

ATTESTATION PAPER.

300TH BATTALION

No. 922487
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- | | |
|--|--|
| <p>1. What is your surname?.....</p> <p>1a. What are your Christian names?.....</p> <p>1b. What is your present address?.....</p> <p>2. In what Town, Township or Parish, and in what Country were you born?.....</p> <p>3. What is the name of your next-of-kin?.....</p> <p>4. What is the address of your next-of-kin?.....</p> <p>4a. What is the relationship of your next-of-kin?.....</p> <p>5. What is the date of your birth?.....</p> <p>6. What is your Trade or Calling?.....</p> <p>7. Are you married?.....</p> <p>8. Are you willing to be vaccinated or re-vaccinated and inoculated?.....</p> <p>9. Do you now belong to the Active Militia?.....</p> <p>10. Have you ever served in any Military Force?..
If so, state particulars of former Service.</p> <p>11. Do you understand the nature and terms of your engagement?.....</p> <p>12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }</p> | <p><i>Morrison</i></p> <p><i>Robert</i></p> <p><i>Y. N. C. A. Winnipeg</i></p> <p><i>Loxva Scotland</i></p> <p><i>Robert Morrison</i></p> <p><i>Huntley Banffshire Scotland</i></p> <p><i>Farmer</i></p> <p><i>May 25 1900</i></p> <p><i>Farmer</i></p> <p><i>No</i></p> <p><i>Yes</i></p> <p><i>No</i></p> <p><i>No</i></p> <p><i>Yes</i></p> <p><i>Yes</i></p> |
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DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *June 1st* 191*6*. *Robert Morrison* (Signature of Recruit)
J. L. Ross (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *June 1st* 191*6*. *Robert Morrison* (Signature of Recruit)
J. L. Ross (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 *1st* day of *June* 191*6*.
J. L. Ross (Signature of Justice)

Anglin

Description of Robert Morrison on Enlistment.

Apparent Age 16 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. 2 ins.

Chest measurement { Girth when fully expanded 34 ins.
Range of expansion 2 ins.

Complexion Light

Eyes Grey

Hair Fair

Religious denominations. { Church of England
Presbyterian
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 June 1st 1916.

Place Winnipeg

J. R. Maynas

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 Morrison 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 June 1st 1916.
J. R. Maynas (Signature of Officer)
Commanding 20th Bn. C.E.F.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

*no 3 W 67-2
Haye*

DISCHARGE DOCUMENTS

Name

Morrison, Robert

Regt. No.

922484

Rank

Pte

Corps

200th Bu. C.E.F.

Being a Minor

R. O. No.....

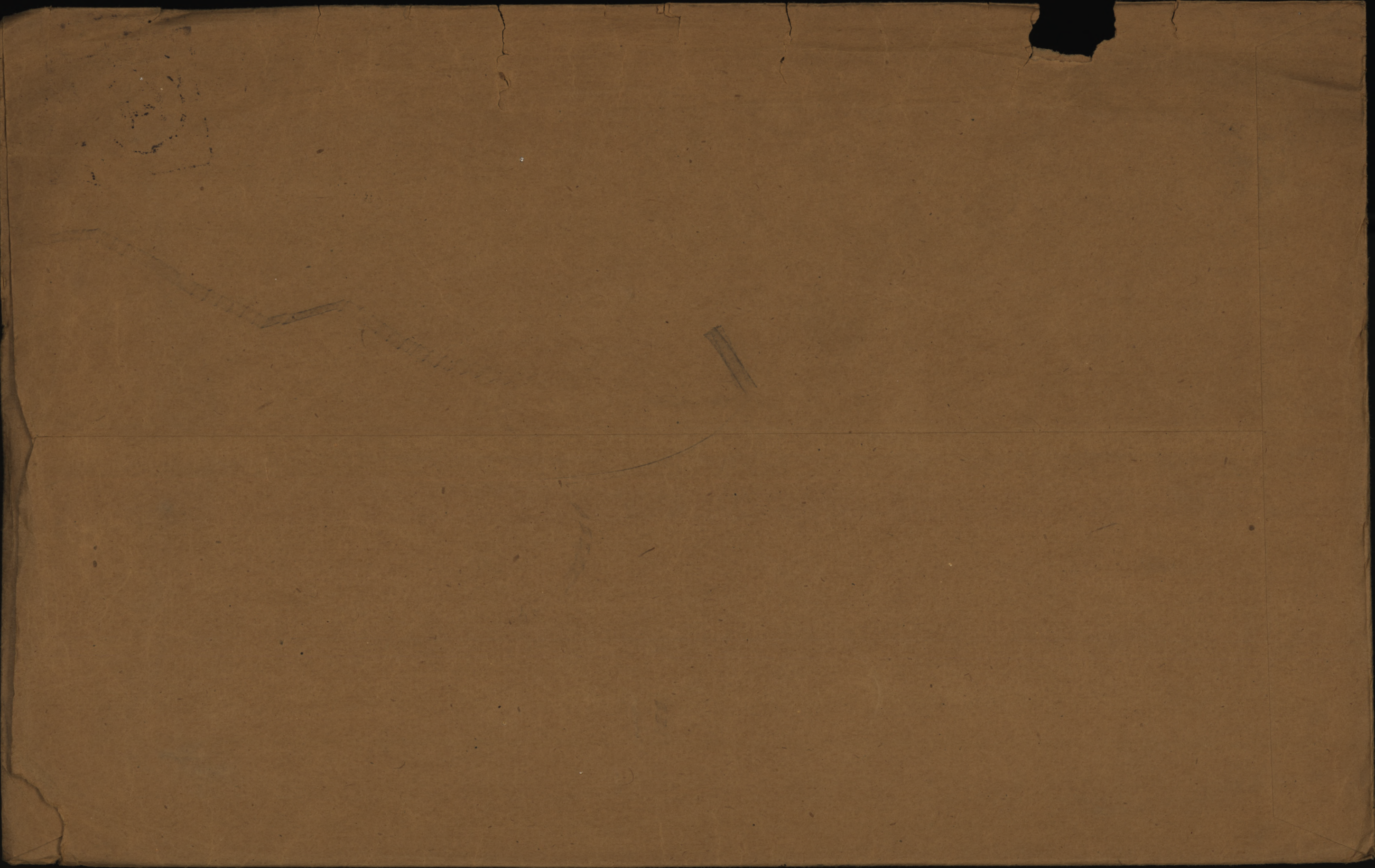
H. Q. No.....



