

ATTESTATION PAPER.

No. 725521

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

ORIGINAL

- 1. What is your name?..... Robert Eric Sharp
- 2. In what Town, Township or Parish, and in what Country were you born?..... Lindsay Ont.
- 3. What is the name of your next-of-kin?..... (Mother) Margaret Sharpe
- 4. What is the address of your next-of-kin?..... Fenelon Falls Ont. Can.
- 5. What is the date of your birth?..... 26th November 1894
- 6. What is your Trade or Calling?..... Tailor
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated?..... & inoculated Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... No  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the } Yes  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Robert Eric Sharp (Signature of Man.)  
 H. Bissanette (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Eric Sharp, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Robert Eric Sharp (Signature of Recruit)  
 Date November 15th 1915 H. Bissanette (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Eric Sharp, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Robert Eric Sharp (Signature of Recruit)  
 Date November 15th 1915 H. Bissanette (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 Fenelon Falls this 15th day of November 1915.

Wm McArthur (Signature of Justice)

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

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



# Description of Robert Eric Sharpe on Enlistment.

Apparent Age 21 years 10 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. 8 ins.

*Marks of two operations for hernia*

Chest measurement. (Girth when fully expanded) ..... 36 ins.  
 Range of expansion ..... 3 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Black

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

## 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 ..... November 15 1915

Place ..... Fendon Falls

*J. McCulloch* ..... Capt.  
*A. Boyd* ..... Medical Officer  
 109th Overseas Battalion, C. E. F.

\*Insert here "fit" or "unfit."

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

## CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert Eric Sharpe ..... 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. H.* ..... Lt. Col. (Signature of Officer)  
 C.O. 108th Overseas Battalion, C. E. F.

Date ..... JAN 12 1916 191



REGIMENTAL DOCUMENTS

km 2714119

NAME SHARPE, ROBERT ERIC

REGT. NO. 725521 UNIT 109 # Bn. H. Q. FILE NO.



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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

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FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

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MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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Misc.

mp49

Warrant

med case sheet

cas card

DEATH

Category

DISCHARGE

Category

Demob

DESERTION

30 - 30

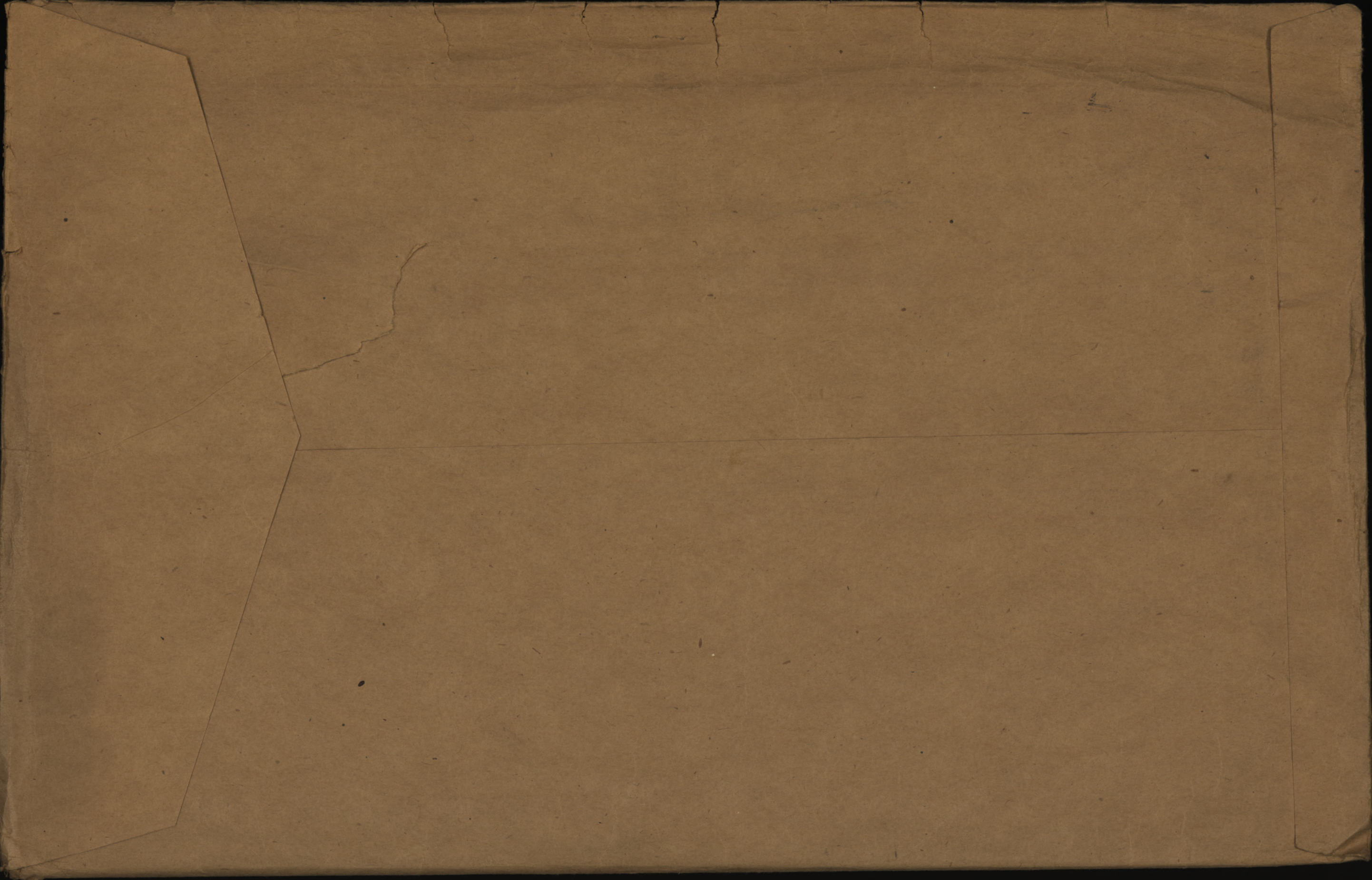
17 - 30

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2

13921







Emk.

Rd

~~B~~

Number 725521

Rank of Sgt.

