

202 5271

CHANDLER

RAYMOND THORNTON

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

Open

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL


PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

1617

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»

NAME CHANDLER RAYMOND THORNTON REGT. NO. 2025271 UNIT 50th Regt. H. Q. FILE NO. _____

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)	4/4/19 M.J.			14624	DEATH Category 
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
1 TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				403 538	
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
DENTAL HISTORY SHEET (M.F.B. 465)					
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
2 MEDICAL EXAMINATION (M.F.W. 129)					DISCHARGE Category <i>Demob.</i>
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCFEDINGS, 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)					
1 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)					
1 a.f.w. 3497					
1 m.f.w. 192					
1 CADC 5009a					
1 1099 122					
1 oc					

CANADIAN FORCES
 RECORDS CENTRE
 PERS JACKET 403 538
 ROOM

Bol #
 1617

403538

OK Bof R 14-8-17
MILITIA AND DEFENCE

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

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 4503.-Req. 6832

Florence S. Chandler

Mother
PAYMENTS.

Name of Soldier

Plt

2025271

Chandler, Raymond J.
Post Regt

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		<i>A 11397</i>	<i>31</i>	<i>31 R mailed 29/9/17</i>
Oct.		<i>C 23078</i>	<i>20</i>	<i>B</i>
Nov.		<i>X 25626</i>	<i>20</i>	<i>B</i>
Dec.		<i>Q 19804</i>	<i>20</i>	<i>T → \$91.00</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				

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.				

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

REGT. NO 20252

M. OR S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.P.
ADDRESS					PLACE OF ATTESTATION
					DATE OF ATTESTATION
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY 1
TO WHOM PAID	RELATIONSHIP				PAYABLE TO
ADDRESS					ADDRESS
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE
					DISCHARGED

Eligible to be Reimbursed for benefit Purchased up to a limit of £35 - \$170.33 Under Air Ministry Order 808. 1918.

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.			OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY	REG. MENT. L. CHARGES
	NO. OF DAYS	RATE	AMOUNT			COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3			
						\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.		
1920																			
Nov.				170 33	170 33														
				170 33	170 33														

AUDITOR

PAYMASTER

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

REGT. NO

2025271

RANK

a/Sgt
Cadet

NAME (IN FULL)

CHANDLER, R.T.

IF IN P.F.
WHAT UNIT?

(BLOCK LETTERS SURNAME FIRST)

SHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	TRANSFERRED TO	DATE	AUTHORITY		
				PLACE OF ATTESTATION	DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY	
IVE				ASSIGNED PAY	DATE EFFECTIVE				
				PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS			
SHIP				ADDRESS	3151 California St. San Francisco, Calif.				
				STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE				
				DISCHARGED	PLACE	DATE	REASON	AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY

Eligible to be Reimbursed for outfit
Purchased up to a limit of £35 - \$170.33
Under Air Ministry Order 808. 1918.

L	ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY	REG- MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE				PARTICULARS OR REMARKS
	COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3						DEBIT	CREDIT			
	C.	N.	D.	N.	D.	N.	D.	C.	N.	D.	C.	N.							D.	C.	
33														91 86						91.86 Chits Paid by Air Ministry.	
														38 93		170 33				38.93. Outfit received by Officers Repayment Store on the London Exp.	
33														130 79		170 33				39.54 Payment to Cadet.	

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:- 11/17/17		EFFECTIVE DATE:-	
AMOUNT:- 15.00		AMOUNT:-	

NAME:- CHANDLER Raymond Horton
NUMBER:- 7075771 1408

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.

Mrs Florence D. Chandler (Mother)
127 St. Vendome St. Los Angeles Calif.

Stopped Eff 1-2-19.

R.I.D. 28-12-18. B.B.R.D. 211 2/12/18
bourse 11-6-18 D.O. 162 B.B.R.D. 8-7-18

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
BCRD 297	13.12.18	11.6.18
D.O. 297 B.B.R.D. 13/2/18	7.9.18	a/spl
D.O. 310.		

UNIT AND TRANSFERS

ORIGINAL UNIT:- 50 Kent: Draft

DATE ACCOUNT FIRST OPENED - 11/17/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
	11/17/17		B.B.R.D.
	11/4/18		1 km
	11/7/18		BCRD
			21.8.18 Impudate H.

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
3/19		Londons	48 87	11/16/18		11/9/18 = 88 days @ 10	96 80
15/19	1666	Seaford	24 33	11/17/18		28/12/18 = 113 " " 50	169 60
			73.00				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS-CE ALL'CE
19.17.10				
34.16.7				
	+	-	10	
26.297 BCRD. 13/12/18	1	35	15	
	1	35	15	

PARTICULARS OF RENDERING NON-EFFECTIVE:- 31/19 Dis Canada for disposal funds. N.R 1876 64/19 M.D. M.D. 11.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
mch 31	Bal Forwd								28 12		
apl	P.P	33		AR 90 18/4/18 7/13m	446			15			
				8.7/4/18 7/2	357						
		33			8 03			15	38 09		
May	p/p	34 10		AR 90				15			
				AR 153. 8/5/18 7/2	357						
				205. 16/5/18 4	446				49 16		
		34 10			8 03			15			
June	p/p	33		AR 284. 1/6/18 7/2	357						
				AR 357. 9/6/18 7/2	892						
				CAJ.				15			
				C.P. 10584. 14-6-18 7/2	24 33						
		33		C.P. 13891. 30/6/18 7/2	14 60			15	15 74		
July	p/p	34 10		1/1/18 CP. 23.	51 42						
				CAJ.				15			
				San Cash 17383 18.7.18	487				2997		
		34 10			487			15			
Aug	p/p	34 10		CAJ.				15			
				AR 2355.1 Sheonards	14 60						

Stopped by 1-2-19.
W

19.0. 3/10.

