Forestry - Capt. Kenny

TRIPLICATE

ATTESTATION PAPER.

No. 2160914

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE. TRIPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Grey (a) R.A.M.
1a. What are your Christian names?	Robert ~~Lynes~~ Lyons
1b. What is your present address?	44 Ottawa Street, Ottawa.
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?	Mrs. Robert Grey
4. What is the address of your next-of-kin?	44 Ottawa St., Ottawa.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	18th October, 1891
6. What is your Trade or Calling?	Labourer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, R. L. Grey, 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 Lyons Grey (Signature of Recruit)

Date 21st May 1917 191 . W. Harness O.M.S. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, R. L. Grey, 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 Lyons Gray (Signature of Recruit)

Date 21st May 1917 191 . W. Harness O.M.S. (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 Ottawa this 21st day of May 191 7.

Roy Mosley (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Capt. Kenny

Description of Robert L. Grey on Enlistment.

Apparent Age 25 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 4 ins.

Chest measurement: Girth when fully expanded ..... 35 ins.
Range of expansion ..... 3 ins.

Complexion ..... medium

Eyes ..... blue

Hair ..... brown

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

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

3 Vac. left
Scars - 1 rt. side neck (circular)

Right eye D 70
Left " "

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.

Categ B 11

Date 21st May, 1917. 191 .

Place Ottawa

N Macleod Capt Canadian Capr
A.P. Davis Capr
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.

R. L. Grey 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.

C Lewis (Signature of Officer)
Captain & Adjutant

Date 21st May 1917. 191 .

for O.C.

REGIMENTAL DOCUMENTS

NAME Gray, Robert Lyons Plt REGT. NO. 2160914. UNIT C.H. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				24828	
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobilization
2	MEDICAL EXAMINATION (M.F.W. 129)					
1	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	Dispersal Certificate R 13-2					

W 2589
100M-11-18
1272-39-1377

SURNAME. Gray

CHRISTIAN NAMES Robert Lyons.

REGL. No. 216 0914. RANK Pte.

UNIT Rly Const. & Forestry Draft (M.D.3)

FORMER CORPS Nil.

CARD No. 3

S.O.S. 14-19. Demob.
A.O. 94. FOLL. 4-4-19.
3 D D

NEXT OF KIN.

NAMES IN FULL Gray, Mrs. Robert.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 44 Ottawa St., Ottawa, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Ottawa, Ont. DATE Oct. 18th 1891.

PLACE OF ATTESTATION Ottawa, Ont. DATE May 21st 1917.

O/S. 25-6-17. 887/3.

R/C 31/3/19. 294/61 Pte. 3

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-39-339.

Sailed from Halifax per S.S. "Justicia" 25-6-17.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Labourer. RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 25- YEARS MONTHS

HEIGHT 5- FEET 4 INCHES

CHEST MEASUREMENT 35- INCHES EXPANSION 3 INCHES

COMPLEXION Medium EYES Blue HAIR Brown.

DISTINGUISHING MARKS 3 vacc. left. 1 scar right side neck.

MEDICAL EXAMINATIO PLACE Ottawa, Ont. DATE May 21st 1917.

Present address: 44 Ottawa St., Ottawa, Ont.

Number 2160914 Rank Pte

Surname GRAY

Christian Name Robert Lyons

Units C.F.C. Theatre of War France

Date of Service 11-8-17

Remarks

Latest Address ~~Ottawa Ont~~
~~G.P.O.~~
~~2167~~ 26½ Poplar St.
Ottawa Ont.
5/4/24

Roll No.

200m.-2-21.M.

B,
Page 13654

DESP. APR 7 1924
REGN. NO. 3268

C.A.D.C. 5009A

14

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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

NAME OF SOLDIER (Block Letters) GRAY R. L

REGIMENT 6 F 6 RANK Pte. No. 2160914

Date of Examination in England 25-2-19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 30.
2. EXTRACTIONS none
3. CROWNS "
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

   } none.

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

} no.

Signature of Dental Officer J. H. Reid Capt.

A. 2.

Corps R.C.R.