Surname SHARPE

Christian Name Robert Eric

Units 124th Bn Can Inf Theatre of War France

Date of Service 9-3-17

Remarks

Latest Address Kingston Ont

Roll No 12 Page 10646



Port, ship, and date of arrival

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  
FEB 21 1922  
REGN. NO. 1173

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



Name **SHARPE Robert Rank Cpl**

Reg. No. **725521**

Unit **Eric 124th Canadian Pioneer Battalion**

Next of Kin **Canada**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
Jne 29	Reptd Base Adm to Hospital	Sick	A81	A81		
Jne 29	No 13 Can Fld Ambulance	Syno	Knee	A85		
Jly 7	No 11 Can Fld Ambulance	Do	A90	A90		
Jly 17	No 22 Cas Clg Station	Do	A94	A94		
Aug 13	D of C C R X Hsp	Taplow	Do	B138		
18-12	<i>Discharged</i>	<i>(2016)</i>	<i>do</i>	<i>B99</i>		

*[Handwritten signature]*







NAME

*Sharp. R. E.*

REG'TL No.

*725521.*

H. Q. FILE No. 649.

RANK AND CORPS

*Cpl. 124th. Can. Inf. Bn.*

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY



LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A. 81.	Rep. from Base. admn. to Hosp.	29-6-17.	Sick.
a 83-	#13 Can. G. Amb	29-6-17	Syno knee
A. 714.	#5. Gen. Pouen.	26-7-17.	" " <i>Latest Information</i>
A. 90.	#11. Can. Fld. Amb.	7-7-17.	" "
A. 94.	#22. Gas. Coly. Stat.	17-7-17.	" Lt. "
B. 138.	Duch. Comm. Can. + Laplow.	13-8-17.	" "
B. 138.	No 15 Can Gen Laplow Disch	18-12-17,	" "



Surname *Sharpe* Christian Name or Names *R. E.* Reg. No. *725521*  
Rank *cpl.* Unit *124th. Pion.* Co. *1st C. Co.* Troop Batty.  
Hospital Date of Admission

Transferred *13 Can Field Amb.* Hosp. *29.6.17*  
*5 Gen. Hosp.* Hosp. *26.7.17*  
*No 11 Can. Hd. Amb.* Hosp. *7.7.17*  
*22 Cas Clearing Station* Hosp. *17.7.17*

Diagnosis *Synod. Knee. R*

- (1) Later Diagnosis (if changed)
- (2)
- (3)

Additional Diagnosis: if more than one state present

DISPOSITION

*Disch. 18.12.17* Date

*A81*

*c.l. 23-7-17*

REMARKS

*R.F. Base Sick to Sharp.*  
*29-6-17*

*31.7.14 A85*

*3.8.17 a914*

*8.8.17 A90*

*13.8.17 a94.*

*-17-8-17 B138*

*27.12.17 B97-2*

A.M.D. 2 DEPT.

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



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. *Loz CER + Zuplow*

*13-8-17*

2.

3.

4.

5.

6.

7.



Hospital.

Ward J-2

No. of Bed 14

Date 13-8-17

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
725521	Cpl Sharpe	RE. 124 Caval Pioneers	left knee

Canadian Coy 72  
SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case)

Contusion lt knee  
on area front  
from #5 General Pouch  
Bones & Cartilage?  
please

4 Dia REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate 4804<sup>1.2</sup>

No lesion demonstrated

Signature of M.O. [Signature]

Date \_\_\_\_\_

Signature of Radiographer [Signature]

Date August 15/17



11-1-1

M. 12

10

10

10



LTR

Rank Act. / Corp Name SHARPE, Robert Eric Reg'l No. 725521  
 Unit 109th, Bn. If in perm. Corps, }  
 What Unit? } Married or Single Single.  
 Place and Date of Enlistment Fenelon Falls, 15th, Nov, 1915, Place of Birth Lindsay, Ontario.  
 Name and Address, Next-of-Kin Margaret Sharpe  
Fenelon Falls, Ontario, Canada. Relationship Mother.

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

N/E. R.B. No. 11002  
 File R.L.  
 Category CAN. 05

*Eng*

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		Arrived in England per H. M. T. 2810		31-7-16	
5-8-16	D.C. 109th	<u>App'd Prov. Sgt.</u>	<u>Doney</u>	5-8-16	<u>Pt. II D.O. 218 + D.O.</u>
21-11-16	"	<u>Reverts to Rank of Act. Corp</u> <i>to meet establishment</i>	<u>Witley</u>	2-11-16	<u>326 + 328</u>
8-12-16	"	<u>SOS on leave to 1244 Bn.</u>	"	8-12-16	<u>343</u>
11-12-16	D.C. 124th	<u>SOS on leave to 109th.</u>	"		<u>267</u>
9-3-17	124Bn	Emb for France	Witley	9*3*17	PtII DQ68
14-4-17	"	<u>Confirmed in rank of Corp.</u>	<u>Field</u>	9.3.17	<u>81</u>
23-7-17	"	<u>Rep'd from Base Adm'to Hospital</u>	"	29.6.17	<u>C.L. A81 Sick</u>
31-7-17	"	<u>Adm No 13 C.F.A.</u>	"	29.6.17	<u>A 85 Syno Knee</u>
2-8-17	4 Bn	<u>To No. 5 Genl Hosp.</u>	<u>Rouen</u>	26.7.17	<u>A 714</u>

