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27-2-17

# DUBUQUATE ATTESTATION PAPER

No.

Folio.

1502113

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

with Statutory Declaration  
5-11-17.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... ~~Welsh~~ *Finan*
- 1a. What are your Christian names? ..... *Robert John*
- 1b. What is your present address? ..... *Iroquois Falls*
2. In what Town, Township or Parish, and in what Country were you born? ..... *Ottawa*
3. What is the name of your next-of-kin? ..... *Eileen Welsh*
4. What is the address of your next-of-kin? ..... *99 Rochester St. Ottawa*
- 4a. What is the relationship of your next-of-kin? ..... *Mother*
5. What is the date of your birth? ..... *April 2, 1897*
6. What is your Trade or Calling? ..... *Teamster*
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 } *Yes*  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

228 THIBN

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Robert John Welsh*, 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.

*Robert John Welsh* (Signature of Recruit)

Date *Jan. 6* 191 *7* *Frank E. Ebbin* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

*Robert John Welsh* (Signature of Recruit)

Date *Jan. 6* 191 *7* *Frank E. Ebbin* (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 *Iroquois Falls* this *sixth* day of *January* 191 *7*

*Frank E. Ebbin* (Signature of Justice)

Description of Robert John Welsh on Enlistment.

Apparent Age...19...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.....5 ft. 8 ins.

Chest measurement { Girth when fully expanded.....36.5 ins.  
 Range of expansion.....33.5 ins.

Complexion.....Ruddy

Eyes.....Blue

Hair.....Brown

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

MEDICAL OFFICER  
 J. H. B. S. S.

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.....Jan 6th/17.....191

Place.....Iroquois Falls, Ont.

*C. H. Morsey M.D.*  
 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 John Welsh*.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

*J. Eastman* (Signature of Officer)

Date.....Jan 6.....191

O. C. NORTHERN FUSILIERS 228TH O. S. BATTALION

Duplicate set of papers

# ATTESTATION PAPER.

## TRIPPLICATE

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 100 7113

Folio.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

auth: Stat Dec of 5-11-17  
Pt. 20 58 of 13-7-17  
646 R 5

1. What is your surname? *Welsh alias: Finan*
- 1a. What are your Christian names? *Robert John*
- 1b. What is your present address? *99 Rochester St. Ottawa, Ont. Can*
2. In what Town, Township or Parish, and in what Country were you born? *Ottawa Ont. Canada*
3. What is the name of your next-of-kin? *Mrs Ellen Welsh*
4. What is the address of your next-of-kin? *99 Rochester St. Ottawa Ont. Can.*
- 4a. What is the relationship of your next-of-kin? *mother*
5. What is the date of your birth? *Apr. 2/1898*
6. What is your Trade or Calling? *Seaman*
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, *Robert John Welsh*, 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.

*Robert John Welsh* (Signature of Recruit)

Date *Jan 6* 1917. *Art Kent* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

*Robert John Welsh* (Signature of Recruit)

Date *Jan 6* 1917. *Art Kent* (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 *Proquies Falls* this *6* day of *Jan* 1917.

*A. Zachman* (Signature of Justice)

O. C. NORTHERN FUSILIERS 228TH O. S. BATTALION

alias: *Janin Robert John*

Description of *Welsh Robert John* on Enlistment.

Apparent Age *19* 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 ..... *5* ft. *9* ins.

Chest measurement { Girth when fully expanded ..... *38 1/2* ins.  
Range of expansion ..... *36 1/2* ins.

Complexion ..... *reddy*

Eyes ..... *blue*

Hair ..... *brown*

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date ..... *Jan 6* ..... 1917.

Place ..... *Proquois Falls, Ont*

*A. W. Murphy*  
.....  
*M. O.*  
.....  
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.

..... *Welsh Robert John* ..... 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.

..... *A. E. ...* ..... (Signature of Officer)  
O. C. NORTHERN FUSILIERS 228TH O. S. BATTALION

Date ..... *Jan 6th* ..... 1917.

Duplicate  
No. 639584

**ATTESTATION PAPER.**  
156th OVERSEAS BATTALION, C. E. F.  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**  
(ANSWERS.)

- 1. What is your name?..... Robert John FINAN
- 2. In what Town, Township or Parish, and in what Country were you born?..... Ottawa Ont. Can
- 3. What is the name of your next-of-kin?..... Mrs. Ellen FINAN Mother
- 4. What is the address of your next-of-kin?..... 99 Rochester St. Ottawa Ont.
- 5. What is the date of your birth?..... 2st. April 1896
- 6. What is your Trade or Calling?..... Teamster
- 7. Are you married?..... NO
- 8. Are you willing to be vaccinated or re-vaccinated?..... AND INOCULATION R.J.F. Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?.. No  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the } Yes  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

R. J. Finan (Signature of Man.)  
W. Kingston Capt (Signature of Witness.)

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

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

R. J. Finan (Signature of Recruit)  
Date 7th. February 191 6 W. Kingston Capt (Signature of Witness)

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, Robert John FINAN, 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. J. Finan (Signature of Recruit)  
Date 7th. February 191 6 W. Kingston Capt (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 Prescott Ontario this 7th day of February 191 6

W. Kingston Capt (Signature of Justice)

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

W. Kingston Capt (Approving Officer)

# Description of Robert John Finan on Enlistment.

Apparent Age 19 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 ..... 5 ft 9 ins.  
 Chest measurement { Girth when fully expanded ..... 35 ins.  
                                   Range of expansion ..... 3 ins.  
 Complexion ..... dark  
 Eyes ..... blue  
 Hair ..... dark brown

*Note right hip*

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

## CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date ..... Feb. 7<sup>th</sup> 1916.

Place ..... Ottawa

*M. Shillington*  
*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:—

**156th Battalion.**

## CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert John Finan ..... 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.

Date February 15<sup>th</sup> 1916 ..... (Signature of Officer)  
*T. D. [Signature]*  
 Commanding 156th Overseas Battalion. **Lieut. Col.**

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

#10183

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... Robert James Finan
- 2. In what Town, Township or Parish, and in what Country were you born?..... Canada
- 3. What is the name of your next-of-kin?..... Robert Finan
- 4. What is the address of your next-of-kin?..... 99 Rochester St. Ottawa.
- 5. What is the date of your birth?..... April 2, 1896.
- 6. What is your Trade or Calling?..... Driver.
- 7. Are you married?..... No.
- 8. Are you willing to be vaccinated or re-vaccinated?..... 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

38th Bn. Cavalry

*R. J. Finan* (Signature of Man).  
*H. Ambrose* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

*R. J. Finan* (Signature of Recruit)  
*H. Ambrose* (Signature of Witness)

Date 22 February 1915

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert James Finan, 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. J. Finan* (Signature of Recruit)  
*H. Ambrose* (Signature of Witness)

Date 22 February 1915

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 Ottawa, Ont. this 22 day of February 1915

*H. Ambrose* (Signature of Justice)  
JUSTICE OF THE PEACE IN AND FOR THE COUNTY OF CARLETON

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

*H. Ambrose* Lt. Col. (Approving Officer)

Description of Robert James Finan on Enlistment.

