

Dec 13

OK

1075

~~C. Coy.~~

ATTESTATION PAPER.

No. 724732

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION

(ANSWERS.)

ORIGINAL

- 1. What is your surname?..... *Ross*
- 1a. What are your Christian names?..... *Charles, Arthur*
- 1b. What is your present address?..... *Argyle, Ont RR #1*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Argyle Ont*
- 3. What is the name of your next-of-kin?..... *James Ross*
- 4. What is the address of your next-of-kin?..... *Argyle Ont Canada*
- 4a. What is the relationship of your next-of-kin?..... *Father*
- 5. What is the date of your birth?..... *27th July 1896*
- 6. What is your Trade or Calling?..... *Farming*
- 7. Are you married?..... *no*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *yes*
- 9. Do you now belong to the Active Militia?..... *no*
- 10. Have you ever served in any Military Force?..... *no*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Charles Y. Ross*, 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.

Date *Dec 13* 191*5*. *Charles Y Ross* (Signature of Recruit)
Wm O'Connell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Y. Ross*, 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.

Date *Dec 13* 191*5*. *Charles Y Ross* (Signature of Recruit)
Wm O'Connell (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Lindsay* this *27th* day of *December* 191*5*:
Wm O'Connell (Signature of Justice)

1075

Description of Charles G. Ross on Enlistment.

Apparent Age 19 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Height 5 ft. 7 1/2 ins.

None

Chest measurement { Girth when fully expanded 34 1/2 ins.
Range of expansion 3 1/2 ins.

Complexion Fair

Eyes Blue

Hair Dark Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Dec 13 1915

J. McCulloch
H. Boyd

Place Lindsay

Medical Officer Capt.
Medical Officer

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Charles G. Ross 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. H. Hill Lt. Col. (Signature of Officer)
O. C. 109th Overseas Battalion, C. E. F.