*Miss  
 bar*

**A.F.B. 103 CHECKED**  
**20 MAR 1917**

*Ch  
 comm*



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.				
8.8.17	124 B.	To 11 C. F. Ambro (or 13 C. F. A)	Field	7.7.17	CLA90 Syno Knee
13.8.17	"	No 22 Cas. Cl. State	"	17.7.17	. A94 "
17.8.17	"	" Duction from Can. Red X Ho.	Japlow	13.8.17	. 13138 <i>97</i>
21.8.17	"	Invt. (Tech) posted to 1C. OR D. Capt	Field	11.8.17	M 20.124 4165 1CORD 2/21/47
24.12.17	1COR	tech 15 Can. En. Hosp'	Japlow	18.12.17	1397 3/
23.12.17	1COR	Attached 1COR	Edend	18.12.17	279 (288. <sup>22/12/17</sup> 1CORD
15.4.18	1COR	beas att. S.O.S. to b. & RD. Cpl	Withey	9.3.18	P 40103. C.E.R.D. <sup>23.5.18</sup> 122
30.8.18	C.E.R.D.	ceas att. 4 S.O.S. to 1COR	Seaport	26.8.18	--- 233 (1660 PD 235 <sup>9/26</sup> 8)
26.8.18	1COR	To be actg. Sergt. with pay	Cliffe	26.8.18	PI 235
5.9.18	1COR	Reverts from grade Cpl	"	5.9.18	PI 245
5.9.18	1COR	S.O.S. to C.E.R.D. + on com. Cpl from that Dep.	"	5.9.18	PI 245
6.9.18	"	ceas att. pro. to C.E.R.D.	"	6.9.18	--- 246
25.9.18	C.S.M.E.	Att. from <del>1COR</del> C.E.R.D. and CSME DO	"	15.9.18	--- 102
30.1.19	"	S.O.S. to 3 <sup>rd</sup> C.E.R.B. Cpl.	"	30.1.19	. 25 3 C.E.R.B. by 31.1.19
9.2.19	1st C.E.R.A.	T.O.S. from 3rd C.E.R.B.	"	7.2.19	" 3343 C.E.R.B. 32, 7.2.19
15.3.19	MLD 3	T.O.S. from 1 <sup>st</sup> C.E.R.A.	"	12.3.19	. 64 9 59 / 12 79 1 <sup>st</sup> C.E.R.B
26.3.19	MLD 3	S.O.S. to vac	33 11	23.3.19.	
			Phyl	23.3.19	" 73



**Casualty Form—Active Service.**

*Sheet No 2*  
 Rank Cpl

Regiment or Corps 124th Cav Inf Reg

Surname Sheep Christian Name Robert Louis

Age on Enlistment ..... years ..... months.

Enlisted (a) Class "A" No. .... Terms of Service (a) ..... Service reckons from (a) .....

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....

Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B, 213, Army Form A, 36, or other official documents
Date	From whom received				
		Embarked .....			
		Disembarked .....			
<u>5-9-18</u>	<u>1st C.C.D.</u>	<u>Reverts to pen grade of Cpl on ceasing to be specially employed 5-9-18</u>	<u>Shoncliff</u>	<u>5-9-18 D.O.P. 11.245.</u>	
<u>5-9-18</u>	<u>12th C.C.D.</u>	<u>S.O.S. of Pen Grade of the Dept., when "On Command" from C.C.P.D. 5-9-18</u>	<u>"</u>	<u>" D.O.P. 11.245.</u>	
<u>6-9-18</u>		<u>Admitted to 1st C.C.D. from <u>Fallop</u> D.O.P. No. <u>279</u> 7/27-12-17</u>		<u>D.O.P. 246 876-9-18</u>	
		<u>Injured to be attended on proceeding to <u>Defence</u> D.O.P. 246 876-9-18</u>			

(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) Signaller, Shoeing-Smith, &c.

[P.T.O.]



Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
3-5-18	C. E. R. D.	T.O.S. on Com 1 CCD Shorncliffe	Seaford	9-3-18	Part II to 122
30-8-18	C. E. R. D.	Leaves on Com 1 CCD. S.O.S. posted to 1. C. C. D. perm Cadet	Seaford	26-8-18	Part II Do. 233
4-2-19	b. S. M. C.	berce to be attached to T.O.S. from b. S. R. D.	Seaford	26-1-19	Part II D.O. # 23
4-2-19	b. S. M. C.	S.O.S. on transfer to 3rd b. S. R. D.	Seaford	30-1-19	Part II D.O. # 25
7/2/19	b. S. E. R. D.	S.O.S. to 1st b. S. E. R. D.	Seaford	7/2/19	Part II D.O. # 22
8/2/19	1. b. S. R. D.	T.O.S. from b. S. R. D.	Seaford	7/2/19	Part II to 32

*[Signature]*  
Lieut  
of C. C. E. R. D.

A. S. G. M. 4 Co. C. Comd.

*[Signature]*  
Lieut b. S.



# SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103-I.  
Part I.

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [ <i>vide</i> A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	Initials and Rank of an Officer.

(Authority) (date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life ( <i>vide</i> Army Order 93 of 1917))
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (date)
				Second Occupation Card despatched on (date)

(17) Next of Kin		
(18) Demobilizer (f)	(Place)	(Signature of Posting Officer)
(19) Pivotal-man (f)	(Date)	
(20) Qualifications (g)	or (21) Corps trade and rate	
(22) Extended {		(23) Re-engaged }
(24) Miscellaneous entries:—		

**NOTES.**—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P. Co (3400)







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

M. F. W. 54. (A. F. B. 103.)

250M.—1-16.  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 100th BATTALION CANADIAN INFANTRY.

Regimental No. 425521 Rank Private Name Sharpe Robert Eric

Enlisted (a) 15/11/15 Terms of Service (a) D. of W. Service reckons from (a) 25/11/15-15/11/15

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) Tailor.

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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Embarked Canada Halifax 24.7.16  
Disembarked England Liverpool 31.7.16

Appointed A/Sergt. Witley 5.8.16

5/8/16  
8-12-16 OC 109<sup>th</sup> transferred to 124<sup>th</sup> Witley 8-12-16 D. O. Pt II #43

21-11-16 OC 109 Reverts to A/Corpl. Witley 16-10-16 D O Pt II 326+330

*Adjutant*  
CAPTAIN,  
ADJUTANT,  
100th BATTALION CAN. INFANTRY.

CERTIFIED CORRECT.  
27 MAR 1917  
CAN. RECORDS, LONDON.

9-12-16 124th Bn. Taken on strength of 124th Bn., C.E.F. Witley Camp 8-12-16

Part III Orders 265  
MAJOR ADJUTANT,

9-3-17 124th Bn. Proceeded for Overseas Service. Witley Camp 9-3-17

Part II Orders 124th BATTALION C.E.F. No. 69  
Lieut. Asst. Adj. 124th. C.C.B.C. (Pars)

