

Card,  
a.m.

148TH "OVERSEAS" BATTALION  
CANADIAN EXPEDITIONARY FORCE  
ATTESTATION PAPER.

DUPLICATE

No. 241232

Folio. 19

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

148. BATT

- 1. What is your surname? Morrison
- 1a. What are your Christian names? Robert Clarence
- 1b. What is your present address? Arundel Que
- 2. In what Town, Township or Parish, and in what Country were you born? Arundel Que
- 3. What is the name of your next-of-kin? Walter Morrison
- 4. What is the address of your next-of-kin? Arundel Que
- 4a. What is the relationship of your next-of-kin? Father
- 5. What is the date of your birth? 26th. October 1896
- 6. What is your Trade or Calling? Farmer
- 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? ~~Yes~~ 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 Clarence 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.

R. C. Morrison (Signature of Recruit)

Date 25 January 1916 William Stewart (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Clarence 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.

R. C. Morrison (Signature of Recruit)

Date January 25 1916 William Stewart (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 Montreal P.Q. this 25 day of January 1916.

W. J. Ashe (Signature of Justice)



Description of Robert Clarence Morrison on Enlistment.

Apparent Age 19 years 3 months.

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

Height 5 ft. 7 1/2 ins.

Chest measurement { Girth when fully expanded 34 1/2 ins.  
Range of expansion 2 3/4 ins.

Complexion Dark

Eyes Greybrown

Hair Black

Religious denominations. { Church of England  
Presbyterian  
Methodist XX  
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.)

*Scars left Temple*

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 January 25<sup>th</sup> 1916.

Place Montreal P.Q.

*H. Aubrey*  
Medical Officer.  
*Capt. A. W. C.*

\*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 Clarence 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.

*Alway* (Signature of Officer)  
O. C., 148th "Overseas" Battn. C. E. F.

Date 28 January 1916.



2m-18  
1-20-18

(S)

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 1
- Compulsory Stoppages.....
- Casualty Forms..... 1
- 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..... 2
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Dec. 5, 7, 10 — 1  
 M. 7, W. 67 — 1  
 1 pay card

**Deserter's DISCHARGE DOCUMENTS**

R. O. No.....  
 H. Q. No.....

(H)

Name Morrison, Robert C.

Regt. No. 841238 Rank Pte

Corps 14th Bn. C. C. 7.

