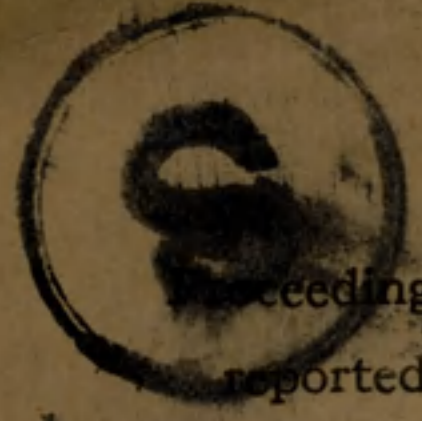


DISCHARGE DOCUMENTS

9508

R. O. No. ....

H. Q. No. ....



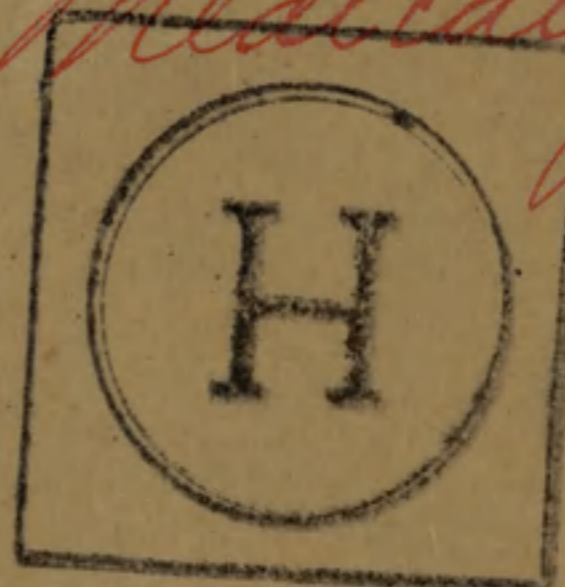
- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *24*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge..... *1*
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *2*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... *1*
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name *Burnhill Roy B.*