Date DEC 29 1915 191

B-14-7-19

REGIMENTAL DOCUMENTS

NAME Ross Charles Yule REGT. NO. 724732 UNIT 38th Dn H. Q. FILE NO. _____

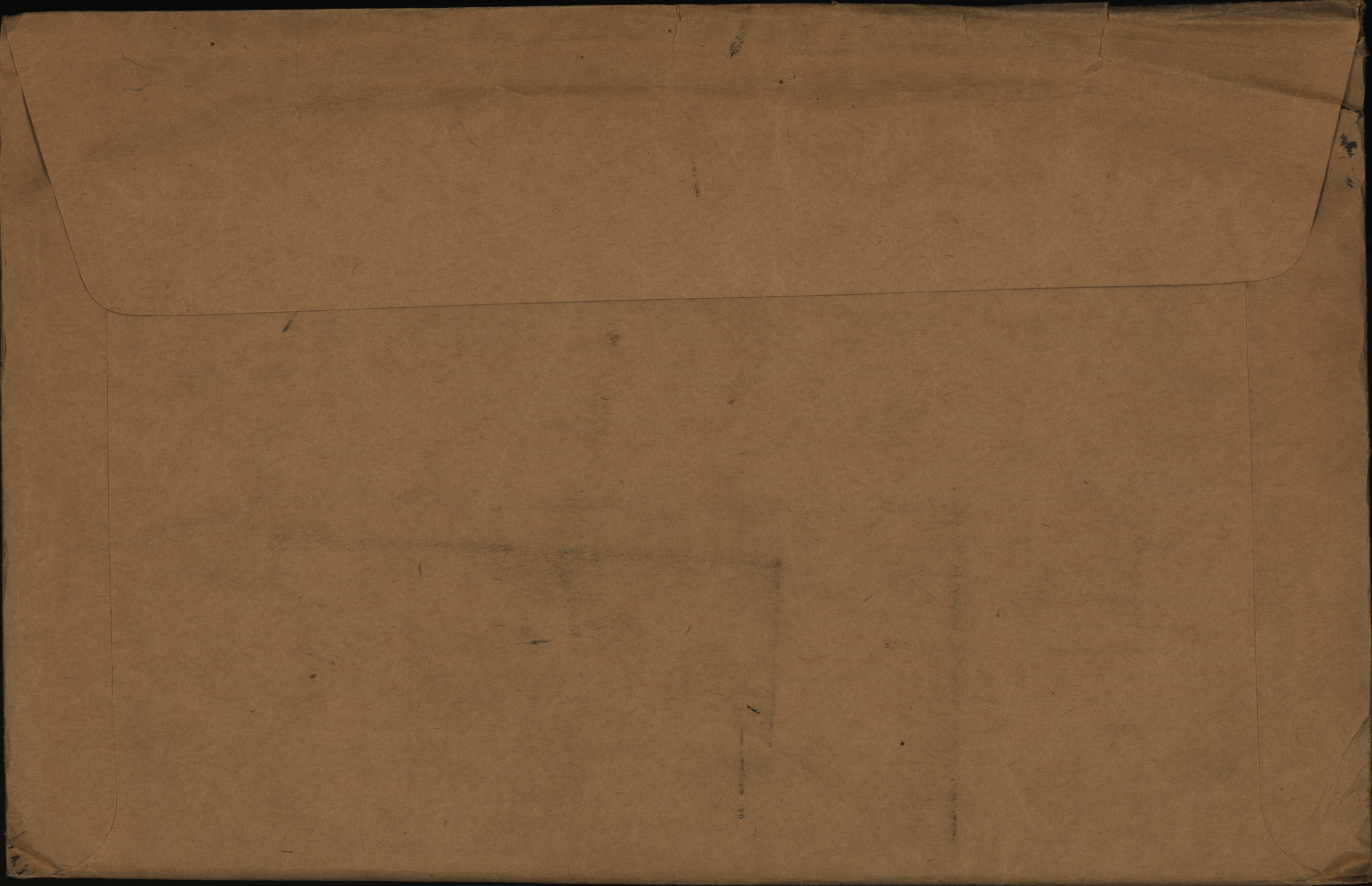
CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTENTION PAPER (M.F.W. 23, 133, or 51)					DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demol</i>
MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				23340	
4 <i>Misc</i>					
1 <i>7 items</i>					
1 <i>P 122</i>					
1 <i>copy of</i>					
1 <i>copy of</i>					

M

482/86

39-9
17-9
9-9

PUBLIC ARCHIVES RECORDS CENTRE
DEPOT DES ARCHIVES PUBLIQUES
OTTAWA



No. *724702* RANK*Pvt.*

NAME

*Pass. C.**Y.*

T. O. S.

13-12-15.

UNIT

*109th. Battalion.**S. O. 20. 12-12-15.*M. D. *13*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915 Dec 13</i>	<i>1915. Dec. 31</i>	<i>✓</i>		
<i>1916 Jan.</i>	<i>1916</i>	<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>April.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>		
<i>June.</i>		<i>✓</i>		
<i>July.</i>		<i>✓</i>		

UNIT SAILED
JUL 23 1916



Name Ross, Charles Yuen L/Cpl

Rank

Reg. No. 724732

Unit 109th Batta.

Next of Kin Canada

1075

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<u>1916</u>						
21. 9. 16 7-10-16	Isle 2600	Admiral Panahatu	16. 19.			

NAME

Ross, C. Y.
L/Cpl.

RANK AND CORPS

CABLE

NO.

DATE

H. Q. FILE No. 649-

REG'T'L. No.

724732

109th Bn (Can. Inf.)

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1075-

16

Mil. Inst. Aldershot.

21-9-16

Parotiditis.

19.

Discharged

7-10-16

Parotiditis

HPB
Number

724732

Rank

L/cpl.

Surname

ROSS

Christian Name

Charles Jule

Units

38 Bn Can Div Theatre of War France

Date of Service

4-12-16

Remarks

Latest Address

Gen Recf. Argyll.

Dist

Roll No

B. Page 9022.

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date

Remarks

DESP. NOV 23 1921
REGN. NO GA59052

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

Dist Area 9.3
CARD NO.

SURNAME.

