115594	AYMER	Robert
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 320

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

1525-2-79

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M. F. Av. 52
50m.—9-16.
H.Q. 17-1-30-838.

10

DIS[illegible]CUMENTS

649 H 1341

R. O. No.....

H. Q. No.....

Name AYMER, ROBERT.

Regt. No. 115594 Rank Pte.

Corps 10th C.A.M.R.

Dismissed

C 8184

Public Archives Records Centre
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H

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402193

10-11
25 11
27-11

Original
11559/4

ATTESTATION PAPER

No. Y81591H

CANADIAN OVER-SEAS EXPEDITIONARY FORCE. Folio.....

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your surname?	Aymer
1a. What are your Christian names?	Robert
1b. What is your present address?	936-Lillooette St - Moose Jaw.
2. In what Town, Township or Parish, and in what County were you born?	Kenora - Ont
3. What is the name of your next-of-kin?	Edward Aymer
4. What is the address of your next-of-kin?	936-Lillooette St - Moose Jaw. Sask. Canada
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	15 Oct 1897
6. What is your Trade or Calling?	Cook
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No.
10. Have you ever served in any Military Force? If so, state particulars of former service.	No
11. Do you understand the nature and terms of your engagement?	Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE	Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Robert Aymer, 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. Aymer (*Signature of Recruit*)

Date 29 Dec 7 1915 W Everett (*Signature of Witness*)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Aymer, 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. Aymer (*Signature of Recruit*)

Date 29th Dec 7 1915 W Everett (*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 and replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Moose Jaw. this twenty ninth day of December 1915

R. Woodman (Signature of Justice)

Justice of the Peace.

M.F.W. 23

128th (OVERSEAS) BATTLN. C.E.F.
ORDERLY ROOM
DEC 29 1915
No.
MOOSE JAW, SASK.

DESCRIPTION OF Robert Aymer ON ENLISTMENT,

Apparent Age 18 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services).

Distinctive marks, and marks indicating congenital pecularities 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. 4 ins.
Chest measurement.	Girth when fully expanded	35 ins.
	Range of expansion	2 ins.
Complexion		Fair
Eyes		Brown
Hair		Light Brown
Religious Denominations	Church of England	
	Presbyterian	Yes.
	Methodist	
	Baptist or Congregationalist	
	Roman Catholic	
	Jewish	
	Other Denominations (Denomination to be stated)	

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 29th December 1915. R. Black

Place Moose Jaw Sask., Medical Officer.

* Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert Aymer 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.

F. Lawless (Signature of Officer)

Date 29th December 1915.

Lt. Col.
Commanding 128th.
overseas Batt'n. C.E.F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. ----- 115594 ----- (Rank) ------- Private --------

Name (in full) ---------- Robert Aymer ---------- enlisted in

the ---------- 10th C.M.R.'s ----------

CANADIAN EXPEDITIONARY FORCE at ---- Moose Jaw ----- on the ---- 29th ---

day of ----- December -------- 19 15

HE served in France Seventeen and one half (17½) months with 10th Bn.

and is now discharged from the service by reason of xxxxxxx on Demobilization. Entitled to wear Two (2) Gold Casualty Stripes 11.11.17 and 8.8.18, and three (3) Blue Service Chevrons.

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

Age ------ 21 years, 3 months ---

Height ---- 5 feet, 4 inches -----

Complexion ---Fair ----------

Eyes ------Brown ----------

Hair ----- L. Brown ----------

Marks or Scars ----------

----- G.S.W. Neck and R.Thigh --

11-11-17 8-8-18

R. Aymer.

Signature of Soldier

A.H. Bradbrooke Lieut.Colonel

Issuing Officer

Rank

10.2.19 ----------

Date of Discharge

O.C. #12 District Depot.

Appointment

Signed at ---- Regina ------- this ---- 10th ----- day of ---February -- 19

in Military District No. ------- 12 ---------

File Reference No. 96-A-12 DD

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

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

Discharge Section
FEB 10 1919
NO. 12 DISTRICT DEPOT

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263		Attestation Paper or	Militia Form W. 23	
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a	Particulars of Recruit	"	W. 133
or			Proceedings on Discharge	"	B. 218
Field Conduct Sheet	"	W. 178			
Copies of Convictions, by C. P.		in MS.			
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.

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

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.

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.)

I hereby certify that there are no reservations.

R. Aigner.

CANADIAN CONTINGENT EXPEDITIONARY FOR

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 115594 ..... Rank Pte ..... Name ....Aymer.....R.....

Corps ..12..District..Depot..... who was*..Discharged.....

On .....10-2-19.....191...., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from .....1-1-19.....191...

to.....10-2-19.....191...., the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$ 12	c
Bal. Dr. from prev. month	.....	.....	Balance Cr. from prev. month	469.	.43
Advances by Cheques No.....	.....	.....	Regt'l. Pay ..41.....days at $..1..c.....	..41.	.00
Advances by Cheques No.....	.....	.....	Field Allow. ..41.....days at $.....c10.	...4.	.10
Assigned Pay and Sep'n All'ce No.....	.....	.....	Separation Allowances* (Monthly)	.....	.....
Other charges kit..shortage.....	.....	27.	Other Allowances* C.C..Allce.....	35.	00..
Payment on transfer or discharge No...407..	631.	26.	Other Credits*	.....	.....
Balance Cr. (to be paid by the new unit).....	.....	.....	Bal. Dr. (to be deducted by new unit).....	70.	00..
Total.....	631.	53	Total.....	631.	53.

*Give particulars. Paid 1 months P.D.P.

A monthly stoppage of $....15.00.....(†) has.....(‡) been paid on account of Assigned Pay for the month of January.....191.9. and Sep'n All'ce. for month of .....191.... (to) Assignee ..Mrs..Nellie..Ayner.....

(Address) .....918.Lillonette..St,..Moose.Jaw,..Sask.....

.....

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $.....has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted .....No.....

(3) cause of discharge.....authority .....D.O..39.....

(4) authority for transfer .....

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

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

Date ....10-2-19.....

Place ...Regina,..Sask,..... .....James Mitchell Captain.....
No.12 District Depot Paymaster.

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

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

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

M. F. W. 44.

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

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	115594	Private	Aymer.	R.
Year 1918	Unit. 10th Can: Bn:		Age. 20 yrs	Service. 32/12 yrs.