UNIT AND TRANSFERS

ORIGINAL UNIT: - 50 Regt: Draft
DATE ACCOUNT FIRST OPENED - 1/17/17

R.I.U. 28.12.18. B.B.R.D. 211 2/12/18
bourse 11-6-18 D.O. 162 B.B.R.D. 8-7-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
	11/17/17		B.B.R.D.
	11/4/18		7 Bm
	1/7/19		BCRD
			21.8.18 Ampladate H.

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
3/19		London	48 67	11/6/18	69/18 = 88 days @ 1 ¹⁰ / ₁₀₀		96 80
15/19	1686	Seaford	34 33	11/7/18	28/12/18 = 113 " " 1 ⁵⁰ / ₁₀₀		169 60
			73 00				

19. 17. 10 DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
26.297 BCRD. 13 ¹³ / ₁₈	1 35	10		
" " " "	1 35	15		

PARTICULARS OF RENDERING NON-EFFECTIVE: - 31/19 Dis Canada for disposal Amth. N.R. 1878 6-4/19 M.D.M. 11.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
mch 31	Ordn Forward								28 12		
apl	P.P.	33		AR 90 18/4/18 7 Bm	446			15			
				" 8.7/4/18 7 B	357						
		33-			8 03			15	38 09		
May	p/p	34 10		AR 9.				15			
				AR. 153. 5/5/18 7 B	357						
				" 205. 16/5/18 "	446				49 16		
		34 10			8 03			15			
June	p/p	33		AR. 284. 1/6/18 7 B	357						
				AR. 359. 9/6/18 7 B	892						
				CAP.				15			
				C.P. 10584. 14-6-18. 7 B	24 33						
		33		C.P. 13891. 20/6/18. 7 B	14 60			15	15 74		
July	p/p	34 10		1/7/18 CP. 23.	51 42						
				CAP.				15			
				San Cash 17383 18.7.18	487				2997		
		34 10			487			15			
Aug	p/p	34 10		CAP.				15			
				AR 23554 Sheonards	14 60						
				AR 20161 " 31.7.18	9 73						
				AR 28856 " 28.8.18	9 73				15 01		
		34 10			34 06			15			
Sep	"	33		CAP.				15			
				AR 35041 Hastings 12.9.18	7 30				25 71		
		33			7 30			15			
				Balceford							

NUMBER 2025271

RANK

Pte

NAME

CHANDLER R.T.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sept 30	Balance forward								25 71		
Oct	P.P.	34	10	b.a.p				15			
				AR 41895 Hastings 1-10-18	9	73					
				✓ 53067 London 25-10-18	24	33			10	75	
		34	10		34	06		15			
Nov.	1/2 c P.A. from 11 6/18 to 31 18.	5	20	b.a.p.				15			
	Sgts Pay	4	5	A.R. 65120 Bristol 11-11-18	7	30					
Dec	-	4	50	" 74349 " 25-11-18	9	73					
				b.P. 80418 London 10/12/18	29	20					
				Jan A.P. D.C.				15			
Jan 19	Sgts Pay	4	50	Jan A.P. Jan	46	23		15	114	72	
		46	50					45			
				Over for Sgt pay 11.6.18 to 6.9.18 88 days @ 40cts.			35	20			
Feb				b.P. 97414 London 3.1.19	48	67					
				D.N.A.R. 6686 1st Res Bn. 14-1-19	24	33			6	52	
					73						
					73		35	20			
				S.O.D. to Canada 1-2-19							
				S.L. 13 1st Res Bn.							

A 3 M RM REN'D
 DISCHARGED TO CANADA DATE 31/19
 PAY BOOK VERIFIED 16-1-19
 BAL. 11.72 L.P.C. REN'D 16-1-19
 AUTHY. N.R. 1876 14/19 M.D. 11.

COMPILED BY J. Bradley
 CHECKED BY P. Cairns
 Corrected Bal of 6.52 P868 rendered 1/2/19.
 adj. 35.20

Nov.	u/c P.A. from 11/18 to 31/18.	57 20	C.A.P.			15
	Sgts pay	45	A.R. 65120 Bristol 11-11-18	7 30		
Dec	-	46 50	" 74349 " 25-11-18	9 73		
			b.P. 80418 London 10/12/18	29 20		
Jan 19	Sgts pay	46 50	Jan A.P. D.C.			15
		195 20	Jan A.P. Jan	46 23		114 72
Feb			Over on Sgt pay 11.6.18 to 6.9.18. 88 days @ 40 cts.	35 20		
			b.P. 97414 London 3.1.19	48 67		
			D.A.R. 6686 1st Res Bn. 14-1-19	24 33		6 52
				73		
				35 20		

S.O.S. to Canada 1-2-19
 S.L. 13 1st Res. Bn.

A 3 M. F. RM REN'G. *1-2-19* EFFEC.
 DISCHARGED TO *Canada* DATE *31/19*
 PAY BOOK VERIFIED *16-1-19*
 BAL. W. 2 L.P.G. REN'G. *16-1-19*
 AUTHY. NR. *1876 14/19 MD. 11.*

COMPILED BY *J. Brindley*
 CHECKED BY *R. Cairns*
 Printed Bal of *6.52* P868 rendered *1/2/19*
 24.35.20

Carman 8/2/19
 PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
 DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 29252

M. OR S. *S*

NEXT OF KIN _____ RELATIONSHIP _____

ADDRESS _____

PARTICULARS *Eng 2nd ady to 3/1/19*

EFFECTIVE DATE *1/2/19*

AUTHORITY *DD64*

ORIGINAL UNIT C.E.F. _____

PLACE OF ATTESTATION _____

DATE OF ATTESTATION _____

ASSIGNED PAY \$ *15.00*

IS SEPARATION ALLOWANCE PAID? *Yes*

DATE EFFECTIVE *1-3-19*

RELATIONSHIP _____

TO WHOM PAID *Same as AP*

ADDRESS _____

PAYABLE TO *Mrs. Florence*

ADDRESS *311 Loma
Los An*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____