Ross,

CHRISTIAN NAMES

Charles Y.

REGL. No.

724732

RANK

Pte.

UNIT

109th

FORMER CORPS

nil

505 Op 16.6.19
Dumb FOLL.
42-1779 26.6.19
V #800
Batt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Ross, James

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Argyle, Ont.

COUNTRY OF BIRTH

Canada, Argyle, Ont.

DATE

July 27th 1896

PLACE OF ATTESTATION

Lindsay

DATE

Dec 28th 1915

O/S. 23/7/16. 488/29

Rb. 13.6.19. 341/64 Pte

Sailed from Halifax 23.7.16.

Per. S.S. Olympic.

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

19

YEARS

4

MONTHS

HEIGHT

5

FEET

7 1/2

INCHES

CHEST MEASUREMENT

34 1/2

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

dk. brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Lindsey

DATE

Dec. 13th 1915.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Blm

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

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

Casualty Form—Active Service.

1075

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

Regimental No. 424432 Rank Private Name Ross Charles Gyle

Enlisted (a) 13.12.15 Terms of Service (a) D of W. Service reckons from (a) 13.12.15

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) Armer.

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A: 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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S. B. CLASS. A.

		Embarked Canada	Halifax	24.7.16.	
		Disembarked England	Liverpool	31.7.16.	
		Appointed <u>A.L. G.P.</u>	Osney	5.8.16	Part II Order 216
		Reverts to rank of Pte to proceed overseas	Witley	2-12-16	D.O.Pt.11 338
		Proceeded overseas for service with 38th	Witley	4.3-12-16.	D.O. Part 2-339

CERTIFIED CORRECT,
3-12-16
12 DEC. 1916
CAN. RECORDS, LONDON.

A. W. Aseltine
CAPTAIN,
ADJUTANT,
109th BATTALION CAN. INFANTRY.

6.12.16	C.B.D.	TAKEN on STRENGTH 38th	Havre	0.12.16	N. R. <u>DCS. 242-13</u>
7.1.17.	»	Left for Unit	FIELD	7.1.17.	N. R.
14.1.17.	Unit	Joined <u>4th Co Bn</u>	FIELD	8.1.17.	B. 213. DCS.

(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.]

1075

724732
Ross
cy

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				

1 6 MAR 1917 *W. C. ...*
 1 7 MAR 1917 Unit
 26 JAN 18 "
 1 6 FEB 18 Unit
 9. 3. 18 "
 8.3.19. 38th Bn
 22.3. 19. "
 1- MAI 19

Left for Unit FIELD
 Joined Unit FIELD
 GRANTED 14 DAYS LEAVE
 Joined Unit FIELD
 One G.C.B.
 14 days leave to, U.K.
 Rejoined
 Proceeded to England,

1 6 MAR 1917
 1 6 MAR 1917
Eng. 25.1.18
 9. 2. 18
 13.12.17
 4.3.19.
 Unit 21.3.19.
 1- MAI 19

N. R. 3 5
 B. 213. DCS. 103
 " 20. 9 - 2.2.18
 " 2023.
 B213, D.O.16/19
 "

6/6/19 *Pranshoff*

S.O.S. on Proceeding to Canada

G. Skelton
 Canadian
 Part ordered
 No 74

Lieut. for Lt Col. A. A. G.
 Section, G. H. Q. - 3rd, Ech.
W. Williams Capt
 24/2/18

I-M-T Olympic
 SAILED S'HEM'TON 6/6-19
 ARR'D HALIF'X June 12 1919

6-6-19. J.O.C. Sub. report # 3, D.O.
 16-6-19. S.O.S. Dis. An. Annot. P.O. 1420.

Ottawa. 21.2.177.
 Ottawa. 21.2.177.