Station and Date.	Disease E&O R. Thigh.
	Wounded on 8th August 1918. at Amiens & taken
	to 1st Canadian Fd Ambulance. & passed to
	3rd Australian General Hospital 9.8.18. Evacuated to
	England
13.8.18	to 6. General Hospital (Oxford) Reported. Keen
20.8.18	Wound healed.
	Dr Davis
	Capt R.A.M.C.
	Princess Patricia Canadian Red Cross Hospital,
	Cooden Camp, Bexhill.
29-8-18	
20.9.18	Inspected no disability
	Discharged to duty
	F.W. Connolly Capt

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.

Station and Date.	

Duplicate. DUPLICATE. NF

Alta

MEDICAL HISTORY SHEET

Surname Aymes Christian Name Robert

Examined on 29th Day of December 1915 at Moose Jaw, Sask

Approved by P.E. Black Capt

Birthplace City or Town Kenora, County Ontario

Rank ..... M.O.

Apparent Age 18 yrs 2 mos.

Trade or Occupation Oiler

Height 5 Feet 4 Inches

Weight ..... Lbs

Chest Measurement Minimum 33 Inches, Maximum Expansion 35 Inches

Physical Development Good

Small-Pox Marks ....

Vaccination Marks Arm right 1 left 1, Number 2

When Vaccinated Last Childhood

(a) Marks Indicating Congenital Peculiarities or Previous Disease —

(b) Slight Defects, but not Sufficient to Cause Rejection —

Date	Fit or Unfit	Examined for Re-Engagement
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
April 20/16	V	A C Phillips M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 29th day of December 1915 at Moose Jaw, Bath.

	Corps	Regt'l Number	Habits	Date
Joined on Enlistment	128th O. Baths	~~781594~~		29/12/15
Transferred to	10th O'seas C. M.R.	~~781.594.~~		April 1-1916
	Ft Gy Hse	~~11559~~		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

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

Surname Ayres Christian Name Robert

STATION.	Date of Arrival at the Station	DATES OF Admission into Hospital. Day	Month	Year	DATES OF Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Moose Jaw	29/12/15										
Portage La Prairie	April 1/16										

This space to be for numbers.

Proceedings on Discharge.

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

No.	115594
Rank	Private
Surname	Ayers
Christian name	Robert
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	10th Can R's
Date of discharge	20th February 1919
Place of discharge	Regina

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 years 3 months.	Descriptive marks
Height 5 feet 6 inches.	G.S.W. Neck x
Complexion Fair	R. Thigh
Eyes Brown	
Hair L. Brown	
Trade Orderly	
Intended place of residence (To be given as fully as practicable.)	Moose Jaw Sask

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

Authority for discharge DD 39-257

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

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

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.)

Kalamp 15.12.19 BB

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

26-2-19

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) Regina R. Rayner *(Signature of Soldier.)*

(Date) 10. 2. 19 R. W. Bannister *(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.

(Place) Regina

(Date) 10. 2. 19

(Signature) A. H. Bradbrooke Maj
Lt. Col.
Officer Commanding
No. 12 District Depot

Forms.
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Can 406	115594	L. Cpl.	Ayrton	Robert
Year 1917	Unit. 10th Canadians C		Age. 20	Service. 2B mts

Bath War Hospital.

Station and Date. Nov. 17

A. Disease or Wound. Rheumat. Throat

B. Date and place of wound.

10 Nov Passchendale ridge

C. If wound, state size & structure involved.

2 in between Hyoid & thyroid on L. side - deep tissues

D. Was wound or injury received in execution of duty or sickness caused by Military service.

Yes

E. Condition on admission, signed by M.O.

Wound as C.

F. Treatment.

G. Progress.

H. Description of condition on discharge, signed by M.O.

I consider he is fit for

i. Duty.
ii. Command Depot.
iii. Employment.

Canad Con Hosp
18/11/17

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

Station and Date.	

Regional No...... # MEDICAL HISTORY OF— A.F. B.178.

Regimental No. 11559 4 ..... *Region*.....

Surname.... Aymes ..... *Christian Names*.... R. .....

TABLE I.—General Table.

Birthplace { Parish..... County.. .....

Examined { on.....day of.....191...., at.....

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

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair... .....Complexion.....

,, Eyes .....

Chest Measurement { Girth when fully expanded .....inches. Range of expansion .....inches.

Physical development .....

Vaccination Marks { Arm, RIGHT. / LEFT. Number ..... / .....

When Vaccinated.....

Vision { R.E.—V = ... With Glasses { R. ..... L. ..... L.E.—V = ...

Identification Marks, such as Tattoo, Moles, Scars, etc.:—

.....

.....

Defects or Ailments :

.....

.....

Examined and found—

Fit for Grade { I. II. III. IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at ... .

On.....day of .....191...

Enlisted { at ..... on.....day of.....19...

	Corps.	Regtl. No.
Joined on enlistment	Canadians M.D. 12	11559 4
Transferred to	.....	.....
	.....	.....
	.....	.....

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

Date.	Brief details and Signature.
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
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.....	.....
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.....	.....
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.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

Special Remarks : state if a discharged Soldier

.....

.....

.....

.....

TABLE IV.—Service Table.

Station or Troopship.	Date of arrival or embarkation.	Date of Departure or disembarkation.
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

Became non-effective by .....

on.....day of.....191...

(Signature).....

(Rank).....

M833 Wt.12046/37 400,000 7/15 CLdP 334.

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital. Day	Month	Year	Discharged from Hospital. Day	Month	Year	Disease.	Number of days in Hospital.	Remarks bearing on the cause, nature, or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
Kinmel Park Military	11	12	18	19	12	18	Scabies	4	Discharged to Unit	R. A. Kinmonth Capt. C. A. M. C.

Temporary Copy.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

115594

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

1. Surname Aymer Christian name Robert.

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

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

4. Address (including street and number, if any) .....

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

5. Age as stated .....Years .....Months.

6. Apparent age .....Years .....Months

7. Height .....Feet .....Inches.

8. Weight .....Pounds.

9. Chest measurement { Minimum .....Ins. / Maximum .....Ins.

10. Complexion ..... { Eyes ..... / Hair .....

11. Physical development. ..... { Good / Fair / Poor

12. Smallpox marks .....

13. Number of vaccination marks { Right arm ..... / Left arm .....

14. When vaccinated last .....

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

.....

16. Slight defects but not sufficient to cause rejection .....

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

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

17.

(a) Vision R. .....L. .....

(b) Hearing. R. .....L. .....

Signature of Man .....

.....*President.*

.....*Member.* .....*Member.*

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined .....*day of* .....*191* ....*at* .....

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Regina	7-2-19.	Nil	A. R. T. Gen Capt.