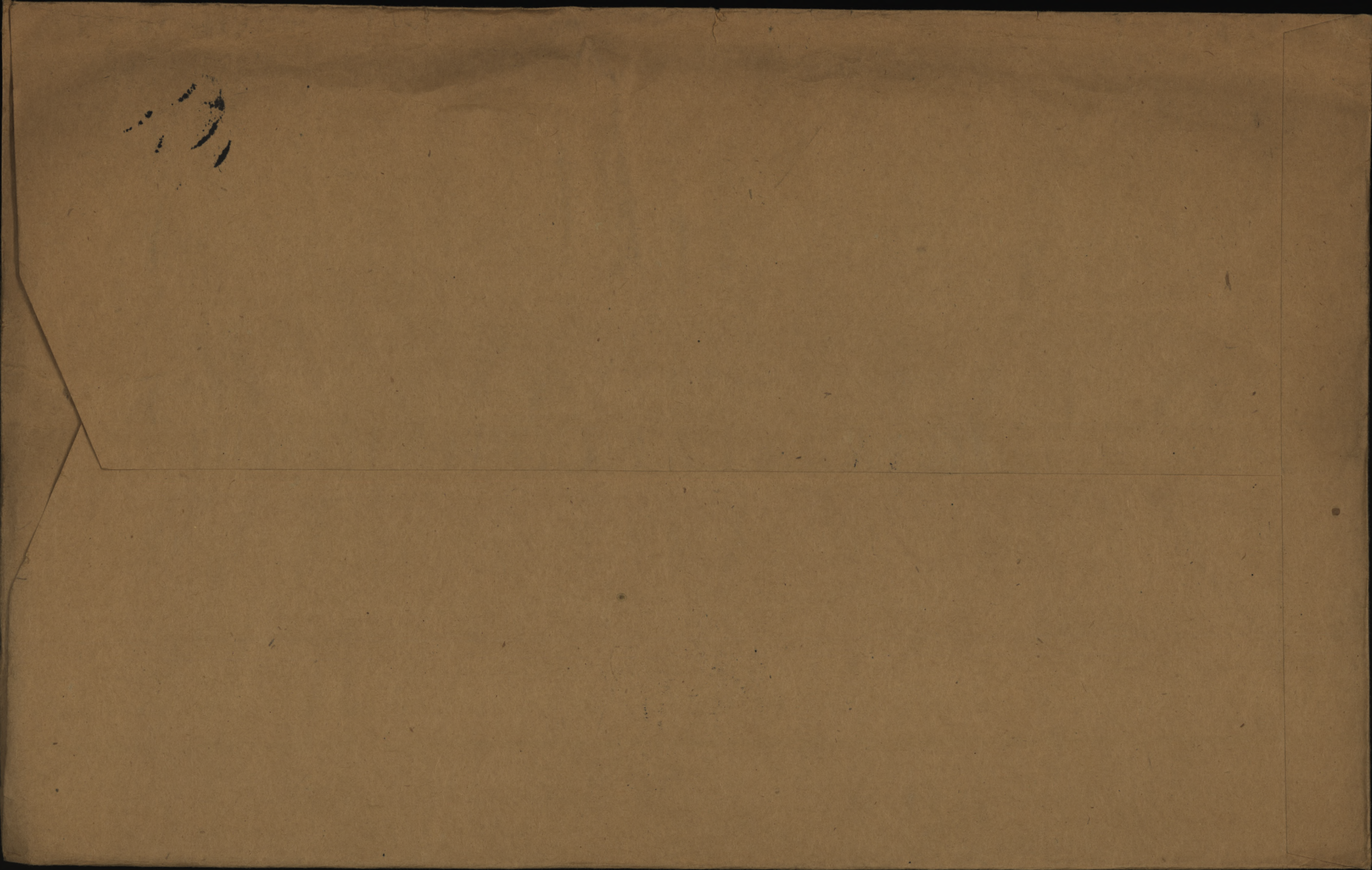
**Absentee**

(C)

34574

(H)







No. 841238 RANK

Pte

NAME

Morrison Robt. C.

T. O. S. 25-1-16

UNIT

148<sup>th</sup> Battalion C. E. F.

(Do 21 of 26-1-16)

M. D. 4

## PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID  
FROMPAID  
TOSIG.  
OR  
REC'T

PARTICULARS

AUTHORITY

1916

1916

Jan. 25

Jan. 31

✓

Feb.

✓

Mar.

✓

Apr.

