

ORIGINAL

#10

M. D.

First

Depot Battalion

Manitoba

Regiment

Regtl. No. 3349261

# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname Morrison

2. Christian name Rowland Mulock

3. Present address c/o Richard Gilhuly West Selkirk P.O. Manitoba Canada

4. Military Service Act letter and number 19-J 69100  
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension or surrender)

5. Date of birth 30th. October 1899

6. Place of birth West Selkirk Manitoba Canada  
(town, township or county and country)

7. Married, widower or single Single

8. Religion Presbyterian

9. Trade or calling Clerk & Dog Driver

10. Name of next-of-kin Mrs. Sadie Morrison

11. Relationship of next-of-kin Mother

12. Address of next-of-kin Grand Rapids P.O. Manitoba Canada

13. Whether at present a member of the Active Militia No

14. Particulars of previous military or naval service, if any None

15. Medical Examination under Military Service Act :—  
(a) Place Winnipeg Canada (b) Date 21st. Oct. 1918 (c) Category A 2

## DECLARATION OF RECRUIT

I, Rowland Mulock Morrison, do solemnly declare that the above particulars refer to me, and are true.

Rowland Mulock Morrison (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age	<u>19</u> yrs.	.....mths.	Distinctive marks, and marks indicating congenital peculiarities or previous disease.
Height	<u>5</u> ft.	<u>11</u> ins.	
Chest measurement	fully expanded	<u>39½</u> ins.	
	range of expansion	<u>2½</u> ins.	
Complexion	<u>Fair</u>		Scar right leg & left thigh.
Eyes	<u>Grey</u>		
Hair	<u>D. Brown</u>		

W. G. Groubi Major for  
Commanding, 1st. Depot Battalion Manitoba Regiment  
Depot Btin.

Place Winnipeg Canada Date 21st. October 1918.



REGIMENTAL DOCUMENTS

Pte

15/10/59

NAME **MORRISON Rowland M** REGT. NO. **3349261** UNIT **Syren 7th A.C.** FILE NO.

<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;">S</div> <b>CONTENTS</b>	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<i>RM</i>			<b>DEATH</b>
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;">M</div>			Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				<b>34605</b>	<b>DISCHARGE</b>
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demol</i>
MEDICAL EXAMINATION (M.F.W. 129)					
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)					<b>DESERTION</b>
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)		<div style="border: 1px solid black; border-radius: 50%; width: 60px; height: 60px; display: flex; align-items: center; justify-content: center;">H</div>			
<i>Misc</i>					52-25
<i>R120</i>					20-25
					13-25



LEDGER NO. 4486

SERIAL NO. A 13915 ✓

REG. NUMBER 3349261 NAME Morrison R.

RANK Pte CORPS S.C.F.

AGE ..... SERVICE .....

NAME OF HOSPITAL Drummondville PLACE Montreal

DATE OF ADMISSION 7-11-18

DISEASE Influenza

TRANSFERRED TO OTHER HOSPITALS .....

OPERATION .....

DISCHARGED TO ..... 8/11/18 IN CATEGORY .....

REMARKS:.....

.....

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.....

.....

Surname *Morrison*  
Christian names *Rowland Mulock*  
Regtl. No. *2249261* Rank *Pte*  
Unit *Man Regt 1st Div Can*  
#H.C.E.R. *LOS 25-10-18*  
*202055 of 14-11-19*

H. Q. ✓  
M. D. No. *10 X m10*  
T. O. S. *Oct 21st 1918*  
D. O. Pt. II *295* of *22-10-18*  
S. O. S. *M107 26-11-1918*  
Reason *Imp Army*  
Auth. *100000-10/31-18 #400*  
*905 Div 3-10-19*  
*20279 # 10-10-19*  
*6-10-19*

Next of kin *Morrison Mrs Sadie* Relationship *Mother*  
Address *Grand Rapids*  
*Man*

Also notify:  
.....  
.....  
.....

BORN—Place *Canada W Belkirk Man.* Date *Oct 20th 1899*  
ATTESTED—Place *Winnipeg Man.* Date *Oct 21st 1918*  
O/S *15-11-18 1474* att'd *Imp Army* R/C *29/9/19 418/24 Pte*





M 84  
Number..... 3349261 Rank..... Pter. B

Surname..... MERRISON..... V

Christian Name..... Rowland Mulock.....