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

M. F. B. 313.
300M.—10-17.
1772-39-439.

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

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

D.M.S. 1375

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

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

Rank Pte Name Aymer Surname Robert

Unit or Corps 10th Batt (If a soldier) Regtl. No. 115594

Born at Kenora Ont on, date Oct 15th 1898

Signature (for identification) R. Aymer

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. None

Weight 150 lbs.

Height 5 ft. 7 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?**

Abnormal Sounds? No

Abnormal Size? No

Pulse Rate? 78 Intermittence or irregularity? No

6. **ARTERIES.**—Any hardening? No

7. **DIGESTIVE SYSTEM?** No

8. **GENITO-URINARY SYSTEM?**

Urinalysis—S.G.? 1020 Reaction? acid Albumen? No Sugar? No

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 Kinmount Park

Date 4/11/18

Signed [illegible] M.O.

Signed [illegible] 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.*

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1/11544	11594	L/C.	Aylmer	R. P.
Year	Unit.		Age.	Service.
	10th Batt. C		20	2 4/12

Station and Date.	Disease
Bearwood	Shrapnel Throat
4/1/18	wd. Healed. mark fit. W.F.
Shrk 2.	
7/1/18.	D. I. wound. healed.
15/1/18	Discharged 2 C.C.D Bramshott
	J. W. Bell Capt

CANADIAN CONVALESCENT HOSPITAL REGISTRATION ROOM WOKING, SURREY OFFICE 19 JAN 1917

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

(44502) Wt. W 11202—M 1150. 1,450,000. 6/12 16. C.F.&S. Form/I. 1237/12. (E239)

Station and Date.	

LTR.

115594 R—122

Rank Name AYMER, Robert ✓ Reg'l No. ~~781594~~ ✓

Unit Cav Draft 10th C.M.R. If in perm. Corps, What Unit? ✓ Married or Single Single. ✓

Place and Date of Enlistment Moose Jaw, 29th, Dec, 1915. ✓ Place of Birth Kenora. Ontario. ✓

Name and Address, Next-of-Kin Edward Aymer. ✓

936 Lillooette St, Moose Jaw, Sask, Canada. ✓ Relationship Father. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 8919
File R.J.
Categ. CAN.OR

OC

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
C		Arrived in England S.S. Olympic		10 MAY 1916	
22.5.16	6.6.D.	S.O.S. on Trans. to G.C.N.R.R	S'Cliffe	22.5.16	A II O. 1143
13.8.16			"	13.9.16	" " " 1688
13.7.16	R.G.A. R.R.	Taken on strength.	"	12.6.16	" " " 32
19.9.16	.	S.O.S to 9th Bn.	Wo.	17.9.16	Pte II O. 100
17.9.16	9th Bn	Taken on strength.	do	17.9.16	" 261
28.9.16	.	Struck off to 10th Bn o/seas	do	27.9.16	" 272.
5-10-16	10th Bn	Taken on Strength	France	28-9.16	" 49
21.11.17	AR. (10th Bn)	No 16 Gen Hos	Pt Le Treport	12.11.17	CL 69 GSW Throat slt.
21.11.17	✓ (✓)	Bath War Hos	✓ Bath	16.11.17	CL 69 ✓ ✓ ✓
24.11.17	ARD	T.O.S. posted from 10th Bn o/s	✓ Bekott	16.11.17	Pte 260 OC / Pte 00 1298 W 26.11.17 of 10th Bn
17.1.18	✓	On cmd to 2nd CCD	✓ ✓	15.1.18	✓ 17 ✓ ✓ ✓ ✓

A.F.B. 103 CHECKED 5-OCT1916

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
18-3-18	A.R.D.	Ceases On Com to 2nd C.C.D.	Bramshott	15-3-18	P.R.O. 77. & 64 2nd C.D. 5/16/3/18.
19-3-18	21st Res Bn	T.O.S. from A.R.D	"	15-3-18	" " 66.
26-4-18	"	S.O.S. on prov. to 10th Bn O/s.	"	25-4-18	" " 99. & 44 10 B. 7/30/4/18
16-8-18	A.R. 10th	Wounded	Field	9-8-18.	H.A 3177/18 Q.C
19-8-18	A.R.D.	T.O.S. posted from 10 B. O/s	B'shott	13-8-18	P.R.O. 215. & 89 10 B. 8/21/8/18
23-9-18	"	S.O.S. to 21st Res. Bn	"	20-9-18	" 245. & 226 2nd Res Bn. 8/24/9/18.

21.1.19 2iRES S O S TO CANADA 47 19 DO 17

General Medical Board
REGINA, SASK.

96 a.

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. 115594 Rank Private Surname AYMER
(Given name in full) Robert

Unit or Corps 12 D.D. Birthplace Kenora Ont

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

1. GENERAL DESCRIPTION:

Physique Good Weight 147 lbs. Height 5 ft. 7 in. Colour of Eyes Brown

Nutrition Good

Pulse 78

Condition of arteries Soft

Vision Rt. W/N Left W/N

Hearing (conversational voice) Rt. W ft.

Left W ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
1" scar neck above rt. clavicle
Scar 1½" × ¾" neck above left clavicle both due to shrapnel.
Small scar q.s.w. rt. iliac

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 Sytem 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 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.

Shrapnel wound neck 11th Nov. 1917,
Machine gun bullet wound right groin 8th Aug. 1918.
No disability from wounds received.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

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

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Regina (Canada)

Date 7-2-19 Signed R. D. Gunn Capt. 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. Rymer

(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]

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

Canadian Form D.M.S. 1375.

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

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

Rank Pte Name ROBERT Surname AYLMER

Unit or Corps 71st Regt (If a soldier) Regtl. No. 115594

Born at Kenora Ont Can on, date 15th Oct 1898

Signature (for identification) R Aylmer

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

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

Weight 150 lbs. no

Height 5 ft. 7 in.

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?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 80 Intermittence or Irregularity? no

6. **ARTERIES**---Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?**

Urinalysis---S.G.? 1028 Reaction? acid Albumen? 0 Sugar? 0

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 Minnedosa Park Camp. Signed H R C Smith Capt. M.O.

Date 28/12/18 Signed W Sleeth Lieut Can 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.

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

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

Casualty Form—Active Service.

115594 — Unit, Regiment or Corps Can. Dl 10th O'Seas. C. M. R. R.