DISCHARGED _____

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					
		\$	C.	\$	C.	\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.
<i>3/1/19</i>		<i>1.50</i>				<i>41.72</i>											
<i>1/2/19 to 2-2-19</i>									<i>35248</i>		<i>35249</i>			<i>30.00</i>	<i>5.00</i>		<i>15.00</i>
<i>122 days</i>		<i>2.80</i>		<i>1.20</i>		<i>4.00</i>		<i>Cpl 6</i>	<i>160448</i>	<i>175381</i>	<i>174229</i>			<i>30</i>	<i>30</i>	<i>30</i>	<i>30</i>
						<i>4.00</i>		<i>May 7</i>									
								<i>July 20</i>						<i>34.80</i>	<i>30</i>		<i>30</i>
						<i>16.50</i>		<i>1919 Aug 31</i>									<i>AR Balance</i>

WAR GRATUITY War Service

Certified that all payments on this account for which has been received to date.

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.

BALANCE FROM PREVIOUS ACCOUNT

*Adj. for
Paymaster
Demobilization Pay
M.F. No. 11*

*Adj. for
Officer i/c War
Gratuity
M.F. No. 11*

Adjustment Account

OK Boj R.

14-8-19
MILITIA AND DEFENCEM. F. W. 11.
50m.-4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Mrs Florence D. Chandler* Name of Soldier *Chandler Raymond J.*
 Address *127 South Verdome St* Regtl. No. *2025371*
Los Angeles. Cal Rank *Otē*
U.S.A. Corps *50th Regt.*
 Relation to Soldier }
 wife, child or mother } *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				



Date of Enlistment

MILITIA AND DEFENCE

4196 Date of Assignment

14.8.17.

Separation and Assigned Pay Branch

C

4247 Dec 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20.	\$25.00	30%
	1-12-17	1-9-18
	P.O. 3257	M.O. 26505.

RATE OF ASSIGNMENT

\$15.00			
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4105

PARTICULARS OF SEPARATION ALLOWANCE

No. 2025271.
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name Raymond T. Chandler.
 Battalion 50th Regt.
 Beneficiary Mrs. Florence D. Chandler.
 Relationship Mother.
 Address 127 South Vandome St. Los Angeles Cal. U.S.A.

PARTICULARS OF ASSIGNMENT

Name Mrs. Florence D. Chandler
 Address Loma
 311 Loma Drive - Los Angeles. Cal. U.S.A.
 Change of Address
 M.F.N. 2554-29 7/18
 M.F.N. 2554-ret'd. of 23 1/18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					03058-R-2
Dec 31	5A	\$91.		\$91.	
Dec	B63167		15	15	S
Jan 1918	N71595	30	15	45	D
Feb	D92845	25	15	40	✓
Mar	a 111058	25	15	40	✓
Apr	L 8340	25	15	40	✓
May	R 14028	25	15	40	✓
June	Z 8518	25	15	40	✓
July	Z 19581	25	15	40	✓
Aug	Z 31640	25	15	40	✓
Sept	Z 44868	25	15	40	✓
Oct	Z 59463	25	15	40	✓
Nov	Z 73926	25	15	40	✓
Dec	Z 88025	45	15	60	✓
JAN	Z 104775	30	15	45	✓
FEB	Z 118556	30	15	45	✓
		476	225	701	

M. F. W. 128.
40M. 6-17-172-33-1144
L. L. 2320-M & D. 1931.

A/c Closed 28 2/19
 Ret'd per Carrmania
 Date 8/2/19 M.F.W. 187 142 M.O. 11
 G.A. Holbrook
 M.P.O. 40440



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

M. F. W. 128.
 4004 6/17-1772-89-1141
 L. L. 22320-M. & D. 1983.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

5-215
WAR SERVICE GRATUITY
FEB 21 1919
C.E.F., M.D. XI

D/O 55 Service 1 yr.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *Raymond Thornton* Surname *Chandler*
3. Rank *Cadet* 4. Original Unit *50th G.H.* 5. Reg. No. *2025271*
6. Address, in full, to which future payments of gratuity are to be forwarded
*127 South Verdore St
Los Angeles Cal. U.S.A.*
7. Date of enlistment in the C.E.F. *14-8-17*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs. F. Chandler*
9. Relationship of such dependent *Mother*
10. Address, in full, of such dependent *127 South Verdore St
Los Angeles Cal. U.S.A.*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
7th Batt 8-2-18 to 11-6-18
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *N.A.*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *One year 6 1/2 mos. 50th Regt. G.H. 2nd Depot Bn. 1st Res. Bn. 7th Bn. P.A. 7 1st Res. Bn.*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No.
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid No.
20. Have you been issued with a War Service Badge? If so, what class? No.
21. Have you, during the present war, served in the Imperial Forces? Attd R.A.F.
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled No.
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? No.
 (b) If so, was such reversion in consequence of misconduct or inefficiency? N.A.
24. Are you now serving in the C.E.F. No. If not, give:—(a) Date of discharge 20-2-19
 (b) Reason for discharge demobilization
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. No.
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit. 7th BA 8-2-18 — 11-6-18
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No.
 (b) If so, are you in receipt of full pay and allowances from that Department? No.

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: R. J. Chandler

Place of Residence: 127 South Vermont St Los Angeles Cal. U.S.A.

Declared before me at: Willows Camp Victoria B.C.