(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, Slogging 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.				
-11-3-17	M.L.O.	Disembarked	Boulogne	11-3-17	N.R.
14/4/17	O.C. 124 Bn.	Confirmed in Rank of Lpl. Field	Field	9/3/17	D.O. Pt. 11 No. 81 d. 14/4/17
7.7.17	do	Sick (Synovitis) exar.	do	29.6.17	B. 213 D.O. <sup>29</sup> <del>28</del> d. <sup>17</sup> <del>14</del> 7.17
30.6.17	11 G.F.A.	Synovitis L. Knee adm.	11 G.F.A.	29.6.17	} A.36 E.4855 D.O. 30 d. 24.7.17
14.7.17	do.	Synovitis L. Knee <sup>Perm.</sup> adm.	13 G.F.A.	29.6.17	
21.7.17	22 G.C.S.	do. do. adm.	11 G.F.A.	7.7.17	A.36 E.5151 D.O. 32 d. 3.8.17
11.8.17	O.C. A.T. "Grantully Co."	Synovitis Knee Lt. To England Posted to 1st. Cen. Out. Regt. Depot, Shorncliffe	22 G.C.R.	17.7.17	A.36 E.5251 <del>do.</del> 33 d. 7.8.17
				11.8.17	W.3083/3710 D.O. Pt. 11 No. 124 d. 21.8.17
					Chas. B. Chapwell Lieut. for Lt-Col. A.O.G. Gen. Rec. G.H.Q. 3rd. Sct.
21-8-17	ICORD	Taken on strength	Wand'g	11.8.17	165 <del>164</del>
28-8-18	1766 D	T.O.S. 1st Lt. (Perm badge) from G.H.Q.	Shorncliffe	26-8-18	DO. 235 d/26-8-18
28-8-18	-	Go on as Sgt with pay & allowances while so employed on (Perm badge) of this depot to complete establishment.	-	26-8-18	DO. 235 d/26-8-18
					Wm. McDonald Officer in Charge for Office concerned 660



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

Canadian Printing and Stationery Services, London

## DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) SHARPE R.E.  
REGIMENT 1st C.F.R.B. RANK CPW No. 7233-71.  
Date of Examination in England 3-3-19. Date of Examination in France \_\_\_\_\_

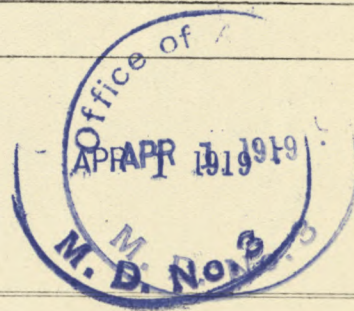
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



*Prof.*

### PRESENT DENTAL REQUIREMENTS

1. FILLINGS 19
2. EXTRACTIONS NO
3. CROWNS NO
4. DENTURES NO
  - (a) Full Upper NO
  - (b) Part Upper NO
  - (c) Full Lower NO
  - (d) Part Lower NO



HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

- (a) In Canada NO
- (b) In England NO
- (c) In France NO

Signature of Dental Officer [Signature] **Capt.**  
C. A. D. C.



3-8-19  
M. C. B. (P.N.)  
SHARPE R. E.  
7537A



NO  
NO  
NO  
NO  
NO  
NO  
NO

NO  
NO  
NO



# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

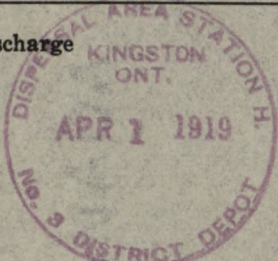
War Service Badge Class *A*

91689

THIS IS TO CERTIFY that No. 72552 (Rank) Corporal  
 Name (in full) Sharpe, Robert Eric enlisted in  
 the 109<sup>th</sup> Can Infantry Bn.  
 CANADIAN EXPEDITIONARY FORCE at Genou Falls on the 15<sup>th</sup>  
 day of November 1915  
 HE served in 124<sup>th</sup> Can Pioneers 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 <u>24.</u>	Marks or Scars _____
Height <u>5' 8"</u>	<u>Scar on abdomen &amp; left knee.</u>
Complexion <u>Fair</u>	_____
Eyes <u>Blue</u>	_____
Hair <u>Dark</u>	_____
<u>R. E. Sharpe</u> Signature of Soldier	<u>R. Chappel</u> Issuing Officer
Date of Discharge _____	Rank _____
	Date <u>March 13<sup>th</sup></u> 19 <u>19</u>

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



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. \_\_\_\_\_ (Rank) \_\_\_\_\_

Name (in full) \_\_\_\_\_ enlisted in \_\_\_\_\_

the \_\_\_\_\_

CANADIAN EXPEDITIONARY FORCE at \_\_\_\_\_ on the \_\_\_\_\_

day of \_\_\_\_\_ 19\_\_\_\_

HE served in \_\_\_\_\_

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

Medical History \_\_\_\_\_

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

Age _____	Height _____
Complexion _____	Eyes _____
Hair _____	Signature of Soldier _____

Date of Discharge \_\_\_\_\_

Rank \_\_\_\_\_

Date \_\_\_\_\_

Ranking Officer \_\_\_\_\_

Marks or Stars \_\_\_\_\_

N.B.—As no duplicate of this certificate will be issued, any person finding same is requested to forward it in an unopened envelope to the Secretary, MILITARY COUNCIL, Ottawa, Canada.

M.E.S. 204  
 Form D.T. 2000-11-18  
 R.C. 172-28-202



# 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. 425521 Rank Cpl Surname SHARPE  
(Given name in full)  
ROBERT E.  
 Unit or Corps 1st C.E.R.B. Birthplace LINDSAY, ONT.

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

**1. GENERAL DESCRIPTION:**

Physique Good Weight 150 lbs. Height 5 ft. 8 in. Colour of Eyes Blue  
 Nutrition Good  
 Pulse 74  
 Condition of arteries Normal  
 Vision Rt. 6/6 Left 6/6  
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

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

Rt + left hematomy before enlistment  
Scar - left knee Nov. 1917 - operation for removal of cartilage

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 No  
 Disturbance of mentality No Muscular System No Digestive System No  
 Osseous and Joint System Yes 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.**

Double Hematomy before enlistment  
Synovitis left knee - to hospital  
June 1917 - operation Nov. 1917 for  
removal of cartilage - no  
disability at present



# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at Singapore (Overseas)

Date 3-3-19

Signed J. W. MacNeil Esq. 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 H. E. Sharpe

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

## THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

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

[OVER]



725521

# MEDICAL HISTORY SHEET.

ORIGINAL

Surname Sharp (Cpl) Christian Name Robert Eric

4115

Examined { on 15<sup>th</sup> day of November 1915  
at Lindsay  
Birthplace { City or Town Lindsay  
County Ont

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

Apparent age 21 years  
Trade or occupation Sailor  
Height 5 Feet 8 Inches.  
Weight 131 Lbs.  
Chest measurement { Minimum 33 inches.  
Maximum expansion 36 inches.  
Physical development Good  
Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		16 AUG 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left One  
Number One  
When Vaccinated last November 15 1915

Date	Result	VACCINATIONS,
15-11-15	Nil	J. McCulloch M.O.
29-3-16	Good	J. McCulloch M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease Marks of two operations for hernia  
(b) Slight defects but not sufficient to cause rejection None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
25-5-16	Good	J. McCulloch M.O.
4-6-16		J. McCulloch M.O.
12-6-16		J. McCulloch M.O.
22-9-16		Not done

Enlisted on 15<sup>th</sup> day of November 1915 at Fenelon Falls

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>93<sup>rd</sup> Battalion C.E.F.</u>	<u>725521</u>		<u>15-11-15</u>
Transferred to.....	<u>124th OVERSEAS BATTALION C.E.F.</u>			
	<u>P.O.S.</u>			

9 MAR 1917

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>1<sup>st</sup> C.C.P.</u>	<u>18-7-18</u>	<u>Syphilitic Rashes</u>	<u>A</u>

CANADIAN

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.



