Original

ATTESTATION PAPER.

No. 532354

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Gray.
1a. What are your Christian names? — Robert Drysdale
1b. What is your present address? — 136 Selkirk Ave. Winnipeg
2. In what Town, Township or Parish, and in what Country were you born? — Winnipeg, Man
3. What is the name of your next-of kin? — William Gray.
4. What is the address of your next-of-kin? — 136 Selkirk Ave. Wpg.
4a. What is the relationship of your next-of-kin? — Father.
5. What is the date of your birth? — August 10th 1886
6. What is your Trade or Calling? — railway brakeman.
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 Drysdale Gray, 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 D Gray (Signature of Recruit)

Date May 26th. 1916. 191 . J. R. Sumner (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Drysdale Gray, 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 D Gray (Signature of Recruit)

Date May 26th. 1916. 191 . J. R. Sumner (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 Winnipeg this 26 day of May 191 6

H Fraser (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of Robert Drysdale Gray on Enlistment.

Apparent Age 29 years 9 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).

nil.

Height	5 ft. 7½ ins.
Chest measurement. Girth when fully expanded	36½ ins.
Chest measurement. Range of expansion	3½ ins.
Complexion	Fair
Eyes	Blue
Hair	Brown
Religious denominations. Church of England	
Presbyterian	X
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 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 May 26th. 1916. 191 .

Place Winnipeg, Man

J. R. Leadbetter Capt. C.A.M.C.
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 D. Drysdale Gray 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.

H Foster (Signature of Officer)

Date May 26th. 1916. 191 .

[illegible] Field Amb. [illegible]

REGIMENTAL DOCUMENTS

14/1/19. NAME GRAY. ROBERT. DRYSDALE PTE REGT. NO. 532354 UNIT 12th Field Ambulance A.Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)				24813	
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
2	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1+1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					Demob.
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2 1	DIS. CER. (3)					5-6
1	DENT CER					10-7
1	MFW (67)					31.7
7	Cards and R 122					
1	Pay Card					1

Deceased, 3-7-31

W 2589
100M-11-18
2772 .9 1677

Number 5-32354 Rank Pte Dvr. B

Surname GRAY

Christian Name Robert Drysdale

Units C a S C Theatre of War France

Date of Service 18-8-16

Remarks

Latest Address 136 Selkirk Ave
Winnipeg Man

Roll No.

200 .-2-21. . B. Page 13653.

DESP JUN 6 1922
REGN. NO 37347

NAME Gray R. D.

RANK AND CORPS Pvt G.A.S.C.

REGT'L. No. 532354

H. Q. FILE No 649

FOLLOWS

No

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A168-1	No. 13 Can. Fld. Amb	16-3-18	V.D. G.
A178-1	Disc to Duty	27-3-18	V.D.G.

No. 3-32354 RANK Pte. NAME Gray, R. D.

T.O.S. 26-5-16 UNIT C.A.M.C. (12th Fld. Amb.)
A.O. 760 of 26-5-16

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
May 26	May 31	C		
June		C		

Form R. 149.

Robert Drysdale

Name GRAY Rank Dvr. Reg. No. 532354

Unit CASC. 4th D.T. Att. 12th Fd. amb.

Next of Kin Canada

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
1918								
16	3	13 Can Fd amb.		V.D.G.	A168			15387
27	3	Discharged to Duty.	Hm.	do	2484			16023

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

NB #10.

SURNAME. Gray

CHRISTIAN NAMES Robert Drysdale

REGL. No. 532354 RANK Pte

UNIT No 12 Fld Amb

FORMER CORPS nil

CARD No.

S.O.S. Demob. 17/6/19
P.O. 170 FOLL. 19/6/19
1062

NEXT OF KIN.

NAMES IN FULL Gray, William

RELATIONSHIP TO SOLDIER Father

ADDRESS 136 Selkirk Ave, Winnipeg Man

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Winnipeg DATE Aug 10th 1886

PLACE OF ATTESTATION Winnipeg, Man DATE May 26th 1916

O/S 24-6-16 452/4

R/C. 13/6/19 340/178

L. L. 9450. M. & D. 6512.

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

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Railway Brake-man RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 29 YEARS 9 MONTHS

HEIGHT 5 FEET 7 1/2 INCHES

CHEST MEASUREMENT 38 1/2 INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Fair EYES Blue HAIR Brown

DISTINGUISHING MARKS nil

MEDICAL EXAMINATION. PLACE Winnipeg, Man DATE May 26th 1916

Present Address 136 Selkirk Ave, Winnipeg, Man

D M S. 1300 50M-21-1 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
GRAY	R.D.	532354.