Apparent Age.....19.....years.....months..... Distinctive marks, and marks indicating congenital anomalies or previous disease.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.) (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. 5 1/2.....ins. *None.*

Chest-measurement { Girth when fully expanded.....36 1/2.....ins.  
 Range of expansion.....2 3/4.....ins.

Complexion.....Healthy

Eyes.....Hazel

Hair.....Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....22 February.....1915

Place.....Ottawa, Ont.

*Howard Munnick*  
*Lt. Col.*  
 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 James Finan.....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.

*W. Edwards*  
 Lt. Col. ....(Signature of Officer)

Date.....26th February.....1915.



C.E.F.

FINAN ROBERT JAMES

410183

38 BN

TRANSFERRED

06369

639584

156 BN

DESERTER

→ 1,007,113

228 BN

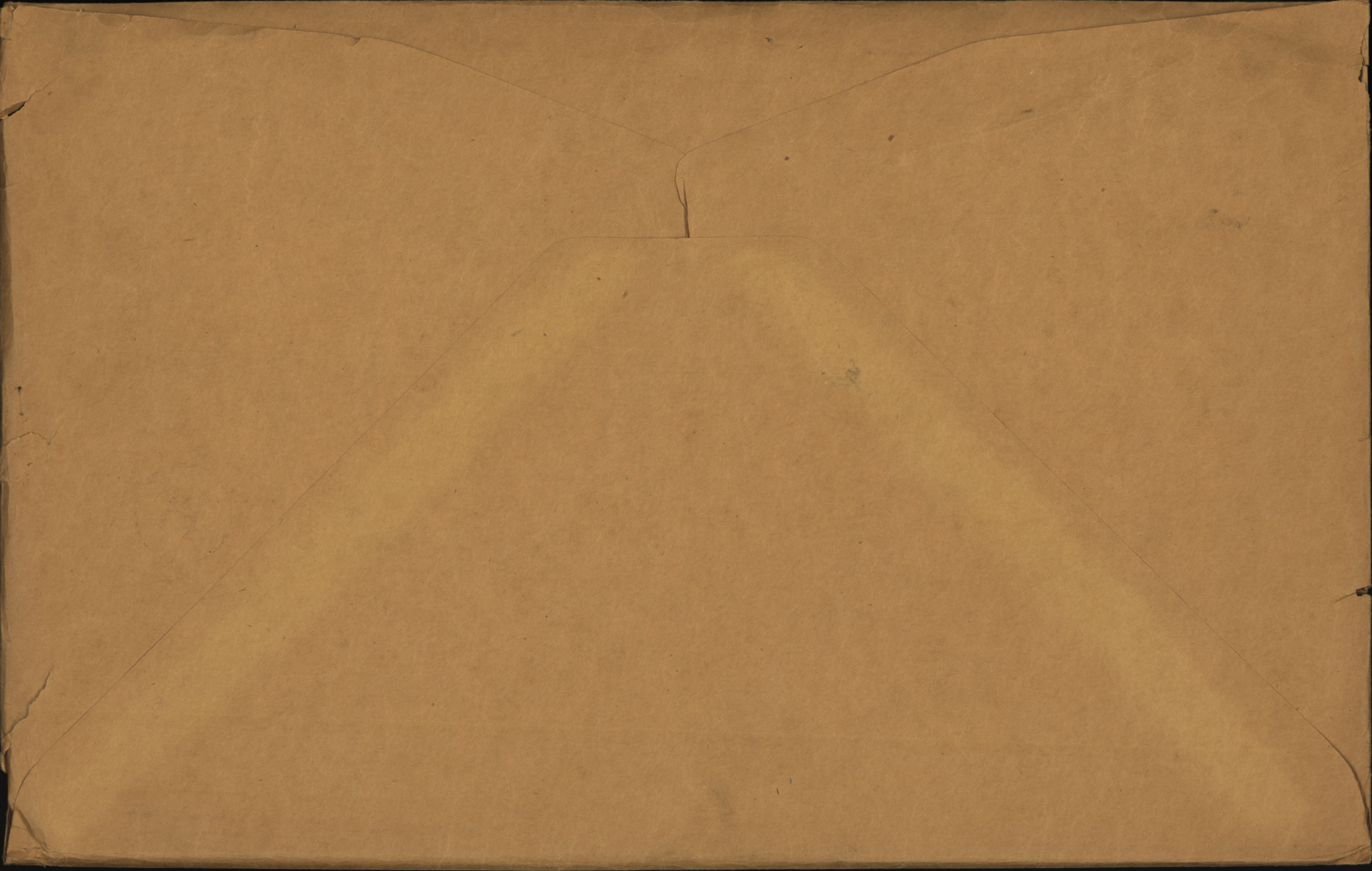
S.O.S.

ALIAS WELSH R.J. *empty jacket only*



*405 010*

PUBLIC ARCHIVES  
RECORDS CENTRE



PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

ORIGINAL

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..... **228 th Bn.C.E.F.**

(2) Regimental Number..... **1007113**

(3) Full Name of Soldier..... **Robert L WELSH**

(4) Place of Birt..... **Ottawa**

(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.....

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

If so, state name and address.....**Robert J WELSH 99 Rochester St Ottawa**.....

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

If so, state name and address.....**Ellen WELSH 99 Rochester St Ottawa**.....

(11) If your Mother is a widow.....**No**.....

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

(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.

(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.

(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.

-----  
*A. S. Buchanan*  
-----  
Officer Commanding.

Date..... **O. C. NORTHERN FUSILIERS 228TH O. S. BATTALION**

*Duplicate  
set of Papers  
FINAN  
ALIAS*

# ORIGINAL MEDICAL HISTORY SHEET.

Surname Welsh Christian Name Robert John

Examined { on 6 day of Jan 1917  
 at Proquois Falls

Birthplace { City or Town Ottawa  
 County Ont.

Apparent age 18

Trade or occupation Teamster

Height 5 Feet 8 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 33½ inches.  
 Maximum expansion 36½ inches.