W. Williams Lieutenant
 For O. C. No. 3 District Depot

CHS Rank *Act. Lt. Col* Name *1075* **ROSS Charles Yule** Reg'l No. **724732**
 Unit **109th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Lindsay Dec. 13rd. 1915** Place of Birth **Argyle Ont.**
 Name and Address, Next-of-Kin **James Ross**
Argyle Ont. Canada Relationship **Father**
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N.L. R.B. No. *16703*
 File No. _____
 Category _____

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

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.					
Arrived in England per H. M. T. 2810 31-7-16						
5.8.16	<i>Act. 109th</i>	<i>App'd Prov. Lt. Col</i>		<i>Osney</i>	5-8-16	<i>Pt. II S.O. 218</i>
20.8.16	do	<i>Adm'd to B. Isolation Strs</i>		<i>Branchott</i>	20-9-16	<i>Pt. II D.O. 264</i>
8.10.16	do	<i>Discharged from Hospital</i>		do	7-10-16	<i>Pt. II S.O. 282. C.L. 19</i>
12.16	do	<i>Reverts to ranks</i>		<i>With Mitley</i>	2-12-16	<i>Pt. II D.O. 338.</i>
4.12.16	do	<i>Adson tfr to 38th Bn.</i>			4.12.16	<i>Pt. II D.O. 339.</i>
13.12.16		38th Bn T-O-S on tfr from 109th Bn		Emst	6.12.16	Pt. II D.O. 242.
22.3.18	"	<i>Granted I.S.C. Badge</i>	<i>Pt.</i>	"	13-12-17	" 23
4.5.19	"	<i>Proceeded to England</i>		<i>Harve</i>	1-5-19	- 27
20.5.19	<i>FWing ecc</i>	<i>T.O.S. pending R.T.C.</i>		<i>Branchott</i>	5-5-19	- 21
		83 - G - 93			6-6-19	

109th CHECKED
17 DEC 1916
Alm

1075

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

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. 724732 Rank Pte Surname Ross
(Given name in full) Charles Yule
Unit or Corps Leam Birthplace Argyle Dist

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

1. GENERAL DESCRIPTION:

Physique Good Weight 140 lbs. Height 5 ft. $\frac{1}{2}$ in. Colour of Eyes Blue
Nutrition Good
Pulse 74 Regular
Condition of arteries soft
Vision Rt. 6/12 Left 6/12
Hearing (conversational voice) Rt. 30 ft.
Left 30 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
nil

Opinion as to general health and physical condition Good

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 No Integumentary System No Respiratory System Yes
Disturbance of mentality No Muscular System No Digestive System No
Osseous and Joint System No Any other general condition Yes

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.

Stumps - 20-9-16 - Recovery.
Pneumonia - 1915 - ~~20-9-16~~ - Full recovery.

1075

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramstott (Overseas)

Date 9-5-19

Signed [Signature] 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 [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at [Signature] (Canada)

Date Nov 18/19

Signed [Signature] 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 [Signature]

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

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

0

[Signature]

[OVER]

724732

1075

MEDICAL HISTORY SHEET ORIGINAL

Surname Ross Christian Name Charles Y

Examined { on 13th day of December 1915
at Lindsay

Birthplace { City or Town Argyle
County Ontario

Apparent age 19 years

Trade or occupation Farmer

Height 5 Feet 7 1/2 Inches

Weight 127 Lbs.

Chest measurement { Minimum 31 inches
Maximum expansion 34 1/2 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right None Left Two
Number Two

When Vaccinated last February 19th 1916

(a) Marks indicating congenital peculiarities or previous disease None

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

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

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

Date	Result	VACCINATIONS.
<u>19.2.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25.5.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>4.6.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

Enlisted on 13th day of December 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt C. E. F.</u>	<u>724732</u>		<u>13.12.15</u>
Transferred to.. ..	<u>38th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

9

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.