34569



W. H. J.



SURNAME.

Morrison

CARD NO.

S.O.S. Disc

CHRISTIAN NAMES

Robert

17/2/17

FOLL.

10

REGL. NO.

922487

RANK

Pte

UNIT

200th

Bn.

FORMER CORPS

Nil

NEXT OF KIN.

NAMES IN FULL

Morrison, Robert

RELATIONSHIP TO SOLDIER

Father

ADDRESS

*Huntley, Banffshire,
Scot.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Scotland, Fordyce

DATE

May 23rd 1900

PLACE OF ATTESTATION

Winnipeg, Man.

DATE

June 1st 1916

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

16

YEARS

MONTHS

HEIGHT

5

FEET

2

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

2

INCHES

COMPLEXION

Light

EYES

Grey

HAIR

Fair

DISTINGUISHING MARKS

nil

MEDICAL EXAMINATION.

PLACE

Winnipeg, Man.

DATE

June 1st 1916

Present address:-

J. M. C. A. Winnipeg, Man.

No. 922487 RANK

Pte.

NAME

Marrison, R.

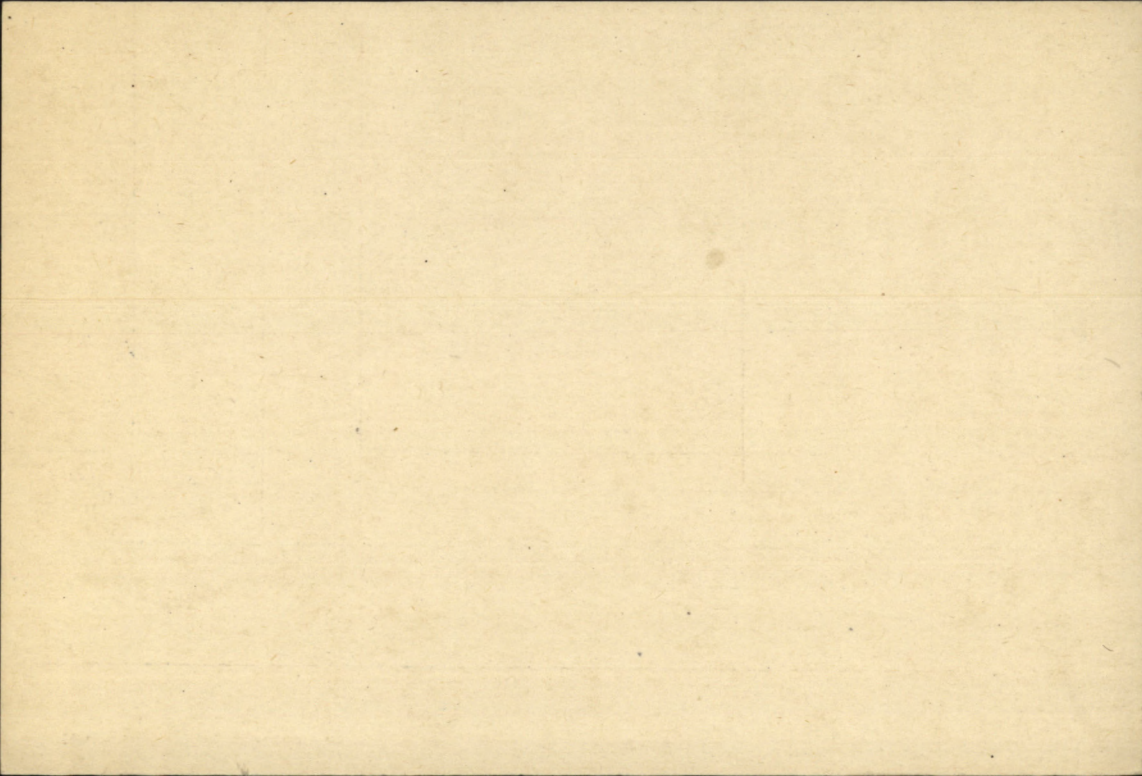
T. O. S. 1-6-16

UNIT

(Do 91-3-6-16) 200th Battalion C.E.F.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
June 1	June 30	x		
	July	v		
	Aug	v		
	Sept	m		
	Oct	c	amv. L. from 18 1/2 to 19 1/2 do. pay. B.O. 233.	
	Nov	c		
	Dec	c		
	1917			
Jan		c		
Feb 1	Feb 17	c	dischgd. v. S.O.S. 17-2-17	NO. 35:10-2-17.
			apclosed by payment B.	



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..... 200th Battalion.

(2) Regimental Number..... 4022487.

(3) Full Name of Soldier..... Robert Morrison.

(4) Place of Birth..... Banffshire, Scotland.

(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?..... No.

(8) Have you any children?..... No.

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?..... **No.**.....

If so, state name and address

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

If so, state name and address **Janet Nicol, Aberdeen, Scotland.**.....

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

Are you her sole support, or not?..... **No.**.....

(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. Bouygaste
.....
Officer Commanding.

Date *Dec. 12th 1916*.....

FORM OF WILL.

I, Robert Morrison. (Name in full)

Regimental Number #922487. serving in 200th Battalion.

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

~~Mrs Wm Robertson. (Grandmother)~~
~~Fordyce, Banffshire, Scotland.~~

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

absolutely, and my personal estate I bequeath to

Mrs Wm Robertson. (Grandmother)
Fordyce, Banffshire, Scotland.

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 28th. day of Nov. A. D. 191 6.

R Morrison 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 J A Park

Address of Witness Wood. Den

Occupation of Witness Soldier.

THE TWO WITNESSES MUST SIGN HERE

Signature of Second Witness W A Gait

Address of Witness 200th Battalion Wpg.

Occupation of Witness Soldier

FORM OF WILL

I, the undersigned, of the County of _____ State of _____ do hereby certify that I am of sound mind and memory, and that I am not under any duress, coercion, or undue influence, and that I am not a minor, and that I am not a married person living with a spouse, and that I am not a person who is otherwise disqualified by law from making a will.