Physical development good

Small-Pox Marks

Vaccination Marks { Arm Right Left  
 Number 0 1

When Vaccinated last 1912

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by		
<u>Alone Murby</u>		
Rank <u>capt.</u> M.O.		
Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on 6 day of Jan 1917 at Proquois Falls

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>228 Bw</u>	<u>100 7113.</u>		<u>Jan 6/17</u>
Transferred to.. ..				

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Toronto</u>	<u>8/2/17</u>		<u>passed</u>
<u>Knotty Ash Camp.</u>	<u>18/2/19</u>	<u>nil</u>	<u>'A' with 2000 apt</u>



# MEDICAL HISTORY SHEET

Surname Welsh Christian Name Robert J.

Examined { on 6th day of Jan 1917  
 at Iroquois Falls, Ont.

Approved by *C. G. Lawrence*

Birthplace { City or Town Ottawa  
 County Ont.

Rank \_\_\_\_\_ M.O.

Apparent age 19 M.O.

Trade or occupation Teamster M.O.

Height 5 feet 8 Inches M.O.

Weight 150 lbs. M.O.

Chest measurement { Minimum 33.5 inches M.O.

{ Maximum expansion 3.5 inches M.O.

Physical development Good M.O.

Small-pox Marks \_\_\_\_\_ M.O.

Vaccination Marks { Arm None Right Left X M.O.

{ Number 1 M.O.

When Vaccinated last 1911 M.O.

(a) Marks indicating congenital peculiarities or M.O.

previous disease \_\_\_\_\_ M.O.

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

\_\_\_\_\_ M.O.

\_\_\_\_\_ M.O.

\_\_\_\_\_ M.O.

\_\_\_\_\_ M.O.

\_\_\_\_\_ M.O.

Enlisted on 6th day of January 1917 at Iroquois Falls

	CORPS	REG'TL 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.









*Explosive*

*J.P.*

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

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

350M.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 228 Bn CCF

Regimental No. 1007113 Rank Pte Name ~~W. J. H. Finn~~ Robert John Finn

*o/c Records RLU-2 R2H2, 2211*

Enlisted (a) Jan 6/17 Terms of Service (a) Duration of War Service reckons from (a) Jan 6/17

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) Teamster

CERTIFIED CORRECT.  
12/23/17  
17 MAR 1917  
CAN. RECORDS, LONDON

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				
			Embarked		Canada 16-2-17
			Arrived		England 27-2-17
	228th Bn	taken on strength 6th C.R.D.	Purfleet	8/3/17	Part II 2071
	6th C.R.D.	arrived in France	Field	3-4-17	" " " I
			<b>R. H. Blowers</b> LIEUT. FOR LT: COL: MC RECORDS, C.O.M.F.		
28.6.17	G.C.D.	sentenced to 10 days F.P. No. 2 for 1. Insolence to a commissioned officer. 2. Insolence to an. n. c. o.	field	23-6-17	B. 2069 Part II 190.22 8 1/2
1-9-17	6th C.R.D.	Detached to 12th American Engrs	Field	27-8-17	B 213
29/9/17	C.R.F.	Ceases to be attached to 12th Am. Engrs.	Field	24/9/17	B. 213

(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  
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

29/1/19. CRD. 20 of fur. demob. posted to  
 CRD. Krotty cash. 30-1-19  
 Chapelle  
 Lt. Col. A. A. G.

Canadian Section, G. H. Q., 3rd Echelon, B. E. F

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				
13/11/17	6 CR.T.	Having declared his true name to be Robert John Timmon will in future be known as such. All documents to be altered accordingly	Lieut	13/11/17	Part 2. All. 58 - d/- 13/11/17
28/11/17	O/c Records.	Pt. 2. All. 58. 28/11/17. amend to read Finan.	Lieut	28/11/17	Part 2. All. 63. 28/11/17
12.2.18.	6 CR.T.	Sustained to 14 days. 70/1. fur. 1) lightning with another spr. in camp area. 2) drunk. miss	Lieut	28-1-18	Part 2. All. 8. 12-2-18 B 2069 d/- 31.1.18
3.8.18	no	Granted 14 days LEAVE	Lieut	21-7-18	All. 8 of 1918
10.8.18.	no	Returned from LEAVE	no	6.8.18	B 213
6.1.19.	do	Granted 14 days LEAVE	no	17.12.18	All. 1 of 1919
11-1-19.	do	Joined Unit & leave		21-1-19	B 213

*Orig Not available*  
Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103:  
500M.—9-16  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. *38 Bn 6, E. I.*

Regimental No. *210183* Rank *Plt* Name *Sinaw, R. J.*

Enlisted (a) *22.2.15* Terms of Service (a) *C.E.R.* Service reckons from (a) *22.2.15*

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) *Driver*

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				
<i>July 14/15</i>	<i>38 Bn</i>	<i>Subon Transfer to 59 Bn</i>	<i>Bermuda</i>	<i>1.8.15</i>	<i>Pophest</i>

(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



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

KNOTTY ASH CAMP,  
LIVERPOOL

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. 1007113 Rank SAPPER Surname FINAN

(Given name in full)

ROBERT JOHN

Unit or Corps C.R.T.D. Birthplace OTTOWA ONT. CANADA

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

## I. GENERAL DESCRIPTION:

Physique good Weight 155 lbs. Height 5 ft. 8 in. Colour of Eyes Brown

Nutrition good

Pulse 74

Condition of arteries good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 24 ft.

Left 21 ft.

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

nil

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System 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.

nil

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at .....(Overseas)

Date ..... 18/2/19 .....

Signed..... *W. H. Nichols* .....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. J. Finnan* .....

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

## THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date .....

Signed ..... M.O.

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

Signature .....

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

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



*649-7-8275*  
SURNAME *Welch Finan* (auth for change of name Stat Decla- tion Nov 5<sup>th</sup> 1917)

3 CARD NO.  
805. 27.5. 2  
FOLL.  
652-17-5 Vol 5 7/10/18

CHRISTIAN NAMES *Robert John*  
REGL. No. *1007113* RANK *Plt*

UNIT *228<sup>th</sup> 3. D.D.*

*Bn*  
*Sos. demob. 27-3-19*  
*no. 150. 16-4-19.*

FORMER CORPS *Nil*

NEXT OF KIN.  
NAMES IN FULL *Finan, Mrs Ellen*  
RELATIONSHIP TO SOLDIER *Mother*  
ADDRESS *99 Rochester St, Ottawa, Ont*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada, Ottawa, Ont* DATE *Apr 2<sup>nd</sup> 1897.*  
PLACE OF ATTESTATION *Iroquois Falls, Ont* DATE *Jan 6<sup>th</sup> 1917.*

*PIC 24. 3-19 <sup>289</sup>/<sub>22</sub> J.P.V.*

*See also card for John Robert Welch*

Sailed from St John N. B. Per S.S. Messanabie 16 <sup>2</sup>/<sub>17</sub>.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Steamster

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

19

YEARS

MONTHS

HEIGHT

5-

FEET

8

INCHES

CHEST MEASUREMENT

33 <sup>1</sup>/<sub>2</sub>

INCHES

EXPANSION

3

INCHES

COMPLEXION

Ruddy

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Iroquois Falls

DATE

Jan 6<sup>th</sup> 1917.