1095
CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No. 229625

THIS IS TO CERTIFY that No. 724732 (Rank) Private

Name (in full) Ross Charles Yule enlisted in
the 109th Bn

CANADIAN EXPEDITIONARY FORCE at Ludray on the 13th
day of December 1915

HE served in 38th Bn in France

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

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

Age 22

Marks or Scars

Height 5' 7 1/2"

Complexion Fair

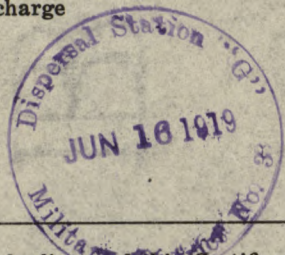
Eyes Blue

Hair DK Brown

Chas Ross
Signature of Soldier

J. Williams
Issuing Officer

Date of Discharge



Issuing Officer

Rank

Date _____ 19____

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

1918

THIS IS TO CERTIFY that No. 724782 (Rank) Private

Name (in full) Charles John enlisted in

the 1st Bn

CANADIAN EXPEDITIONARY FORCE at Barrow on the 13th

day of December 1917

He served in the 1st Bn

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

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

Age	<u>22</u>
Height	<u>5' 7 1/2"</u>
Complexion	<u>Fair</u>
Hair	<u>Blue</u>
Build	<u>Medium</u>

Signature of Soldier [Signature]

Rank Private

Date 1918

Rank Private

Signature of Officer [Signature]

Date of Discharge [Stamp]

NOTE: No duplicate of this certificate will be issued, any person having same is requested to forward it in an unopened envelope to the Secretary, Military Council, Ottawa, Canada.

1075

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ROSS, C. Y.
REGIMENT 38 Bn RANK Rt No. 724732

Date of Examination in England 7/5/19 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

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

Handwritten: 1075
95

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 20

2. EXTRACTIONS _____

3. CROWNS _____

4. DENTURES
- (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

Handwritten: A. D. D. S., M. D. No. 3

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

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

BRAMSHOTT CAMP

Signature of Dental Officer *[Signature]*

6022
C. J. ...
...

10
10

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 **724732**.....

(3) Full Name of Soldier **Charles Yule Ross**.....

(4) Place of Birth **Argyle Ontario Canada**.....

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

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

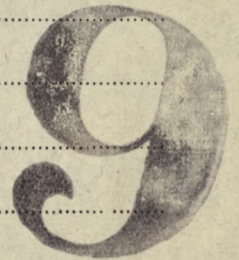
(b) Present Postal Address **Nil**.....

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

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

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

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



(9) Is your Father alive? Yes.

If so, state name and address James Ross Argyle Ontario Canada.

(10) Is your Mother alive? Yes.

If so, state name and address Agnes Ross Argyle Ontario Canada.

(11) If your Mother is a widow No.

Are you her sole support, or not? Nil.

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

Nil.

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

Nil.

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

Nil.

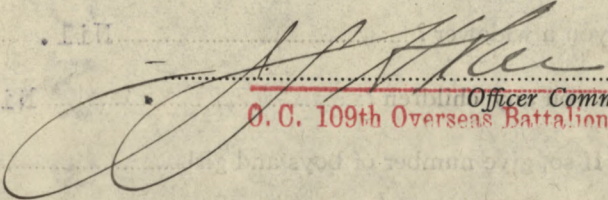
(15) Are you insured? Nil.

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 8, 1916.


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

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom Gas Ross
 Address Argyle
And

By Whom Assigned Ross C-2
 Regtl. No. 724732
 Rank Pte.
 Corps 109th Bn. Coy

Rate 15 ⁰⁰/_{XX} **AUG 1 1916**

PAYMENTS

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



1. 10/10/73
2. 11/11/73

3. 12/12/73
4. 13/13/73

5. 14/14/73
6. 15/15/73

7. 16/16/73
8. 17/17/73

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-219.

Sheet No. 2.

Gas. Ross.

L. L. Job 310.-Req. 6374.

PAYMENTS.

Name of Soldier

Ross C. Y.

