

Unit A. M. C. Training Depot No. 2

Rank Capt. Name MORRISON, Robert Lindsay

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname?..... M O R R I S O N
- (b) What are your Christian Names?..... Robert Lindsay
2. (a) Where were you born? (State place and country)..... Mansewood, Halton Co., Ont.
- (b) What is your present address?..... 77 Boon Avenue, Toronto
3. What is the date of your birth?..... May 10, 1885
4. What is (a) the name of your next-of-kin?..... Susan Frances Morrison
- (b) the address of your next-of-kin?..... 77 Boon Avenue, Toronto
- (c) the relationship of your next-of-kin?..... Wife
5. What is your profession or occupation?..... Physician
6. What is your religion?..... Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
8. To what Unit of the Active Militia do you belong?..... CAMC
9. State particulars of any former Military Service..... CAMC 1 1/2 yrs.
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

R Morrison Capt (Signature of Officer)

Taken on strength (place)..... Niagara Camp, Ont.

(date)..... June 15, 1918

Richard R. Armstrong
Capt. A.M.C.
(Signature of Commanding Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him*..... fit..... for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date..... Sep. 23, 1918..... 191.....

Place..... Niagara Camp, Ont......

Hugh Cowlean Capt
Medical Officer.

*Insert here "fit" or "unfit"

OFFICERS' REGISTRATION PAPER

UNITARIAN OVER SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

ANSWERS

1. What is your name?
 2. What is your rank?
 3. What is your service number?
 4. What is your date of birth?
 5. What is your date of enlistment?
 6. What is your date of discharge?
 7. What is your date of re-enlistment?
 8. What is your date of return to the United Kingdom?
 9. What is your date of arrival in the United Kingdom?
 10. Are you/were you married in the United Kingdom?

UNITARIAN OVER SEAS EXPEDITIONARY FORCE

It is recommended that the above answers should be typed on the reverse of this paper.

There are certain questions which are asked in the above questions and the answers to which should be typed on the reverse of this paper.

Signature of Commanding Officer

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above named officer and find him/her to be fit for service in the United Kingdom.

Signature of Medical Officer

Signature of Commanding Officer

J. A. W. 1945
 10/10/45

REGIMENTAL DOCUMENTS

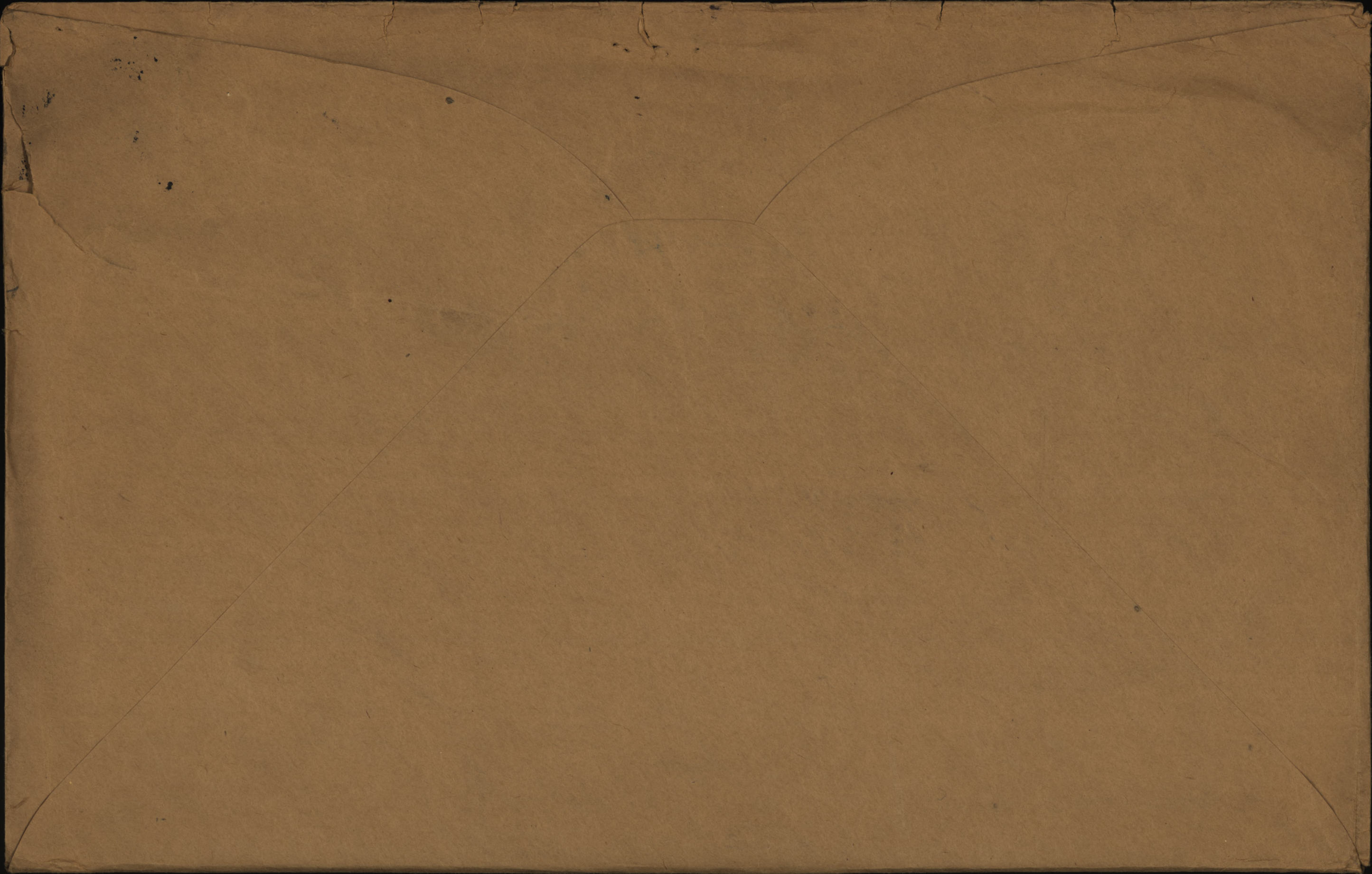
NAME MORRISON ROBERT Lindsay REGT. NO. Capt. UNIT C.A.M.C. H. Q. FILE NO. _____