Present address. Iroquois Falls. Ont.

10 183 Jensen Robt John 38 Br 183

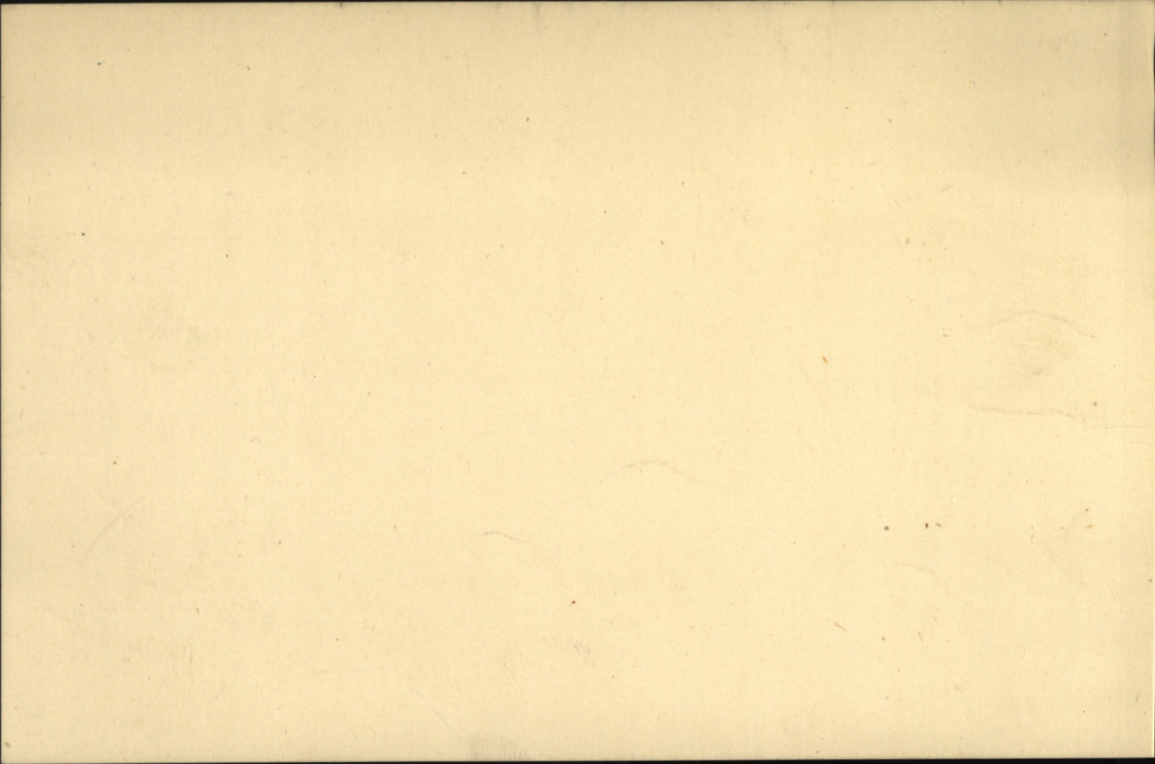
Try Welsh of Welch

10183  
1007113  
639584

June 1915 - In Detention

July .. S.S. Irons to 59/2. 1.8.15 -  
A copy. No further

Records of many  
Details to close his enlistment are  
not available. Please draw A.R.  
File 1007113 Welsh Robert John



SURNAME.

*Welsh*

*649-7-8275-*

*358. R 25. 7*  
CARD NO.  
*652-17.5 Vol 5 7/10/81*

CHRISTIAN NAMES

*Robert, John*

REGL. No.

*1007113*

RANK

*Pte.*

UNIT

*228<sup>th</sup>*

FOLL.

*Bm*

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

*For full particulars see card for Jimmie Robert John Auth Stat Belar glion Nov 5-17 1917.*

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

DATE

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

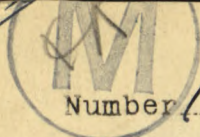
EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE



Number

100 7113 ✓

Rank

Spr. ✓

Surname

FINAN ✓

Christian Name

Robert John ✓

Units

1st Canadian Trench Mortar Bn Theatre of War France ✓

Date of Service

3-4-17 ✓

Remarks

3/1/23 ✓

Latest Address

~~235 99 Rochester St~~ ✓

Roll No.

R. Page 22582

Ottawa  
Ont ✓

10m.-8-21.M.

Class "A" # 428037 (25-8-58 (By Hand)

W Stelbisky

The B.O.M. & M.  
3/1/2

Peter Finnan -

DESP. 10 SEP 1958  
REGN No.



No. 639584

RANK

Pvt.

NAME

Finan Robert John

T. O. S. 7-2-16

UNIT 156th. Battalion C.C.P.