724 732

Pte. Coy

109th Bn

Month.	Year.	Cheque No.	Amt.	Remarks.
				AUG 1 1916
			15 ⁰⁰ / ₁₀₀	
April	1916			
May				
June				
July				
Aug. ✓		X 15140	15	
Sept.		P 20238	15 ¹⁵	
Oct.		P 25077	15	
Nov.		y 26957	15	
Dec.		y 32360	15	
Jan.	1917	B 41403	15	
Feb.		B 47109	15	
March		m 52248	15	15.6
April		M 67109	15	15.8
May		M 10975	15	
June		L 18920	15	15 @W
July		Y 25049	15	15
Aug.		D 32541	15	
Sept.		J 39878	15	15 lu J 39877 cano.
Oct.		J 39877	15	
		C 47938	15.	
Nov.		V 32414	15	
Dec.		K 59730	15	253.74P
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

OK

note

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

* Strike out whichever inapplicable

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: Ross Charles G.
EFFECTIVE DATE: 1-8-16		EFFECTIVE DATE: -		NUMBER: 724732
AMOUNT: 15-00		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				AUTHORITY
James Ross Argyle Ont. Father				DATE EFFECTIVE
				RANK OR APPOINTMENT
				Private

UNIT AND TRANSFERS			
ORIGINAL UNIT: 109 Bn.			
DATE ACCOUNT FIRST OPENED: 1-8-16			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P D	UNIT TRANSFERRED TO
			38 Bn.

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
24/9/15	152	Belg.	20/00				
24/9/15	157	Belg.	11/07				
24/9/15	2847	✓	£10				

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

PARTICULARS OF RENDERING NON-EFFECTIVE: **1/6/19 Disposal RR-1014 Brans to Brans. No. 3 10/19 R.P. Cr. 924**

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Mar 3	Bal fwd							15	10766	3	
Apr	P.P.	33		a.p.							
				AR. 30 5/4/18 38 Bn.	446						
				AR. 160 15/4/18	357			15	11762	3	
May	✓ P.P.	3410		C.A.P.	803			15			
				AR. 369, 4/5/18, 38 Bn.	446						
				" 558, 18/5, "	535			15	12692	3	
June	✓	3410		C.A.P.	981			15			
				" 635, 1/6, 38 Bn.	357						
				" 833, 15/6/18, "	357			15	13718	3	
July	✓	3410		C.A.P.	714			15			
				" 926, 1/7/18, "	446						
				" 951, 15/7/18, "	446						
				Rem. 34, 22/7/18, 38 Bn.	50			15	9796	3	
Aug	✓ P.P.	3410		C.A.P.	589			15			
				AR. 1037, 1/8/18, 38 Bn.	357						
				" 1177, 19/8/18, "	357			15	10992	3	
Sept.	✓	33		C.A.P.	734			15			
				" 1276, 9-9-18 38 Bn.	357						
				" 1365 16-9-18 "	357			15	12078	3	(Bal. agreed 2/12/18)
Oct.	✓	33		C.A.P.	714			15			
				" 1438, 6-10-18 12 C.S.B.	373						
				" 1432, 15/10/18 "	746			15	12869	3	
Nov	✓	33		C.A.P.	714			15			
				" 2332, 9/11 38 Bn.	373						
				" 2501 19/11 12 C.S.B.	1306						
				" 2600 1/12 "	373						
	Forward	33		Forward	2052			15			

(Bal. Forward)

NUMBER 724732

RANK

Pte

NAME ROSS

C. G.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Dec.	P. P. Forward	33 -		Prot forward	10 52			15	128 69	3	
		34 10		Cap				15			
Jan		34 10		AR. 2842. 112/12. 38 th	18 66			15	145 70	3	
		101 20						45			
Feb		30 80		✓ 1805. 1/1. ✓	39 18						
					3 73			15			
				u 2917. 14/19 u	18 66						
				✓ 3010. 17/1 ✓	3 73				135 39		
				✓ 3262. 4/2 ✓	9 33				126 06		
				✓ 3407. 15/2. ✓	3 73				122 33		
Mar		34 10						15	141 43		
				✓ C. 395 4/3. ✓	97 33						
				✓ 3639. 8/3. ✓	9 13						
				✓ 3569. 3/3. ✓	3 65				31 32		
		64 90			149 29			30			
Apr		33		Cap				15			
				✓ 30 14/19 ✓	3 40						
				136. 9. 4. 19 38 th Bn	3 49						
May		34 10		Cap				15			
				208. 15. 4. 19 ✓	3 49						
				452 26. 4. 19 ✓	3 49						
				2327. 2. 5. 19 Filing ecc	4 87				49 59		
		67 10			18 83			30	73 -		
				2357. 8/5/19 ecc	4 87						
				5154. 29/5/19 (end) 2433	73 -				23 41		

SBS Canada. 6/25/83
38th

CR
31.32
67.10
98.42
CR 72
98.42
J. Wood
10.5.19

1075 War Service Badge Class "A" No. 229622 PA 26-9

SHORT FORM.
PROCEEDINGS ON DISCHARGE. Occupational Group No. 1
(Demobilization.)