Surname

*Sharp*

Christian Name

*Robert Eric*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
DUCHESS OF CONNAUGHT CANADIAN RED CROSS HOSPITAL. Taplow, Bucks		12	8	14	18	12	14	Synovitis L. knee	129	Operation: J.B. removed. Good result, slight disability till 10 Sept 18. 14.57	<i>W. Brownell Capt in Charge</i>



OTTAWA

*Sept 19/21*

From;

The Adjutant-General,  
Canadian Militia.

To;

*72 5521 P.C. Sharp  
G.P.O. Genelon Falls  
Ont*

Sir:-

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

*H. Paugman*

for Colonel,  
Director of Records,  
for Adjutant-General.

D-1  
MBM







CASUALTY FORM. ACTIVE SERVICE. A.F.B. 103.

NUMBER 725321 RANK hpl NAME Sharp, R.E.

12-3-19 T.C.S. WING 3.. KINMLI PARK. Part 2 D.O. 64 1919.  
18-3-19

23-3-19 S.O.S. On transfer to C.E.F. On proceeding to  
CANADA. Part 2 D.C. 73, 25-3-19

← I.M.T.S. EMPRESS OF BRITAIN.  
LMARKED 23-3-19

*A. Stewart*  
..... Lieut.

Cfr. i/c Records, M.D. No.3.

23/3/19 I. O. S. 300 Discharged. 1-4-19 Kingston. Cont Pt. 2. Order. 14097

*A. J. Money*  
..... Major  
O. C. Dispersal Area Station H.







**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 **725821** .....

(3) Full Name of Soldier..... **Robert Eric Sharpe** .....

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

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

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

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

.....

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

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

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

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

.....

.....

.....

.....

.....



(9) Is your Father alive?.....**Yes**.....

If so, state name and address.....**Samuel H.P. Sharpe, Fenelon Falls, Ontario  
Canada**.....

(10) Is your Mother alive?.....**Yes**.....

If so, state name and address.....**Margaret Sharpe, Fenelon Falls, 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.

.....**Yes**.....

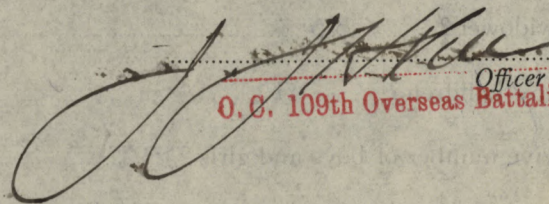
(15) Are you insured?.....**Yes**.....

If so, in what Company?.....**Canadian Order of Oddfellows**.....

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

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

Date.....**4th July 1916.**.....

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



MEDICAL CASE SHEET.\* 3.

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
542	725521.	Cpl.	Sharpe.	Robert Eric
Year	Unit.	Age.	Service.	
1917	124 Canadian Pioneers	22.	1 yr 8 months	

DUCHESS OF CONNAUGHT  
Station  
CANADIAN RED CROSS HOSPITAL  
and Date.  
Taplow, Bucks.

Disease Synovitis left knee joint  
Balantitis - Phlegmon

12-8-17. While on duty in front line trenches, patient twisted knee while pulling sandbags. Admitted 28-6-17 to #11th Can. 7 ant. Thence 17-7-17 to #22. C.C.S. Had one week in bed with Scott's dressing. Internal semilunar cartilage affected? Thence to #5 General Hospital 26-7-17. Some fluid present.

Admitted Taplow. 12-8-17. Knee still troublesome with slight swelling. Patient also has troublesome balantitis.

16-8-17. Generally good. Knee jaws. *GBW.*  
13-8-17. May no lesion demonstrated. *GBW.*

23-8-17. Taken to O.R. Etherized. Flaps removed. Anesthetized. Returned in good condition.

7-9-17. Considerable edema of remaining flaps and tissues. H.B. Foment. *GBW.*

13-9-17. Condition nearly normal. *GBW.*

20-9-17. Taken to O.R. Ether given. Incision made over internal aspect of knee joint. Joint cavity exposed and small piece of cartilage free in joint the size of a bean removed. Internal cartilage left in situ. Wound closed. Returned in good condition.

\*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.

27.9.17

Doing well. Itches removed. Slight  
discharge. Swelling less. G.B.W.

4-10-17

Considerable sanious discharge from lower  
end of wound. Swelling less. Doing well. G.B.W.

12-10-17

Wound healed. Nearly normal G.B.W.

19-10-17

Condition good. G.B.W.

25-10-17

Nearly fit. Slight stiffness still G.B.W.

1-11-17

Practically healed. Generally good. G.B.W.

8-11-17

Normal condition. G.B.W.

15-11-17

Massage. Slight swelling still " G.B.W.

22-11-17

Generally good. Regularly employed G.B.W.

29-11-17

Do G.B.W.

6-12-17

Do G.B.W.

13-12-17

Slight amount of fluid still in joint G.B.W.

18/12/17

To Reg. Dept. furlough. D.I.  
K. B. well - capt came



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

To Whom Margaret Sharpe  
 Address Fenelon Falls  
Ont.

By Whom Assigned Robt. E. Sharpe

Regtl. No. 725521

Rank Plt.