Units..... ~~No. R. C. F.~~ Theatre of War..... Siberia  
C. S. C. F.

Date of Service..... 20-1-19.....

Remarks.....

Latest Address..... ~~Sulbuk apt~~

..... ~~Manitoba~~

Roll No. B  
Page 6122

Winnipegosis  
Man.

NO.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID FROM

PAID TO  
OR REC'D

DESP MAY 22 1922

REGN. NO. *34598*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.  
PARTICULARS

AUTHORITY

M

# 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. 33<sup>4</sup>9261 Rank, Pte Surname, Morrison  
(Given name in full) Roland  
Unit or Corps, Russ Legion Party Birthplace, Man. Canada

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

### 1. GENERAL DESCRIPTION:

Physique normal Weight 180 lbs. Height 5 ft. 11 in. Colour of Eyes grey  
Nutrition good  
Pulse normal  
Condition of arteries soft  
Vision Rt. no/w Left no/w  
Hearing (conversational voice) Rt. 21 ft.  
Left 21 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin).  
Scar on right leg.

Opinion as to general health and physical condition .....

### 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.

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Burton.....(Overseas)

Date 17/9/19..... Signed C. P. Wilson 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. M. Morrison.....

(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.)

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Morrison Christian name Rowland Mulock
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 19-J 69100
3. Consecutive number on schedule of men reporting for service (if he appears on it) 19-20 yr. Class
4. Address (including street and number, if any) c/o Richard Gilhuly West Selkirk P.O. Man.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 21st. day of Oct. 1918. 1917, by the undersigned medical board sitting at WINNIPEG, MANITOBA, CANADA.

5. Age as stated 19 Years Months. 6. Apparent age Years Months
7. Height 5 Feet 11 Inches. 8. Weight 180 Pounds.
9. Chest measurement { Minimum 37 Ins. Maximum 39 1/2 Ins.
10. Complexion Fair { Eyes Grey Hair Lt Brown
11. Physical development Good { Good Fair Poor 12. Smallpox marks

13. Number of vaccination marks { Right arm Left arm one
14. When vaccinated last childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar R thigh
16. Slight defects but not sufficient to cause rejection Nil.

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2
R. Burns Lt. Member. President. Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Rows show M.O. results.

Joined 21st. day of October 1918. 191 at WINNIPEG, MANITOBA, CANADA.

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Includes: 1st Depot Battalion, Manitoba Regiment, D 3349261, 21.10.18.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT. Includes: Montreal, 10-11-18, Nil, Capt. E. F. T. ...

N. B.—This sheet is 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.

Signature of Man Rowland Mulock Morrison



# FORM OF WILL.

I, Rowland Mulock Morrison (Name in full)  
Regimental Number 3349261 serving in 1st. Depot Batt. M.R.  
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 Sadie Morrison } Name and Address  
Mother } of person or  
Grand Rapids P.O. Manitoba Canada } persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Sadie Morrison } Name and Address  
Mother } of person or  
Grand Rapids P.O. Manitoba Canada } persons to receive  
personal estate\*  
(See note).

**IMPORTANT  
NOTE**  
This must be Signed  
and Dated by  
THE SOLDIER  
HIMSELF.

this 21<sup>st</sup> day of October A. D. 1918

Rowland Mulock Morrison Signature of Soldier.

\*N.B.—Personal estate includes ~~any, bonds, stocks, bank, insurance, policy, etc.~~ 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 [Signature]

Address of Witness Minto Barracks, Winnipeg, Canada

Occupation of Witness Soldier

Signature of Second Witness [Signature]

Address of Witness Minto Barracks, Winnipeg, Canada

Occupation of Witness Soldier









WAR SERVICE BADGE  
CANADIAN EXPEDITIONARY FORCE

CLASS "A" NO. 73932 DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3349261 (Rank) Pk.  
Name (in full) Rowland Mulock Morrison enlisted in  
the Syren. H. R. S. F. 21<sup>st</sup>  
CANADIAN EXPEDITIONARY FORCE at on the 21<sup>st</sup>  
day of October 1918.  
HE served in Russia with Syren Party.  
and is now discharged from the service by reason of Demobilization.  
Medical Unfitness. Demobilization R.O. 1420 (6)

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

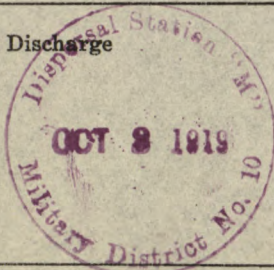
Age 20.  
Height 6'0"  
Complexion Fair  
Eyes Blue.  
Hair Brown

Marks or Scars  
Scar on Right Leg.