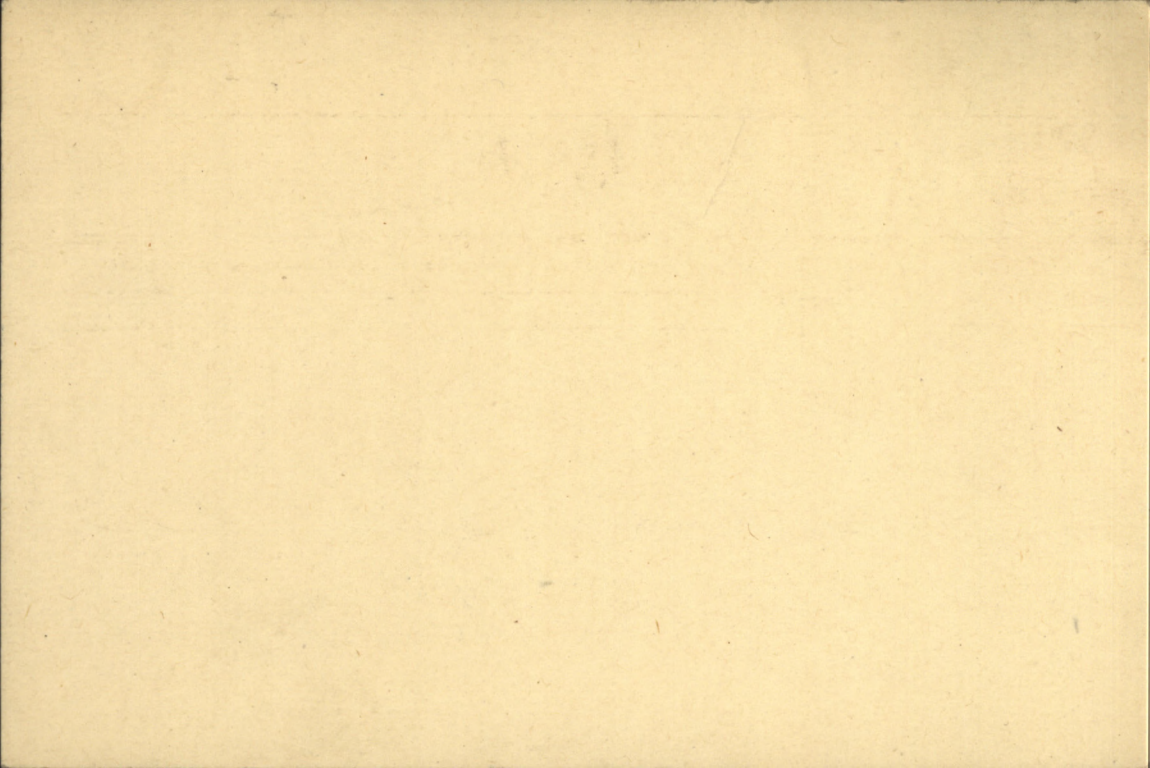
D.O. 38 of 15-2-16

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb. 1	1916 Feb. 29	✓		
	Mar.	✓		
	Apr	✓		
	May	✓		
	June	n		
July	no etc	n	<p>after 2 days pay.</p> <p>Discharged (Deserter) 20159 of 8-7-16.</p> <p>LOS. 7-6-16. by bof J.</p>	<p>20132.</p>

UNIT SAILED

etc. closed by charges. **OCT 17 1916**



# FORM OF WILL.

I, Robert J WELSH (Name in full)

Regimental Number 1007113 serving in 228 th Bn .C.e.F

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

.....  
.....  
.....

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Ellen WELSH  
99 Rochester St  
Ottawa.

Name and Address of person or persons to receive personal estate\* (See note).

**IMPORTANT NOTE**

This must be Signed and Dated by THE SOLDIER HIMSELF.

this 26 day of Jan A. D. 1917

Robert John Welsh Signature of Soldier.

\*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness Ernest Darrow  
Address of Witness 66 Garsden St North Bay Ont  
Occupation of Witness Police Officer  
Signature of Second Witness P. W. Rice  
Address of Witness 458 Euclid Ave. Toronto Can.  
Occupation of Witness clerk.

**THE TWO WITNESSES MUST SIGN HERE**

FORM OF VOTE

Robert J. WELSH  
1007113  
of the Canadian Expeditionary Force to which I have been assigned  
and I hereby declare that I am a Canadian citizen.

I declare that I am a Canadian citizen and that I have no other citizenship.

Name and address of person to whom I wish to vote  
Mrs. Eliza WELSH  
93 Rochester St.  
Ottawa

IMPORTANT  
VOTE  
This must be cast  
and dated by  
THE SOLDIER  
HIMSELF.

I hereby declare that I have no other citizenship and that I am a Canadian citizen.

Name of witness  
Address of witness

Occupation of witness  
Address of witness  
Occupation of witness

THE TWO  
WITNESSES  
MUST  
SIGN HERE

OFFICE OF THE SECRETARY

CIVIL SERVICE COMMISSION



CANADA

IN REPLY REFER TO FILE NO. PW-CA2-3405 (MMM) OTTAWA, February 16, 1949.

Acting Director, War Service Records, Department of  
Veterans Affairs, Ottawa.

Attention: Army Records

The information mentioned below has been taken from the file of the person concerned. It would be appreciated if you would confirm this and also indicate the theatre of war in which he served, and whether he was honourably released.

A handwritten signature in cursive script that reads "R. Morgan".

R. Morgan, Secretary.

Name  
FINAN, Robert John

Regimental No.  
1007113

Date of Enlistment  
January 6, 1918

Date of Discharge  
March 27, 1919

P.S. Please state also his date of arrival overseas.





DEPARTMENT OF VETERANS AFFAIRS

STATEMENT OF SERVICE

IN THE

CANADIAN ARMED FORCES

NOT VALID  
WITHOUT THE  
IMPRINT OF  
THE OFFICIAL  
STAMP OF THE  
DEPARTMENT

Service Rank and/or Number 1007113 Name Robert John FINAN ✓

- 1. Branch of Service: CANADIAN EXPEDITIONARY FORCE ✓
- 2. Date and Place of Birth: April 2, 1897 Ottawa, Ont. ✓
- 3. Date and Place of Appointment, Enlistment or Enrolment: January 6, 1917 Iroquois Falls, Ont. ✓
- 4. Theatres of Service: CANADA - BRITAIN - FRANCE ✓
- 5. Date and Place of Retirement or Discharge: March 27, 1919 Kingston, Ont. ✓
- 6. Type of Retirement or Discharge: Honourable ✓
- 7. Rank on Retirement or Discharge: Sapper ✓
- 8. Medals and Decorations: BRITISH WAR MEDAL - VICTORY MEDAL ✓
- 9. Remarks: Nil ✓

Date: April 11, 1969.

/CG

*for* Chief, *J. L.* Supervisor, War Service Records Division

*390 BOOTH ST.,  
OTTAWA, ONT.*





CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Class. *A*  
 No. *230191* Issued

THIS IS TO CERTIFY that No. *100 7113*

(Rank) *Private*

Name (in full) *FINAN ROBERT JOHN.*

enlisted in

the *228th Battalion*

CANADIAN EXPEDITIONARY FORCE at *Roquais Falls*

on the *6th*

day of *January*

19 *17*

HE served in *France*

and is now discharged from the service by reason of

Demobilization.

Medical Unfitness

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

Age *19 years*

Marks or Scars *nil*

Height *5' 9"*

Complexion *Fair*

Eyes *Blue*

Hair *Dark*

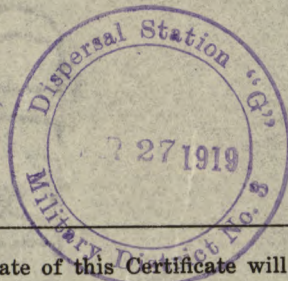
*R. J. Finan*  
 Signature of Soldier

*W. Mackenzie*  
 Issuing Officer

Date of Discharge

*Capt.*  
 Rank

Date *27-3-1919*



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

When Service Number Classed as...  
Issued

THIS IS TO CERTIFY that No. 1111 (Rank) Private enlisted in the 2nd the Canadian Expeditionary Force at London on the 15 day of August 1918. He served in the 1st Division and is now discharged from the service by reason of Demobilization Medical Fitness Good

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

Age	<u>28</u>
Height	<u>5' 8"</u>
Complexion	<u>Fair</u>
Eyes	<u>Blue</u>
Hair	<u>Brown</u>
Stature of Soldier	<u>Medium</u>
Date of Discharge	<u>15 August 1918</u>
Rank	<u>Private</u>
Issuing Officer	<u>[Signature]</u>
Date	<u>15 August 1918</u>

Marks or Scars None

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

H. 17-2-22  
L. 17-2-22  
M. 17-2-22

JM.