ORIGINAL

MEDICAL HISTORY SHEET

#2160914

ORIGINAL

Surname Fry Christian Name Robert Leslie

Examined on 21 day of May 1917 at Ottawa

Birthplace City or Town Ottawa County Carleton

Apparent age 26

Trade or occupation Labour.

Height 5 feet 4 Inches

Weight 132. lbs.

Chest measurement Minimum 32. inches Maximum expansion 35 inches

Physical development Good

Small-pox Marks None

Vaccination Marks Arm Right Left Number four.

When Vaccinated last 1914

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Eyes.
R. D 70 } 20 feet.
L. D 70 }

Approved by N. Macleod Capt
Chaudière Capr
Rank A.P.D. Ch 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	
15-6-17	Good	R. E. Valin	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
5-6-17	Good	R. E. Valin	M.O.
12-6-17	Good	R. E. Valin	M.O.
19-6-17	Good	R. E. Valin	M.O.

Enlisted on 21 day of May 1917 at Ottawa.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	RCR 2 Depot	2160914	Good	May 21/17
Transferred to	C. For. C.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Summerdale P.E.	24/2/19	Cut H. A.	J.W. Harper Capt. A.D.M.S.
	8/3/19		J. O'Brien Capt. A.D.M.S.

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.

J.M.C

M. F. B. 313.
300M.—1-17.
H. Q. 1772-39-439.

Surname Grey Christian Name Robert R.

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

(14)

D.M.S. 1375.

Medical Examination upon leaving the Service

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

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

Rank PTE. Name ROBERT. L Surname GRAY

Unit or Corps C. F. C. (If a soldier) Regtl. No. 2609/4

Born at OTTAWA. ONT. on, date 18 OCTR 1894

Signature (for identification) R L Gray

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

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

Weight 135 lbs. EST. ~~R L Gray~~

Height 5 ft. ~~4½~~ ins.

2. NUTRITION AND DIATHESIS? Good.

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

3. NERVOUS SYSTEM? Negative

4. RESPIRATORY SYSTEM. Negative.

5. HEART?

Abnormal Sounds? NO

Abnormal Size? NO

Pulse Rate? 75 Intermittence or irregularity? NO.

6. ARTERIES.—Any hardening? NO.

7. DIGESTIVE SYSTEM? Negative.

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1018 Reaction? Acid Albumen? Nil Sugar? Nil.

9. SKIN, MIDDLE EAR, EYE or any other part? Negative

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

11. Opinion as to the health and physical condition of the one examined? Fit for Cat A.

Examined at Summerside Signed J W Harper Capt A.M.C. M.O.

Date 24/2/19 Signed D. L. Macdonell Lt Col A.M.C. M.O.

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

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.~~ 216914 Rank PTE Surname GRAY.
(Given name in full) ROBERT LYONS.
Unit or Corps C.F.C. Birthplace OTTAWA ONT.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 133 lbs. Height 5 ft. 4½ in. Colour of Eyes Blue

Nutrition Good

Pulse 76

Condition of arteries Good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 2 ft.

Left 2 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
None

Opinion as to general health and physical condition Good as a Subsistence

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.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Sarcelles (Overseas)

Date 8/3/19 Signed J. J. O'Brien Maj 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. L. Gray

(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.)

[OVER]

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

FORM OF WILL

I, Robert Lynos Gray (Name in full)

Regimental Number 216914 serving in R.C. and T. Depot

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

I devise all my real estate unto

My Mother, Mrs. Margaret Gray,
44 Ottawa St.,
Ottawa, Ontario

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

absolutely, and my personal estate I bequeath to

My Mother, Mrs. Margaret Gray,
44 Ottawa St.,
Ottawa, Ontario

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

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 19 day of June A.D. 1917

R L Gray 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.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness A. S. McCloskey

Address of Witness 405 Wellington St., Ottawa.

Occupation of Witness Soldier

Signature of Second Witness A. R. Blanchard

Address of Witness 405 Wellington St. Ottawa

Occupation of Witness Soldier

M. F. W. 82.
300M.-12-16.
1772-39-983.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Class. A

No. 230942 Issued

THIS IS TO CERTIFY that No. 216914 (Rank) Private

Name (in full) Gray, Robert Lyons enlisted in

the C.F.C.