R. M. Morrison.  
Signature of Soldier

M. Mulock  
Issuing Officer

Date of Discharge



Capt  
Rank

Date 3/10/19 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.

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3842 of the

Canadian Expeditionary Force has been discharged from the service by reason of

illness on the 1st day of August 1918.

The name of the soldier is

John J. ...

and he is entitled to the gratuity provided for in the regulations.

The signature of the commanding officer is

...

THE SIGNATURE OF THIS SOLDIER OF THE CANADIAN EXPEDITIONARY FORCE IS AS FOLLOWS:

...

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

Signature of Soldier

Date of Discharge

DI 1111

# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.  
Part I.

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps <div style="text-align: center; font-size: 1.5em; font-family: cursive;">                     Morrison                      Rowland Mubert                 </div>	(3) Regtl. No.
--	--	----------------

(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 (vide 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)	(20) Qualifications (g)	(Date)	
(22) Extended }	or (21) Corps trade and rate		(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] It 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, Shoehing-smith, &c.

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

Nothing to be written in this margin.

W1889-PP1150 IM 5/18 G.W.P.Co.(3496)



*Drafted under military S.A. 1914.*

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

500M.—9-16

H. Q. 1772-39-920.

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

# Casualty Form—Active Service.

1st Depot Battalion, Manitoba Regiment

Unit, Regiment or Corps.....

Regimental No. 3349261 Rank PRIVATE Name Morrison, Rowland Mulock  
C. E. F.

Enlisted (a) 21.10.18 Terms of Service (a) CEF Service reckons from (a) 21.10.18

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) CIVIL Clerk & Dog-driver  
MILITARY

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>Transferred to Northern Russia mobile force "Dogs"</i>			
<i>Nov 15/18</i>		<i>Embarked.</i>	<i>Canada</i>	<i>15-11-18</i>	
<i>" 26/18</i>		<i>Disembarked</i>	<i>England</i>	<i>26-11-18</i>	<i>S. S. T. Smith</i>
<i>" 26/18</i>	<i>8<sup>th</sup> Reserve 1<sup>st</sup> C.O.T.D. Whitley</i>	<i>T. O. S. on arrival in England.</i>			<i>Mr. Kelly Capt of Dogs</i>
				<i>Pl: 2 Orders # 339 dated 8-12-18 in command to Green Party.</i>	
<i>Dec 20/18</i>		<i>S. O. S. 8<sup>th</sup> Reserve 1<sup>st</sup> C.O.T.D. Whitley Eng. Embarked Disembarked.</i>	<i>England Murmausk</i>	<i>20-12-18 20-1-19</i>	<i>S. S. Bruce</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, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Grantsy Form - Active Service

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				
25 AUG 1919	So Ra	England a SS Iowa	harmack	21 AUG 1919	Let 11-108
				25 AUG 1919	addington Major O IC BASE RECORDS, SYREN, N.R.E.F.



16 Bde  
S 2A

Rank Northern Russia  
Unit Mobile Force.  
(Dog Detachment)  
Place and Date of Enlistment Winnipeg 21. Oct. 1918  
Name and Address, Next-of-Kin Mrs Sadie Morrison.  
P. O. Grand Rapids. Man.  
Relationship Mother.

Reg'l No. 3349261

If in perm. Corps,  
What Unit?

Married or Single Single

Place of Birth West Selkirk, Man.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 31924  
File R.L.  
Category CAN. O.R.

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—9546-16.