RANK	UNIT	CO.	TROOP	BATTY.
Pvr.				

HOSPITAL: CASC.4DT. DATE OF ADMISSION: 13 C.F.A. 16-3-18.

1. HOSP.
2. HOSP.
3. HOSP.
4. HOSP.

DIAGNOSIS

1. V.D.G.to
2.
3.

DISPOSITION: CL. 21-3-18. A168.
4. 4. 18 A168-1.

DATE: Disto Duty 27.3.18
REMARKS

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

EPITOME OF HOSPITAL TREATMENT

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

L. L. J[illegible]10—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs Wm Gray

Address 136 Selkirk Ave
Winnipeg

JUL 1 1916

Rate 15[cts]

By Whom Assigned Gray R D

Regtl. No. 532354

Rank Pte

Corps 12" Field Amb

PAYMENTS

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

CONSOLIDATED 3 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs Wm Gray

L. L. Job 310.—Req. 6574.

Name of Soldier Gray R D

532354, 12th Field Amb

15th

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		W 12278	15	
Aug.		S 13593	15	
Sept.		S 17312	15	
Oct.		S 22430	15	
Nov.		Q 27381	15	
Dec.		29882	15	
Jan.	1917	A 40341	15	
Feb.		A 45318	15	
March		850337	15	15 P.
April		T 1864	15	15 B
May		T 8085	15	
June		X 12034	15	15 Bn
July		B 23446	15	15
Aug.		C 28573	15	
Sept.		L 36046	15	Ln
Oct.		~~W 42502~~	~~15~~	W43502 cancd Jly 1st.
Nov.		A 40994	15	
Dec.		256778	15	2/10 D
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

T4DT

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. 532354 Rank Driver Surname Gray. GRAY
(Given name in full) Robert Drysdale

Unit or Corps 4th Can. Div. Trains. Birthplace Winnipeg.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 162½ lbs. Height 5 ft. 7½ in. Colour of Eyes Blue

Nutrition Good.

Pulse 72. Regular

Condition of arteries Good

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

2. scars - Gunshot. Gunshot scar back of head - Gunshot.

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 yes Cardio-Vascular System no

Special Senses no Integumentary System some Respiratory System no

Disturbance of mentality no Muscular System one 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.

16.3.18. V.D.S. - Apparently cured

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 14/5/19 Signed [signature] 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 [signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

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

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

Signature .....

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

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

[signature]

[OVER]

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

R—122

J.P.

Rank Name GRAY, Robert Drysdale Reg'l No. 532354.

Unit 12th Fd.Ambce. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg. 26th May.1916. Place of Birth Winnipeg.Man.

Name and Address, Next-of-Kin William Gray.

136 Selkirk Ave. Winnipeg. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 6917
File R.L.
Category O.R. CANADA

H. W. & V., Ld.—7165-16.

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.
		Arrived in England	S.S. Scandinavian	4-7-16 ~~24 JUN 1916~~	
3-8-16	12th Fd Ambce	Ifrd to Case to 4th Dvl Trn	Brandshott	2-8-16	Pt II -19 Case Pt II D0182
4-8-16	4th Dvl Train	Attached to 17th Fd. Ambce	— do —	2-8-16	Pt II 23
10-8-16	12 Fd Amb	Embarked for France.		10-8-16	" 22. GABO3 checked 19-8-16 JRW
9.5.18	4th D.T.	SOS to Base Pool & remains att. pr in W.F. to 12th Fild amb.	Field Pte.	6.5.18	— 324 Base Pool D 600 11.5.18
14.11.18	"	TOS from Pool serves att. 12 Can. Fd Amb	"	12.11.18	WO 34 D 57 d 12.4.19 Base Pool
17.5.19	"	Proc to England he Havre	"	10.5.19	-40
		Proc to Canada		6.6.19	83-M-185

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.
23.5.19	G Wing	TOS	Witley	12.5.19	— 19
6.6.19	—	SOSB Boan	"	6.6.19	— 25

ORIGINAL. Original 32

MEDICAL HISTORY SHEET.