I hereby declare that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will.

I hereby declare that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will.

I hereby declare that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will.

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I hereby declare that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will, and that I am not a person who is otherwise disqualified by law from making a will.

MEDICAL HISTORY SHEET.

Surname Monison Christian Name Robert

Examined { on 1st. day of June 1916.
 at Winnipeg

Birthplace { City or Town Fordyce
 County Scotland

Apparent age 16 years.

Trade or occupation Farmer

Height 5 Feet 2 Inches.

Weight 115 Lbs.

Chest measurement { Minimum 32 inches.

Maximum expansion 2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left
 Number None

When Vaccinated last Never

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by J. H. Mayne
 Rank Capt. 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.
<u>7/12/16</u>	<u>OK</u>	<u>J. H. Mayne</u> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>7/12/16</u>	<u>OK</u>	<u>J. H. Mayne</u> M.O.
<u>7/20/16</u>	<u>"</u>	<u>J. H. Mayne</u> M.O.
<u>7/28/16</u>	<u>"</u>	<u>J. H. Mayne</u> M.O.

Enlisted on 1st. day of June 1916. at Winnipeg

	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.

This space to be for numbers.

14.4.42

Proceedings on Discharge.

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

No. <i>922487</i>	
Rank <i>Private</i>	
Name <i>Robert Morrison</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>200th Battalion, C. E. F.</i>	
Date of Discharge <i>February 17th, 1917</i>	
Place of Discharge <i>Winnipeg, Manitoba</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <i>16</i>years.....months.	Descriptive Marks
Height..... <i>5</i>feet..... <i>2</i>inches.	
Complexion <i>light</i>	
Eyes <i>Grey</i>	
Hair <i>Fair</i>	
Trade	
Intended place of residence (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of <i>being a minor</i> <i>authority A. A. G. of Administration C. O. 33.</i>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc. <i>Fair</i>
	<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>✓</i>

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113.

(OVER)

*Noted 20-4-17.
g.p.*

H

5. He is in possession of the following number of G. C. Badges:



No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations, with a checkmark in the middle line.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) *Winnipeg, Man*

A Boueycastle

(Date) *Feb 17/17*

Commanding *200th Battalion C&A*

8. Certificate to be signed by the Soldier on Discharge

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

(Place) *Winnipeg, Man* *R Morrison* (Signature of Soldier.)

(Date) *Feb 17/17* *Jas. McFinnan* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

R Morrison (Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place).....

(Signature).....

(Date).....

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.