

TRIPLICATE ATTESTATION PAPER.

No. 50654.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Edward Sidney Richardson*
 2. In what Town, Township or Parish, and in what Country were you born?..... *Keating Bld.*
 3. What is the name of your next-of-kin?..... *Mrs. Wm. Richardson*
 4. What is the address of your next-of-kin?..... *Keating Bld.*
 5. What is the date of your birth?..... *Sept 22 1892.*
 6. What is your Trade or Calling?..... *Teamster*
 7. Are you married?..... *No*
 8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
 9. Do you now belong to the Active Militia?..... *Yes*
 10. Have you ever served in any Military Force?..... *Yes 3 Month 88th Victoria Fusiliers*
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*
- E. S. Richardson* (Signature of Man).
G. P. Ragnall (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *E. S. Richardson*, do solemnly declare that the above answers made by me to the above questions 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.

E. S. Richardson (Signature of Recruit)
Date *May 22nd* 1914 *G. P. Ragnall* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Edward Sidney Richardson*, 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.

E. S. Richardson (Signature of Recruit)
Date *9th June* 1914 *E. Macdonald* (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 *Permon BC* this *9th* day of *June* 1914.

[Signature] (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

..... (Approving Officer)

Description of Ed S. Richardson on Enlistment.

Apparent Age 23 years 8 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. 6 ins.

2 vaccination marks.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 4 1/2 ins.

Complexion Fair

Eyes Blue

Hair S. Brown

Religious denominations { Church of England yes
 Presbyterian
 Wesleyan
 Baptist or Congregationalist
 Other Protestants
 (Denomination to be stated.)
 Roman Catholic
 Jewish

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 May 21st 1914

*W. H. Haigh, Captain
 New Beech Camp.
 Medical Officer.*

Place Esquimaux, BC

*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.

Edward S. Richardson 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.

J. H. G. G. G. (Signature of Officer)

Date 14 June 1914

NAME **RICHARDSON EDWARD SYDNEY** REGT. NO. **50654** UNIT **C.A.M.C.** H. Q. FILE NO.

H

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

1 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)

1 HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 L. HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

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1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 C.D.3