S

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<i>pers</i>	21-10-19	<i>pers-1216-91</i>	DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		M		I	Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
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
2 DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				34583	
1 MEDICAL EXAMINATION (M.F.W. 129)					<i>Demot.</i>
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)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 <i>M. F. W. 2591</i>					
1 <i>Form C.D. 3</i>					
1 <i>Misc.</i>					

H

480143



-2.2

H. Q.
 M. D. No. 2
 T. O. S. June 15th 1918
 D. O. Pt. II 18.5 of 4-7-18
 S. O. S. 27-10-1919
 Reason Dismiss.
 Auth. Bo-2249-31-10-19
 Unit C.A.M.C. (I.D.)
 Rank Capt.
 Surname Morrison
 Christian names Robert Lindsay
 Regtl. No.
 Unit C.A.M.C. (I.D.)

Also auth. 100909-15-11-19 D-DE 2
 #2 note
 Next of kin Morrison, Mrs Susan T. Relationship Wife
 Address 17 Boon Ave., Toronto Also notify:
Ont.

BORN—Place Canada Mansewood Ont. Date May 10th 1885
 ATTESTED—Place Niagara, Ont. Date June 15th 1918
 O/S. 28-9-18 1453
 R/C 17-10-19427 Capt.
T

8-13

1-13

No

RANK

Capt.

NAME

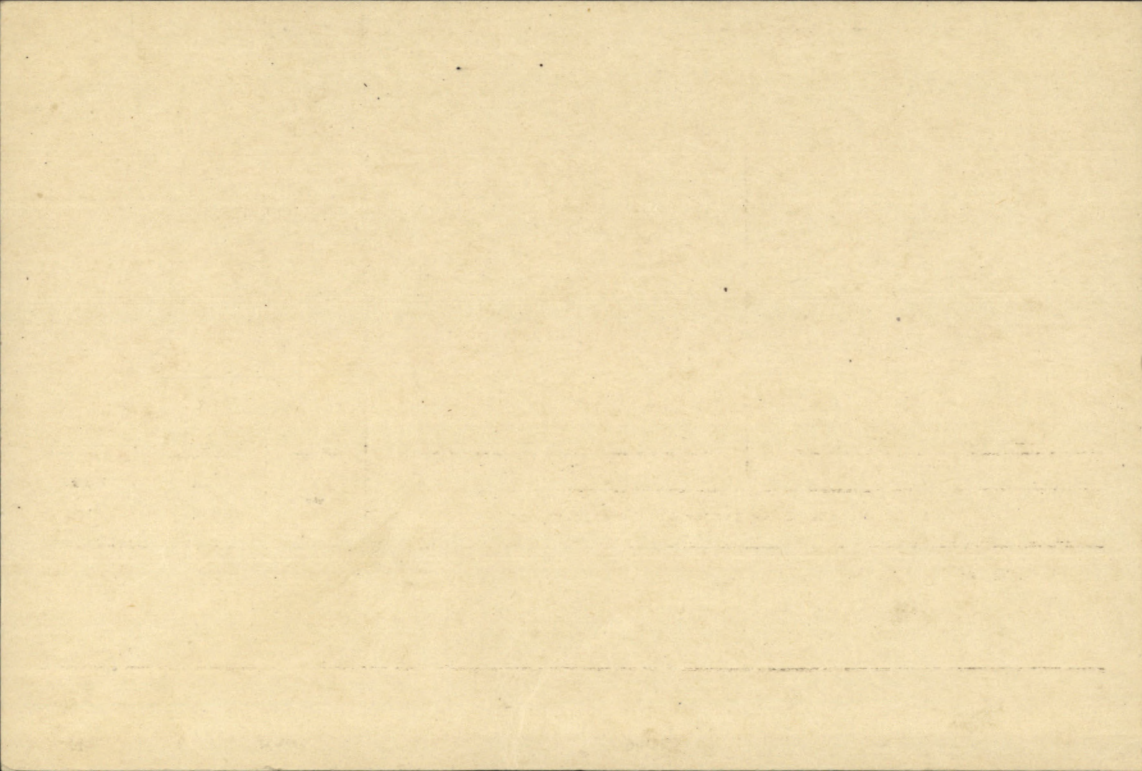
Morrison R. L.

T. O. S. 15-6-18 UNIT

June Paylist, A. M. C. Training Depot #2

M. D. 2,

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 June	1918. noate	n		



Number

Rank

Capt

Surname

MORRISON

Christian Name

Robert Lindsay

Units

Theatre of War

England

Date of Service

28-9-18

Remarks

1845 Dufferin St.

Latest Address

~~77 Bloor Ave.~~

Toronto

Roll No.

C A M L

Ont.

200m.-6-21.

A Page 47/18

(This form to be filled in by all ranks on voyage to Canada.)

0.....

ER RANK SURNAME INITIALS UNIT

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

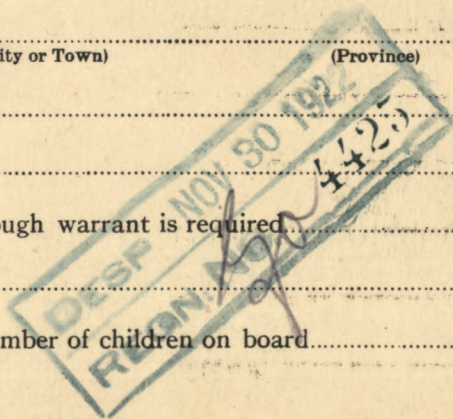
Station in Military District to which a furlough warrant is required.....

..... Railway.....

ed, is your wife on board..... Number of children on board.....

stination.....