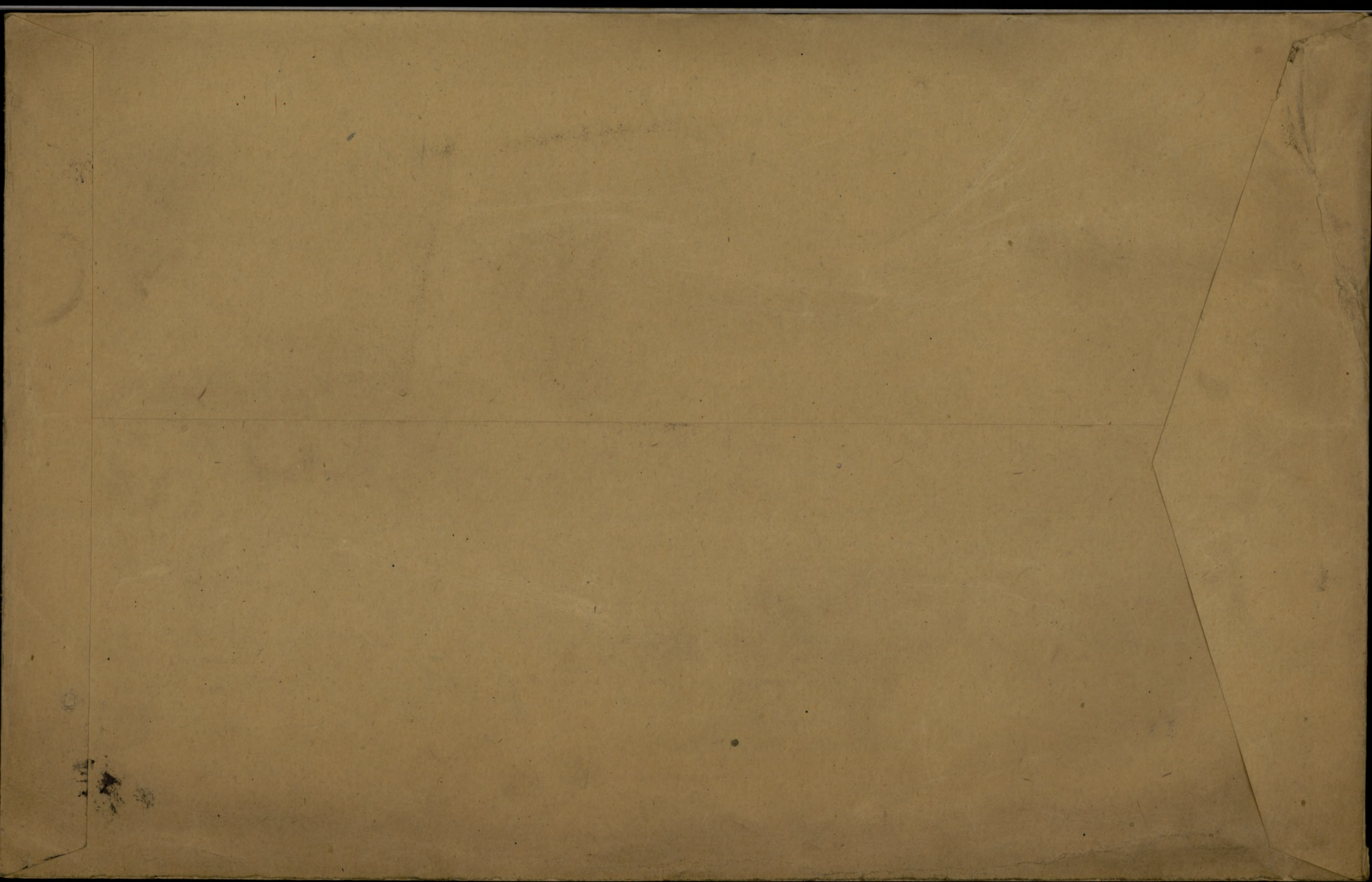
Regt. No. *503703* Rank *Sapper*

Corps *Eng Train Dep.*

*Medically unfit*



*BP 66418*



ATTESTATION PAPER.

No. 503703

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Barnhill*
- 1a. What are your Christian names? *Ray B.*
- 1b. What is your present address? *Two Rivers Canal Co. N.S.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Two Rivers Canal Co. N.S.*
- 3. What is the name of your next-of-kin? *A. B. Barnhill Two Rivers N.S.*
- 4. What is the address of your next-of-kin? *Two Rivers Canal Co. N.S.*
- 4a. What is the relationship of your next-of-kin? *Father*
- 5. What is the date of your birth? *26<sup>th</sup> Jan. 1895*
- 6. What is your Trade or Calling? *Machinist*
- 7. Are you married? *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
- 9. Do you now belong to the Active Militia? *No*
- 10. Have you ever served in any Military Force? *No*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *Yes*
- 12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *Feb 22<sup>nd</sup>* 1916. *R B Barnhill* (Signature of Recruit)  
*B W Bhis M.D* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *Feb 22<sup>nd</sup>* 1916. *R B Barnhill* (Signature of Recruit)  
*B W Bhis M.D* (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 *Amherst* this *22<sup>nd</sup>* day of *Feb.* 1916.  
*W A Filleron J.P.* (Signature of Justice)

# Description of Bamhill Roy B. on Enlistment.

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

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

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

Height .....ft.....ins.

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

Complexion .....

Eyes .....

Hair .....

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

*Deficient eyesight  
 MS*

## 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\*.....for the **Canadian Over-Seas Expeditionary Force.**

Date.....191 .

Place.....

*J. S. Shelton*  
*Lt Col. AMC*  
 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:—

*Deficient eyesight  
 MS*

## CERTIFICATE OF OFFICER COMMANDING UNIT.

.....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.

.....(Signature of Officer)

Date.....191 .

70 carb  
474

# MEDICAL HISTORY SHEET.

Surname Barnhill Christian Name Boz B

Examined { on 15<sup>th</sup> day of Feb 1916  
 at ambat-ns,  
 Birthplace { City or Town Two Rivers  
 County Bumbalad.

*not*  
 Approved by J. S. Shillington  
 Rank 1st Col. Amt M.O.

Apparent age 21  
 Trade or occupation Mechanic  
 Height 5- Feet 5 1/2 Inches.  
 Weight 152 Lbs.  
 Chest measurement { Minimum 34 inches.  
 Maximum expansion 37 1/2 inches.  
 Physical development Good  
 Small-Pox Marks none

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

Vaccination Marks { Arm Right 0 Left 0  
 Number 0  
 When Vaccinated last 1908

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease none

Deficient Eyesight

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on 15<sup>th</sup> day of Feb. 1916 at ambat-ns

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to.. ..				

### 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 cause being stated on next page.





Surname *Barnhill* ..... H. Q. *649-B-2623*  
Christian names *Roy B.* ..... M. D. No. *3*  
Regtl. No. *50370 B* ..... Rank *Pvt* ..... T. O. S. .... 19.....  
Unit *Div Engineers* ..... D. O. Pt. II ..... of .....  
S. O. S. *Dis 2-5-1916*  
Reason *med unfit*  
Auth. *Doc.*

Next of kin *Barnhill, B. B.* ..... Relationship *father*  
Address *Two Rivers N.S.* ..... Also notify: .....