Corps 109 Bn Coy

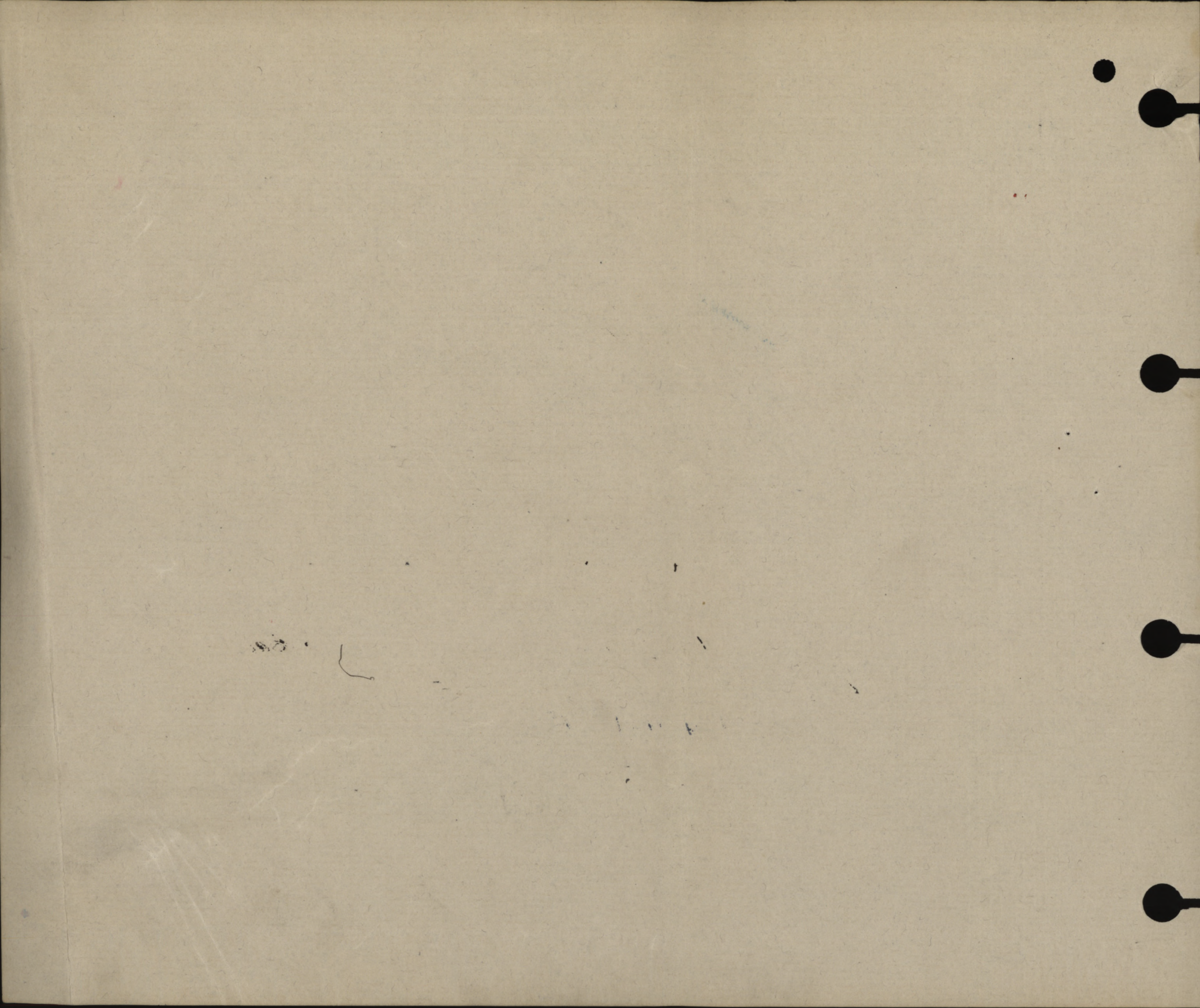
Rate \$ 13.00 **AUG 1 1916**

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				









MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12a.  
 50m.-4-16.  
 1772-30-819.

Sheet No. 2.

L. L. Job 310.-Reg. 6574.

*Margaret Sharpe*

PAYMENTS.

Name of Soldier

*Robt. E. Sharpe*

*725521 (Pte) 109 Bln*  
*\$15.00*      Remarks. **AUG 1 1916**

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<i>X15291</i>	<i>15</i>	
Sept.		<i>A18910</i>	<i>15</i>	
Oct.		<i>a 23570</i>	<i>15</i>	
Nov.		<i>D28627</i>	<i>15</i>	
Dec.		<i>Z 32453</i>	<i>15</i>	
Jan.	1917	<i>041341</i>	<i>15</i>	
Feb.		<i>047377</i>	<i>15</i>	
March		<i>B 53208</i>	<i>15</i>	
April		<i>Z 4620</i>	<i>15</i>	<i>156</i>
May		<i>Z. 11804</i>	<i>15</i>	
June		<i>y 18111</i>	<i>15</i>	<i>154 y18111 Remailed 7-7-17</i>
July		<i>T 25137</i>	<i>15</i>	<i>c 25137 Canc.</i>
Aug.		<i>Q 32226</i>	<i>15</i>	
Sept.		<i>K 91263</i>	<i>15</i>	
Oct.		<i>L 45421</i>	<i>15</i>	
Nov.		<i>T 52842</i>	<i>15</i>	
Dec.		<i>J 62907</i>	<i>15</i>	
Jan.	1918		<i>255</i>	
Feb.				
March				
April				
May				
June				
July				

*J*

*MAG*



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.				



1-3-16  
MILITIA AND DEFENCE341  
M. F. W. 11.  
50m.—6-16.  
H. Q. 177-39-813.

## SEPARATION ALLOWANCE

Name *Margret Sharpe* Name of Soldier *Sharpe, Robert. E.*  
 Address *Lenelon Falls* Regtl. No. *725521*  
*Out* Rank *Pte*  
 Corps *109<sup>th</sup> Batt*  
 Relation to Soldier }  
 wife, child or mother } *Dependant Mother* }  
 To what Corps belonging }  
 when called out }

## PAYMENTS

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

ACCOUNT CLOSED  
 DATE..... PER.....  
 W-



016  
/ 0  
22



1-8-16

MILITIA AND DEFENCE

M. F. W. 11a.  
50m.-6-16.  
1772-39-818.

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

*Margret Sharpe*

*Mother*  
PAYMENTS.

Name of Soldier

*Sharpe, Robert E.*

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>A 21393</i>	<i>160 -</i>	
Nov.		<i>J 22726</i>	<i>20</i>	
Dec.				
Jan.	1917			<i>Issue no further cheques - not eligible for S/a. See Correspondence - acct. closed - J. Pratt.</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

**ACCOUNT CLOSED**  
DATE..... PER *W*



MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 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.				