Regimental No. 115594. Rank Pte. Name Aymer Robert

C. E. F.

Enlisted (a) 29-12-15 Terms of Service (a) D. ore. Service reckons from (a) 29-12-15

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

Extended Re-engaged Qualification (b) Diler

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked CANADa	SS Olympic	29.6.16	
		Disembarked England		10.8.16	✓
22.5.16	C.C.D	Taken on strength C.C.D	Shorncliffe	27.8.16	C.C.D Pt Two No 143 d 22.8.16
13.7.16	F.G.H.R.R	D.O.S. do F.G.H.R.R	do	12.6.16	F.G.H.R.R Pt Two No 31 d 3/7/16
19.9.16	F.S.H.R.R				Pt-I D.O 100
		Transferred to 9th Battalion		19.9.16	18-9-16
27-9-16	9th Bn.	Drafted to 10th Battn	Ffance	27-9-16	B.O.NO. 272
28/9/16	C.C.D.	Arrived in France for 10th Bn. Fld		28/9/16	2nd Lieut. a/a Part 2. O. 49 5/10/16
14/10/16	10th Bn.	Joined 10th Bn.		10/10/16	B.213 - 378
26/10/16	10th Bn.	One days F.P. No.1. 25/10/16 for "Neglect to the prejudice of good order & military discipline in that he fell out on the left side of the Road during a halt"			Brdg. Part 2. Ord. 63 11/11/16

CERTIFIED CORRECT. FO OCT. 1916 CAN. RECORDS, LONDON.

J. A. Matheson Lieut ADJUTANT FORT GARRY HORSE RESERVE REGIMENT

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
Date	From whom received				
11.11.17.	44 C.C.S.	S.W. neck. A.Y. 34	Fuld	11.11.17	A36-B3975
17.11.17.	10th Bn	Wounded to Hosp	do	11.11.17	B.213.
13.11.17.	16 Bn.	Inv. Wd & posted to Alberta Regt. Depot - Bramshott. Per H/S Carisbrook Castle.		13.11.17.	3083-4360 Pt II D/o 129 dy 26/11/17.
					J Kerr Lieut for. Lieut. Col. A.A.G. Can. Sec. G.H.Q.
24.11.17 MR 19.1.18	ak Depot	Tos posted from 10th Bn ✓	Bram	16.11.17	Pt II 260 H.O. Charles ..... LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
18.1.18	2 CCD	attached to 2 CCD ✓	Bramshott.	15.1.18	Pt 2 4 15 (ak Dy II 17 D/ 17.1.18)
16 MAR 1918	OC. 2nd CCD	Ceases to be attached to 2nd C. C. D. ✓ on return to 21st Res. Bn.	Bshott	15 MAR 1918	Pt. 2 D. O. No. 64. for OC. 2nd CCD.
18/3/18	ALBERTA REGT. DEPOT	CEASES TO BE ON COMMAND TO 2nd C.C.D. ✓	BRAMSHOTT.	15 MAR 18	Pt. II D.O. No. 77
18/3/18	ALBERTA REGT. DEPOT	808 POSTED TO 21ST RES. BN. ✓	BRAMSHOTT.	15 MAR 18	Pt. II D.O. No. 77

Sheet II.

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number 115594

Regiment or Corps 10th Battalion Can Dft. to C.E.F.

Rank Pte Surname Aymer Christian Name Robert.

Religion _____ Age on Enlistment _____ years _____ months.

Enlisted (a) 29/12/15 Terms of Service (a) Dft. Service reckons from (a) 29/12/15

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 i/c Records.

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 ...			
19/3/18.	21ST RES. BN.	Taken on Strength from ARD ✓	BRAMSHOTT.	15 MAR 18	Pt. II D.O. No. 66
APR 25 1918	21ST RES. BN.	PROCEEDED OVERSEAS FOR SERVICE WITH 10TH BATTALION.	BRAMSHOTT.	APR 25 1918	Pt. II D.O. No. 99
					W Wilkinson Lieut. & Asst. Adjt. 21st Reserve Battalion (Alberta.)
7.8.16	66D	SOS to F.G.N.R.R.	S'cliffe	12.6.16	Pt II 168
7.9.16	9 Bn	TOS from F.G.N.R.R.	"	17.9.16	— 761 Dvr
					A P Charters LIEUT. FOR LT COL i/c RECORDS - C.O. M.F.

CERTIFIED CORRECT. 1 MAY 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) Signaller, Shoeing-Smith, &c.

[P.T.O.

(938). Wt. 15012/5156. 1,000,000. 1/16. P. P. Ltd. Forms/B.103/3.

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				
26.4.18.	C.I.B.D.	Arrived in France T.O.S. 10th Bn.		26.4.18	P+O 44 d/30/4/18
29.4.18.	do	To C.C.R.C.	Guild.	29.4.18	WR. 1195
4.5.18.	10th Bn	Joined Unit	-	3.5.18	B.213
29.4.18.	C.C.R.C.	Arrived	-	29.4.18.	WR. 549
6.5.18	do	To Unit	-	3.5.18.	WR 653
27.6.18.	10th Bn.	Sentenced to 14 days F.P. No 1.			
		21.6.18 for When on A.S. Refusing			
		to obey an Order 16.6.18.		16.6.18	B.2069 P+O 67 d/9/8.
8.8.18.	1 C.I.A.	R.S. to R: Thigh to C.C.S.		8.8.18	A.36.
9.8.18.	3 Aust. Gen.	M.G.B. Thigh R. Adm.		9.8.18.	G.8023.
13.8.18	do.	Inv. W. rpted to Alta. Regtl			
		Depot. Bramshott.		13.8.18.	W.3083-5742 P+O
		Per H/S Princess Elizabeth			0.88 d/-

Lieut for
Lt-Col. A.A.G

Sheet III.

Army Form B. 103. Regimental Number 115594

Casualty Form—Active Service.

Regiment or Corps .....

Rank PTE Surname ~~Byers~~ AYMER Christian Name Robert

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

Enlisted (*a*) ..... 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.....

Occupation .... 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...			
19.8.18	A.R.D.	T.O.S. posted from 10th Bn.	Bramshott	13.8.18	P.200.245
					A.P. Chantler LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
23.9.18	A.R.D.	Posted to 21st Res Bn	Bramshott	20/9/18	P.II D0245
24.9.18	21st Res Bn	T.O.S. from Alberta R.D	Bramshott	20/9/18	P.II D0226.
2/12/18	21ST RES. BN.	On Com Kinmel Pk Rhyl	BRAMSHOTT.	2/12/18	P.II D.O. No 285 A.C. Hayes Capt. & Adjut. for O.C. Base Details

(*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.