CANADIAN EXPEDITIONARY FORCE at Ottawa on the 23rd

day of May 19 17.

HE served in C.F.C. 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 24

Height 5' 4½"

Complexion Medium

Eyes Brown

Hair Brown

Marks or Scars Scar. Right side of neck

R L Gray

Signature of Soldier

Date of Discharge

Dispersal Station No. 2
APR 1 1919
Military District No. 2

J. DeGlenderr

Issuing Officer

Capt

Rank

Date March 13th 19 19

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.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

Form R 122.
2353—100M—9-17-16

Gray

LTR Rank Name ~~GREY~~, Robert Lyons Reg'l No. 2160914

Unit If in perm. Corps, What Unit? Married or Single Single.

Dft. No1. Forestry, OTTAWA, to Base Depot.

Place and Date of Enlistment Ottawa, 21st, May 1917. Place of Birth Ottawa, Ont, Canada.

Name and Address, Next-of-Kin Mrs Robert Grey.

44 Ottawa, St. Ontario. Canada. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. NS. 9447
File R.L.
Category O R Can

Discharge, Date and Place Reason Character G

H. W. & V., Ld.—9546-16.

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 ~~5~~ 4 7 17 S/S JUSTICIA.				A.F.B. C. 22 AUG 1917 CHECKED
9.7.17	C.F.C. BD	T.O.S on Arrival	S. dale		4.7.17	A.F.B. II 62
11.8.17	" "	S.O.S. to 71 Coy France	Pte	"	11.8.17	— 91
3.9.17	" 71 Coy	Disembarked Havre	"	Field	12.8.17	— 1.
10.2.19	" "	SOS to BDCFC S'dale.	"	"	17.2.19	— 7 (T.O.S. B.D. C.F.C. A.F.B. II 42 d/11-2-19)
15-3-19	3 M D C W	TOS from BDCFC	"	Rhyl	12-3-19	- 64
12-3-19	B.D.C.F.C.	S.O.S. to 3 m.D.C.W. Rhyl	✓	S'dale.	12-3-19	- 91
				33-G.	23-3-19	
26-3-19.	3 M D C W Sub Depot C F C	DOS to C&F Canada. Sailing 33	✓	Rhyl	23-3-19	— 73

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.					

CASUALTY FORM. ACTIVE SERVICE. A.F.B. 103.

NUMBER 216914 RANK Pte. NAME Gray L.

12:3:19 T.O.S. WING 3. KINMEL PARK. Part 2 D.O. 64, 13-3-19

23/3/19 S.O.S. On transfer to L.E.F. On proceeding to
M.N.D. PART 2 D.O. 73 25/3/19

W. Stevens Lieut.
Offr. i/c Wing Discharge Office,
M.D. No.3. Camp 6 & 7.

H.M.T.S. EMPRESS OF BRITAIN.
EMBARKED 23-3-19

23/3/19 ..... O. S. ..... Discharged ..... Kingston ..... Pt. 2. Order ..... 94.

..... Major

O. C. Dispersal Area. Station

Army Form B. 103. Sheet 2. Regimental Number 3160914

Casualty Form—Active Service.

Regiment or Corps.....

Rank Pte. Surname Gray. Christian Name Robert Lyons.

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

Enlisted (a) 21/5/17. Terms of Service (a)..... Service reckons from (a) 21/5/17.

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended {.....} Re-engaged {.....} Qualification (b).....

{.....} {.....} or Corps Trade and rate.....

Occupation..... .....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked			
12.3.19					
B.D.C.F.C.	S.O.S.	BASE DEPOT C.F.C. on transfer to M.T.3. Can. camp. Rhyl.	SUNNINGDALE	12.3.19	Pt. I T.D.O. 71

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

W. 5527—M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B./103 E/1555.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties. &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				

Gray, Robert Lyons

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

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

Casualty Form—Active Service.