\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE: 1/8/16.		EFFECTIVE DATE: -	
AMOUNT: \$15.		AMOUNT: -	
NAME: SHARPE, Robert Eric.		NUMBER: 725521.	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	PARTICULARS OF RANK OR APPOINTMENT	
	AUTHORITY	DATE EFFECTIVE
Sharpe, Margaret. Fenslow Falls, Ont. (mother).	Rank conf. 9/3/17. D.O. 330. 1.8.31. 1/1/17	2/1/16.
	D.O. 235 2/8/19 1660.	2/8/18
	D.O. 245 5/9/18. 1660.	5/9/18

UNIT AND TRANSFERS

ORIGINAL UNIT: - 109<sup>th</sup> Bn.

DATE ACCOUNT FIRST OPENED: - 1/8/16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SFD	UNIT TRANSFERRED TO
122	3/5/18	1/5/18	1 <sup>st</sup> CORO.
		2/5/18	G.E.R.D.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
12/2	3817	166 R.B.	973				116.11
24/2	4071	"	973				3893
3/3	4327	"	1947			L.P. Co. br. Balances	7718
			3893				

PARTICULARS OF RENDERS NON-EFFECTIVE

MONTH 1918.	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar. 31	Balance Forward.								8469	41	
April	6 Pay.	36		ban. ad.				15			
				AR. 261. 12/1/18. 1 <sup>st</sup> CCD	973						
				" 749. 26/1/18.	1460			15	8136		
					2433						
May	6 Pts Pay.	3720		6 A.P.				15			
				AR. 1097-1 CCD. 7.5.18	3407				6949		
					3407			15			
June	6 Pts Pay.	36		AR. 1464-1 CCD 28/5/18	973						
				AR. 184 " 4.6.18	24						
				" 2088 " 12/6/18	1460						
				6 A.P.				15			
				AR. 440-1 CCD. 25/6/18	12						
				" 2278 " 25/6/18	973			15	5607		
					3442						
July	6 Pts Pay.	3720		6 A.P.				15			
				AR. 1689 1660. 12/7/18	973						
				" 2954 " 26.7.18	1947						
				" 2963 " 26.7.18	1729			15	3678	41	
					4144						
Aug	6 Pts Pay	3720		6 A.P.				15			
	Dist pay of Sgt + Mpl 24/8 to 31/8 1640 @ 30	180		AR. 3450 1660 27/8	985				5093	41	
					985			15			
Sept	6 Pts Pay	45		6 A.P.				15			
				AR. 3524 1660 5/9	973						
				Overcredit of 1/9 from 5/9 to 30/9 2640 @ 30				780			
				AR. 1731 1660 R.R. 25/9	487				5853		
				Forward	1260			780			



NUMBER 725521

RANK

Lieut

NAME

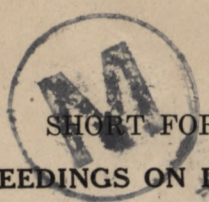
SHARPE R.E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sept	Bal Fwd								5853	41-	
Oct	Oppls Pay	3720		bal				15-	8073		
				1950 1st R.B. 24 15/10	1460						
				2168 do 41 29/10	487				6126		
		3720			1947			15			
	Oppls Pay Nov Dec Jan	11040		bal				45-	17166		
				2412 1st R.B. 13/11	973						
				2786 " 26/11	973						
				3052 " 17/12	1947				8773		
		11040			3893			45-			
				3229 " 9/1	973						
				ap 3402 " 25/12	487				7313		
Feb	Oppls Pay	3360		bal				15-			
Mar		3720		"				15-			
	Int on Depts to 31/3/19	218							11611	41-	
				3817 ✓ 13/2	973						
				4071 " 24/2	973						
				4327 " 3/3	1947						
				3533 Klank End. 20/3	973				6745		
		7298			6326			30			

Int on Depts to 31/3/19 (ailing list) 33. U.E. R.B.



H  
11



SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

8.7.17. M. D. 8

War Service Badge Class. *A*  
No. *91689* Issued *C.H.*

1. No. *725521.*

2. Rank. *CPL*

3. Name. *SHARPE Robert Eric.*

4. Unit. *1st C.E.R.B. 109 B Bn.*

5. Date of Discharge *1-4-19* Place *Kingston*

6. Reason for Discharge *Demob. - mother.*

War Service Badge Class "A" No. *91689*

*A 3.*

7. Authority. *R.O. 1420*

8. Proposed Residence after Discharge. *Kingston 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. ? *B 39*

*H.M.T.S. MPRS D BRITAIN.*

*LIMITED 23-3-19*

*R.E. Sharpe*  
Signature of Soldier.

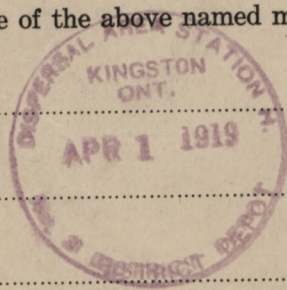
10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place *Kingston Ont.*

Date *APR 1 1919*

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





PROCEEDINGS ON DISCHARGE  
(Continued)

1	Name	
2	Rank	
3	Company	
4	Unit	
5	State of Discharge	
6	Reason for Discharge	
7	Authority	
8	Proposed Conditions after Discharge	

CERTIFICATE TO BE SIGNED BY SOLDIER

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

Signature of Soldier  
 M. L. W. J.  
 M. L. W. J.  
 M. L. W. J.

CONFIRMATION

The discharge of the above named man is hereby confirmed.