Rank

Name

WELSH, Robert John. *alias FINAN*

*Stat. Declaration*  
*Robert John 45-11-17*

Reg'l No.

1007113.

Unit 228th Bn.

If in perm. Corps,  
What Unit?

Married or Single **Single.**

Place and Date of Enlistment Iroquois Falls. 6th Jan 1917.

Place of Birth Ottawa, Ont, Canada

Name and Address, Next-of-Kin Mrs Ellen Welsh.

99 Rochester St., Ottawa, Ont., Canada.

Relationship **Mother.**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. **7290**  
File R.L.  
Category **O.S. O.B.**

Discharge, Date and Place

Reason

Character

H. W. V., Ld.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
ARRIVED IN ENGLAND per S.S. MISSANABIE 27.2.17					
12.3.17	228th Bn.	NOW KNOWN AS	6th. Bn. C.R.T. Pt. II. D.O. 71.		
28.5.17	6 B.R.T.	Proceeded overseas	Field	2.4.17	Pt II 9
14.4.17	6 B.R.T.	Arrived in France	Field	3.4.17	Pt II 1
13-11-17	6 B.R.T.	Having declared his true name to be John Robert Finan all documents to be altered accordingly	Field	28-11-17	Pt II 63
4-2-19	6 <sup>th</sup> Bn. C.R.T.	Ported to C.R.T.D.	" "	30-1-19	Pt II 30/4/19
21-2-19	6 <sup>th</sup> Bn. C.R.T.	Ported to C.R.T.D.	" "	15.3.19	Pt II 30/4/19
19.3.19	M.D.C.W. 3	S.O.S. Canada	" Rhyl	15.3.19	Pt II 67

M.F.B. 103 CHECKED  
21 APR 1917

7 M.D. 1603  
53/3/19



## SEPARATION ALLOWANCE

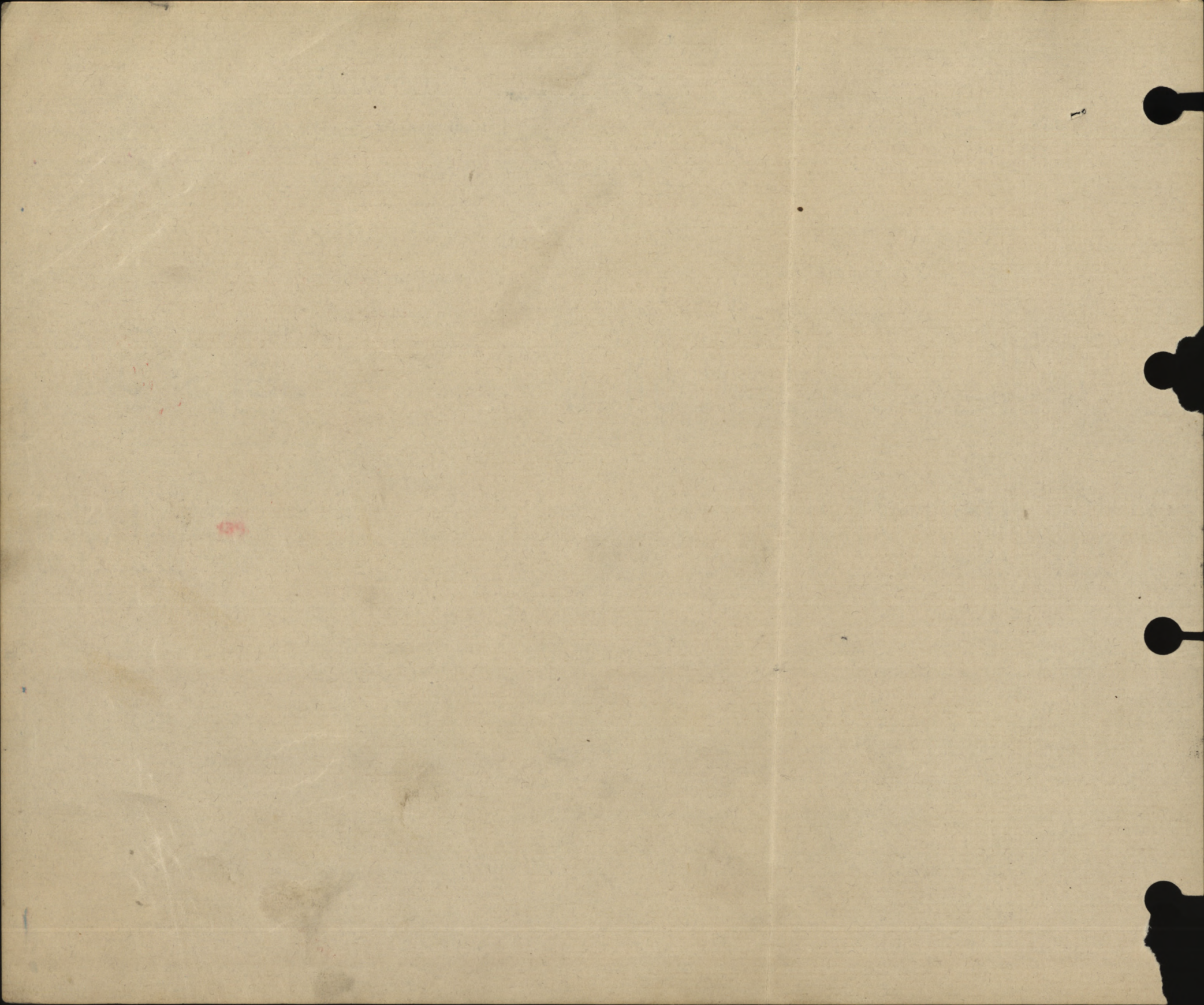
Name *Mrs Ellen Finan*  
 Address *99 Rochester St  
 Ottawa  
 Ont.*  
 Relation to Soldier }  
 wife, child or mother } *Mother*

Name of Soldier *Finan R. J.*  
 Regtl. No. *639584*  
 Rank *Pl*  
 Corps *56th Batt C.E. F.*  
 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.				
17 Jan.	1916			
16 Feb.				
1 March				

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



MILITIA AND DEFENCE  
SEPARATION ALLOWANCE

M. F. W. 11a. 52  
50m.-4-16.  
1772-39-818.

Sheet No. 2.