Surname Gray Christian Name Robert Drysdale

Examined { on ..... day of ..... 191 ..... / at Winnipeg

Birthplace { City or Town Winnipeg / County Manitoba

Apparent age 2 9 y. 9 mo.

Trade or occupation .....

Height 5' Feet 7½ Inches.

Weight ..... Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 3½ inches.

Physical development Good

Small-Pox Marks Two

Vaccination Marks { Arm Right. Left. X / Number Two.

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None.

Approved by J. McDonaldson

Rank Capt. C.A.M.C. M.O.

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.
9.6.16		Wm Cole M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
6.6.16		Wm Cole M.O.
16/6/16		M.O.
25-6-16		M.O.

Enlisted on 26th *day of* May 1916 *at* Winnipeg, Man

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#12 Field Amb. C.E.F.	532354		
Transferred to	C.A.S.C. Bramshott Hants.			JUL 26 1916

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.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Gray Christian Name Robert Drysdale

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.

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class A, No. 163652.

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 532354 (Rank) Pte
Name (in full) Gray Robert Drysdale enlisted in
the 12th Field Ambulance Canada
CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 26th
day of May 1916
HE served in 4th Div. Train (France)

and is now discharged from the service by reason of Demobilization. Demobilization R.O. 1420 (c)
~~Medical Unfitness~~.

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

Age 32
Height 5ft 7½ ins
Complexion Fair
Eyes Blue
Hair Brown

R. D Gray
Signature of Soldier.

Marks or Scars
Scar back of Head

Date of Discharge

Dispersal Station "M" JUN 17 1919 Military District No. 10

Issuing Officer.

Lt.
Rank

Date June 17. 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.

M.F.B. 39A.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

CERTIFIED CORRECT.
31 AUG. 1916
CAN. RECORDS, LONDON

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

W.S.B. CLASS A.

Casualty Form—Active Service.

Unit, Regiment or Corps #12 Field Ambulance, C.E.F.

Regimental No. 532354 Rank Pte Name Robert D Brydale Gray

Enlisted (a) 26-5-16 Terms of Service (a) C.E.F. D of War Service reckons from (a) 26-5-16.

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) Brakeman

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	Montreal	June 3/16.	
		Disembarked	Liverpool	July 3/16	"S. S. Scandinavian"
		Transferred to CASC. Bramshott Hants.		JUL 26 1916 2-8-16	
		Transferred from CASC: Bramshott to 4th. Divisional Train. 2-8-16. (Auth. AB.12/38, 2-8-16).			
		Detached from 4th Div Train to 12th Field Ambulance 2/8/16. Bramshot. Aut. AB. 12-38		2/8/16	Jas Bissett Capt. for OC 4th Div Train

Proceeded overseas 10th August 1916. 12th Field Amb

(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				
16-3-18	12th C.F.A.	Sld. V. D. G.	to 13th C.F.A.	16-3-18	D 85 19.
17-3-18	13th C.F.A.	do	adm do	16-3-18	D 948.
20/3/18	12th C.F.A.	Rejoined from Hospital		18/3/18	B 213
28.3.18	13 C.F. Amb.	V. D. G.	to duty	27.3.18	a 36. E 742
	A.A.G. Edn Secn.	Reposted. to C.A.S.C. Pool & to remain attd as in W.E. to 12 C.F. Ambulance		6-5-18	K.A. 18/9457 Pte II D.O. 32 d/
	do.	T.O.S., C.A.S.C. Pool on reposting from 4 C.D. Train & to remain attd as in W.E. to 12 C.F. Amb.		7 5 18	do Pte II D.O. 60 d/11.5.18
25-1-19	12. C.F.A.	Granted 14 days Leave UK		25.1.19	B 213
15-2-19	Do	Rejoined from Leave		11.2.19	B 213
	A.A.G.	Ceases to be Attd as in W.E. to 12 C.F. Amb.		11.4.19	K.T.I.Y.-385-1 Can Corps A Pers-O d/24/2/19 Pte II O 54 d/1919
	do	S.O.S. of C.A.S.C. Pool and posted to 4 C.D. Train		11.4.19	do do do 19
24. 2. 19.	Edn Corps	T.O.S. & to be Struck on reposting from base Pool Emb. Camp.	Proceeded to England	23.4.19. MAY 9	P II. O 1919

Sailed S.S. "Tuscania" 1 MAY 1919 HMT "OLYMPIC" Arrived HALIFAX June 9 1919

S.O.S. "J" Wing, Canadian Corps Camp, Witley,
on proceeding to Canada 6 June 1919, D.O. No.