✓

May

✓

June

✓

July

✓

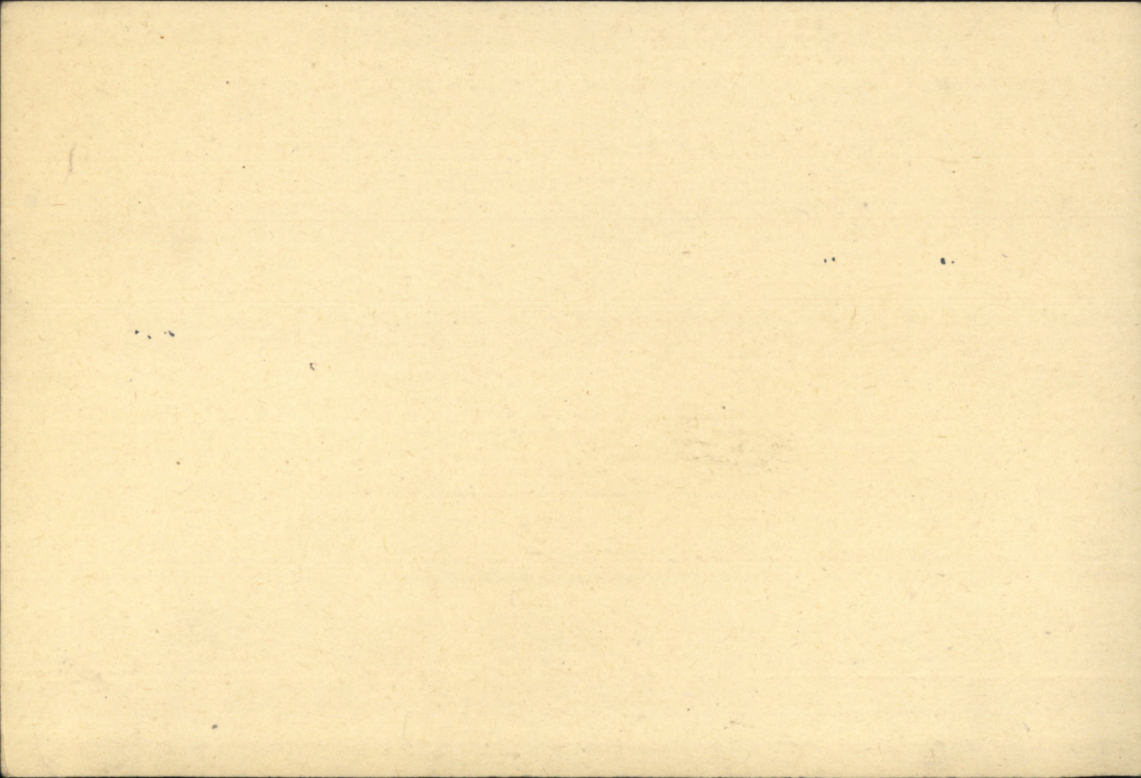
Aug.

✓

Sept.

9 days pay forfeited  
transferred to 5<sup>th</sup> Pioneer Bn 21-9-16Sept pay list  
" "







No. 541238 RANK 1st Lt

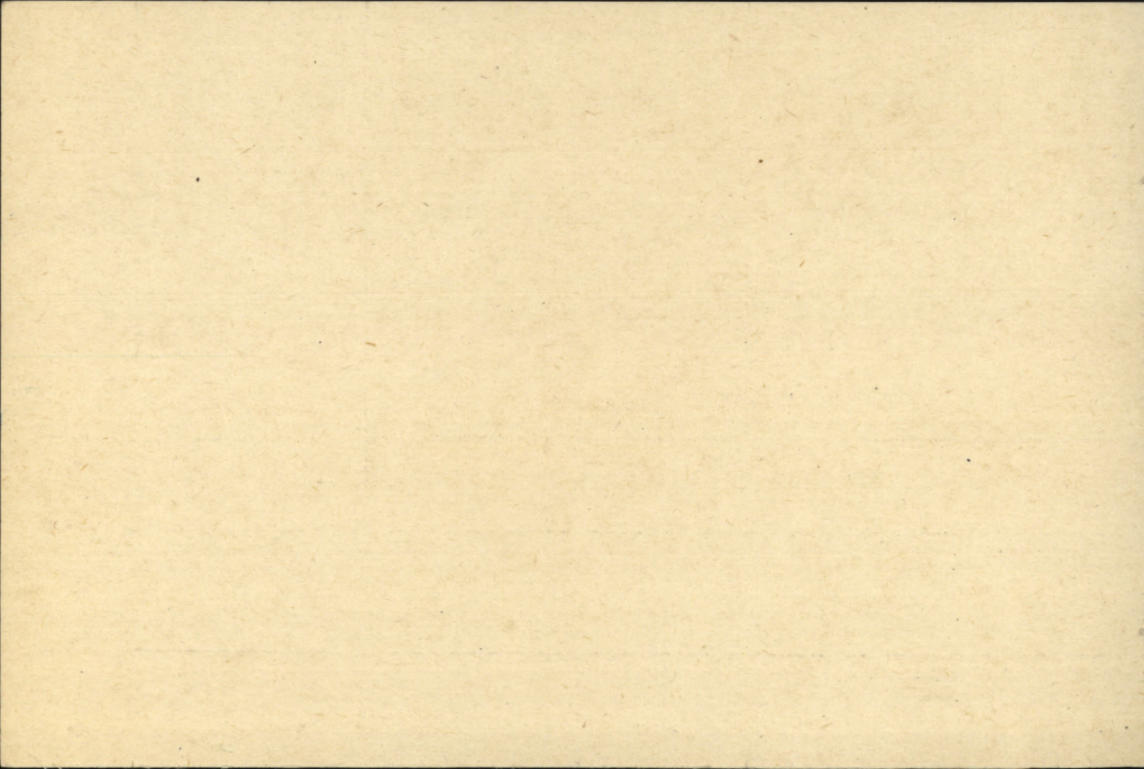
NAME Harrison R. G.