W. 11814—M1188 1000m 1/17 (27227) S P & Co, Ltd. Forms B./103/4 E./354.

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				
6-12-18	O.C. Dis Dq.	Attached from 21st Res.	K.P.C.	2-12-18	Pt. II - I.
11-12-18	"	Trans. to C.E.F.	"	11-12-18	" II - II
			Daniel H. Saunders		Lt.
		TAKEN ON STRENGTH 16-12-18 R Regt Bde Pt 2 No 7		for O.C.	
		EMBARKED FOR CANADA 8 JAN 1919			
		D.D.O, Part II 7 O.S. No. 12 DISTRICT DEPOT REGINA		Geo Johnston Lieut	
		22-139 From Clearing Off 11-1-19		for O.C. Casualty Company, No. 12 District Depot	
8.2.19	Can Corp	Discharged on De- demobilization	Regina	10.2.19	DDO 39-737
		Lieut. & A/Adjt. No. 12 District Depot			

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

In. D. 12

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

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

REGTL. No.	* NAME	RANK	UNIT
115594	Rymer, R.	Pte	10th Bn.

Date of Examination	3.12.18
Present Dental Condition	Requires Fillings
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	
Has he ever declined Dental Treatment?	
Recommendation	Fillings at Public Expense

Date 3/12/18

Station Kinmel Park
N Wales

Signature of Examining Officer ..... A C Steele ..... Capt.
C.A.D.C.

* Name should be entered in block letters.

3H.

*Name AYMER. Robt. Rank Pte. Regtl. No. 115594

Fyle Depot

Original unit Present unit 10Bn. M. or S. Age Religion Ref. H.Q.

Port, ship and date of arrival Olympic. 17-1-19.

Next of kin (Father) Edw. Aymer. 936 Lillooett St. Moose Jaw.

Address on leave 918 Lillooett St. Moose Jaw.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Oiler. Date and place of enlistment M. Jaw. 29-12-15.

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
11-1-19.	TOS. #12DD. and posted to Cas. Coy. from 22-1-19.	23-139
	Granted leave from 23-1-19 to 6-2-19 inc.	
	Entitled to wear 3 Blue Chevrons.	

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

(over)

Date.	Remarks	Pt. 2 Order No
8-2-19.	Posted from Casualty Company to Discharge Section.	39-253
10-2-19.	Discharged on Demobilization.	39/251

M. F. W. 192
150m.—5-18
1772-39-1243

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
AYMER.	R.	115594.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.		Alta. 10.		

HOSPITAL — DATE OF ADMISSION

16. Gen. Le Treport. 12-11-17.

Bath War Bath. 16-11-17.

Can. Conv. Bearwood. Wokingham. HOSP. 5-1-18.

2. 16 Can. Gen. Orpington HOSP. 13. 8. 18

3. P.P.C.R.C. Bexhill. 30. 8. 18. HOSP.

4. HOSP

DIAGNOSIS

1. G.S.W. Throat slt. Ho
G.S.W. Right Thigh H.

2.

3.

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

DISPOSITION — DATE

Dis. 15-1-18

C.L. 22-11-17. A69(3) & B69. Dis. 20. 9. 18.

8-1-18. B106 (1)

28.1.18 B123 (1)

15.8.18 B291 (1)

3.9.18 B308.

24.9.18. B326 (2)

REMARKS

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Princess Patricia Canadian Red Cross Hospital,
Cooden Camp, Bexhill,
HOSPITAL.

A 7908
D.M.S. 1317

A. & D. No. ..... Ward Div. 2.

Unit 10th Can Batt. C Coy. Sick or Wounded.

Regtl. No. 115594 Pl. of Act'n Amiens

Rank Pte Name Aymer. R.

Age 20 Religion Pres

Service Compl'd 3 yrs 12. Time with Field Force 4/12.

Diagnosis G.S.W. (Bullet) Rt. Thigh

Admitted 29-8-18 8th Can. Ontario Regt Orpington. Discharged 20-9-18 21st Res Bn Brancaster

DISCHARGED TO DUTY.

Transferred Cat A

RECORD FURTHER REMARKS ON BACK.

Mechanics

No. 7815-94 Rank Pte Name Aymer, Robert

T. O. S. 29-12-15 Unit 128 th. Battalion, C. E. F.
D. O. # 41 of 31-12-15.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 29	1915 Dec 31	~		
1916	Jan 1916.	~		
	Feb	~		
	Mar	~		
Apr.	M a/c	M.	Trans to C.M.R. 31-3-16.	# 8080 of 1-4-16.

Form R. 149.
7106—250m—7/2/17.

Name AYMER, R Rank Pte Reg. No. 115594

Unit 10th Batt

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1914						
12-11-	16 (U.S.A.) Y.H. Le Crepust		G.S.W. throat wd			HA 16293/5
16-11-	Both War H. Both		do			6334
5-1-15	Q.R. Bearwood		do	B106		9835
15-1-15	Discharged		do	B123		2749
9-8	3 Aux. Sy. Abbeville		Sick K. Thigh.			31779/18
13-8-	16 6 Hosp Wimereux		S.W. Rt Thigh	B	291 H 25	39692
30-8	1 PCR Boxhoo		do	B	308	25412
20-9-	Discharged		do	B	326	8113

R.T.D. 20/9 & F from 20/9 to 21/10/15 Rpld 21 [illegible]

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

REGT'L No. 115594

H. Q. FILE No. 649.

NAME Aymer. Robert.

RANK AND CORPS Pte. 10th Bn Form 10th C | 7th R. Can. Rifles.

FOLLOWS NO. | FOLLOWS

CABLE NO. | CABLE DATE | NATURE OF CASUALTY

C

4-7.
M639 | 23-11-17 | Adm. 16th Gen Hosp. Le Treport Nov. 12th 1917 Shell through
76-5
H25-5 | 17-8-18 | Adm Aust. Mil H. Orpington Aug 13th/918. GSW Thigh

NOK Edward Aymer (Father) 36 Lillcott St. Maidenhead Berks.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-383.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A69- 3.	16 General Le. Treport	12-11-17.	G.S.W. Throat Slt. abdo
B69'	Bath War Bath.	16-11-17	G S W. Throat. 8-12-12 (1. & 28-1-18)
B106'	ex Can. Com Bear Wood Wokingham	5-1-18	G S W. Throat Sld
B123-1.	C.C. Bearwood Wokingham.	7-1-18.	(Dis) G.S.W. " Slt. abdo.
B291.	16 Can Gen: Orpington	13-8-18.	Gsw Rt. Thigh
B308	C.C.P.P.L.R.L. Bexhill	30-8-18	Gsw Rt Thigh
B326	Disc	30.9.18	" " "

Form DMS 1401.

A. & D. CARD

Wd. Convl. Hospital. HOSPITAL.

AT Bear Wood.

A. & D. No. DS 11544 PL. OF ACTION

RANK Pte REG. No. 11594 UNIT 10th Bord "C" SICK OR WOUNDED

NAME Rymer R. AGE 20 RELIGION

PLACE IN HOSPITAL Hut 2.