J. E. Duckworth Lt.
for Officer Commanding.

Lieut. for Lt Col. A. A. G.
Canadian Section, G.H.Q. - 3rd, Echn.

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 C.A.M.C.—C.C.S.

Regimental No. 532354 Rank Pte C. E. F. Name Gray Robert Drysdale

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

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				
6.6.19	T.O.S. Dispersal Station	20 170 "	Ra 2		
	and Dispersed	17-6-19 — do "	3		
	H. C. Patton Lieut. for O. C. 10 District Depot.				

(*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				

C.A.S.C. 532354

TEMPORARY RECORD SHEET

Pte Gray R.D.

4-8-16	4 Div Tr. Att 12 Fld Amb	Bramshott	2-8-16	Pt II O.	23.
10-8-16	12 Fld Amb Embarked for France	"	10-8-16	—	22.
14-5-18	" Attd from 4th Div Train now attd from 6 A.S.C. Pool	Field	7-5-18	—	23.
14-4-19	— " — Leaves to be att in W/E	Rhyl	24-2-19	—	15.

Form No. R. 133A.

Unit.....

TAKEN ON STRENGTH.

Month of.....

Number	Regimental Number	Rank.	NAME.	From Unit.	Date,	Authority Pt. II. D.O.	Class.	Card Index Notified.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) GRAY R D.

REGIMENT No 2 Coy 4th Can Div Train RANK Dvr. No. 532354

Date of Examination in England 13/5/19 Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3. 4. 6 11. 15. 29. 31. 32.
2. EXTRACTIONS 12. 18. 19.
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (a) In Canada
- (b) In England
- (c) In France yes

Signature of Dental Officer [signature] Capt

To be made out in duplicate. H.Q. 54-21-23-53

32

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins ..... #12 Field Ambulance, C.E.F.

(2) Regimental Number 532354

(3) Full Name of Soldier ..... Robert Drysdale Gray

(4) Place of Birth ..... Winnipeg, Man

(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 .....

M. F. W. 67
200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

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

If so, state name and address ..... William Gray, 136 Selkirk Ave, Winnipeg, Man

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

If so, state name and address..... Jennie Gray ..... Do. .....

.....

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

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.

.....

Officer Commanding.

No.12 Field Amb. C.E.F.

Date..... May 26th. 1916.

P. 559

MARRIED OR SINGLE Single.

PLACE OF BIRTH Winnipeg, Man.

NAME AND ADDRESS OF NEXT OF KIN William Gray
136, Selkirk Ave. Winnipeg.

RELATIONSHIP OF NEXT OF KIN Father

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. 532354 RANK Private NAME Gray. Robert Drysdale.

IF IN PERMT. CORPS WHAT UNIT UNIT 12 Field Amb TRANSFERRED TO C.A.S.C. & Divis Train DATE Aug 2/16 AUTHORITY B015

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 12th Fd. Amb. DATE 21-10-16 AUTHORITY Do 22 4.8.16