(Sgd.).....



Number..... Rank *Capt.* *B*
V

Surname *MORRISON.*

Christian Name *ROBERT.*

Units..... Theatre of War *France*

Date of Service *2-4-16* *13-8-16* *6-9-19*

Remarks..... *555 Niagara St.*

Latest Address *~~Box 638~~ Victoria B.C.*
B.C.K.

Roll No. *B. Page 10107.*

200m.-2-21.M.)

DESP. FEB 13 1922
REGN. No. *668019*

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

M. F. W. 54. (A)

350M.-5

H. Q. 1772-39

Casualty Form—Active Service.

Unit, Regiment or Corps. AMC TRAINING DEPOT NO 1

Regimental No. 15-6-18 Rank Capt Name MORRISON Robert Lindsey

C. E. F.

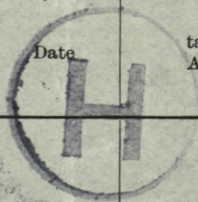
Enlisted (a) 15-6-18 Terms of Service (a) C E F Service reckons from (a) 15-6-18

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) Physician Physt

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

Embarked Canada
Arrived England



15/11/18

O.C., C.A.M.C.
R. & I. Depot, T.O.S. from Canada

SHORNLIFFE

29/9/18 Lt 256319

16/11/18

do do to become busby on attachment to Can. Spec. Hosp. Witley

do

16/11/18 Lt 256320

AD Ours Capt. Asst. Adjutant
For O.C. C.A.M.C. Reserve Depot

19/11/18

do do to S from 6 ambulance depot / Shorcliffe
On com. to S.H. Witley

16/11/18 Lt 256167

16/11/18

do
Special Duty Coy

25-11-18

B & H attached to 68th Witley

16-11-18 Lt 256132

(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.]

Casualty Form

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				
-11-18	88th	Receives attachment to Canadian Special Hospital.	Witley	21-11-18	At II DO 154 <i>St. J. Simmons</i> Eupt A. Adgt CANADIAN SPECIAL HOSPITAL
22.11.18	8th Res	Attached to Hospital from C.A.M.C.	Witley	21.11.18	DO 326
31-3-19	8th Res.	Ceases to be attached from C.A.M.C. Witley.	Witley	31-3-19	D.O. #90. <i>A. Dale</i> Lieut. ASST ADJT FOR C.O. 8th CANADIAN RES. BN
1-4-19	"O" Wing	Attached for Quarters and Rations from C.A.M.C. Shorncliffe.	Witley	1-4-19	D.O. #1.
8/10/19	-	S.O.S. O.M.F. of C. ON EMBARKATION FOR CANADA, For MAJOR General, Adjutant General, Canadians.	<i>Richard Capm</i>		

EMBKD, S.S. CANADA,
LIVERPOOL, 8-10-19,
DISEMBKD, QUEB C,

W. O. Plaine
Capt

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

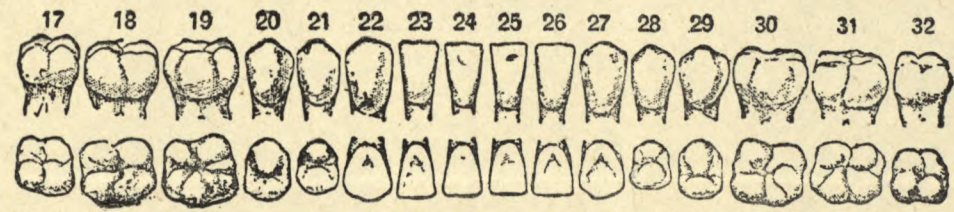
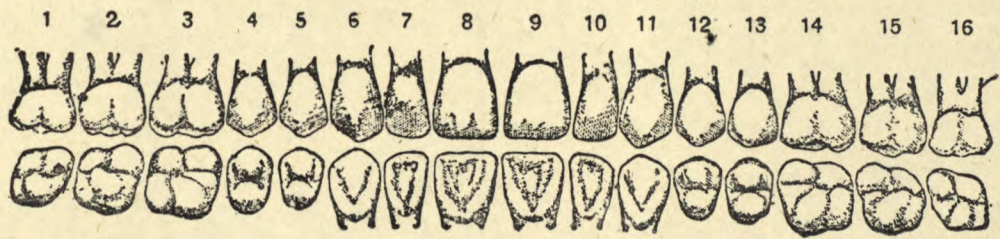
NAME OF SOLDIER (Block Letters) MORRISON, Robert Lindsay

REGIMENT Came RANK Captain No.

Date of Examination in England 15/7/19 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
2. EXTRACTIONS
3. CROWNS 4
4. DENTURES