DIAGNOSIS Shrapnel Through.

ADMITTED 5 JAN 1918 FROM Bath War Hospital

DISCHARGED 15 JAN 1918 TO 2nd C.C.D. Bramshott

TRANSFERRED

SERVICE AT HOME 1/12 IN FIELD 3/12

RESULTS Wound healed. nearly fit D.I.

(See Document Card for M.H. Sheet and other Documents.)

P.T.O.

REMARKS.

12 CARD NO.

SURNAME. Aymer.

CHRISTIAN NAMES Robert

REGL. No. ~~7815-94~~ 115594 RANK Pte

UNIT 18th, C. M. R. (Cavalry Draft) (Form 128 24/2m.)

FORMER CORPS nil.

505. 10/3/19. 12. Demob
DD 29 of 2/BDP
FOLL 8/2/19 -

NEXT OF KIN.

NAMES IN FULL Aymer, Edward,

RELATIONSHIP TO SOLDIER Father,

ADDRESS 936 Lillecett St. Moose Jaw. Sask.

Addn for change of no.
Cable M 4394 23/11/17 STHS

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Kenora. Ont. DATE Oct 15th, 1894

PLACE OF ATTESTATION Moose Jaw, Sask. DATE Dec, 29th 1916.

D/S 28/4/16 44/2

D/C 17/1/19 254/166 12 Pte

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Oiler. RELIGION Presbyterian.

DESCRIPTION.

APPARENT AGE 18 YEARS 2 MONTHS

HEIGHT 5. FEET 4. INCHES

CHEST MEASUREMENT 35. INCHES EXPANSION 2. INCHES

COMPLEXION fair. EYES brown. HAIR light brown

DISTINGUISHING MARKS nil.

MEDICAL EXAMINATION. PLACE Moose-Jaw, Sask. DATE Dec 29th. 1915.

Present Address. 936. Lillecett St. Moose-Jaw. Sask.

728.

Name Pte Aymer. R. Folio Reg. M.D.12.

Rank Reg. No. 115594. Compy.

Age 30. Service 36/12. Rel. Pres.

Disease Scabies

Admitted 11-12-18. From Lines

Ward Epion.

Transferred To

Discharged 19-12-18 To Unit

AFW. 3118. 1237.

AFW. 3243 & 3243a. Medical History Sheet & other Documents.

To	To	To
From	From	From

Not Home

#402193

Number 15594 Rank Pte ~~B.H.R.~~

Surname AYMER

Christian Name Robert

Units 10th Bn. Can Inf Theatre of War France.

Date of Service 27-9-16

Remarks 81 Gould St Toronto, Ont

Latest Address ~~9 & 8 Lillooet St.~~ ~~Moose Jaw Sask~~

Roll No. B

Page 208830

10m.-8-21.M.

9/9/77

DEP. JAN 20 1923
REGN. NO 33367

REGN. NO 2034

B. & F. Retd
12.12.22.

Surname AYMER

Christian Names ROBERT
(Show Christian Names in full)

Service No. 115594 Rank on Discharge PTE

Kindly forward Medals to which I am entitled by reason of my service during the War ~~1914-15,~~ to:— 1914-18

No. & Street BOX 5701 WESTMINSTER HOSPITAL

Town LONDON

Province ONTARIO

NAVY

ARMY

R.C.A.F.

(Designate by an "X" the branch of the service from which you obtained your final release)

SIGNATURE Robt Aymer
(Write in block letters and in ink)

OTHER SERVICES
(Name Organization with which served)

I AM ALREADY IN POSSESSION OF

..... Medals.

K. 15857

DIRECTOR OF WAR SERVICE RECORDS
(AWARDS)

DEPT. OF VETERANS AFFAIRS

OTTAWA, ONT.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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. Aymer.

1. Christian Names ... Robert ... 2. Surname ... Aymer ...
3. Rank ... Pte ... 4. Original Unit ... 10 C. M. R. ... 5. Reg. No. 115594
6. Address, in full, to which future payments of gratuity are to be forwarded ... 288 Smith, St ... Winnipeg ... Manitoba
7. Date of enlistment in the C.E.F. ... 29/12/15 ...
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ... Not Applicable ...
9. Relationship of such dependent ...
10. Address, in full, of such dependent ...
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier ? ...
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:—
28 Sept ... 1916 ... To ... 11 Nov ... 1917 ...
25th April ... 1918 ... To ... 8th Aug ... 1918 ...
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 ? ...
14. Were you on active service only in Canada or the United States ? If so, give particulars of unit and dates of such service ... 12 8th Batn ... 29/12/15 to Mar 31/16 10th C. M. R. Mar 31/16 to Sept 30 1916 Fort Garry Horse R.R. Sept 30 1916 Left Sept 15 1916 9 Res. Left Sept 15 1916 to Sept 27 1916 10 Bn 28 Sept 1916 to June 11 1917 21st Res June 1917 Apr 25 1918 10 Bn Apr 25 1918 Aug 8 1918 21st Res. Aug 8 1918 to 11 Jan 1919 ...
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 ...
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department ...
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ...

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

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 ? ..... no .....

22. Are you entitled 'o 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? ..... no .....

24. Are you now serving in the C.E.F. ..... no ..... If not, give:—(a) Date of discharge ..... 7 Feby 10 1919 ..... (b) Reason for discharge ..... Demobilized .....

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 .....
10 Bn. 9 Sept. 1916 to 11 Nov. 1917 .....
10 Bn. 25 Sept. 1918 to 8 Aug. 1918 .....

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? .....

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. Aymer,

Place of Residence: 288, Smith St, Winnipeg.

Declared before me at: Regina Sask

This 10TH day of Feb. 19.19

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

E Stone

A Commissioner for Oaths in and for the Province of Saskatchewan. My Commission expires Dec. 31, 1924

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: Kenora, Ont. Canada.

NAME AND ADDRESS OF NEXT OF KIN: Edward Aymer, 926, Lillooette St, Moose Jaw, Sask, Father.