PLACE OF ATTESTATION Winnipeg TRANSFERRED TO 4 D.S. DATE 1-11-17 AUTHORITY WR

DATE OF ATTESTATION 26th May 1916 TRANSFERRED TO DATE AUTHORITY

C

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Mrs W. Gray, 136 Selkirk Ave, Winnipeg 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
June															38 00												15 00		17 00	21 00				
July	31	1 00	31	00	31	10	3	10							34 10	745	8/7/16							9 74			15 00		24 74	30 36				
Checked D.O.Richards Aug	2	1 00	2	00	2	10		20							2 20	788	19/7							9 73		4 87	15 00		29 60	2 96				
Aug. 3 - Sept 30	59		59	-	59		5	90							7H 30 6H 90	31 20	4.9.16 12th Fd. 22.8.16 A.M.C.								2 61 2 62		15		71 34 20 23	H7 63				
Checked V.K.M. 2 Oct.	1-20	20		20	-	20		2	-						22 -	44	16/9/16 12th Fd. A.M.C.								2 62		15		17 62	52 01				Trans. 12th Fd. Amb.
Oct 21/31		11		11		11		1	10						12 10	55 80	2/10 1/11							2 61					2 61	61 50				
Nov		30		30		30		3							33	67	20/10							2 62 2 61			15		20 23	74 27				
Dec		31		31		31		3	10						34 10	91	16/11	101	5/12					2 62	11 33		15		28 95	79 42				
1917 Jany	21	1 00/70	21	40 10											12H 2.1.17 34 10	115	17.1.17							2 62 2 62			15		20 24	93 28				
Feby	28	-	30	80											30 80	140	16/1/17							2 62			15		14 62	106 46				
Mch	31	-	34	10											34 10	162 151	16.2.17 7.2.17	185 142	18.2.17 16/3/17					2 62 2 61	2 62 2 61		15		25 46	115 10				
Apl	30	-	33	-											33 -							10	4/4/17		2 61		15		17 61	130 49				
May	31	-	34	10											34 10												15		15	149 59				
June	30	-	33	-											33 -	179 117	4/6 16/5					58 93	16/4 4/5	2 68 2 68		2 62 2 62		15		25 65	156 94				

532354 Pte Gray R. W.

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
July	31	1.10	34	10										34 10													15		15	176 04				
Aug	31	"	34	10										34 10													15		15	195 14				
Sep	30		33											33		476	31/8			3357	17/7			2 68		-5 36		15		61 40	166 74		Nil		
																				2642	2/8	8 Qrs				-35 69								
																				263	4/7					-2 67								

DATE	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	S.P. ARREARS ENG.
Sep 30	b/f Bal	166 74							166 74	
Oct	P. P.	34 10		AR 392 28.7.17 48.7 Arrears	89 22		15			
				" 546 5.9.17 127 Arrears	-2 67					
				" 218 16.6.17 "	-2 67					
				" 600 18.9.17 "	-2 68				88 60	
Nov.	PP.	34 10			97 24		15			
		33 100		AR 75 H.B.S. Arrears 17/10/17	H 46					
							15			
Dec	PP.	34 10					15		121 24	
1918.		67 10			4 46		30			
Jan	" "	34 10					15			
				AR 347 4 7 Arrears 7/1/7	535					
				AR 773 " 6.11.17	3 57					
				" 678 " 8.10.17	3 57				127 85	✓
Feb	PP.	34 10		CAP.	12 49		15			
		30 80					15		143 65	
		30 80					13		34 10	
Mar	"	34 10		AR 1170 17/2 4 F.F. (10)	4 46				177 75	
				" 1681 20/2 " (11)	8 92				127 42	
				Dw. 1031 20/12 " (16)	3 57					
				AR 1437 4/2 " (6)	3 57					
				Dw. 888 23/11 " (19)	12 49					
				AR 1886 22/2 Paris (11)	71 38					
					104 39					
				CAP.			15			
				Dw. 1072 1/1 4 F.F. (22)	3 57					
				" 1202 17/1 " (24)	4 46				5033	
					112 82					
		34 10			117 42		15			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:-	EFFECTIVE DATE:-
AMOUNT:- 15.00	AMOUNT:-

NAME:- Gray, Robt. Drysdale
NUMBER:- 532354.

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs W Gray
136 Selkirk Ave.
Winnipeg Man.

Stopped Effective
1-6-19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT

UNIT AND TRANSFERS

ORIGINAL UNIT:- 12. FAM.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
NR.	1.11.17.		4 D.Tn.

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
~~15/5/19~~		J Wing Ltr	~~24 33~~			Ledger Bal	52 61
						Extracts	24 33
		(New book discontinued only)				L.P.C. C/R Bal	28 28

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: To Coun 1/9 HRG 9237 B/St 4-20/5 B/St 4. Ind 10