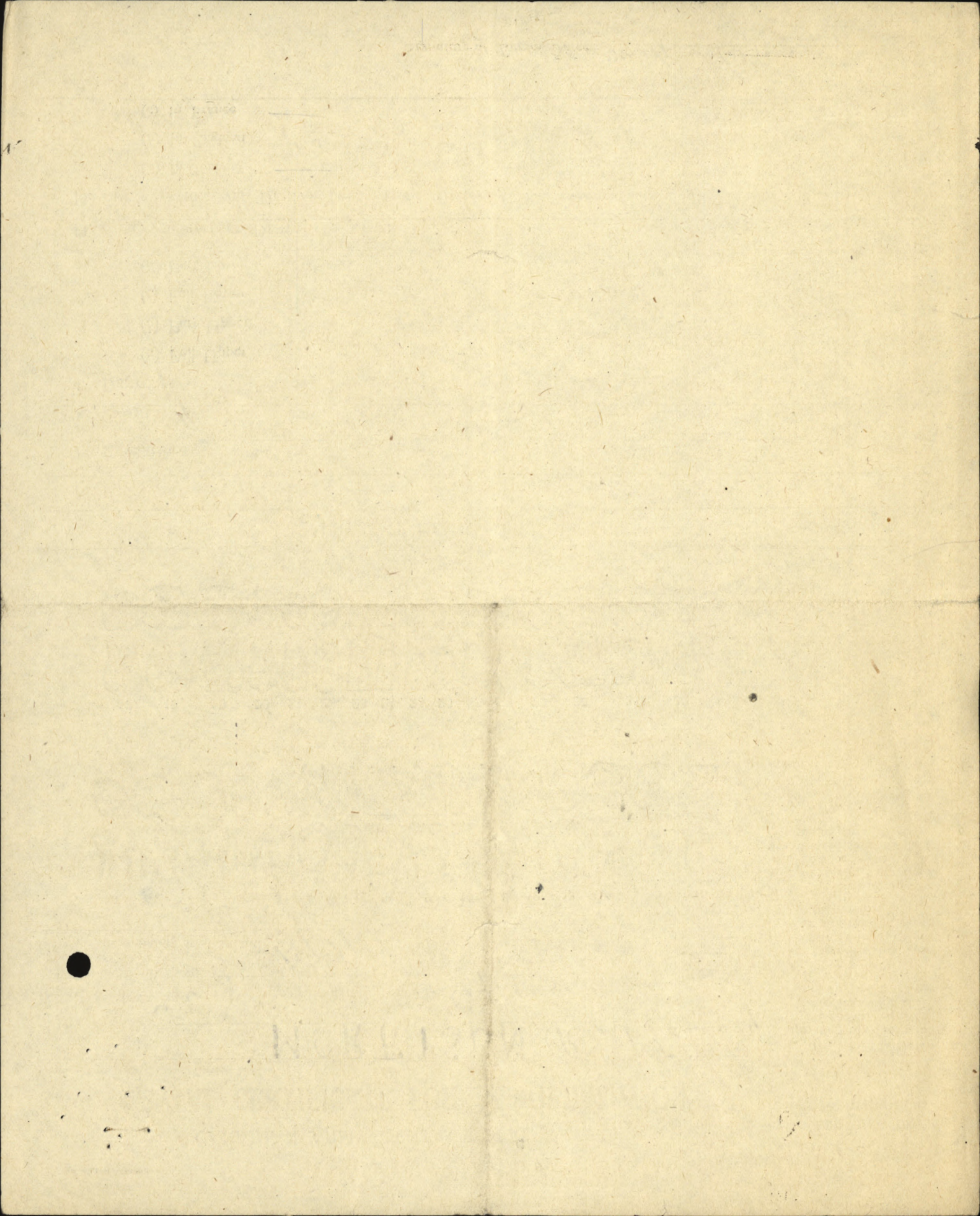
- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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 yes
- (c) In France

Signature of Dental Officer M. R. Thomas
cypk



Army Form B. 103 (II.) to be gummed on here, if required.

CERTIFIED CORRECT

JUN. 1915

CAMBRIAN RECORD OFFICE

Nothing to be written in this margin.

Forms/B. 103/3

(6 28 19) W10416—P2151 100,000 3/19 HWV(R1460)

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—I.
Part I.

(1)*Substantive rank <i>Captain</i>	(2) Regiment or Corps	(3) Regtl. No.
*Acting rank (To be entered in pencil to facilitate alteration.)	<i>CAMP</i>	
(4) Surname <i>Morrison</i>		
(5) Christian Names <i>Robert Lindsay</i>		
(6) Army Form, number of, Attestation } Form or Record of Service paper }		
(7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918)		
(8) Date of birth as stated on enlistment		
(9) (a)		

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	(Authority) (date)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (date)
				Second Occupation Card despatched on (date)

(17) Next of Kin			
(18) Demobilizer (f)	(Place)		(Signature of Posting Officer)
(19) Pivotal-man (f)	(Date)		
(20) Qualifications (g)	or (21) Corps trade and rate		
(22) Extended {		(23) Re-engaged {	
(24) Miscellaneous entries :-			

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.

DUPLICATE. Copy to replace original

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					
			Embarked Canada		28 9. 18.	
15 11. 18	BAMC Rest D		TOS on arrival from Canada		"	Pt D. 319 60 44
16 11. 18	"		SOS on posting to BAMC Cos Coy		16 11. 18	330
19 11. 18	BAMC base Co		TOS on " from BAMC R+T Depot.		16 11. 18	167
"	"		On bond to C. S. Co.	Wiley	"	167
20 2. 19	"		SOS on posting to BAMC R+T.		15 5. 19	43
25 2. 19	BAMC Rest D		TOS on trans from BAMC base Co			
			& remains of bond to C S Co	Wiley	15 2. 19.	56

CERTIFIED TRUE COPY.

from Record Sheet

C. E. Gray

Major, Capt.

For M.A.S. base

Nothing to be written in this margin.

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

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

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.

Regimental No. Rank *Capt* Name *Horison R.L.*
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N. C. Os. }

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<i>28-10-19</i>	<i>M.H.Q. Ottawa</i>	<i>T.O.S. C.E.F. in Canada on General Demobilization</i>	<i>M.D. No. ²</i>	<i>10-10-19</i>	<i>C.E.F. R.O. No. 2239-19</i>
<i>31-10-19</i>	<i>M.H.Q. Ottawa</i>	<i>S.O.S. C.E.F. in Canada on General Demobilization</i>	<i>M.D. No. ⁷</i>	<i>27-10-19</i>	<i>C.E.F. R.O. No. 2249-19</i>
			<i>W. Steiner Capt</i>	<i>No. 15420</i>	
			<i>for Director Personal Services</i>		

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

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

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				

B.S.H.

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. Rank Captain Surname Morrison
(Given name in full) Robert Lindsay
Unit or Corps C.A.M.C. Birthplace Mansewood, Halton Co. Ont. Canada

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

1. GENERAL DESCRIPTION:

Physique Good Weight 154 lbs. Height 5-9¹/₂ ft. Colour of Eyes Blown
Nutrition Good
Pulse 70 reg
Condition of arteries Soft
Vision Rt. 6/12 Left 6/12
Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

est. est.
Identification marks, scars, or deformities.
(Give cause and date of origin).
1 vaccine lt. arm 1909

Opinion as to general health and physical condition Good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no
Special Senses no Integumentary System no Respiratory System no
Disturbance of Mentality no Muscular System no Digestive System no
Osseous and Joint System no Any other general condition yes

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.