War Service Badge "A" No.

Unit, Regiment or Corps 1st Forestry Draft. RC & Depot

Regimental No. 2760914 Rank Pte Name Robert Lyons Gray Robert Lyons GRAY.
C. E. F.

Enlisted (a) 21/5/17 Terms of Service (a) War Service reckons from (a) 21/5/17

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) (Bil) Labourer

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 Halifax June 22nd 1917			H.M.T. 78261
		Disembarked Liverpool July 4th (91)			Chas. Eb. Babcock Lt. actg adjutant
		8.7.17 O.C. C.F.C. T.O.S., Base Depot, CFC.	Sunningdale	4.7.17	D.O.Pt.II., No.61. 62 R.R.Elliott Lt.& A/Adjt., Base Depot, CFC.
11-8-17	O.C., C.F.C.	S.O.S. BASE DEPOT C.F.C. SUNNINGDALE 11-8-17 PT. II. DO. NO 91			
		On posting to 7/1 Coy., C.F.C., France. R.R.Elliott LT. & A/ADJ. C.F.C.			
		LANDED IN FRANCE 12 8 17			
		L R 8792			

CERTIFIED CORRECT. 24 AUG. 1917 CANADA RECORDS, LONDON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, 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				
2-3-18.	71st Coy.	Granted 14 days leave to U.K.	Field	2/3/18	B213 Pt 2. O. No 11. : 1918.
23.3.18	Do	Rejoined	Do	23.3.18	B213
14/11/18.	71st Co. B26	Sentenced to 20 days F.P. No 2. 11/11/18 for D.O.S.D. Drunk (2) Creating a disturbance in Camp.	Field	8/11/18.	B2069. Pt 2 No 57 of Nov. 1918.
3/2/19	12 Dest Hqrs	Granted 15 days leave to U.K.		2/2/19	F24/1/709 of KA 38920 P3/7
Do	Do	S.O.S. of No 71 Coy on being ordered to report to C.F.C. Depot Summary of Operation of leave for Demobilization		17/2/19	Authy as above P3/7
17-2-19		from 71 Co Essex.	17-2-19		42.

A Brander Lieut.
for Lt. Col., A.A.G.,
Canadian Section

Mrs

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Marg. Grey
(Assignee)

Name of Soldier Grey, L.

PAYMENTS. 2160914 Pte R.C. & For.

L. L. Job 19227—M. & D. 7814.

15 00

JUL 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		B.30277	30	15 00
Sept.		X 39839	15	15 00
Oct.		R 41611	15	
Nov.		H 49667	15	
Dec.		R 57368	15	90
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.				

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

Mrs

To Whom Margaret Grey

Address 44 Ottawa St.
Ottawa. Ont

By Whom Assigned Grey R. L.

Regtl. No. 2160994

Rank Pte

Corps Ry. Con. & For. Dpt.

Rate 15 00

JUL 1 1917

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

FORM F. 559
8245-150M.-7/9/17

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Ottawa Canada

NAME OF NEXT OF KIN: Mrs Robert Gray — RELATIONSHIP: Mother

ADDRESS: 44 Ottawa St., Ottawa, Canada

NAME OF NEXT OF KIN — RELATIONSHIP

ADDRESS

APPOINTMENTS, PROMOTIONS AND REVERSIONS.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &C. NAME OF HOSPITAL.

SEPARATION ALLOWANCE.

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE) — STOPPED EFFECTIVE (DATE)

PAYABLE TO — REASON

RELATIONSHIP — AUTHORITY

AUTHORITY FOR ISSUE — REMARKS

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE DATE — STOPPED EFFECTIVE (DATE)

PAYABLE TO — REASON

RELATIONSHIP — AUTHORITY

AUTHORITY FOR ISSUE — REMARKS

NEW PAYBOOK ISSUED — NEW PAYBOOK ISSUED

REG'L. No. 2160914 RANK Private NAME Gray, Robert Lyons

PLACE OF ATTESTATION Ottawa Canada — DATE OF ATTESTATION 21.5.17 — ORIGINAL UNIT Ottawa Ry Con & Forestry Draft

PRESENT UNIT 6 F 6

ASSIGNED PAY

(1) PER MONTH $15 00/100 — DATE EFFECTIVE 1.7.17 — AUTHY.