1. No. 724732
2. Rank. Pte
3. Name. ROSS Charles Yule
4. Unit. 38th Bn Inf.

5. Date of Discharge JUN 16 1919 Place Ottawa G

6. Reason for Discharge Demob
I-M-T CYPIC
SAILED EMBARKON 6/8-19
ARR'D HALIF X June 12 1919

7. Authority. R01420

8. Proposed Residence after Discharge P.O. Argyle - Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. ? 39

Chas Ross
Signature of Soldier.

10. CONFIRMATION.

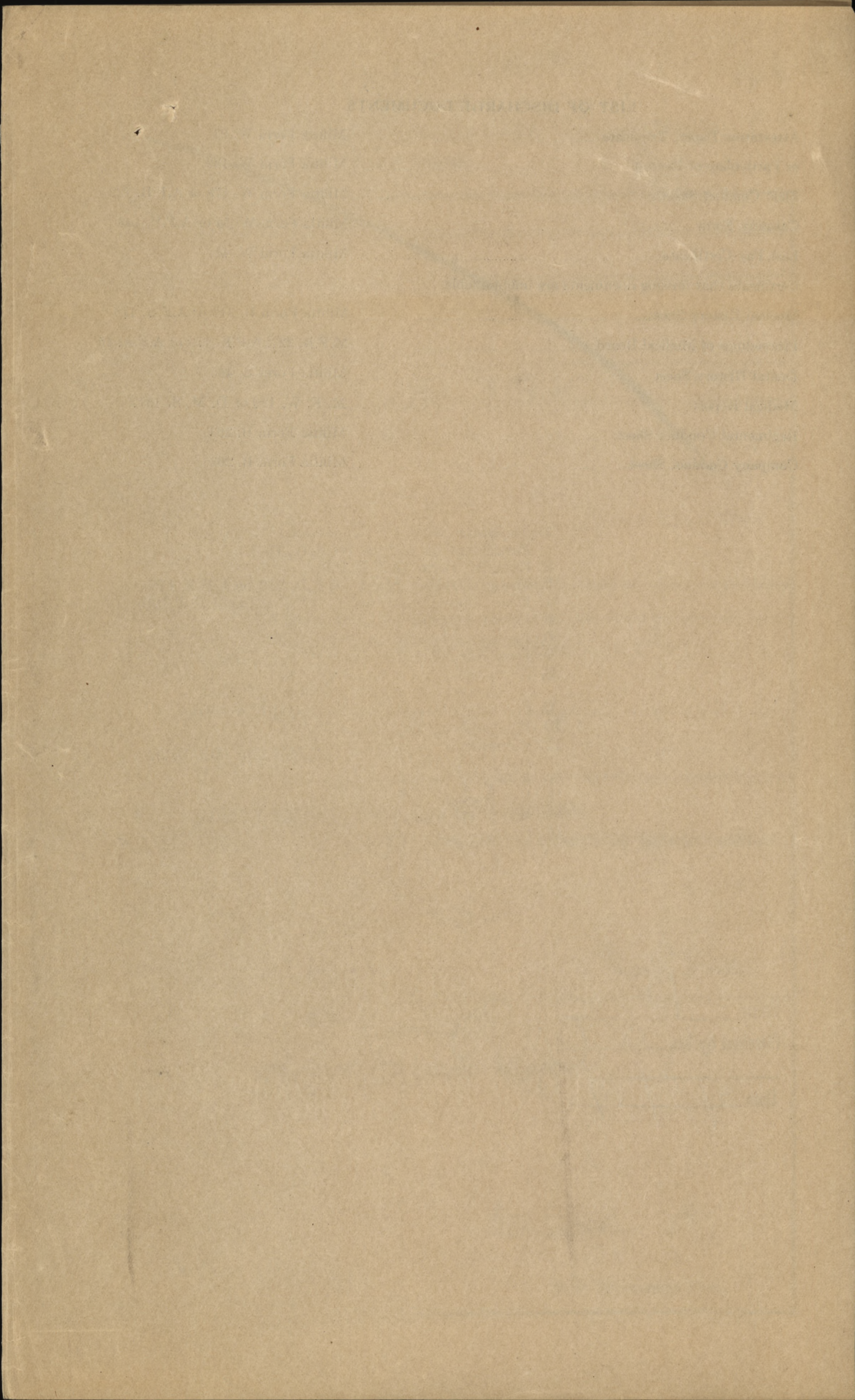
The discharge of the above named man is hereby confirmed.