Typhoid Fever 1908

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 2-7-19

Signed Gresham Capt

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 D. Morrison Capt

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed

M.O.

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

Signature

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

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

Surname **MORRISON**Christian Names **Robert Lindsay**Rank **Capt.**

Name and Address of Next-of-Kin

Promotion

Susan Frances Morrison (wife)**77 Boon Av. Toronto.**

Unit

CAMCPlace of birth **Halton, Co. Ont**

Married (Yes or No)

Appointments

Date of leaving Canada **28-9-18. RL. 28-15, 7/189. 8/97-100** Date and Cause of Resignation**CAN MED CORPS**

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				
15-11-18.	<i>came Res. & T. Depot</i>	T.O.S. on arrival from Canada.		28-9-18.	<i>came</i> P ^t II Ord 319. Co. 747 d/ 12-11-18.
16-11-18.	<i>R^o</i>	S.O.S. on posting to <i>CAMC Cas Coy</i>		16-11-18.	P ^t II Ord 320.
19-11-18.	<i>CAMC Cas Coy</i>	T.O.S. on posting from <i>CAMC R & T. Depot</i>		16-11-18.	P ^t II Ord. 167.
19-11-18.	<i>R^o</i>	"On Command" to <i>C.S.H. Witley</i>		16-11-18.	P ^t II Ord. 167.
20-2-19	<i>Do</i>	SOS on posting to <i>CAMC R & T</i>		15-2-19	P ^t II Ord 43
25-2-19	<i>CAMC Res & T. Depot</i>	TOS on transfer from <i>CAMC Cas Coy</i> & remains "On Command" to <i>C.S.H. Witley</i>		15-2-19	P ^t II 956
2-5-19.	<i>came R & T. Depot</i>	S.O.S. on posting to <i>C.S.H. Witley</i>		30-4-19	P ^t II Ord. 122. & Cas Coy P ^t II 147
8-4-19	<i>CAMC. ce.</i>	SOS to <i>9 Can San Sec.</i>		1-5-19	P ^t II 159
9-4-19	<i>9 San Sec</i>	TOS from <i>C.S.H. Witley</i>		14-5-19	P ^t II 440 cancelled by P ^t II 43

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				
9.7.19	9 San Sect	IOS from Camb. Co. Coy		1.5.19	Pt II 43
28.9.19	6 S H.	IOS from 9 San Section		16.9.19	Pt II 76
20 10 19	D GMS	Sol on transfer to C E Y in Canada		8.10.19	CO 131

Called for CANADA 8 10 19 per S S CANADA S. 122

25102

ASSIGNED PAY.

UNIT.

RANK.

mess

NAME. 9-M. 3577

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

To Canada

Beneficiary

C.A.M.C.

Pay 4⁺⁺

Capt

11¹⁰/₁₈

WMSBO 447

Name Morrison

Address

F.A. 1⁺⁺

4/12-11-18

Initials Robt Lindsay

Messing 1⁺⁺

Bank of Montreal

Amount.

\$60⁺⁺ f 1¹⁰/₁₈ Can

Separation Allowance issued. Yes or No.....

DATE
1918

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

Nov 19

Pa of 1¹⁰/₁₈ - 31¹⁰/₁₈ mess f 1¹⁰/₁₈

Vo 15628 176

Do (+ bal of Can 55²⁰ less A.P. \$60) Bank

11879

171 20

✓ Adv hol Pa £10. H.P. Schiffe

11938

48 67

✓ a P Can (2 mths)

120

hol Pay R

184 75

21 Outfit allce

9624

L20-10-11

br bal of Can 30⁹/₁₈ Vo 489

55 20

25

Bank

12502

76 08

Dec

Dec Pay R.

186

13

a P Can

60

14

Bank

13485

126

Jan

Jan Pay R.

186

16

a P Can

60

24

Bank

15448

126

Feb 12

a P Can

60

Feb Pay R.

168

21

Bank

16751

108

Mar

Mar Pay R.

186

12

a P Can

60

✓

Bank

18380

126

Apr

Apr Pay R.

180

14

a P Can

60

23

Bank

776

120

carry forward

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount.

\$ 60 ban

Separation Allowance issued. Yes or No.....

Pay +
F.A. /
Messing /

bapt.

Name Morrison
Initials Robt. Lindsay
Bank of Montreal
Tref Sq.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1919								
May 13	May Pay R. a P ban		186		60			
21	Bank	2513.		126				
June 16	June Pay R. a P ban		180		60			
24	Bank			120				
July	Pay R. at leave		186		60			
24	Bank			126				
Aug 12	Rations 1-31/19	5508					£2.2.7	
15	Adv Aug & Sept Pa a P ban	0722		246	60		Relief Canada.	
	Aug & Sept Pay R.		366		60		A.P.G. 30.11.19	
Sept	a P ban				60		£100 Canada	
24	Subs 1-31/19	6873					Yours N.E. Caqu	
26	Subs. for 1-31/19. £12-14.9Pme0873	70 266	62			£17.14.9 62		
30	Subs. 1-30/19. paid by P.M.							
	Details written credit letter on his Fin Stat. Sept 1919	6990					£12-6-7- 60	
Oct 7	Advance Bal Pra to 30/19.	84		308				
	Addl. Outfit allee.	114		100				
14	Subs 1-8/19 paid by P.M. wulley							
	cred taken on his Fin stat sep 1919	198					£3.5.9	
16	Adv. 1/19	708.	100					
	Pay Oct R.		186					
	Pay Nov R.		180					
	a. P ban. Oct Nov.				120			