PAYABLE TO Mrs Robert Gray, 44 Ottawa St, Ottawa, Can. — RELATIONSHIP Mother

(2) PER MONTH $ — DATE EFFECTIVE — AUTHY.

PAYABLE TO

RELATIONSHIP

(3) PER MONTH $ — DATE EFFECTIVE — AUTHY.

PAYABLE TO

RELATIONSHIP

(4) PER MONTH $ — DATE EFFECTIVE — AUTHY.

PAYABLE TO

RELATIONSHIP

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

(1) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

(2) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

(3) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

(4) STOPPED EFFECTIVE — CAUSE — DATE A3M FORMS REND.

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PARTICULARS OF TRANSFERS

TO UNIT	EFFECTIVE DATE	AUTHORITY
C.H.Q. France	1/11/17	

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. OF DAYS	PAY AND FIELD ALLOWANCE RATE	PAY AND FIELD ALLOWANCE $ C.	WORKING PAY No. OF DAYS	WORKING PAY RATE	WORKING PAY $ C.	SEPARATION ALLOWANCE $ C.	ASSIGNED PAY CREDITS $ C.	ANY OTHER CREDITS $ C.	TOTAL CREDITS $ C.	SEPARATION ALLOWANCE $ C.	CASH PAYMENTS DURING THE MONTH 1 $ C.	2 $ C.	3 $ C.	4 $ C.	ASSIGNED PAY $ C.	OTHER CHARGES $ C.	TOTAL DEBITS $ C.	BALANCE CARRIED FORWARD CREDIT $ C.	BALANCE CARRIED FORWARD DEBIT $ C.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &C., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
July 1		Balance from Canada																		25 60					
July 1	31	31	1 00/10	34 10							34 10						15		15	44 70					
Aug 1	31	31		34 10							34 10						15		15	63 80					
Sept 1	30	30		33							33		9 73				15		24 73	72 07		30 40 31/9			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE ENG.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE ENG.

389

216091/4 Pte Gray R L 8/15th Can.

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. OF DAYS	PAY AND FIELD ALLOWANCE RATE	PAY AND FIELD ALLOWANCE $ C.	WORKING PAY No OF DAYS	WORKING PAY RATE	WORKING PAY $ C.	SEPARATION ALLOWANCE $ C.	ASSIGNED PAY CREDITS $ C.	ANY OTHER CREDITS $ C.	TOTAL CREDITS $ C.	SEPARATION ALLOWANCE $ C.	CASH PAYMENTS DURING THE MONTH 1 $ C.	2 $ C.	3 $ C.	4 $ C.	ASSIGNED PAY $ C.	OTHER CHARGES $ C.	TOTAL DEBITS $ C.	BALANCE CARRIED FORWARD CREDIT $ C.	BALANCE CARRIED FORWARD DEBIT $ C.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.								
Sept 30	Bal.	~~72 07~~													72 07										
Oct 31.	P. Pay.	34 10		A/S Can									15												
				3095							4 87														
				AR 278							3 57														
				AR 224							3 57				79 16										
		34 10									12 01		15												
Nov.	P. Pay.	33 80		Can A/S									15												
				AR 466							7 14														
				AR 362							3 57														
Dec				Can A/S									15												
				2nd 223 AR 2906							19 47														
				Jan R. 126.							62														
"	P Pay	34 10													85 46										
		67 10									30 80		30												
1918 Jan.	P.P.	34 10		Can A.P.									15												
				AR. 625							16 06														
				" 801							7 14				81 36										
		34 10									23 20		15												
Feb	P.P.	30 80		Can A.P.									15												
				AR 963							7 14														
				H.R.F.							2 00				88 02										
		30 80									9 14		15												
1919 March	P.P.	34 10		Can A/Pay									15												
				AR. 1282.							7 14														
				GR. 6893.							4 87														
				AR. 1091.							73 00														
				- 1542.							7 14														
		34 10									92 15		15		14 97										

P 820
1247—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.7.17	EFFECTIVE DATE:-
AMOUNT:- $15.00	AMOUNT:-

NAME:- GRAY, Robert Lyons. 5575

NUMBER:- 2160914.