BORN—Place *Canada Two Rivers* ..... Date *January 26th 1895*  
ATTESTED—Place *Amherst* ..... Date *February 22nd 1916*  
O/S ..... R/C .....



R.O. 22-5-16.

### List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of  (a) Proceedings on Discharge.  (b) Attestation.  (c) Medical History Sheet (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	

\*Only if discharged "Medically unfit."

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.

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. 503703.	
Rank <i>Sapper.</i>	
Name <i>Roy B. Barnhill</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>Engineer Training Depot</i>	
Date of Discharge <i>May 2, 1916.</i>	
Place of Discharge <i>Ottawa.</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>21</i> years <i>3</i> months.	Descriptive Marks <i>Deficient Eyesight</i>
Height <i>5</i> feet <i>5/2</i> inches.	
Complexion	
Eyes	
Hair	
Trade <i>Machinist</i>	
Intended place of residence	
<small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <i>Medically unfit</i> <i>3 D. 44 B-62.</i>	
<small>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.</small>	
3. Conduct and character while in the service have been, according to the records, etc.  <i>— Good —</i>	
<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.  
25m.—11-15.  
H. Q. 1772-39-113.

(OVER)

P.B.

*Card 22-5-16  
4.*

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.)

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 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) Ottawa.....

(Date) 2.5.16.....

[Signature]  
for Lt. Colonel C. E.  
Commanding G. C. Engineer Training Depot.

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Ottawa ~~London~~ [Signature] (Signature of Soldier.)

(Date) 2.5.16 R. B. Bamhill (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] (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed) 2 1/2 months years.....days.

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

11. Confirmation of Discharge.

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

(Place) Ottawa.....

(Date) 2-5-16.....

[Signature]  
for Lt. Colonel C. E.  
Commanding G. C. Engineer Training Depot.

# MEDICAL HISTORY OF AN INVALID.

THIRD DIVISIONAL AREA  
APR 1 1916  
3. D.

- 1.—Station. *Ottawa.*
- 2.—Regiment of Corps. *Engineers. (Divisional)* (a) Conduct. *good*
3. Regimental No. and Rank. *503703. Sapper* (b) Habits. *regular*
- 4.—Name. *Roy Byron Barnhill* (c) Temperance. *temperate*
- 5.—Age last Birthday. *21*
- 6.—Enlisted { on *15 Feb 1916.*  
at *Amherst.*
- 7.—Former Trade or Occupation. *Chauffeur* Date *Mch 17<sup>th</sup> 1916*
- 8.—General remarks on his:—  
(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

9.—Service.	Years.		Days. <i>32.</i>
	PERIODS.		
	From	To	
	<i>15 Feb. 1916.</i>	<i>17<sup>th</sup> Mch 1916</i>	

- 10.—Disease or Disability. *Defective eyesight.*
- 11.—Date of origin, cause, present condition, and whether the same is the result of service or climate. *unknown commenced to wear glasses two years ago. eyesight very defective. Right  $\frac{20}{70}$  Left  $\frac{20}{50}$*
- Has it been aggravated by intemperance, vice or misconduct? *no*

(At Station or Hospital where finally disposed of)

Station and Hospital } Arrived from }  
Date

Index No.	If under treatment.		Disease.	How finally disposed of.	Date of Discharge, &c.
	From	From			
Date					

SUMMARY of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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

**Militia Form B. 227.**  
(H. Q. 1772-39-117.)

**DETAILED MEDICAL HISTORY OF INVALID**

Date	Disability	Name	Regimental No.	Rank	Station	Corps	Hospital or Station transferred to for final disposal.	Date of final disposal	How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

No

18.—State if for discharge on account of unfitness for service.

Yes

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

✓

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

✓

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

✓

15.—Is the disability permanent? If not, state its probable duration. To what extent will it prevent his earning a full livelihood?

Yes

16.—Full particulars of medical treatment of case up to date of invaliding.

None

*M. Shillington*  
*Lt. Col. A.M.S.*

Medical Officer by whom the case is brought forward

**OPINION OF THE MEDICAL BOARD.**

(In which it should be stated how far the Board concurs in above Report.)

*We concur in the above report and recommend that Sapper Barnhill be discharged from the service as medically unfit. Disability is not permanent and has not been aggravated by service*

Signatures :—

*J. H. Leggett* President.

Station

*B. Howe*

*T. H. Leggett* Major A.M.S. Members.

Date

*Feb 22nd 1906*

*A. J. McLean*

Date

*14.16*

*R. H. ...*  
Assistant Director of Medical Services.

Approved.

Date

Director of Medical Services.

[OVER]