Canada 16/10/19

AUDITOR *J.P.B.* PAYMASTER *[Signature]*

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

M. OR S. _____ REGT. NO. _____ RANK CAPT. NAME (IN FULL) MORRISON ROBERT LINDSAY

ORIGINAL UNIT G.E.F. *C.A.M.C.* IF IN P.F. WHAT UNIT? *Band Comm. St. Clair & St. Sufferin St.*

PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY *[Signature]*

DATE OF ATTESTATION *4/11/19* TRANSFERRED TO *29/11/19* DATE _____ AUTHORITY _____

ASSIGNED PAY \$ *60.00* DATE EFFECTIVE *1/11/19*

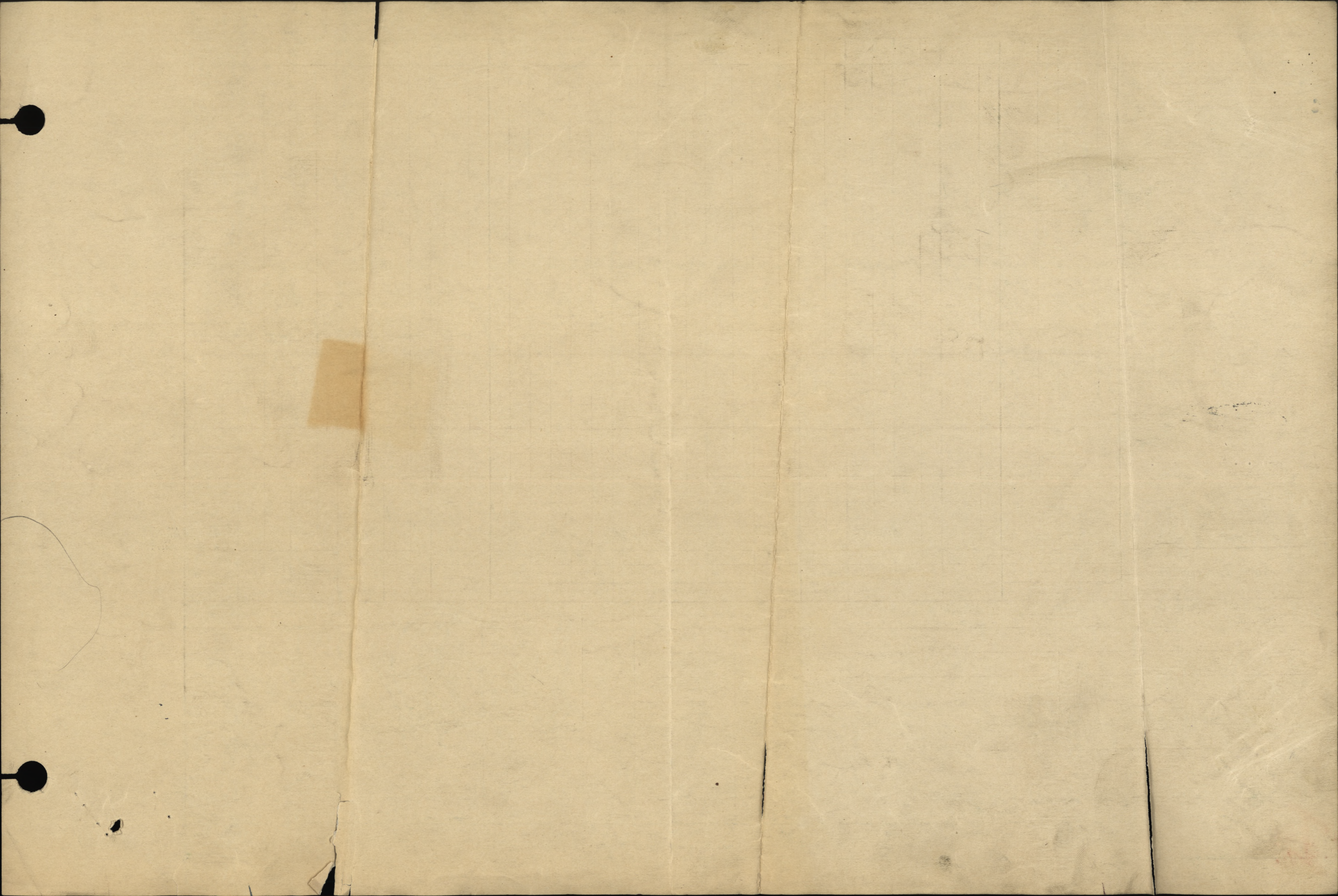
PAYABLE TO *Cather Shordred Morrison* RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *77 Boon Avenue, Toronto*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED _____ PLACE _____ DATE *27-10-19* REASON *Demt.* AUTHORITY *309* IF ENTITLED TO POST DISCHARGE PAY *yes*

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
<i>30/11/19</i>			<i>MLA</i>					<i>150.00</i>				<i>54.00</i>		<i>204.00</i>	<i>144.00</i>		<i>Not shown as paid on M.F.W. 15/10/19 Add Cond P.M. 120 pay not g. Res. Messg. 8/10 to 30/11/19</i>
			<i>60.00</i>	<i>60.00</i>				<i>150.00</i>				<i>54.00</i>		<i>204.00</i>	<i>144.00</i>		<i>T.O.S. FROM O/S D.O. 298</i>
<i>Decr 1-</i>		<i>5.00</i>										<i>144.00</i>					<i>Capt. Payne, Paymaster, Dispersal Station "1"</i>
			<i>W.S.G. S.A.</i>									<i>170.</i>					<i>Cap. Payne 20/10 to 30/11/19</i>
<i>120 dup 5-</i>			<i>610-1100-790-</i>					<i>165</i>		<i>17500 58</i>		<i>W.S.G. S.A. 319</i>		<i>319</i>	<i>296</i>	<i>155</i>	<i>AMOUNT DUE SOLDIER DEPENDENT</i>
<i>153 dup 5-</i>			<i>765-1200-1965-</i>									<i>40</i>	<i>1359</i>	<i>296</i>	<i>105</i>		<i>Capt. [Signature] No. 2 DISTRICT DEPOT</i>
								<i>177</i>	<i>1751286-7</i>			<i>155</i>	<i>140</i>	<i>554</i>	<i>296</i>	<i>116</i>	
								<i>224</i>	<i>1754198-9</i>			<i>146</i>	<i>175</i>	<i>1775</i>	<i>150</i>	<i>40</i>	
								<i>252</i>	<i>1865967-68</i>			<i>150</i>	<i>140</i>	<i>965</i>	<i>0</i>	<i>0</i>	
			<i>765 00 200 - 965 00</i>									<i>470.00</i>	<i>195.00</i>	<i>965.00</i>	<i>146</i>		