1918 MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS		DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31.										50 33	✓	
Apl.	P.P.	33		C.A.P.					15	68 33		
				A.R. 17b 7/4. 4 F.A.	3	3 57						
				✓ 347. 19/4 ✓	10	4 46				60 30		
		33				8 03			15			
May.	P.P.	34 10										
				C.A.P.					15	79 40		
				A.R 5b0. 5/5. 4 F.A.	1.	3 57						
				✓ 645. 15/5 ✓	4.	4 46				71 37		
		34 10				8 03			15			
June	P.P.	33										
				C.A.P.					15	89 37		
				7/637. 47a —	6-6	3 57				85 80		
				5/1022. ✓	17 6	3 57				82 23		
		33				7 14			15			
July	✓	34 10										
				8 C.A.P.					15	101 33		
				1/1166 ✓	1-7	3 57						
				7/1241 ✓	16-7	4 46				93 30		
		34 10				8 03			15			
Aug	✓	34 10										
				C.A.P.					15	112 40		
				4/1371 ✓	1-8	3 57						
				10/1514 ✓	18-8	3 57				105 26		
		34 10				7 14			15			
Sept	✓	33		C.A.P.					15	123 26		
				3/1852 ✓	9-9	3 57						
		✓		8/1966 ✓	16-9	3 57				116 12		
		33				7 14			15			

NUMBER 532.354 RANK Pte NAME GRAY – R. D

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct									11 6 12	✓	Agreed 3/9
	P-P	34 10									
				Bal				15	135 22		
				12/1144 HDTa 4-10	3 73						
				26/1133 ✓ 15 10	3 73				127 76		
		34 10			7 46			15			
Nov	✓	33									
				Bal				15	145 76		
				2678 ✓ 11-11	3 73						
				2847 ✓ 19 11	13 06				128 97		
Dec	✓	34 10		Bal				15	148 07		
				3001 ✓ 4 12	3 73				144 34		
				3179 ✓ 20 12	3 73				140 61		
Jan	✓	34 10		Cal	24 75			15	159 71		
		101 20			24 75			45			
Feb	✓	30 80		Cal.				15	175 51		
				40/3572 ✓ 29/1/19	11 19				164 32		
				72/4366 Can Details 6 2/19	18 66				145 66		
				82/653 Brunels 8 1/19	18 66				127		
				95/3902 4 F. Flank 15 2/19	3 73				123 27		
				130/2667 Paris 28 4/19	95 14				28 13		
Mch	✓	34 10		Bal				15	47 23		
				140/4069 4 Flank 1 3/19	3 65				43 58		
				150/4234 ✓ 14 3/19	3 65				39 93		
		64 40			154 68			30			
Apl	✓	33		Bal				15	57 93		
				1/81 ✓ 2 4/19	20 93				37 –		
				4/438 24 4/19	3 49				33 51		
May	–	34 10		Bal				15	52 61		
				5/4934 15 5/19	24 33				28 28		
		67 10			48 75			30			
				1/5400 5 Wing 29 5/19	24 33	E			3 95		
					24 33						

Sos 6/6/19 SL83

163652

12-12

21
M

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 532354

2. Rank. Driver

3. Name. Gray Robert Drysdale

4. Unit. 4th Div. Train

5. Date of Discharge 17-6-19 Place Winnipeg

6. Reason for Discharge.....

HMT, OLYMPIC
Sailed-S.M.TN June 6
Arrived HALIFAX June 12
1919

7. Authority. DO 1710

8. Proposed Residence after Discharge 136 Kirkfield Ave.
Winnipeg.

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.?.....

R. D. Gray
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....

Date.....

Dispersal Station "M"
JUN 17 1919
Military District No. 10

25-8-54
AS

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

M.F.B. 218a—300M.-11-18—1772-39-113.

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 Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group AB

Checked by No. 13

Date 4 JUN 1919

G 1009

M. OR S.

AUDITOR | PAYMASTER

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

REGT. No. 532354 RANK Pte NAME (IN FULL) GRAY. R.D

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY
ADDRESS				
IS SEPARATION ALLOWANCE PAID? No	DATE EFFECTIVE			
TO WHOM PAID	RELATIONSHIP			
ADDRESS				

ORIGINAL UNIT C.E.F. 127a — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO Dls Stn M — DATE JUN 6 1919 — AUTHORITY D, O, 170

DATE OF ATTESTATION 26 May 16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15 00 — DATE EFFECTIVE

PAYABLE TO ~~Mrs Hon Gray~~ — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 136 Seekirk ave Selty