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. NO. 781594 RANK Pte NAME Aymer Robert

IF IN PERMT. CORPS WHAT UNIT — UNIT 10th Can. Draft TRANSFERRED TO 6 b D. DATE AUTHORITY

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 9th Bn DATE 7/9/16. AUTHORITY R.O. 190

PLACE OF ATTESTATION Moose Jaw, Sask. — TRANSFERRED TO 7-10th Bn DATE 11/10/16 AUTHORITY Boo72

DATE OF ATTESTATION 29th Dec 1915. — TRANSFERRED TO Alta. R. D. DATE 14-1-18 AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916															18															18				L.P.C. Bal.
May 1	30	1.00	30	00	31	10	3	10							34 10	3	14/5/16	1431	31/5/16					974	487					1461	37	49	15		
June			30		30		3								33			1549	15/6/16						487					487	65	62	30		
July			31		31		3	10							34 10	1611	31/6/16	1768	15/7/16					973	487					1460	85	12	45		
Aug			31		31		3	10							34 10	1833	31/7/16	2026	15/8/16					973	974					1947	99	75	60		
Sept 1-16	16		16		16		1	60							17 60	2004	31/8/16							487						487	119	49	75		2nd Bn 17/8/16 R.O. 190
17-30	14		14		14		1	40							125 49																127	88			Boo72 to 10th Bn
Oct 1/10	10		10		10		1	00							11																138	88	90		
11/31	21		21				2	10							23 10			2284 12/9 C.C.R. 2371 27/9 " 126 2700 7/10 C.R.D.								7 30 4 36 973					21	39	140	59	105	
1-30	30		30				3								33			1730 30/10 R.D.								262		1.10	372	169	87	170		1 day. L.P.#1. 8.0.63. 11/11/16.
Dec 1/31	31		31				3	10							34 10	1600	21/11							1395						1395	190	02	222	50	
			24	50			24	50								1649	3/12							262									135	
Jan 1/31	31		34	10											34 10	1640	21/12							5 38						7 80	216	29	150		
															30 80	1752	1/1							262						5 24	241	53	825		
Feb 1/28			30	80																				262											
			352	40											352 40									6114	2435	2401			110	11060					

Checked [illegible]

Checked C.O. Meyer

old No 115 594

781594 Pte Aymer R.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			352	40											352 40														60			875		
Mar 31			34	10											34 10	1182	14/2	1490 1493	21/3 5/3					611	2135 x64	2401 x61			110	110	341 83		165		
Apl	30	1 0/0	33	-											33 -	11	1/4							262						7 85	268 08		180		
May 31			34	10											34 10	137	3/4							265						262	298 46		180		
June 30			33												33	95 177	23/5							261 247						5 25	327 27		255	7227	
July			34	10											34 10	282	2/6							694						8 95	351 36		240		
Aug			34	10											34 10															38 46		225		
Sept			33												33	374 352	21/1 11/9	582	1/9					218 208	267					2 85	416 88		240		
			587	80											687 80	120	1/6	492	21/10					88 54	3939	20 01			110	155 19	-		225		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR3	DR4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.
Oct									434 71		
	P/Pay.	34 10							468 81		
Nov	Pte Pay	33 00		Ad 586. 7/10 10Bn	- 357						
Dec	" "	34 10		" 626. 13/10. 10Bn	- 446				535 91		
		67 10		: 537 18/9 "	- 268						
				" 684. 22/10. "	89						
				R. 7666. 29/11. C Fm	487						
1918				AR 723. 7/11. 10Bn	446				514 98		
Jan	P. Pay	67 10			20 93						
		34 10		HR 11853 Ldn. 22.12.17	4 87	✓			544 21		315
		34 10			4 87						
Feb.	P Pay	30 80		Dn. 1640 9.1.18 Bwood	4 87						
				AR 2115. Ldn 2 bbd	14 84						
				Dn. 1713 15.1.18 Wlan	38 93						
				" 2004 12.2.18 2 bbd	24 54				491 80		330
	67 18 b 27.1.18 = 12a.	30 80			83 21						
Mar.	Dc 15 2 bb 15.1.18	8 76		AR 2056 27.2.18 "	48 91						
	P Pay	34 10		" 1203 21.3.18 21 Res	24 33				461 42		345
		42 86			73 24						30

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR3	DR4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND OR~~ CANADA.

EFFECTIVE DATE:- 1.9.18.

AMOUNT:- 15 00/100

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- AYMER Robert

NUMBER:- 781594 (Old Number 115594)

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.

MISS NELLIE AYMER A2m 5.7.18.
918 LILLOUETTE ST.
MOOSE JAW SASK.
SISTER. CAN.
Stopped Effect 1/1/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 10 b M. R.

DATE ACCOUNT FIRST OPENED:- 1.5.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Alta. R.D.
D.O. 44 20/4/18	26.4.18	1.5.18	10 Bn.
215 - 17/8/18.	13/8/18	20/9/18	Alta. R.D.

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
~~30 10/18.~~	~~220~~ 257	~~30 Forfeits 10 days pay.~~ Breaking Quarantine	~~15 00~~ 15 00				
13 11/18.	1962	Borrett.	~~2 43~~ 2 43				
28 11/18.	2151	✓	~~2 43~~ 2 43				
		Restricted Pay 1 mth to 29/10/18					

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSICE ALLICE
	1 -	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Jfd to Canada 1/1/19. NYK 609. 7/1/18 6 Dale. $334.03. 8 May 413.

MONTH 1918	PARTICULARS	CR 1.	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar. 31	Balce. Forward								461 42	345	
Apl. F-1-(4)	P. Pay	33.		AR 36 - 15.4.17 21 Res.	9 73						
				awx 12.01 am 24.4.18 to 6PM 24.4.18 / D0 99 - 21 Res. 26.4.18		1 10					
				AR 151 22.4.18 21 Res	29 20						
				Q 4005/228 24.4.18 ✓	1 42				452 94	360	
		33			40 35	1 10					
May.	✓	34 10		AR 226 5518 1 DWCRC	3 57						
				✓ 153 155 18 10 Bn	4 46						
		34 10			8 03				479 04	375	
F-10-(7) June	✓	33.		AR 204 16 18 ✓	3 57						
				✓ 299 146 ✓	4 46				504 01	390	
		33 -			8 03						
F-4-(7) July	P. Pay	34.10		AR 92 - 1.7.18 - 10 Bn.	3 57						
				AR 136 - 12.7.18 - ✓ 14 days F.P. No 1. 21-6-18 for w.o.a.s. Refusing to obey an order 16-6-18. Bo 67 - 10 Bn - 9-7-18.	4 46	15 40				398	
		34.10			8.03	15 40			514 68		
Aug	P. Pay	34 10		AR 378 - 3/8/18 - 10 Bn.	3.57						
		34 10		ONAR 4232 - 2/8/18 - #16 C.C.H.	4.87				540 34	413.	
					8 44					441	
Sept.	P. Pay	33 -		Can - A.P.				15			
	S/T 20.9.18 to 2.10.18 - 12d (D0 226 - 21 Res - 24.9.18)	8 76		AR 4100 2.9.18 P.P.C.R + Bayhill	9 73						
				- 5531 20.7.18 - -	48 67				502 70	413	Apt regrad
		41 76			58 40			15			
Oct	P Pay	34 10		C.R.P.				15	527 80		
				AR 1630 15/10 21 Res	9 73						
				T/F 14d. 30/10/18 14d 7 P.C. 2. A.W.L. 26-28/10/18		18 70					
				AR. 1777 31/10 D0 25.7. 30/10 21 Res	24 33				479 04	✓	
		34 10			34 06	18 70		15			