Date of Enlistment

15-6-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

M. 27472

Date of Assignment

1st Oct. 1918.

1st Oct.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

40 ⁰⁰ / ₁₀₀			
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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____
 Rank _____ Promoted _____ Reverted _____ Discharge _____
 Soldier's Name _____
 Battalion *C. A. M. Co. M.D. 2 Officers Dft.*
 Beneficiary *Mrs Susan Frances Morrison*
 Relationship *Wife*
 Address *77 Boon Ave. Toronto. Ont.*

Name _____
 Address _____
 Change of Address _____
 1 *MRS. SUSAN FRANCES MORRISON,*
 2 *77 BOON AVE.,*
 3 *TORONTO, ONT. 40 40.00*
 4 *% CAPT. ROBT. LINDSAY MORRISON*
FORTY DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Oct. X</i>	<i>54239</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Nov. U</i>	<i>57436</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Dec. X</i>	<i>67717</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Jan. 2</i>	<i>72723</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Feb.</i>	<i>77003 W</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Mar. M</i>	<i>86243</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Apr. P.</i>	<i>3845</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>May S.</i>	<i>8305</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>June H</i>	<i>11401</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>July</i>	<i>11607</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Aug.</i>	<i>13478 P</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Sept.</i>	<i>17710 a</i>	<i>40</i>		<i>40</i>	<i>✓</i>
<i>Oct.</i>	<i>15186 B</i>	<i>40</i>		<i>40</i>	<i>✓</i>
		<i>320</i>		<i>320</i>	

012138 H 33

See other acct "M. to mother"

M. F. W. 128
400M.-6-17-1772-38-1141
L. L. 22320-M. & D. 7583.

M.D. 2

A/c Closed
 Ret'd per *Canada*
 Date *16/10/19*
 M.F.W. 187
 Clerk *[Signature]*

Dist 1 PIA 5220 22/10/19

AUTHORITY *N.R.*
AUDIT *M.D. 2 B5.*
 NEW ACCT. *R. Garry 9-10-18*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

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

M. F. W. 126
 400M-6-17-1772-39-1141
 L. L. 22220-M. & D. 7993.

Date of Enlistment

15-6-18

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

~~M 27472~~
M 27504

1st Oct. 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

60 ⁰⁰			
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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____
 Rank _____ Promoted _____ Reverted _____ Discharge _____
 Soldier's Name _____
 Battalion *C. A. M. C. M.D. 2 Officers Rft.*
 Beneficiary _____
 Relationship _____
 Address _____

Name _____
 Address _____
 Change of Address _____
 1 _____
 2 _____
 3 _____
 4 _____

ESTHER SHORTREED MORRISON,
 77 BOON AVE.,
 TORONTO, ONT.
 % CAPT. ROBT. LINDSAY MORRISON
 SIXTY DOLLARS

60.00

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Oct. 4	54238		60	60	✓
Nov. 2	57435		60	60	✓
Dec. 8	67716		60	60	✓✓
Jan. 2	72724		60	60	✓
Feb. 7	77004 W		60	60	✓
Mar. 7	86244		60	60	✓
Apr. 9	3846		60	60	✓
May 9	8306		60	60	✓
June 11	11402		60	60	✓
July 9	11608		60	60	✓
Aug 13	13419 P		60	60	
Sept 17	17711 A		60	60	-
Oct 15	15187 B		60	60	-
			780	780	

012138 R 33

see other acct "to wife"

M. F. W. 128
 400M-6.17-1772-39-1141
 L. L. 22230-M. & D. 7493.

M.D.R.

A/c Closed
 Ret'd per *Canada*
 Date *16.10.19*
 Clerk *[Signature]*

Dist H/P 128529 23.10.19

AUDITED

AUTHORITY FOR NEW ACCT.
M.D. 2 B5
P. Garry 9-10-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted*

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

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. 1683.

CANADIAN EXPEDITIONARY FORCE

W.E. C. 2-41.
R.A.P.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank)..... **Captain**.....

(Name in full)..... **Robert Lindsay MORRISON,**.....

Enlisted in..... **Canadian Army Medical Corps.**.....

CANADIAN EXPEDITIONARY FORCE, on the.....~~.....~~.....

day of.....~~.....~~..... 191..... AND WAS APPOINTED to COMMISSIONED RANK

in..... **Canadian Army Medical Corps.**.....

CANADIAN EXPEDITIONARY FORCE on the..... **Fifteenth**..... day

of..... **June**..... 19**1**.....

HE SERVED in CANADA, ~~and England with the C.A.M.C.,~~.....

and was STRUCK OFF THE STRENGTH on the..... **Twenty Seventh**..... day

of..... **October**..... 19**19**..... by reason of..... **General Demobilisation**.....

Dated at Ottawa, this..... **Twenty Seventh**..... day

of..... **July**..... 19**20**.....

Previous service with the Army Medical Corps (Active Militia)
from 26-2-17 to 14-6-18.

