Name. ROBINSON RICHARD ORMOND.

4. Unit. 1st Depot Bn. 1st C.O.R. (#2 D.D.).

5 Date of Discharge Jan 8th 1919. Place TORONTO, ONT.

6 Reason for Discharge ON GENERAL DEMOBILIZATION

7. Authority. D.O. D.D.#2 Ptll #4.

8. Proposed Residence after Discharge 44 Spadina Ave. Toronto Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.?

Richard Ormond Robinson

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Toronto Ont.

Date Jan 8th 1919.

Signature W E Hart Capt.

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

For

O.C. No. 2 Discharge Depot.

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

Large English ledger sheet
for this mans acct. is
missing. Assignment
was authorized per 2 M on
file for $15. effective from
1/10/16 to 31/1/17 — $45.

Hms & Whillans 19/6/19

AND DEFENCE, CANADA.

.....19

Hour.....

.....has been passed to

.....

.....

o C. R.

R-376

No. 2 DISTRICT DEPOT

AUDITOR M. | PAYMASTER B

M. OR S. S.

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

REGT. No. 724658 RANK PTE NAME (IN FULL) ROBINSON. R.O. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS 44 Spadina Ave Toronto

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
S.D. Rec.		

ORIGINAL UNIT C.E.F. 1 CORD. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO #2 DD. — DATE 22/11/18 — AUTHORITY 1232.

DATE OF ATTESTATION Dec/15 to 13.3.18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY. $ Nil — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 8/1/19 — REASON Demobilization — AUTHORITY Do. 4 — IF ENTITLED TO POST DISCHARGE PAY No

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																					
Jan 8	8	1.10	8	80			35	00	43	80					84631						43	80									43	80					
	153				350	00			350	00													H.S.G				100	10			100	10					S.D.F. $100
																	Feb 11	A 2217					70	00							170	10					Chq taken by man
																	Mar 10	218388					70	00							240	10					chq given to man 10-3-19.
																	Apr 9	272761					70	00							310	10	39	90			chq 272761 given out 9-4-19.
																											500				315	10	34	90			~~Cr. 5 M.H.C. obtained 18/4/19~~
																	May 6	367444					34 90								350	00					W.S.G. PAID IN FULL
							350																244	90			105	10			350	00					

LIEUT.
FOR PAYMASTER WAR SERVICE GRATUITY

60m.-11-18 L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Northland
23/1/17

CERTIFICATE RE DISCHARGE DOCUMENTS.

Reg'tl No. 724658

Name in Full Robinson, Richard

Rank Pte

Reserve Unit 124th Bn

Present Unit C.C.A.C.

Place of Residence in Canada Markdale, Ont.

Military District. 2 3

Classification of Disability 1

(or) Reason for Discharge Permanently Unfit.

Commandant C. D.D. will assume responsibility by his initials in pro or column that documents listed below have been completed, Checked and Enclosed
If original document initial in column on the left.
If original not available, initial in column on the right.

Initials of Commandant C.D.D. (Original)	List of documents required to complete Discharge Checked and Enclosed.	Initials of Commandant (Originals not available)
P.F.H.	Proceedings on Discharge (268B)(Must be original)	
P.F.H.	Proceedings of Medical Board (B.179)(Must be original)	
P.F.H.	Medical History Sheet (A.F.B.178) (Must be original)	
P.F.H.	Last Pay Certificate (Must be original)	
	Certificate of Discharge (A.F B.2079)	
P.F.H.	Casualty Form(A.F.B.103)	
P.F.H.	Attestation Paper.H.F. .54.	
P.F.H.	Field Conduct Sheet. (A.F.B.122)	
	Company Conduct Sheet. (A. .B. 121)	
	Reg'tlConduct Sheet. (A.F.B.120)	
P.F.H.	Inventory of Kit(.3060)	
P.F.H.	Declaration from Dischargee.	

CANADIAN DISCHARGE DEPÔT,

(Signature) Lieut. Col.
(Commandant)
Officer Commanding,

Canadian Discharge Depot.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 724658 Army Rank Pte

Name Robinson Richard
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C.E.A.C.

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge FEB 15 1917

Place of discharge QUEBEC

DISCHARGED

1. *Description at the time of discharge.*

Age 17 years months

Height 5 feet 3½ inches

Chest measurement { girth when fully expanded 33 ins. / range of expansion 2 ins.

Complexion Fair

Eyes Brown

Hair do

Trade Harness

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

scar - each leg

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Para. 392, Sec. 16, K. R. & O. 1912.
Being no longer physically fit for war service.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

LIEUT.
for O/C Discharge Depot, Quebec.

To be filled in on the soldier quitting the Colours.

3. Military character :— Good

4. Character awarded in accordance with King's Regulations :—

CANADIAN DISCHARGE DEPÔT,

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Lieut. Col.,
Officer Commanding.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4500 Wt. W17176/M4g: 500,000 8/16 Sch. 39 Forms B. 268 40

[OVER.

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

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

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

6. Campaigns, Medals and Decorations — Local

Certificate of education .....

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

CANADIAN DISCHARGE DEPOT

(Place) _____

DEC 29 1916

(Date) _____ FILE

Lieut:-Col.

Commanding _____ Officer Commanding _____ Regiment.

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

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

DISCHARGE DEPOT

(*Place*) _____ R Robinson (*Signature of Soldier.*)

JAN 31 1917

(*Date*) _____ J Cuthbert, (*Signature of Witness.*)

QUEBEC

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

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

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

_____ (*Signature of Soldier.*)

10. *Statement of service.*

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

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for FEB 15 1917 (date)

DISCHARGE DEPOT

(Place) _____

FEB 2 1917

(Date) _____

QUEBEC

Signature W. Marriott Major.

Comd'g. Discharge Depot Quebec

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

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

None.

Pte R Robinson

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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