1864

NUMBER 781594 RANK AYMER NAME R.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Balance forward.					445 04	413	
1918 Nov	P. P.	33.		CAP				15			
				MR 1962 15/11 21 Res	243						
				215-1 30/11 "	243						
Dec	P. P.	9410		CAP.				15.			
	Ext on Def Pay.	2675							53403		
		9385			486			30 -			
FEB				R.583 24/12 Kimmel=L.P.C.ord.	973				52430	413 -	
		—			973			—			

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

Date.	Brief details, and signature.
1/4/16	T.V. 2.
TAB 2	(1/2/18 Scm (9/2/18 a.h.
Vacc.	1916 2nd vacc.
15/3/18 A	2nd CCD Bf Lumsden Capt. A.M.S.
14.9.18 A TAB 2	F.R. Connolly. Capt.

Table IV.—Service Table.

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

To replace lost N.M.S.

ORIGINAL

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Aymes *Christian Name* Robert.

TABLE I.—GENERAL TABLE.

22 NOV 1917
2 AUG 1916

Birthplace ... Parish Kenora County Ontario.

Examined ... ... on 27 day of December 1915.
at Moose Jaw. Sask.

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

Trade or Occupation ... Machinist

Height ... ... 5' feet, 6 inches.

Weight ... ... 130 lbs.

Chest Measurement — Girth when fully Expanded. 35' inches.

Chest Measurement — Range of Expansion 3 inches.

Physical Development ...

Vaccination Marks — Arm ... Right Left

Vaccination Marks — Number 1

When Vaccinated ... ...

Vision ... ... R.E.—V= 20/20
L.E.—V= 20/20

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

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

Approved by (*Signature*)

(*Rank*)

Medical Officer.

Enlisted ... ... at Moose Jaw. Sask.
on 27 day of December 191 5

Joined on Enlistment ...	Corps.	Regtl. No.
	128 Bn.	115594
Transferred to	10th C.M.R. 10th Bn France. 27 SEP 1916	

Became non-effective by 21ST REG. BN. 15 MAR '18
10th Bn 25/4/16

on 21st Res Bn day of 20/9/18 191 .

(*Signature*)

(*Rank*)

CANADIAN

2966. Wt. W8005/2748. 300,000. 8/15. D. D. & L.

[P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				
Bath War Hospital	16	11	17	4	1	18	Shrap: Wd Throat	49	Trans: to Canadian Conv: Hospital Wkingham	J.J. Scale
Beau Wood	4	1	18				Shrap wd throat		Wound healed Ro desirability Cat 4 D T	J.A. Bellcapt
Canadian Red Cross Hospital	13	8	18	29	8	18	G.S.W. Rt Thigh	17	Wds healed - marched for Command Depd.	Dr. Dan Captain.
Princess Patricia Canadian Red Cross Hospital, Cowden Camp, Dexhill	29	8	18	10	9	18	GSW. Rt Groin	24	Improved No desirability. Discharged to duty	E.W. Connolly Capt
MILITARY HOSPITAL, KINNEL PARK, RHYL	11	12	18	19	12	18	Scabies	9	Scabies, Discharged fit to Rejoin Unit	R.G. Kenna Capt

(2468) Wt. W. 2290—PP1182 6-18 J.F.W. (E3277)

3B

MD 12

Army Form W3997.

S S Olympic
Sa 11 1 19 Ar 17 1 19

C

Regtl. No. 115594 Rank Pte.

Name Robert (Christian Names in full) Aymer. (Surname)

Unit 21st Res. Regt. or Corps 10th Batt.

A. Walker.

Moose Jaw, Sask.

Service in France. 1½ yrs.

Occupation Oiler

Group 20

21.

COVER

FOR

DISCHARGE DOCUMENTS.

Proceedings on Discharge
" Medical Board
Medical History Sheet
Last Pay Certificate
Casualty Form
attestation Paper
Field Conduct Sheet
Company do.
Regimental do.
D.O.S.R.
Dental Certificate

V. D. G

M. H. Co. B. Ld. Draft

14

K. P. L. H.

1

File - A - 120 - Olympic - 17-1-19.

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 115594 RANK Pte NAME (IN FULL) AYMER. R. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS 1015-4 — 114 Street

~~288 Smith St~~ EDMONTON Alta.

~~Kingston Ont~~

IS SEPARATION ALLOWANCE PAID? No DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 10th Bn. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 29/12/15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15-00 DATE EFFECTIVE 1.2.19.

PAYABLE TO Mrs. Nellie Aymer RELATIONSHIP Sister

ADDRESS 918 Lillooette St. Moose Jaw Sask.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE EFFECTIVE

DISCHARGED PLACE Regina Sask DATE 10/2/19 REASON Demob. AUTHORITY Do 24 IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	Cr Bal forward $	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
31/12/18					534	03	~~534 03~~		534	03													Savy														
1st-10/2	41	1/10	45	10	35/12	-	469 43		561 53				Enroute				49 60						15 -				27				64 60 / 631 53			469 43		35 Mallet 12 Subs 27 Kit Shortage COY 62
			45	10	581	03			626	13							680	86	100	00			15	00			27				796	13	170				Disch 10/2 — Do 39
																																					In Mitchell Sask. For ASST. DIRECTOR OF PAY SERVICES MILITARY DISTRICT No. 12
			W.S.G.																				W.S.G.														
	183		420				420																170								170						N. D. Depot
																							~~11~~								~~170~~						~~Left L.O.B. Yards Mitchell Sask. Cannot trace Leave Edmonton~~ See Corps No. 275 #100 above
																							50								220 / 208		200 / 212				1781 Sp 3.19
																							50								270		150				19267 Sp 10.4.19
																							50								320		100				19787 MAY 10 1919
																							50								370		50				616166 10/6/19
																							50								420		-				624096 JUL 10 1919
			420				420																420								420						I certify that all pay, rations, etc. due to Pte Aymer, Isaac, R. have been paid. Pay Lieut. Canadian Forces Paymaster Military District No. 12.

WAR SERVICE GRATUITY M.D. 12

30M-11-18.—L.L. 50877-M. & D. 9553.

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