T.O.S. trans from UNIT 5th of Pioneer Battalion, C. E. F.  
 145th Bu. 22-9-16  
 (N.O. 170. 24-9-16)

M. D. D.

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916 sept 22	1916 sept 30	✓		
	act	n	absentee 20-10-16	
nov 1	nov 24	n.	Dischgd. 24-11-16	N.O. 195. 20-10-16. N.O. 229. nov 1916
<p>of not closed n.</p>				







SURNAME.

*Morrison,*

CARD NO. ✓

CHRISTIAN NAMES

*Robert Clarence*

FOLL.

REGL. No. *841238*

RANK *Pte.*

UNIT *148 H.*

*Batt.*

FORMER CORPS

*Nil.*

NEXT OF KIN.

NAMES IN FULL

*Morrison, Walter*

RELATIONSHIP TO SOLDIER

*Father,*

ADDRESS

*Arundel, P. Q.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*Canada, Arundel, P. Q.*

DATE

*Oct. 26<sup>th</sup> 1896*

PLACE OF ATTESTATION

*Montreal, P. Q.*

DATE

*Jan. 25<sup>th</sup> 1916*



MARRIED

SINGLE

Yes,

WIDOWER

TRADE OR CALLING

Farmer,

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

19 YEARS

3 MONTHS

HEIGHT

5 FEET

7 $\frac{1}{2}$  INCHES

CHEST MEASUREMENT

40 INCHES

EXPANSION

2 $\frac{3}{4}$  INCHES

COMPLEXION

Dark.

EYES

Grey brown,

HAIR

Black.

DISTINGUISHING MARKS

Scar left temple.

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

Jan. 25<sup>th</sup> 1916



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

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

# Casualty Form—Active Service.

250M.—1-16.  
H. Q. 1772-39-920.

Unit, Regiment or Corps

148TH "OVERSEAS" BATTALION, C.E.F.

Regimental No. 841238 Rank Private Name Morrison., Robert Clarence.

C. E. F.

Enlisted (a) 25/1/16 Terms of Service (a) War & 6 mos. Service reckons from (a) 25/1/16

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) Farmer

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				
24-9-16.	5 <sup>th</sup> Pioneer Batta.	T. O. S. 5 <sup>th</sup> Pioneer Batta on transfer from 148 <sup>th</sup> Batta.	Valcartier	22-9-16	D.O. # 170
24-11-16	5 <sup>th</sup> Pioneer Batta.	S. O. S. Absent on Embarkation	Montreal	24-11-16	DD # 229
10. 9. 21.	do.	Pt. II. D.O. 229 d./24.11.16. amended to read: Ill. Absent from 20.10.16. S.O.S. Reporter wife.	Ottawa Ont.	10.11.16.	After Order 7.

*[Signature]*  
For  
Quarta y Records.

(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.]