Place.....

Date.....



J. Williams Lt. Colonel
for O. G. Dispersal Area Station G,
(O. C. Discharging Unit.)



LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.S).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S, 2).
12. Last Pay Certificate (P. 351).
13. Pay Book (A.B.C.).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Receipts.

Group..... B

Checked by No. 18 *[Signature]*

Date 3/5/19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
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ANOTHER ACCOUNT IN

Spec. Rem. Ledger
 Ledger
 Ledger

R

06744

PARTICULARS OF SEPARATION ALLOWANCE.....Ledger

PARTICULARS OF ASSIGNMENT

No. *724732*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *C. Y. Ross.*

Battalion *109th Btn "C." Co.*

Beneficiary

Relationship

Address

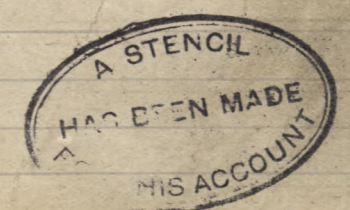
Name *Jas Ross.*
 Address *Argyle - Ont.*

Change of Address

1
2
3
4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					<i>015662-6-61</i>
<i>Dec 31</i>			<i>255</i>	<i>255</i>	
<i>Jan</i>	<i>964991</i>		<i>15</i>	<i>15</i>	
<i>Feb</i>	<i>73006</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>95199</i>		<i>15</i>	<i>15</i>	✓
<i>Apr</i>	<i>7955</i>		<i>15</i>	<i>15</i>	✓
<i>May</i>	<i>15697</i>	✓	<i>15</i>	<i>15</i>	✓
<i>June</i>	<i>26479</i>	✓	<i>15</i>	<i>15</i>	✓
<i>July</i>	<i>21084</i>	✓	<i>15</i>	<i>15</i>	✓
<i>Aug</i>	<i>40957</i>	✓	<i>15</i>	<i>15</i>	
<i>Sept</i>	<i>43229</i>	✓	<i>15</i>	<i>15</i>	
<i>Oct</i>	<i>55921</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>	<i>61294</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>65787</i>		<i>15</i>	<i>15</i>	
<i>Jan 19</i>	<i>76190</i>		<i>15</i>	<i>15</i>	
<i>Feb</i>	<i>77958</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>85151</i>		<i>15</i>	<i>15</i>	✓
<i>Apr</i>	<i>7185</i>		<i>15</i>	<i>15</i>	✓
<i>May</i>	<i>8007</i>		<i>15</i>	<i>15</i>	✓
<i>June</i>	<i>10427</i>		<i>15</i>	<i>15</i>	✓
			<i>525</i>	<i>525</i>	

A/c Closed 30-6-19
*Ret'd per. *Olempsee**
Date 12-6-19 M.F.W. 187 23-6-19
J.H. O'Reilly
Depty. L.P.M.R.O. 966549
23-6-19 J.H.O.



M. F. W. 128
 400M-6-17-1772-30-1141
 L. L. 22520-M. & D. 7998.

JUN 24 1919