X 373

Emil

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.				
			Arrived in England	27.11.18	S.S. Themistocles.
7.12.18	1st CORP	TOS from Canada on com. Syren Party	Witley	28.11.18	0-0-339
28-2.19	1 CORP	Sos to 6th Bn Canada		18-9-18	0048 Cancelled by Lt 11d/8-4-19 1 CORP
<b>1ST CEN. ONT. REGT.</b>					
12.9.19	1 CORP	S.O.A. to 1st Bn son com: Syren Party Russia	Witley	26 <sup>11</sup> / <sub>18</sub>	W.O. 176.
30.8.19	CDT	TOS pending R.I.C.	Buxton	29/8/19	- 281.
25.8.19	Syren Pt	Sos	Field	21.8.19	W.O. 8.
		111-M-29		20.9.19	



ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: MORRISON ROWLAND MULLOCK
EFFECTIVE DATE: -		EFFECTIVE DATE: -		NUMBER: 3349261
AMOUNT: Nil.		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT
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.		AUTHORITY
Nil.		Auth N.R. 9/17/18		DATE EFFECTIVE
				RANK OR APPOINTMENT
				Pte.

*LPB + Nominal Roll to be furnished by Ottawa*

UNIT AND TRANSFERS			
Special Draft ORIGINAL UNIT - Nov. Russia Mobile Force			
DATE ACCOUNT FIRST OPENED - 16-12-18			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SFD	UNIT TRANSFERRED TO
Nil	13-12-18		P 1st 6.0.0.
NR 15.9.19		18.9.19	Lynen Force Seattle

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
25/4/19	1	Field Service 100R	12.17				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS CE ALL'CE
	1-	-	10	

*Loe Bal by 348.19.*

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis. to Canada 30.9.19. NR. 12818-30.8.19. C.O.D. Buxton to C.O.D. Buxton. NR. 10

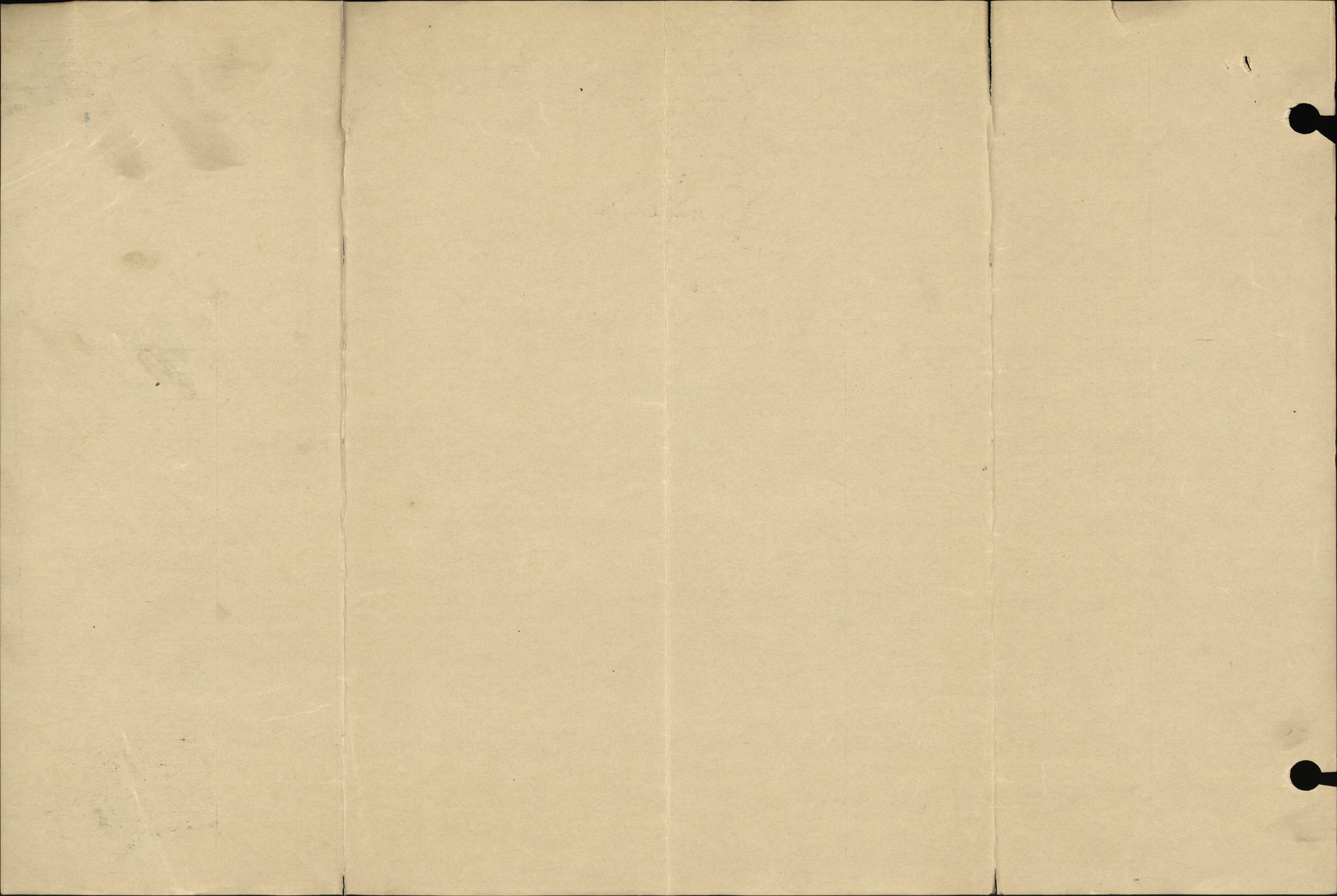
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
16-12-18	Balance from Canada								Nil		
Dec 17/18 to Jan 3/19	P.P. 46 days.	50 60		AK. 79308. 6/12. 160k's.	24 33				26 27 22		
Feb.	P.P.	30 80		Adm. Canada 19/11/18 Pm 2nd 4	10.						
	Pal from Can at 21/10/18 per LPB. on Dog Drivers File. P.A. 27/10/18 to 15.12.18 to be adjusted.	X	1 10	File 1022.							
March	P.P.	34 10							82 27		
		64 90	1 10		10.						
Apr May -		67 10							149 37 82		
June	P.P.	33									
July		34 10							216 47 117		
		67 10									
				AR 122-17-21-19- Pm	15	12 17			204 30		
						12 17					
Aug	Aug & Sep. Arctic allow 21/1/19 to 20/11/19 101 days @ 12¢ per day Arctic Bonus 1/7/19 to 21/3/19 202 days @ 10¢ per wk + 15-3-0	67 10									
		12 17									
		73 72									
		3 12									
		156 06							360 36 142		
				717. 3.9.19 Buxton End	146 00				214 36		
					146 00						
				AR 1. Russia 274	12 17				202 19		
				S.S.S 20/9/19	12 17						