This 20th day of February 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

[Signature]
Major J.P.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

No. 2025271 RANK PLO⁻

NAME Chandler, Raymond P

T. O. S. 14-8-17. UNIT 50th Regt 1 Highlanders of Canada
 (No 190 of 16-8-17)

M. D. 11

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1917 Aug. 14	1917 Aug. 31	-	Trans to 2nd Depot Bn 1-9-17	DO # 200 of 31-8-17

*Name *Chandler, Raymond T.* Rank *Cadet* Regtl. No. *2025721*
 Fyle Depot. *8105*
 Original unit *50th Inf* Present unit *R. F. C.* M. or S. Age Religion *CofC* Ref. H.Q.
 Port, ship, and date of arrival *Salifasc "Carmania" 8/2/19*
 Next of kin *Mrs. F. D. Chandler*
 Address on leave *1274 Vendome St. Los Angeles Cal.*
 Address on discharge *as above*
 Transportation issued Yes No Date Character on discharge
 Previous occupation *Journalist* Date and place of enlistment *Victoria 14/8/19*
 Diagnosis *TD the* Date of Medical Boards *17/2/19*

Date.	Remarks	Pt. 2 Order No.
	<i>Sailed England 31-1-19</i>	
<i>19-2-19</i>	<i>T.S. from O/S 1/2/19 Posted to S.D. 15/2/19 (Direct)</i>	<i>50/2890</i>
	<i>To discharge section 20/2/19</i>	<i>57/3149</i>

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

(over)

Date.

Remarks.

Pt. 2 Order No.

Mon!

Number 2025-271

Rank

al 391-73

Surname CHANDLER

Christian name Raymond Thornton

Units 7th Bn Can Inf Theatre of War France

Date of Service 8-3-18

Remarks

Latest Address ~~127 South Vandome St,
Los Angeles, Cal U.S.A~~

Roll No. B. Page 212 24 933 Menta Ave.
Los Angeles

200m.-6-21.

Calif. U.S.A

(This form to be filled in by all ranks on voyage to Canada.)

.....

R	RANK	SURNAME	INITIALS	UNIT
.....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....
.....

Station in Military District to which a furlough warrant is required.....
..... Railway.....

d, is your wife on board..... Number of children on board.....

destination.....

DESP. JUL 11 1923
REGN. NO. 3786

(Sgd.).....

ROYAL AIR FORCE.

Discharge Card, U.K.

All Air Force Cases except from Expeditionary Forces

Name of Hospital or Station 6th S.A. BRISTOLSerial No. in Admission List (F.S. Form 38) 171Unit 6th School of AeronauticsOffl. No. or Date of Commission 2025271

Squadron, Wing, &c. _____

Rank _____

Grading CadetName CHANDLER. R.T.Age 30 2/12 Total Service 13/12Date of Arrival at Hospital (a) as an Admission 14-10-18

(b) as a transfer (state where from) _____

Date of discharge to duty 20-10-18

" " " by change of disease _____

" " " as an invalid _____

" " death _____

" " transfer (state where to) _____

No. of days under treatment 7

Observations:— _____

To be filled in by the Medical Officer in charge of case. _____

Disease* Influenza

Operations _____

Result of operation _____

Complications in order of occurrence _____

Signature of Medical Officer [Signature] R.A.F.

* To be in accordance with the official nomenclature.

One of these cards is to be completed for every patient of Air Forces received into hospital, except those from Expeditionary Forces.

Entry Card, Royal Air Force.

F.S. Form 35.

Unit L.A.D. Date 1-7-18
 Squadron, Wing, &c. _____ Height _____
 Rank Capt. Official No. or Date of Commission 202527
 Name Chandler, R.T.
 Age 29 Weight _____ Where recruited _____
 Residence (Town and County only) _____
 Address of nearest relative _____
 Body marks 6/9
 Vision, ^{R.E.} 6/6 + 2 BC With Glasses
 * Colour vision h
 Physique h
 Wounds and injuries 1911. op on nose.
 Surgical Abnormalities Both passages clear.
 Mentality _____
 Summary (Surgical) _____
 * Habits—Smoking 6 Cigs 6 Papers
 * Alcohol mod.
 * Any special Athletic record Good.
 Previous occupation (Civil) Journalist
 Army, Period & Unit _____ Foreign Service H/12.
 Illnesses S. Fever.
 * Family History _____
 Heart. Size h
 Sounds h
 * Rate (see F.S. Form 36)—I. 96 *II. 105 *III. 10
 Pulse—*I. 20 m. *II. T.S.
 Thorax—Expansion h * Vital capacity _____
 * Breath held—(i) At rest 105 * (ii) After exercise _____
 * Reasons for giving up _____
 * Abdomen h hul.
 * Nervous system—Deep reflexes R. J. n.
 * Tremor hul.
 * Mentality _____
 * Summary (Medical) Fit.
 Hearing h 20.
 Teeth h
 Nose h
 * Muscle Sense _____
 * Nervous Stability h
 * Mentality h
 Summary (Aural) h
 Signature of Medical Officer [Signature]

* These items need not be filled up for ground duty candidates.

20 W 16-8-18
B 12-10
ROYAL AIR FORCE. F.S. Form 48

16/5/11
ENVELOPE TO CONTAIN THE MEDICAL HISTORY OF AN OFFICER, PROBATIONER, WARRANT OFFICER, N.C.O. OR MAN OF THE AIR FORCE.

Name *Chandler, R. T.* Official No. or Date of Commission } *2025271*
(Surname first.) }
Rank *Cdt.*

(1) This envelope is to contain the flimsy copies of F.S. Forms 35, 39, 40, 42, 44 & 46.

(2) It is to be kept in the Station Office with other personal papers. It is to be treated as strictly confidential.

(3) On the transfer of the Officer or man whom it concerns to another Station or Hospital (whether Air Force, Naval, Military or Civil) it is to be forwarded with other personal papers to the Commanding Officer, of the Station or Hospital to which the transfer is made.

Medical Category.	Unit.	Station or Hospital.	Station or Hospital transferred to—or— Inoculation or Vaccination	Date.	Date of forwarding.
			Inoc: 5-10-17		
			Hampstead hom: 23-2-18 20 per roll dated		
					27-7-18
	<i>nos R.A.F. Cadet Wing</i>	<i>S.F. Leonards on Sea</i>	<i>nos R.A.F. Cadet Wing</i>	<i>16-8-18</i>	

161511
60

ENVELOPE TO CONTAIN THE MEDICAL HISTORY OF AN OFFICER, PROBATIONER, WARRANT OFFICER, N.C.O. OR MAN OF THE AIR FORCE.