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE M.D 10 — DATE JUN 17 1919 — REASON D — AUTHORITY D,O,170 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							28	28	28	28																								28	28	1st BAL. Eng. L. P. C. 28 4x Allots 26/6/19
1/6/16 to 26/6/16	26	1/4	28	60	70	00			133	60							24	33	4	87	112	68	15	00							161	88					Clothing Allce. 1st payment W.S.G.
					35	00													500																Advances - Boat - Train
																																				A.P. engd. on Eng. L. P. C. to
			W.S.G.														War Service Gratuity.						W.S.G.								SOLDIER DEPENDENT				
183 Days			420	00			420	00															70	00							350	00			1st Payment W S G as above
July 17																									9	90					340	10			D: 9th W. of Patra
																	791597	70													270	10			70 2nd Payt W S G
											Aug 17						1215717	70													200	10			70 3rd " "
											Sept 17						1239657	70													130	10			70 4th " "
											Oct 17						1685336	70													60	10			70 5th " "
											Nov 17-19						1700574						60	10											60 12/14 6th " "
							420																410	10	9	90					420				

Cabled War Serv. Gratuity Account Completed

AUDITED 12.11.19 1919 Audit Clerk M.D. 10

He closed.

200M-3-19.—L. L. 38788-... & D. 9985.
M. F. W. 2596.
1772-39-1390.

G. 1009

P. 380.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

S.H.B.

1. Christian names Robert Drysdale 2. Surname GRAY

3. Rank Pte 4. Original Unit 12th Fd Amb 5. Reg. No. 532354

6. Address, in full, to which future payments of gratuity are to be forwarded 136 Selkirk St East, Winnipeg Man

7. Date of enlistment in the C.E.F. 26th May 1916 ✓

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Non Applicable

9. Relationship of such dependent Non Applicable

10. Address, in full, of such dependent Non Applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Non Applicable

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:—

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

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 3 Yrs
Canada 12th Fd Amb
England & France 4th Div Train

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5434. Wt. /30P. 50,0.0(8). 2 19. S.O.,F.Rd.

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 to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled No

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? No

(b) If so, was such reversion in consequence of misconduct or inefficiency? Non Applicable

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge 17-6-19 (b) Reason for discharge

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

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(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 D Grant

Place of Residence: 136 Selkirk St East, Winnipeg Man

Declared before me at: Witley Surrey

This Twelfth day of May 1919

"Questions 12-13-14-20-24-25-26 and 27 are unanswered"

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

R W Marshall major
p O.C. 4th Can. Div. Train

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			420.00	350.00
			70.00	

Certified Correct.

District Paymaster.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch G 6807

OVERSEAS CONTINGENTS

Date of Assignment July 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 532354

Rank Pte Promoted Reverted Discharge

Soldier's Name R D Gray

Battalion 12 Field Ambulance

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Wm Gray

Address 136 Selkirk Ave Winnipeg Man

Change of Address

1

2

3

4

07338-R-68

Date 1917	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
Dec 31				270 -	270 -		
Jan	65918			15	15	S	
Feb.	93120	A.		15	15		
March	93762	H		15	15		
April	128[illegible]	H		15	15		
May	20484	S		15	15	M.	
June	22877	O		15	15	J.	
July	31526	K		15	15	J.	
Aug.	38966	O		15	15	J.	
Sept.	49490	T		15	15	J.	
Oct.	51183	W		15	15	J.	
Nov.	60200	V		15	15	J.	
Dec.	64829	K		15	15	J.	
1919 Jan.	73876	R		15	15	J.	
Feb.	80047	Ly		15	15	C	
Mar.	83235	[illegible]		15.	15	J.	
Apr.	740	S		15	15	J.	
MAY	6935	P.		15	15	V	
JUN	10030	O		15	15	V	
				540	540		

A/c Closed 30-6-19

Ret'd per Olympic

Date 12-6-19 M.F.W.187 Rend

Clerk G.J.B. 1.9-6-19

M.R.O 126757 M.D.10

AUDITED

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22330—M. & D. 7988.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 1933.

44273

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 532354

Name Robert Drysdale Gray

Unit 12th Canadian Field Ambulance

Military Will.

In the event of my death I give the whole of my property and effects to my mother. Mrs William Gray
136 Selkirk Ave
Winnipeg
Man
Can

Signature Robert Drysdale Gray

Rank and Regt Private 12th Can Field Ambulance

Date July 31st 1916