*360.36  
12.17  
348.19 ev*

COMPILED BY  
CHECKED BY







# CASE HISTORY SHEET.

St. Michael's Hospital. Station.  
 No. 004926 Rank Pte Name Rowson R. Age ?  
 Unit 1st Siberian Completed years of service 4 Where and how long Nov. 18  
 Date of admission 4 Nov. 18 Date of discharge Nov. 8/18  
 Diagnosis Cow. Lymphoma Place of origin Can.

## CONDITION ON ADMISSION AND PROGRESS OF CASE.

admitted 4<sup>th</sup> 18 ~~discharged 11<sup>th</sup> 18~~  
 for further convalescence on 8<sup>th</sup> 18  
 J. G. Brown M.D.

This patient has no complaints  
 appears quite fit

Discharge to unit.

J. G. Brown M.D.

## FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

## TREATMENT

(Especially any specific or special form.)

## CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

CASE HISTORY SHEET



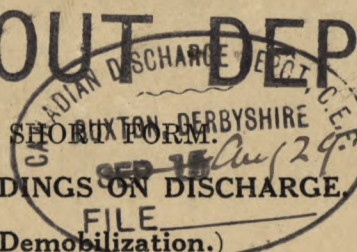


# WITHOUT DEPENDANTS.

WAR SERVICE BADGE

CLASS NO. *A* NO. *73932*  
DEPENDENTS

ISSUED  
PROCEEDINGS ON DISCHARGE.  
FILE  
(Demobilization.)



DISPERSAL AREA *M. 10.*

*Presb.*

NAME OF KIN *Mother*

RELIGION.....

1. No. *3349261*

2. Rank. *Pte.*

3. Name. *MORRISON Rowland Mulock*

4. Unit. *Syren NEE*

5. Date of Discharge *3/10/19* Place *Munsey*

6. Reason for Discharge..... CATEGORY.....

TRADE *Fur Trader* OCCUPATIONAL GROUP *14*

SERVICE IN FRANCE..... *8 Months Russia*

7. Authority. *D. O. 203*

8. Proposed Residence after Discharge.....  
*G. P. O. Selkirk Manitoba*

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate  
M. F. W.?