*Mrs Ellen Finnan*

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

*Finnan R. J.*  
*Pt-56 Bat.*

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		<i>F4596</i>	<i>97-97</i>	<i>Mailed 23-5-16</i>
June		<i>X X</i>	<i>X X</i>	<i>No June Cheque - 21.00 overpaid.</i>
July		<i>38433</i>	<i>3575</i>	<i>21-3575-cancelled</i>
Aug.			<i>19 19 19</i>	<i>Deserter d 7/6/16</i>
Sept.				<i>Rec. office 6-6-17</i>
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

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







\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:- 1-11-14.		EFFECTIVE DATE:-	
AMOUNT:- 15 <sup>00</sup>		AMOUNT:-	

NAME:- **FINAN John.**  
NUMBER:- **1004113**

PARTICULARS OF RANK OR APPOINTMENT		
NAME, ADDRESS, RELATIONSHIP & AUTHORITY	AUTHORITY	DATE EFFECTIVE
Mrs Ellen Finan 99 Rochester St Methu Ottawa Ont.		
Sapper.		

UNIT AND TRANSFERS			
ORIGINAL UNIT:- 228 <sup>th</sup> Batta	DATE ACCOUNT FIRST OPENED:- 1-3-14	AUTHORITY	DATE EFFECTIVE
		DATE LEDGER SHEET T 57 D	UNIT TRANSFERRED TO
			66 R 4

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
4/1/14	453	66 R 1	373			Bal per Ledger sheet	9239
29/1/14	456	"	166			LPC	5967
8/1/14	559	K.A. 1	2433				3212
			3272				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Drawn to Ban 1/3/14 amt N.R. 2894 K.A. 11/1/14 K.A. M.A. 3.*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918									25746	115	
Mich. 31	Balce. forward										
April	T.P.	33		C. A. T.				15			
				A.R. 40 29/4/18	7 14				26862	115	
MAY		33		97.86 5/6/18	75						
		34 10		C. A. T.				15			
				109 31/5	7 14				205 58	115	
		34 10			82.14			15			
June		33		C. R. P.				15			
				251 22/6/18	3 57				220 01	115	
		33			3 57			15			
July		34 10		300 8/7	3 57						
				bal				15			
				463 18/7	3 57						
				1951 22/7	4 46						
				2987 25/7	4 46						
				3140 27/7	4 46						
				3266 27/7	3 57						
				3407 31/7	3 57						
				522 31/7	8 92				5799	115	
		34 10			181 12			15			
Aug		34 10		C. A. T.				15			
				2313 7/8	4 46						
				2498 4/8	4 46						
				678 2/8	3 57				6460	115	
		34 10			1249			15			
Sep		33		794 1/9	3 57						
				bal				15			
				904 29/9	3 57				7546	115	
		33			7 14			15			



G  
1

M. D. 3

b.l.

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

9-12-39

1. No. 100 71 13

2 Rank. SPR.

3. Name. FINAN Robert

4. Unit. C.R.T. 228<sup>73</sup>.

5 Date of Discharge 27-3-19 Place Ottawa

6 Reason for Discharge Demob. - mother

W. S. B. CLASS "A" No. 230192

7. Authority. R-D. 1420

8. Proposed Residence after Discharge Ottawa



9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W. ? 39

R. J. Finan  
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date



Signature [Signature] Captain  
for O. C. Dispersal Area Station (O. C. Discharging Unit.)

amk

PROCEEDINGS ON DISCHARGE

Discharge

1. Name of Prisoner	
2. Name of Prisoner	
3. Name of Prisoner	
4. Name of Prisoner	
5. Name of Prisoner	
6. Name of Prisoner	
7. Name of Prisoner	
8. Name of Prisoner	
9. Name of Prisoner	
10. Name of Prisoner	
11. Name of Prisoner	
12. Name of Prisoner	
13. Name of Prisoner	
14. Name of Prisoner	
15. Name of Prisoner	
16. Name of Prisoner	
17. Name of Prisoner	
18. Name of Prisoner	
19. Name of Prisoner	
20. Name of Prisoner	



CERTIFICATE TO BE SIGNED BY SOCIETY

I hereby acknowledge that the undersigned place and date of discharge of the prisoner

at the date of discharge

Signature of Society

CONFIRMATION

The undersigned hereby certify that the above is a true and correct copy of the



DISBURSED BY THE  
TREASURER OF THE  
SOCIETY

Signature of Treasurer

LIST OF DISCHARGE DOCUMENTS

Attention Paper, Trigrams	Medical Form W 28
or Particulars of Remarks	Medical Form W 28
First Contact Sheet	Medical Form W 28 & A.R. 173
Company Form	Medical Form W 28 & A.R. 173
Last Day Certificate	Medical Form W 28
Certificates that missing documents are available	
Medical History Sheet	Medical Form W 28 & A.R. 173
Proceedings of Medical Board	Medical Form W 28 & A.R. 173
Treatal History Sheet	Medical Form W 28
Medical Report	Medical Form W 28 & A.R. 173
Departmental Certificate Sheet	Medical Form W 28
Company Contact Sheet	Medical Form W 28

[Faint, illegible handwritten text or stamp in the bottom right corner of the page.]

**LIST OF DISCHARGE DOCUMENTS.**

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)  
(Enclosed in special envelope (260M)).
9. Copy of Declaration of Discharge (M.F.W. 39a).
10. Regimental Conduct Sheet (Form B. 263).
11. Company Conduct Sheet (Form B. 263a).
12. Last Pay Certificate (Form W. 44).
13. Last Honor (Form W. 44).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... A

Checked by No. 3  
J. S. W.

Date..... 2. 3. 19



*Original Not Available*  
 Fill in only.—Unit, Number, Rank and Name.

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

500M.—9-16

H. Q. 1772-39-920.

## Casualty Form—Active Service.

Unit, Regiment or Corps. *156 Bn B.E.F.*

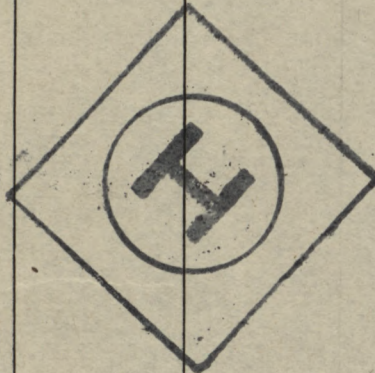
Regimental No. *639584* Rank *Pte* Name *Sinclair, Robert John*  
C. E. F.