Name Chandler H. J. Official No. or Date of Commission } 20757 //
(Surname first.)

Rank Cdt.

- (1) This envelope is to contain the flimsy copies of F.S. Forms 35, 39, 40, 42, 44 & 46.
- (2) It is to be kept in the Station Office with other personal papers. It is to be treated as strictly confidential.
- (3) On the transfer of the Officer or man whom it concerns to another Station or Hospital (whether Air Force, Naval, Military or Civil) it is to be forwarded with other personal papers to the Commanding Officer, of the Station or Hospital to which the transfer is made.

Medical Category.	Unit.	Station or Hospital.	Station or Hospital transferred to—or— Inoculation or Vaccination	Date.	Date of forwarding.
	<u>No 8 B.A.F. Badet Wing</u>	<u>St. Leonards on Sea</u>	<u>No 2 B.A.F. Badet Wing</u>	<u>16.8.18</u>	
			<u>Vac. 16-9-18</u>		
			<u>J.P.C.M.</u>		
			<u>Inoculation 23.2.18</u> <u>as per Hampstead</u> <u>General Roll Badet.</u> <u>7.7.18</u>		
MEDICAL CATEGORY	<u>Grade I.</u>				
D.O.B. OF BIRTH	<u>23.7.88.</u>				
REPORT OF AVIATION CANDIDATES					
MEDICAL BOARD	<u>Pilot 1.7.18</u>				

Entry Card, Royal Air Force.

F.S. Form 35.

Unit C. D. D. Date 22.7.18.
 Squadron, Wing, &c. Height 5ft 9 $\frac{3}{4}$ in
 Rank Cdt. Official No. or Date of Commission 335

Name Chandler H.J.

Age 22 Weight _____ Where recruited _____

Residence (Town and County only) _____

Address of nearest relative _____

Body marks 6/6

Vision, ^{R.E.} 6/6+3 ^{L.E.} 3 B1. With Glasses _____

* Colour vision N.

Physique P.

Wounds and injuries _____

Surgical Abnormalities _____

Mentality _____

Summary (Surgical) _____

* Habits—Smoking 10 Cigs. 3 Pipes. Inhales.

* Alcohol Mod.

* Any special Athletic record Mod.

Previous occupation (Civil) Surveyor

Army, Period & Unit 3 yrs. 11 mths. Foreign Service 2 yrs 1 mth.

Illnesses Seasick every time Sea is rough.

* Family History _____

Heart. Size N.

Sounds N.

* Rate (see F.S. Form 36)—I. 60 *II. 90 *III. 15.

Pulse—*I. V.N. *II. T.S.

Thorax—Expansion G. * Vital capacity _____

* Breath held—(i) At rest 90 * (ii) After exercise _____

* Reasons for giving up _____

* Abdomen G.

* Nervous system—Deep reflexes Plus.

* Tremor Nil.

* Mentality _____

* Summary (Medical) Fit.

Hearing F.

Teeth 3.

Nose 0. Slight Adenoids.

* Muscle Sense _____

* Nervous Stability F.

* Mentality G.

Summary (Aural) Fit.

Found fit as P or O.

Signature of Medical Officer

* These items need not be filled up for ground duty candidates.

CR. Rank

Name CHANDLER, Raymond Thornton

Reg'l No. 2025271.

Unit **Dft No I, 2nd Bn B C Regt** ^{If in perm. Corps, }} _{What Unit Res}

Married or Single **Single.**

**COPIED
Active
COPIE**

Place and Date of Enlistment **Victoria, B.C. Aug. 14th, 1917.** Place of Birth **Chicago, USA.**

Name and Address, Next-of-Kin **Mrs. Florence D. Chandler.**

127 South Vendome St., Los Angeles, Cal., USA. Relationship **Mother.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

NIE. R.S. No **24109**
File R.L.
Category **Can OR**



Relationship

Relationship

Discharge, Date and Place

Reason

Character

H. W. V., Ld.—11319-17.

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.				
	BCR		Arrived in England	7-12-17	S/S MEGANTIC
12-12-17	1st Res	T.O.S. on arrival from Canada	Seaford	Pt 8.12.17	Pt. No. 327
8-3-18	"	SOS to 7th Bn	"	8-3-18	— 57 + 7th Bn Pt 317 18 1/2
22-6-18	7th Bn	Transferred to England posted			
19-8-18	no 2 RA 7 Calculating	BBRD pending Comm on board Cadet Distributor in deficit	Field	Pt 11-6-18	Pro 71. BCRD Pro 1624878
13-12-18	BCRD	attached for pay R & Q	Hastings	16-8-18	Pro 121
31-12-18	BCRD	app^d app^d app^d with pay	Seaford	11-6-18	Pt 297
15-1-19	1 Res	attached from BCRD		14-1-19	Pt 311
15-1-19	BCRD	SOS to 1 Res		14-1-19	Pt 15

103 CHECKED
A.F. 103
2 MAR 1918

COPIED
FROM
COPIE

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.				
7-1-19	BCRD	Pr 297 of 13 ¹² / ₁₆ amended to read app. 2/18 with pay		7-9-18 Pr 27.	
1-2-19	1 Ros	Census attached from BCRD S.O.S to Can.	London	1-2-19 Pr 27. 1-2-19	
20-1-19	Orville Bennett	S.O.S to Canada L.L. 13.		1-2-19 AOI	

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



This is to Certify that No. 2025271 (Rank) A/Sgt (cadet)
Name (in full) Raymond Thornton Chandler enlisted in
the 50th Regt. Reinforcements
CANADIAN EXPEDITIONARY FORCE at Victoria B.C. on the 14th
day of August 1917.
HE served in France with the 7th Battalion
and is now discharged from the service by reason of

DEMOBILIZATION

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

Age 30 years
Height 5' 9"
Complexion Fresh
Eyes Hazel
Hair Dark Brown

Marks or Scars

Nil

Signature of Soldier

M. Andrew
Issuing Officer

Captain

Rank

Date of Discharge Feb 20th 1919

for D.C. District Depot XI
Appointment

Signed at Vancouver B.C. this 20th

day of February 1919

in Military District No. Eleven

File Reference No. D. D. 68105

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

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

WAR SERVICE BADGE CLASS " " *A*
No. 62404 ISSUED

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

H.B. - As no duplicate of this Certificate will be issued, any person having same is requested to forward it as an acknowledgment to the Secretary, Military Council, Ottawa, Canada.