*R. M. Morrison*

Signature of Soldier.

ROYAL GEORGE SLG IN  
EMB SOUTON, 20 9 19  
DISEMB HALPX-20 9.19

CONFIRMATION. ROYAL GEORGE 20 SEP 1919

10.

The discharge of the above named man is hereby confirmed.

Place.....

Date.....



Signature.....

(O. C. Discharging Unit.)

M. 10

PROCEEDINGS ON DISCHARGE  
Demobilization

Mothers

Post

3349261

1/6

McCartors

McCartors

McCartors

McCartors

McCartors

McCartors

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the undersigned place and date I received my discharge Certificate

M. W. J.

Signature of Soldier

The discharge of the above named man is hereby confirmed.

Place

Date

(U. S. Army)

LIST OF DISCHARGE DOCUMENTS

Medical Form W. 28	Attestation Paper, Triplicate
Medical Form W. 28	or Particulars of Receipt
Medical Form W. 28 or A. M. R. 122	Field Conduct Sheet
Medical Form W. 28 or A. M. R. 122	Casualty Form
Medical Form W. 41	Last Pay Certificate
	Certificates that missing documents are unobtainable
Medical Form B. 313 or A. M. R. 122	Medical History Sheet
Medical Form A. M. R. 120 or A. M. R. 45	Proceedings of Medical Board
Medical Form B. 405	Medical History Sheet
Medical Form W. 120 or A. M. R. 122	Medical Report
Medical Form B. 202	Regimental Conduct Sheet
Medical Form B. 202	Company Conduct Sheet

**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 (A.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 of Escapes (Form D. 218a).
8. Dispersal Certificate (M.F.W. 53).
9. Copy of Discharge Certificate (Form D. 1).
10. Dispersal Certificate (C.D. 3).
11. Equipment Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 3).
13. Pay Book (C. 61).
14. War Service Card (Form M.F.W. 2595).
15. Sundry Documents.

Group.....

Checked by No. C

Date 7  
19-9-15

# CASE HISTORY SHEET.

615

Emergency Hospital. Armsbury, Montreal Station.  
 No. 3349261 - Rank V Pte Name W.E. Marston R Age 19  
 Unit S.E.S. Completed years of service 6 days Canada Where and how long }  
 Date of admission 27/10/18 Date of discharge H-11-18  
 Diagnosis Influenza Place of origin

## CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaints. Headache - Chills - Cough - Vomiting  
Sore throat - slight thoracic pain.

Began - 22-10-18.

Attitude Anydehilitis Expression Heavy Colour High Nutrition  
 Temp. 100<sup>4</sup> Pulse 96 Resp. 26  
 Eyes: - Pupils Equal React. Active  
 Ears. neg. Nose neg. Mouth Tongue clear  
 Lymph. Sys. neg.  
 Resp. Sys. Lungs resonant throughout.

Circ. Sys. neg.

C.N.S. K.K.K. + Kornig- 0 Babinski- 0 Ankle cl- 0

Abdomen neg.

FAMILY HISTORY 28 - lungs resonant throughout 29 - do - 30 - Cough -  
 (Tuberculosis, mental or nervous diseases.) Not 1 - Lungs resonant throughout.

TREATMENT Routine  
 (Especially any specific or special form)

CONDITION ON DISCHARGE Fit for discharge.  
 (and disposal made of case.)

Date C.A. Burdow Lt. Col.  
 Medical Officer i/c case.

CASE 107 1/2 SHEET

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Copy of letter received from O/C Records,  
LONDON .

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3349261  
Pte Morrison

This is to certify that the marginally named soldier was struck off strength to the C.E.F. in Canada 26/8/18, on proceeding to Russia with the Syren Party, instead of being shown as "on command" to that Party.

Owing to this fact, and to the fact that all Records and Documents of personnel S.O.S. to Canada have been returned to M.H.Q., Ottawa, this Office is not in a position to supply either originals or copies of Regimental Documents.

Signed *J. J. Lock Capt.*  
for Lt-Col. l/c Records.,  
O.M.F.C.,

2nd Sept, 1919.