Date  
 Place

Signature  
 (O. C. Discharging Unit)



LIST OF DISCHARGE DOCUMENTS

.....	Activation Paper, Typing	.....	Medical Form W. 21
.....	of Particulars of Record	.....	Medical Form W. 153
.....	Final Contact Sheet	.....	Medical Form W. 173 or A.F.M. 121
.....	Casualty Form	.....	Medical Form W. 153 or A.F.M. 121
.....	Last Pay Certificate	.....	Medical Form W. 44
.....	Certificate that missing documents are not available	.....	.....
.....	Medical History Sheet	.....	Medical Form B. 813 or A.F.M. 113
.....	Proceedings of Medical Board	.....	Medical Form A.F.M. 113 or A.F.M. 113
.....	Dental History Sheet	.....	Medical Form W. 153
.....	Medical Report	.....	Medical Form W. 153 or A.F.M. 113
.....	Regimental Contact Sheet	.....	Medical Form B. 202
.....	Company Contact Sheet	.....	Medical Form B. 202
.....	1. Typing Activation Paper, M.F.W. 287, or	.....	.....
.....	Particulars of Record, W. 153	.....	.....
.....	2. Casualty Form, F.F. 102	.....	.....
.....	3. Medical History Sheet, M.F.W. 813 or A.F.M. 113	.....	.....
.....	4. Proceedings of Medical Board, M.F.W. 113	.....	.....
.....	5. Last Pay Certificate, W. 44	.....	.....
.....	6. Certificate that missing documents are not available	.....	.....
.....	7. Medical History Sheet	.....	.....
.....	8. Dental History Sheet	.....	.....
.....	9. Medical Report	.....	.....
.....	10. Regimental Contact Sheet	.....	.....
.....	11. Company Contact Sheet	.....	.....
.....	12. Last Pay Certificate, W. 44	.....	.....
.....	13. Certificate that missing documents are not available	.....	.....
.....	14. Medical History Sheet, M.F.W. 813	.....	.....
.....	15. Dental History Sheet	.....	.....
.....	16. Medical Report	.....	.....
.....	17. Proceedings of Medical Board	.....	.....
.....	18. Casualty Form	.....	.....
.....	19. Activation Paper	.....	.....

Group .....  
 Checked by .....  
 Date .....



**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 (A.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 (D.S).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group.....     a      
 Checked by No.     21      
                       S.S.W.      
 Date.....     20.3.19



CLINICAL CHART.

(To be attached to Case Sheet.)

Corps *24 Gen. Placed*

No. *7255-21*

Rank and Name *Capt. Sharp, Robert Eric*

Age *22*

Military Hospital *Logan*

Service *1 yrs 8 mos*

Disease *Synovitis Rth. Knee*

Date of admission *12/8/17*

Date of discharge *1/12/14*

Result \_\_\_\_\_

Dates of Observation	12		13		23		24		18		19		20		21		22		23		24		25		26		27		
	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
Days of Disease	12		13		23		24		18		19		20		21		22		23		24		25		26		27		
Temperature, Fahrenheit	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	
107°																													
106°																													
105°																													
104°																													
103°																													
102°																													
101°																													
100°																													
99°																													
98°																													
97°																													
Pulse per Minute	102	70	76	80	68	52	60	58	64	60	70	72	96	92	80	104	96	84	88	88	84	76	92	88	76	92	88	80	80
Respirations per Minute	22	18	18	20	20	18	18	20	20	20	18	20	20	20	20	20	18	20	20	20	20	20	20	20	20	20	20	20	
Movements per 24 Hours																													

*Aug*

*4 1/2 grains 1/4 - Atropine 9/4/18*

*1/2 grain 1/4 - Atropine 9/4/18*

*1/2 grain 1/4 - Atropine 9/4/18*

*1/2 grain 1/4 - Atropine 9/4/18*

Signature *Shrewell*

In charge of case.



**CLINICAL CHART.**  
(To be attached to Case Sheet.)

Army Form B. 181.

Corps \_\_\_\_\_

Military Hospital \_\_\_\_\_

No. \_\_\_\_\_ Rank and Name \_\_\_\_\_ Age \_\_\_\_\_ Service \_\_\_\_\_

Disease \_\_\_\_\_ Date of admission \_\_\_\_\_ Date of discharge \_\_\_\_\_ Result \_\_\_\_\_

Dates of Observation																												
	Days of Disease																											
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M. A.M.P.M.																											
107°																												
106°																												
105°																												
104°																												
103°																												
102°																												
101°																												
100°																												
99°																												
98°																												
97°																												
Pulse per Minute																												
Respirations per Minute																												
Motions per 24 Hours																												

Signature \_\_\_\_\_ In charge of case \_\_\_\_\_



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

03532

*Aug. 1/16*

OVERSEAS CONTINGENTS

# S

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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*821359  
B.*

### PARTICULARS OF SEPARATION ALLOWANCE

No. *725521*  
 Rank *Pte* Promoted Reverted Discharge  
 Soldier's Name *Robt. C. Sharpe*  
 Battalion *109<sup>th</sup> Bn. C. Coy.*  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

Name *Margaret Sharpe*  
 Address *Fedelon Falls Ont.*  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					<i>0/6558-R-2</i>
<i>Dec 31</i>			<i>255</i>	<i>255</i>	
<i>Jan/18</i>	<i>P 71257</i>		<i>15</i>	<i>15</i>	
<i>Feb.</i>	<i>J 72764</i>		<i>15</i>	<i>15</i>	
<i>mar.</i>	<i>S 94065</i>		<i>15</i>	<i>15</i>	
<i>april</i>	<del><i>72767</i></del>		<del><i>15</i></del>	<del><i>15</i></del>	
<i>april</i>	<i>S 5410</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>V. 20868</i>		<i>15</i>	<i>15</i>	
<i>June</i>	<i>U. 26716</i>		<i>15</i>	<i>15</i>	
<i>July</i>	<i>E. 26155</i>		<i>15</i>	<i>15</i>	
<i>Aug</i>	<i>U. 38782</i>		<i>15</i>	<i>15</i>	
<i>Sept.</i>	<i>X. 418752</i>		<i>15</i>	<i>15</i>	
<i>Oct</i>	<i>L 53253</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>	<i>Y 52270</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>Q 62671</i>		<i>15</i>	<i>15</i>	
<i>Jan</i>	<i>Y 73992</i>		<i>15</i>	<i>15</i>	
<i>Feb</i>	<i>Z 76844</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>Q 89536</i>		<i>15</i>	<i>15</i>	
			<i>480</i>	<i>480</i>	

*77667 can. per M.O. C. 19-4-18.*  
*20-4-18 adj. C.O. L.P. 3889 rend'd 15-4-18 C.*  
 A/c Closed *31-3-14*  
 Ret'd per *Comptroller of Britain*  
 Date *31-3-14* M.F.W. 187 *M.O. 3*  
~~*6-4-14*~~ *W. W. W. W.*  
*M.I.R.O. L.P. 68445 destroy 6-4-19*  
*OK 6/19 RW*

M. F. W. 128  
 400M. 6.17. 1772. 38. 1141.  
 L. L. 22520 - M. & D. 1183.