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

M. F. W. 54. (A. F. D. 10a.)

500M.—9-18

H. Q. 1772-39-9'0.

Casualty Form—Active Service.

2

Unit, Regiment or Corps. 50th Reg. Pinf. (2nd Dep't B. B.C. Reg)

Regimental No. 2025271 Rank Pte Name Chandler Raymond Houston

Enlisted (a) 14.8.17 Terms of Service (a) O of W. Service reckons from (a) 14.8.17

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				
<u>10.2.19</u>	<u>OVERSEAS</u>	<u>T.O.S. DISTRICT DEPOT XI</u>	<u>HASTINGS PARK VANCOUVER, B. C.</u>	<u>1.2.19</u>	<u>D. O. Pr. II 50. 1919</u>
<u>DISCHARGED</u>		<u>DEMOBILIZATION</u>	<u>VANCOUVER, B. C.</u>	<u>20/2/19</u>	<u>D. O. 53/327 i of 24/2/19</u> <u>J. Maclean</u> <u>Capt.</u> <u>for O.C. District Depot XI</u>

(1) 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.
 I.P.T.O.

2nd DEPOT BATT. B.C. REGT.

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

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

Casualty Form—Active Service.

250M.—1-16.

H. Q. 177-39-920.

Unit, Regiment or Corps 50th Regt. Reinforcements C.E.F.

Regimental No. 2025271 ✓ Rank Private Name Raymond Thornton Chandler

Enlisted (a) 14/8/17 ✓ Terms of Service (a) C.E.F. 50th Service reckons from (a) 14/8/17 ✓

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 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.
<i>no record</i>		Taken on strength	Victoria	14/8/17	PART II O. N. 26. 14/8/17.
		Embarked	Italy	26-11-17	Mineral Roll
		Disembarked	Liverpool	7-12-17	
		TAKEN ON STRENGTH OF 1st CAN. RES. BATTN.	Seaford	8.12.17	P-11 327 ✓
8-MAR 1918	1st Regt Bu	PROCEEDED ON DRAFT TO 7th BATT	Seaford	8-MAR 1918	M 200 57 h J. J. Hutchins for Captain, Adjutant, 1st Canadian Reserve Battalion.
16-3-18	7th Bu	ON STRENGTH 7 TH BATTN CAN BASE DEPOT	Field	8/3/18	Pl. 11 No. 31...d/.....
6.6.18	AG.	JOINED UNIT Transfd to England posted to B.C. Res. Depd. Seaford, for the purpose of obtaining a commission in the R.A.F.	Field	11-3-18	P 213
				11-6-18	AG/2148/389(O) dt. 2.6.18. File K.E. 25714/58/Y Par 11 orders 71 dt. 22/6/18

CERTIFIED CORRECT.
12.12.17
3 MAR 1918
CAN. RECORDS, LONDON.

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

[P.T.O.]

ADJUTANT BATT B.C. REG. DEPOT
 Form in Only - Unit Number, Rank and Name

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				
					<p style="text-align: right;"><i>John Row</i></p> <p>here. for R. Col. a. a. g.</p>
8-7-18.	7 th B.C.	T.O.S. B.C. Reg. Depot. Command Cadet Distribution Depot R.A.F. London.	Seaford	11-6-18	Pt. 2.D.O. 162.
13-12-18	B.C.R.D.	Appointed A/ Surg.	"	11-6-18	" " 297
31-12-18	"	Leases to be on Command to R.A.F. London & Detailed to Depot Coy.	Seaford	28-12-18	Pt. 2.D.O 311
15-1-19	"	S.O.S. on posting to Reg.	"	17-1-19	" 15.
15-1-19	1 st B.C.	attached from B.C.R.D. (cadet)	Seaford	14-1-19	Pt 2 Do #12
22-1-19	1 st B.C.	leaves to be attached from B.C.R.D. & proceeding to Port of Embarkation pending Return to Canada	Seaford	21-1-19	Pt 2 Do #12

John Row

For C.O. B.C. REGL. DEPOT.

Embarked S.S. Carmania
 Liverpool 8 Feb, 1919

Adjutant, 1st Canadian Reserve Battalion

50% Regt Reinforcements C.E.F.

Naturalised British subject

DUPLICATE

M.B. 80-8-17

ATTESTATION PAPER.

No. 2025271

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... CHANDLER
- 1a. What are your Christian names?..... RAYMOND THORNTON
- 1b. What is your present address?..... 127 SOUTH VENDOME ST. LOS ANGELES CAL.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Chicago, Ill U.S.A.
- 3. What is the name of your next-of kin?..... MRS. FLORENCE D. CHANDLER
- 4. What is the address of your next-of-kin?..... 127 SOUTH VENDOME ST. LOS ANGELES, CAL. U.S.A.
- 4a. What is the relationship of your next-of-kin?..... MOTHER
- 5. What is the date of your birth?..... July 23rd 1888
- 6. What is your Trade or Calling?..... Journalist
- 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
- 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? .. No
- 14. If so, what was the nature of the disability?.....
- 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, Raymond Thornton Chandler 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.T. Chandler (Signature of Recruit)

Date AUG 14 1917 1917 Gordon Pascal (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Raymond Thornton Chandler 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.T. Chandler (Signature of Recruit)

Date AUG 14 1917 1917 Gordon Pascal (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 VICTORIA B.C. this AUG 14 1917 day of 1917

Charles Corry (Signature of Justice)

Description of Raymond Thornton Chandler Enlistment.