.....
for

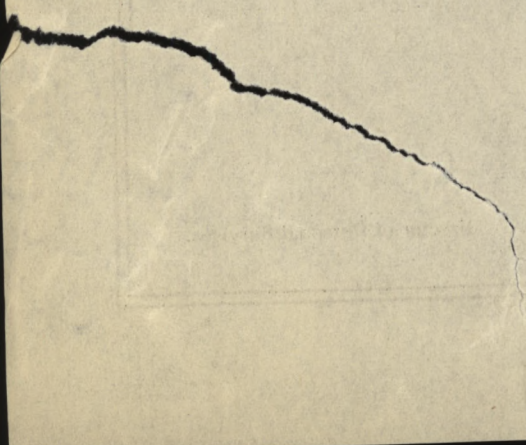
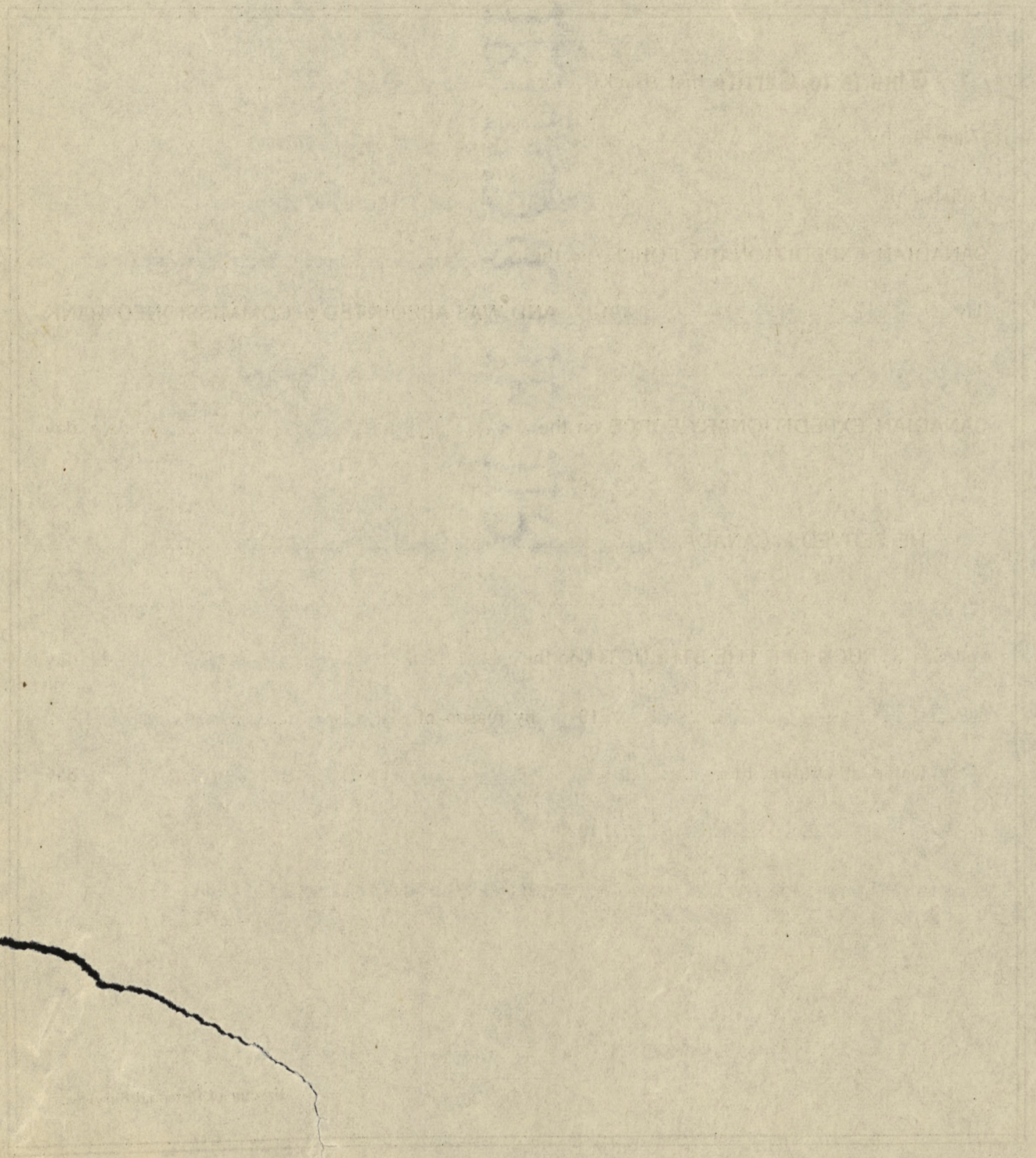
W.D.
..... **Capt.**.....
Director of Personal Services.

S.S.

CANADIAN EXPEDITIONARY FORCE

MINISTRY OF DEFENCE

POST OFFICE BOX 1000 OTTAWA ONTARIO



MEDICAL HISTORY SHEET.

Surname MORRISON Christian Name Robert Lindsay

Examined { on 23rd day of Sep. 1918
 at Niagara Camp, Ont.

Approved by Hugh Cowie
 Rank Capt M.O.

Birthplace { City or Town Manswood, Ont.
 County Halton Co.

Apparent age 33 yrs. 4 mos.

Trade or occupation Physician

Height 5 Feet 9 1/2 Inches.

Weight 154 Lbs.

Chest measurement { Minimum 33 inches.
 Maximum expansion 3 inches.

Physical development

Small-Pox Marks None

Vaccination Marks { Arm Right Left
 Number 1

When Vaccinated last 1907

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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>1907</u>		M.O.
		M.O.
		M.O.
Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>24-10-18</u>	<u>TAD</u>	<u>Had typhoid Sept. 1907</u> M.O.
<u>2-11-18</u>	<u>TAD</u>	<u>Hornumay Capt</u> M.O.
		M.O.

Enlisted on 15th day of June 1918 at Niagara Camp

	CORPS.	REG'L NUMBER.	RANK.	DATE.
Joined on enlistment	<u>AMC, TD#2</u>	<u>Capt.</u>		<u>15-6-18</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.