Enlisted (a) *7.2.16* Terms of Service (a)..... Service reckons from (a) *7.2.16*

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				
<i>8. 7.16</i>	<i>156 Bn</i>	<i>So deserter by Capt D held 5.7.16</i>	<i>Barrifield</i>	<i>7.6.16</i>	<i>D.O. 159</i>



*copy sent to...*

*For D of R*

(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.



D.V.A.  
R.2. (CEF Records)

Ottawa, Ontario.  
22nd February, 1949.

Secretary,  
Civil Service Commission,  
OTTAWA.

Re:- 1007113 FINAN, Robert John

Dear Sir,

In reply to your letter of the 16th February, 1949, File No. PW-CA2-3405 (MMM), I am to inform you that according to records the following are the particulars of service of the marginally noted ex-member of the Canadian Expeditionary Force:

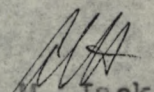
Enlisted in the 228th Battalion, on the 6th day of January, 1917.

Arrived in England on the 27th February, 1917 and proceeded to France on the 3rd April 1917 and served with the 6th Canadian Railway Troops for 22 months.

Returned to Canada and was honorably discharged at Ottawa, Ontario, on the 27th day of March, 1919, by reason of "DEMOBILIZATION".

Previously served under Regt. No. A10183 with the 38th Battalion, in Canada only, from 22-2-1915 to 15-6-1915, also served under Regt. No. 639584 with the 156th Battalion, in Canada only, from 7-2-1916 to 6-6-1916.

Yours truly,

  
for H.M. Jackson,  
Director,  
War Service Records.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

F 186-  
1967 Nov 1/14  
RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

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15 <sup>00</sup>			
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### PARTICULARS OF SEPARATION ALLOWANCE

No. ~~100~~ 7113  
 Rank *Sp4* Promoted *listed as Sgt* Reverted Discharge  
 Soldier's Name *Robert John Welsh*  
 Battalion *228<sup>th</sup> Btr* *Finan*  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

Name *Mrs Ellen Welsh Finan*  
 Address *99 Rochester St Ottawa Ont*  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Sup a/c</i>					
<i>Dec F 60224</i> 30.00	<i>E 51498</i>		<i>30</i>	<i>30</i>	<i>6 mailed 6/12/17</i>
<i>Jan 18 H 60689</i> 15.00	<i>H 60690</i>		<i>15</i>	<i>15</i>	<i>2 M. 20. 11. 14</i>
<i>45</i>	<i>Feb</i>		<i>x</i>	<i>x</i>	<i>a/c suspended until 1<sup>st</sup> May 1918</i>
<i>Mar.</i>			<i>x</i>	<i>x</i>	<i>a/c duplicated by 2 M 45.00 of paid</i>
<i>ap</i>			<i>x</i>	<i>x</i>	<i>to adjust - no payments will be made for</i>
<i>May</i> Q 17354			<i>15</i>	<i>15</i>	<i>Feb, March &amp; April to adjust.</i>
<i>Jun</i> M 201149			<i>15</i>	<i>15</i>	<i>May 1918 &amp; future 15.00. 2. 1-18 700</i>
<i>Jul</i> O 34052			<i>15</i>	<i>15</i>	
<i>Aug</i> M 35425			<i>15</i>	<i>15</i>	
<i>Not Sep</i> R 46966			<i>15</i>	<i>15</i>	
<i>Oct</i> R 51499			<i>15</i>	<i>15</i>	
<i>Nov</i> L 59836			<i>15</i>	<i>15</i>	
<i>Dec</i> V 64929			<i>15</i>	<i>15</i>	
<i>Jan</i> Q 73068			<i>15</i>	<i>15</i>	
<b>FEP</b> 26 80174			<i>15</i>	<i>15</i>	
<b>MAP</b> L 83135			<i>15</i>	<i>15</i>	
<b>APR</b>			<i>255</i>	<i>255</i>	

ANOTHER ACCOUNT IN  
*Spec. rem.* Ledger  
 Ledger  
 Ledger  
 Ledger

M. F. W. 128.  
 400M. 6-17-1772-39-1141.  
 L. L. 22220-M. & D. 7803.

A/c Closed 31-3-19  
 Ret'd per... *Royal George*  
 Date 25-3-19 M.F.W. 187 Bend.  
 Clerk... *A. J. B. 29-3-19*  
 M.R.O. 83926 No D 3.

**AUDITED**



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

M. OR S.

RGT. No. 1007113 RANK *Spr.* NAME (IN FULL) *FINAN Robert John*  
 ORIGINAL UNIT I.E.F. *228<sup>th</sup> of's Batt* IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN  
 ADDRESS  
 IS SEPARATION ALLOWANCE PAID? *nil*  
 TO WHOM PAID  
 ADDRESS

RELATIONSHIP  
 DATE EFFECTIVE  
 RELATIONSHIP

PARTICULARS  
*Robert John Finan  
 99 Rochester St.  
 Ottawa, Ont.*

EFFECTIVE DATE  
 AUTHORITY

PLACE OF ATTESTATION  
 DATE  
 AUTHORITY

DATE OF ATTESTATION  
 TRANSFERRED TO  
 DATE  
 AUTHORITY

ASSIGNED PAY \$ *15.50* DATE EFFECTIVE *1-11-17*

PAYABLE TO  
 ADDRESS  
 RELATIONSHIP  
 ANY CHANGE IN ASSIGNEE OR ADDRESS

STIPEND PAYMENT FORM  
 ASSIGNED PAY  
 INDEXED, DATE

DISCHARGED  
 PLACE  
 DATE  
 REASON  
 AUTHORITY  
 IF ENTITLED TO POST DISCHARGE PAY

*7-451*

BALANCE FROM PREVIOUS ACCOUNT

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	DEBIT	CREDIT	
30-3-19	30	1.10	33.00	35.00	70.00	59.67				4.87	9.94	163.06	15.50		3.30	197.67		59.67	Returned per Royal George Bal. owed 1st pay date of 1st clothing allowance 1st pay. 25 S. Boat money adv. taken money 0 pay 3 days on disc	
153 days			350.00	W.S.S. SA	350.00	350.00							70.00		3.30	70.00	280.00	280.00	1st pay W.S.S. as above Dr Bal as above 4321725 - <del>25</del> Apr. 25/19. 3286930 May 27/19 931484 June 23/19 953246 July 25/19	
													66.70			140.00	210.00	210.00		
													70.00			280.00	70.00	70.00		
													70.00			350.00		350.00		