Apparent Age 29 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 9 ins.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 5 ins.

Complexion Fresh

Eyes Hazel

Hair Dark Brown

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).

1. What is your surname?
 2. What are your Christian names?
 3. What is your present address?
 4. To what Town, Township or Parish, and in what County were you born?
 5. What is the name of your next of kin?
 6. What is the address of your next of kin?
 7. What is the relationship of your next of kin?
 8. What is the date of your birth?
 9. What is your Trade or Calling?
 10. Are you married?
 11. Are you willing to be vaccinated or re-vaccinated and inoculated?
 12. Do you now belong to the Active Militia?
 13. Have you ever served in any Military Force?
 14. Do you understand the nature and terms of your engagement?
 15. Are you willing to be attached to serve in the Canadian Overseas Expeditionary Force?
 16. Have you ever been discharged from any branch of the Army?
 17. What is the date of your discharge?
 18. Have you ever offered to serve in any branch of the Army?
 19. Have you ever offered to serve in any branch of the Army?
 20. Have you ever offered to serve in any branch of the Army?

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 1917

Place

W. M. M. M. M.
Capaine
 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:—

A. H. MOBILIZATION CENTRE
 VICTORIA
 Pres. Mr. Bay
 Member W. M. M. M. M.
 Member C. P. Hughes, Capaine

CERTIFICATE OF OFFICER COMMANDING UNIT.

Raymond Thornton Chandler 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.

Charles Dorsifhe Lieut.-Col. (Signature of Officer)

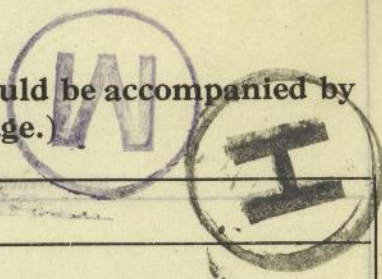
Date 14th August 1917. O.C. 50th Regt. Reinforcements C.E.F.

This is for number 8.

WAR SERVICE BADGE CLASS "A"
No. 62407
ISSUED

Proceedings on Discharge.

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



No.	2025271
Rank	Cadet.
Surname	Chandler
Christian name	Raymond Thornton
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	50 th Regiment. (Reinforcements)
Date of discharge	20 th February 1919.
Place of discharge	Hancouver. B.C.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age..... 30 years..... months.	
Height..... 5' feet..... 9" inches.	Nil.
Complexion	
Eyes	
Hair	
Trade	
Intended place of residence	
(To be given as fully as practicable.)	

Fresh.
 Hazel.
 16 Brown
 Journalist.
 127 South Verdmore St.
 Los Angeles Cal
 USA

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

DEMobilIZATION

Authority for discharge.....

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.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

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

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

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

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

6. Medals and Decorations.....

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).....

(Date).....

Commanding.....

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, and that I have received my permanent discharge certificate.

(Place).....

FEB 20 1919

(Signature of Soldier.)

(Date).....

(Signature of Witness.)

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

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

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

(Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

20th February 1919

(Place).....

FEB 20 1919

(Signature).....

H. A. Andrews Capt. for O. C. District Depot, XI

(Date).....

2025271

MEDICAL HISTORY SHEET

Surname **CHANDLER** Christian Name **RAYMOND THORNTON**

Examined { on _____ day of _____ 191____
 { at _____
 Birthplace { City or Town **CHICAGO, Ill.**
 { County **ILLINOIS, U.S.A.**

Approved by *[Signature]*
 Rank **Captain** M.O.

Apparent age **29**
 Trade or occupation **Journalist**
 Height **5** feet **9** Inches
 Weight **140** lbs.
 Chest measurement { Minimum **32** inches
 { Maximum expansion **37** inches
 Physical development **Good**
 Small-pox Marks _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		8 JUL 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left **X**
 { Number **1**

Date	Result	VACCINATIONS
3/10/17	+	J.D. Hunter M.O.
		M.O.
		M.O.

When Vaccinated last **1907**
 (a) Marks indicating congenital peculiarities or previous disease _____
 (b) Slight defects but not sufficient to cause rejection _____

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
15/5/17	Good	J.D. Hunter M.O.
25/5/17	Good	C. P. Heppin M.O.
31/5/17	Good	J.D. Hunter M.O.
23/7/18	Good	J.D. Hunter M.O.

Enlisted on _____ day of _____ 191____ at _____

	CORPS	REG'T NUMBER	HABITS	DATE
Joined on enlistment	50th Regiment	2025271		14th Aug 1917
Transferred to	Reinforcements C.E.F. 7Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
Victoria B.C.	14th Aug 1917		

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.

CANADIAN

Surname Chandler Christian Name Raymond Thornton

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 general 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				
<i>ILLINOIS</i>											
<i>CHICAGO</i>											
<i>ILLINOIS</i>											

CANADIAN

See on the first page of the non-objection...
 This sheet to be deposited in...
 M. R. S. 1917

Regtl. No. 7025271 Rank Cadet

Name Raymond Thornton Chandler
(Christian Names in full) (Surname)

Unit 1st Res. Bu.
Regt. or Corps

M. D. 11.

Embarked S.S. Carmania
Liverpool Feb, 1 1919

De'barked S.S. Carmania
Halifax Feb, 9 1919

COVER

FOR

DISCHARGE DOCUMENTS.

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

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

Rank CADET Name RAYMOND T. Surname CHANDLER
Unit or Corps 1st Res. (If a soldier) Regtl. No. 2025271
Born at Chicago, Ill. U.S.A. on date 23 July 1888
Signature (for identification) R.T. Chandler

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

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

Weight 156 lbs. Est'd
Height 5 ft. 11 ins.