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 Robert Gray.
44 Ottawa Street
Ottawa. (mother)

Stopped Eff 1/4/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- Ottawa Ry Const For: Bn.

DATE ACCOUNT FIRST OPENED:- 1.7.17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.F.C. Fce

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
2/2/19	3346.	Field 676. 20 frs.	~~3 75~~				
27/2/19	8942	Bn 676.	~~9 73~~				
			13 46				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada 31/2/19 NR 3916 28/2/19 Sdale 3rd 3.28/- Schedule 3

MONTH 1918.	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Balce Forward								14 97	- -	
April	P P	33 -		Can a.p.				15			
				AR 111. 13/4/18. No 12. Dist. 676.	7 14				25 83		
May.	P P	33 -		Can a.p.	7 14			15 -			
		34 10						15			
				AR. 402. 3.5.18 12 Dist	7 14				37 79		
June	P P	34 10		Can a. Pay.	7 14			15 -			
		33 -						15			
				AR. 931. 4.6.18. No 12. Dist.	7 14				48 65		
July.	B.B.	33 -		Can a. P.	7 14			15 -			
		34 10						15			
				AR. 948. 1.7.18 No 12. Dist.	7 14				60 61		
Aug	PP	34 10		Can a.p.	7 14			15			
		34 10						15			
				AR 1390. 3.8.18 No 12 Dist	7 14				72 57		
		34 10			7 14			15			
Sept	PP	33 =		Can a p				15			
				AR 1790 7.9.18 12 Dis	7 14						
		33 -			7 14			15	83 43		
Oct	do	34 10		Can a P				15			
				AR 2101 12.10.18 12 Dis	7 46 ✓				95 07		
		34 10			7 46			15			
Nov	"	33		" 3375 5-11-18 "	7 46 ✓				95 07		
				CAP				15			
DEC		34 10		20 Dp FPV 11.11.18 20 57 71 Coy 28.11.18.		77 ✓					
				CAP Dec				15			
				AR 3868 14.12.18 12 Dis	13 06 ✓						
Jan		34 10		CAP				15	108 75		
		101 70			20 57	77 00		45			
Feb		30 80		AR 3090 5-1-19 12 Dis	7 46 ✓						
				Cl. 25032 5-2-19 Rm	73 -	- ✓					
				CAP.				15			
	CF	30 80		CF	80 46			15			

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		30 80			80 46			15	108 75		
									173 65		
Mar	P.P.	34 10		6 ap				15	63 19		
				ar 8942 27/2/19. 30.	9 33 -						
				ar 3346 6-2-19 "	3 33 -						
				2554. 14-3-19 LPC end.	9 33 -				40 00		
		64 90			103 65			30			

173 65
110 46.
63 19
13 46
49.73

173 65
1.392
49.73

Sh Sh Ca 23.3.19 1/2 33 0.0

A 3 M. FORM REN'D. Slpd EFFEC. 1/4/19.
DISCHARGED TO Ceas DATE 31/3/19
PAY BOOK VERIFIED 1/3/19
Cr. BAL. 49 73 L.P.C. REN'D 1/3/19
AUTHY. WR. 3916. 28.19 Sdale WO 5

COMPILED BY. A.B. Cattrall
CHECKED BY.

R P C end. 14/3/19 -42 Cr Bal 49 -

Name - Gray Enl. May 21/17.

Date of Embarkation for England 22-6-17.

Proceeded to France. 11-8-17. Returned to England. 17-2-19 Demobd

Date returned to Canada. 23-3-19.

P.R.2855.

Certified 26-4-24

Name _____

Date of Embarkation for England _____

Proceeded to France. _____ Returned to England _____

Date returned to Canada. _____

R.A.M.C.