# ORIGINAL MEDICAL HISTORY SHEET.

Surname Morrison Christian Name Robert Clarence

Examined { on 25<sup>th</sup> day of January 1916  
 at Montreal P.Q.  
 Birthplace { City or Town Arundel  
 County Prov. Que.

Approved by H. Aubrey  
 Rank Capt. A.M.C. M.O.

Apparent age 19 years  
 Trade or occupation Farmer  
 Height 5 Feet 7 1/2 Inches.  
 Weight 155 Lbs.  
 Chest measurement { Minimum 37 1/4 inches.  
 Maximum expansion 40 inches.  
 Physical development good  
 Small-Pox Marks none

Date.	Fit or Unft.	EXAMINED FOR RE-ENGAGEMENT.

Vaccination Marks { Arm Right Left  
 Number 1

Date.	Result.	VACCINATIONS.

When Vaccinated last as a child  
 (a) Marks indicating congenital peculiarities or previous disease

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>FEB 26 1916</u>	<u>Good</u>	<u>500 million</u>
<u>MAR 7 1916</u>	<u>Good</u>	<u>1000 "</u>
<u>APR 8 1916</u>	<u>Good</u>	<u>1000 "</u>

Enlisted on 20<sup>th</sup> day of M January 1916 at Montreal P.Q.

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>148th. O/S. Bn. C.E.F.</u>	<u>841238</u>		
Transferred to				

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.



Surname *Novison* Christian Name *Robert Clarence*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Royal Victoria Hospital		15	5	16	15	6	16	gonorrhoea	30	very V.D.	D. Mear Colburn
Valcartier Camp Hos		JUL	6	1916	AUG	10	1916	gonorrhoea	36	very clear V.D.	<i>Robert</i> Capt., O.C. A.M.C. Training Depot No. 4.
Valcartier Camp Hospital.		AUG	29	1916	SEP	29	1916	Gonococcus infection of Urethra and Prostate.	32	No discharge for 12 days. Prostate slightly enlarged and hard Pus cell ++	<i>Robert</i> Major, O.C. A.M.C. Training Depot No. 4.
Royal Victoria Hospital		30	9	16	4	10	16	Gonorrhoea	5	very	D. Mear Colburn



## ASSIGNED PAY

Sheet No. 2.

*Mrs Sarah Morrison*

(Assignee)

OVERSEAS CONTINGENTS

Name of Soldier

*Morrison Rb*  
*Plc "C" 148 Batt*PAYMENTS. *841238*

I. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>10<sup>00</sup></i>	<i>OCT 1 - 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>C24335</i>	<i>10</i>	<i>Request refund \$10<sup>00</sup></i>
Nov.		<del><i>A 31040</i></del>	<del><i>10</i></del>	<del><i>Cancelled</i></del>
Dec.				<i>Closed. Did not proceed @ \$</i>
Jan.	1917			<i>\$10<sup>00</sup> Refund requested. Dm on 28/16</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
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.				



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12  
 50m.—7-16  
 H. Q. 1772-39-316

*ma*  
*MD*

To Whom *Ms Sarah Morrison* By Whom Assigned *Morrison Pl*  
 Address *Arundel* Regtl. No. *841238*  
*Pf* Rank *Pl*  
 Corps *148 Batt*  
*C Co*

Rate *10<sup>00</sup>* *OCT 1 - 1916*

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<i>Stop. Trans to 5th Pioneers</i>
Feb.				<i>ASP 69104 - 2/16. DMEN 27/16</i>
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

*116*  
*0*



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.				



C

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.

148TH "OVERSEAS" BATTALION, C. E. F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 841238.....

(3) Full Name of Soldier..... MORRISON.. Robert Clarence.....

(4) Place of Birth..... Arundel, Que. Canada.....

(5) Are you married, or not?..... No.....

(6) If married, state,  
(a) Full name of your wife.....

(b) Present Postal Address..... Arundel, Que. Canada.....

(7) Are you a widower?.....

(8) Have you any children?.....

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

Also their names and ages.....