2. NUTRITION AND DIATHESIS? good

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

3. NERVOUS SYSTEM? no

4. RESPIRATORY SYSTEM. no

5. HEART? no
Abnormal Sounds? no
Abnormal Size? no
Pulse Rate? 72 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? no

7. DIGESTIVE SYSTEM? no

8. GENITO-URINARY SYSTEM? no
Urinalysis—s.g. ? 1020 Reaction? acid Albumen? Neg Sugar? Neg

9. SKIN, MIDDLE EAR, EYE
or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

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

Examined at Seaford | Signed D.P. Lyons Capt M.O.
Date Jan'y, 18, 1919 | Signed J. J. Abbott M.O.

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

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.)

temporary
on discharge clothing allowance of \$55.00
was as that I received

R. T. Chandler

Reg. Conduct Sheet Militia form B. 303	Station Battery Company	W. 133	Particulars of Recruit	Militia Form W. 33
B. 303a	Conduct Sheet	B. 218	Proceedings on Discharge	
W. 178	Field Conduct Sheet			
in MS.	Copies of Convictions, by C. P.			
Militia form B. 313	Med. Hist. Sheet			
W. 34	Casualty Form			
B. 327	Medical Report for Invalids		(a) Proceedings on Discharge	
B. 402	Dental History Sheet			
W. 44	Last Pay Certificate		(b) Attestation	
W. 30a	Duplicate Discharge Certificate			
W. 82	Form of Will		(c) Medical History Sheet	
	Only if discharged "Medically unfit"			
	Only if man has not been overseas			

Documents not accompanying this form should be crossed out

I hereby certify that the following documents are unobtainable.

Officer Commanding

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

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

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
or Field Conduct Sheet	" W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet.</p>	
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		
§Only if discharged "Medically unfit."			
‡Only if man has not been overseas.			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

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

THIS SECTION FOR USE OVERSEAS

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. 2025271 Rank Cadet Surname Chandler
(Give name in full)

Unit or Corps 7th BN. C.E.P.R.A.F. Birthplace Chicago, U.S.A.
Required Station

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

1. GENERAL DESCRIPTION:

Physique Good Weight 155 lbs. Height 5 ft. 10 in. Colour of Eyes Hazel

Nutrition Good

Pulse 72

Condition of arteries Normal

Vision Rt. 10/10 Left 10/10

Hearing (conversational voice) Rt. 15 ft.

Left 15 ft.

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

None

Opinion as to general health and physical condition Both 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 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.

Influenza - July 1918. 6 days - Good recovery.

Influenza. Oct. 1918. 6 days. Good recovery.

EXAMINATIONS.
THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.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.....**VICTORIA, B. C.**.....(Canada)

Date **FEB 14 1919** Signed *W. Douglas Ross*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. T. Chaudhry*

(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.)

Opinion as to general health and physical condition.....
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.....
Special Senses.....
Integumentary System.....
Respiratory System.....
Muscular System.....
Digestive System.....
Osseous and Joint System..... Any other general condition.....

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.
W. Douglas Ross
R. T. Chaudhry

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..... 50th Regiment Reinforcements C.E.F.

(2) Regimental Number..... 2025271

(3) Full Name of Soldier..... Raymond Thornton Chandler

(4) Place of Birth..... Chicago, Illinois, U.S.A.

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

(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.....

DEPT. BATT. B.C. REGT.

(9) Is your Father alive? *I don't know.*

If so, state name and address

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

If so, state name and address *Mrs. Florence Dart. Chandler*

127 South Vendome St. Los Angeles, California USA.

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

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

(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.

\$6.00 per month

(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.

Yes.

(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.

Date *14th August 1917.*

Charles D. Dwyer *Lieut. Col*
Officer Commanding.
50th Regt. Reinforcements C.E.F.

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

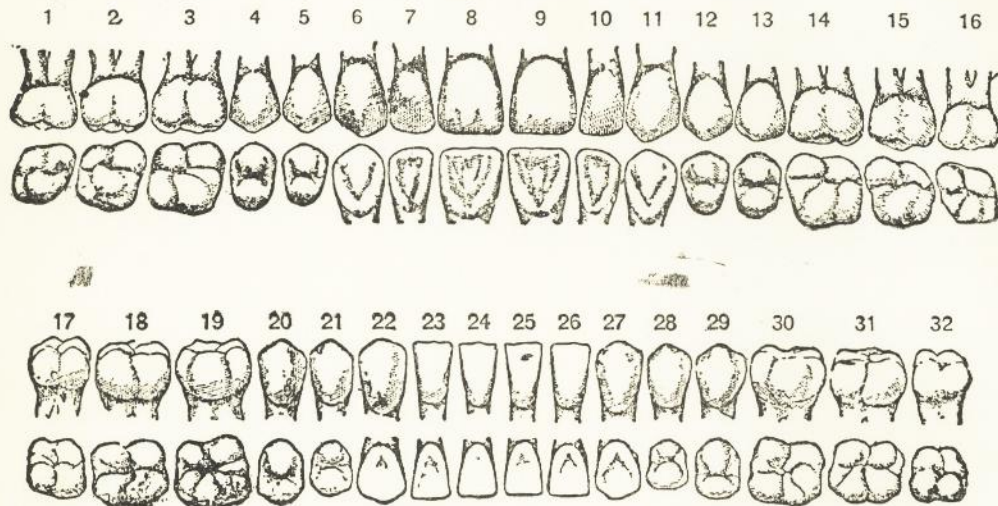
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) Chandler. R.T.
 REGIMENT 1st Res Btn. RANK Cadet. No. 2025571

Date of Examination in England 18/1/19 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.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 19 29

2. EXTRACTIONS _____

3. CROWNS _____

4. DENTURES _____

(a) Full Upper _____

(b) Part Upper _____

(c) Full Lower _____

(d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

(a) In Canada _____

(b) In England YES

(c) In France _____

Signature of Dental Officer J. R. Michael

Capt.

1875

1875

1875