G 21

30-5

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M. D. 3

War Service Badge Class..... A 1579/38

No. 230942 Issued

1. No. 21 609 14

2 Rank. Pte.

3. Name. Cray Lyons.

4. Unit. C.A.S.C. C.A.S.C.

5 Date of Discharge 1-4-19 Place Ottawa

6 Reason for Discharge demob. mother

War Service Badge
Class "A" No. .....

A 111

7. Authority. P.O. 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 M. T. S. EMPRESS OF BRITAIN.

EMBARKED 23-3-19

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Dispersal Station (Q) APR 1 1919 Military District No. 3

Place.....

Date.....

J. McGlendette Captain

Signature..... for O.C. Dispersal Area Station Qy

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

E. R. L.

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.....a.....

Checked by No.....24.....

.....S.S.W.....

Date.....18.3.19.....

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

G 8751

Date of Assignment Jul. 1-17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 2160914

Rank Pte. Promoted Reverted Discharge

Soldier's Name L. Grey

Battalion Ry. Con. & Flor. Dft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Margaret Grey

Address 44 Ottawa St.

Change of Address Ottawa Ont.

1

2

3

4

REMARKS 07338. R. 59

Date 1917		Cheque No.	Amount S/A	Amount A/P	Total	
	Dec 31			90	90	
1918	Jan.	J 65726		15	15	P
	Feb	G 93984		15	15	
	March	H 94638		15	15	
	Apr.	H 13758		15	15	M
	May	S 21400		15	15	M
	June	U 23753		15	15	
	July	K 32414		15	15	
	Aug.	O 39871		15	15	
	Sept.	T 50450		15	15	
	Oct	W 52128		15	15	H
	Nov.	V 61138		15	15	H
	Dec.	X 65466		15	15	H
	Jan	R 74724		15	15	H
	Feb	Y 80818		15	15	
	Mar	M 82950		15	15	H
				315	315	H

M.R.O 88426.

M. F. W. 128.
400M.—6-17—1772 39-1141
L. L. 22820—M. & D. 7993.

A/c Closed 31.3.19

Ret'd per Empress of Britain

MD.3

Date 31.3.19 F.X. 6.4.19

Clerk Hamilton

AUDITED

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. 123.
400m.—J.17—1772 39-1141
L. L. 22920—M. & D. 7993.

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AUDITOR | PAYMASTER

M. OR S.

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

REGT. No 216914 RANK Pte. NAME (IN FULL) GRAY Robert Edgar (BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT C.E.F. C.O.R.C.C. IF IN P.F. WHAT UNIT?

NEXT OF KIN — RELATIONSHIP: hd.

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE: hd.

TO WHOM PAID — RELATIONSHIP

ADDRESS: hd.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Pte. Robert Edgar Gray,		
44 Ottawa St.,		
Ottawa,		
Ont.		

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 21-5-17. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE 1-7-17.

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Mrs. Margaret Gray, Mother
44 Ottawa St.,
Ottawa, Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE: Ottawa — DATE: 1-4-19 — REASON: Demob. — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.		TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.		TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							49 73	49 73																										49 73	Returned "Empress of Britain"
																																			Bal. per Eng. L. P. C.,
April	7	1 10/28	7 70		35 00			112 70								4 87	9 73		127 83	15 00									162 43					Clothing Allce. and 1st Payment W. S. C.
					70 00												5 00																	Pay to Estimate date of discharge.
					15 00			15 00																		6 60			6 60			8 40		Advances in England.
																																			Boat Money, Train Money.
																																			Overpaid 6 days on discharge.
																										32			32		8 08				Over charged A.P.
																																			Equipment charges.
		W. & D. A.									War Service Gratuity					W. & D. A.																		
122 days		280 —		280 —												70 00													70 —	210 —				1st Pay't. W. & D. as above
		8 08		288 08												78 08													148 08	140 —				G. 321964 April 29
																70 —													218 08	70 —				Credit Balance as above.
																70 00													288 08	—				338115 - May 31/19.
																																			G. 938528 June 27/19

200M-3-19.—L. & D. 5878[illegible] & D. 9985.
M. F. W. 2496.
1772-39-1390.