4 Army Cos Card

M

Deserred 16-1-54

DEATH

Category

DISCHARGE

Category

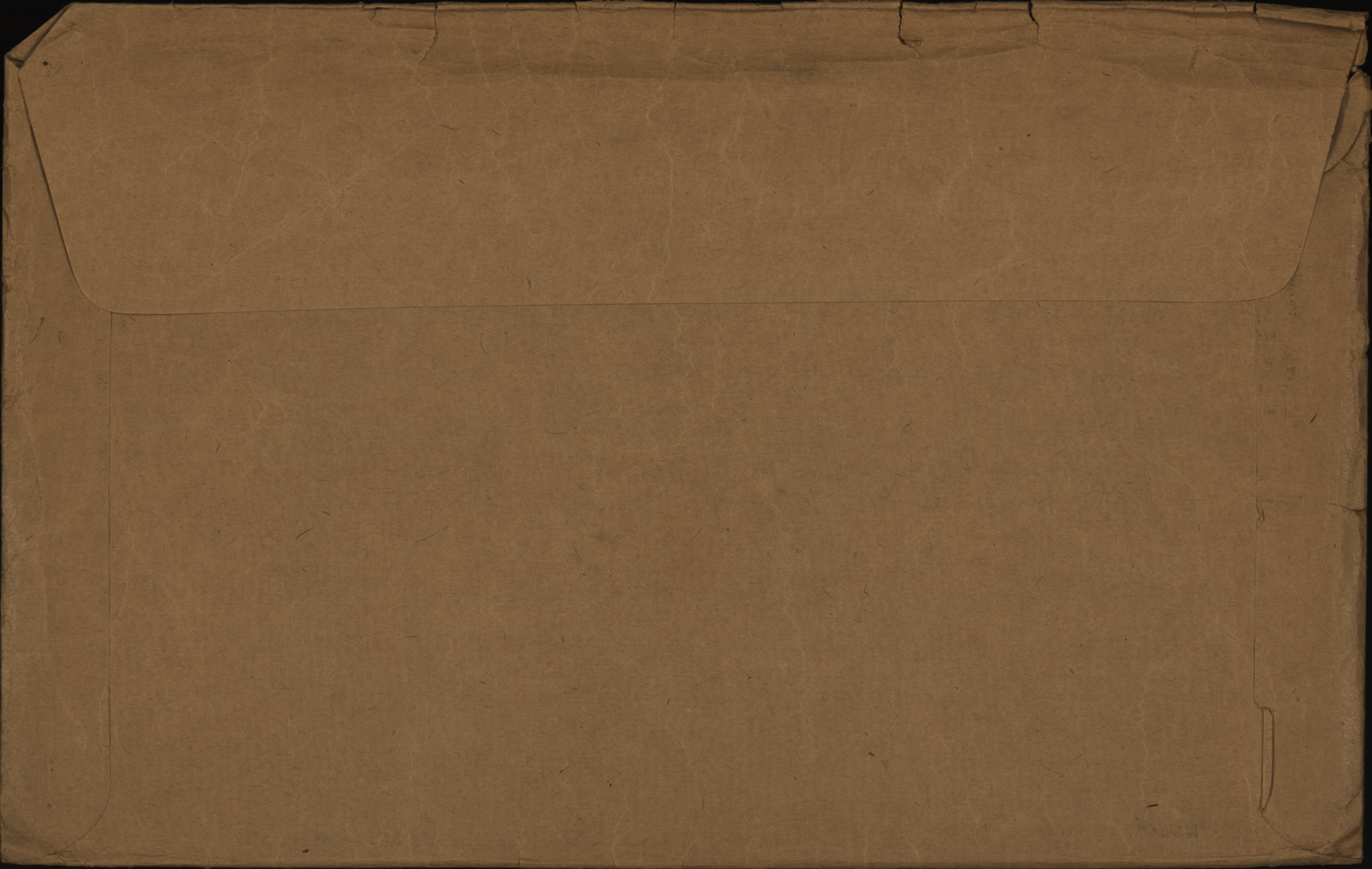
Demob

DESERTION

10578

*31-24
22-24
5-29
7*

E



NAME *Richardson, E. S.*

H. Q. FILE No. 649-

REG'T'L. No. *5-0654*

RANK AND CORPS

Pte. C. R. C. Hospitals-

CABLE

NO.

DATE

NATURE OF CASUALTY

NO. *641*

FOLL.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
- 29	D. of C. R. C. Saplow.	18-1-16	Influenza.
- 33	" " " "	25-1-16	" Disch. to Duty.

SURNAME.

Richardson

CARD NO.

U. 11

CHRISTIAN NAMES

Edward Sidney

Sgt Demok 147
10-198-17-7-19
1154

REGL. NO.

50654

RANK

Pte.

UNIT

C.A.M.C. (Reinf.)

FORMER CORPS

88th Regt. (3 mos.)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Richardson Mrs. William

RELATIONSHIP TO SOLDIER

Not stated.

ADDRESS

Keating B.C.

COUNTRY OF BIRTH

Canada, Keating B.C.

DATE

Sept. 22nd. 1892

PLACE OF ATTESTATION

Vernon B.C.

DATE

June 9th. 1915

Q/529-6-15 $\frac{135}{4}$

R/C. 9-7-19

$\frac{367}{225}$

U.

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

Teamster

RELIGION

Church of England.

DESCRIPTION.

APPARENT AGE

23 YEARS

8 MONTHS

HEIGHT

5 FEET

6 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

4 1/2 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Light Brown.

DISTINGUISHING MARKS

2 vacc. left arm.

MEDICAL EXAMINATION.

PLACE

Esquimalt B.C.

DATE

May 21st. 1915.

Present Address: not stated.

Amey.

Number... 50654... Rank, Pte...

P

Surname... RICHARDSON

Christian Name... Edward Sidney

Units... C.A.M.C. Theatre of War... England

Date of Service... 13-7-15

Remarks... Gp. Wagon Leader. R.C.M. 715 View St. Victoria B.C.

Latest address... ~~Keatings P.O.~~
~~Serjeant S. Smith U.D. B.C.~~

Roll No. A Page 2077

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____

Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date _____ Remarks _____

DESP. JUN 12 39
 REGN. NO. 705

*—Name will be given in full; surname first.

Surname **Richardson.** Christian Name or Names **E. S.** Reg. No. **50654.**
 Rank _____ Unit _____ Co. _____ Troop _____ Batty. _____
 Pte. **Can Red X. Hosp. D.C.C.R.C.H.**
 Hospital **Duc. of Conn. Taplow.** Date of Admission **18-1-16.**

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Influenza.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

Dis. to Duty.

25.1.16

Date

REMARKS

C.L. 21-1-16.

29.

28.1.16 33

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London.

8

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

as DUPLICATE.

MEDICAL HISTORY SHEET.

Surname Richardson Christian Name Edward Sidney

Examined { on 22nd day of May 1915
at Esquimalt BC
Birthplace { City or Town Keating BC
County _____

Approved by _____
Rank _____ M.O.

Apparent age 23 1/2
Trade or occupation Yeomanster
Height 5 Feet 6 Inches.
Weight 150 Lbs.
Chest measurement { Minimum 32 1/2 inches.
Maximum expansion 37 inches.
Physical development Good
Small-Pox Marks ✓

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,

Vaccination Marks { Arm Right Left
Number 2
When Vaccinated last June 19th 1915
(a) Marks indicating congenital peculiarities or previous disease ✓

Date	Result	VACCINATIONS.
<u>19/11/15</u>	<u>OK</u>	<u>J. Biggan</u>

(b) Slight defects but not sufficient to cause rejection ✓

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/11/15</u>	<u>OK</u>	<u>J. Biggan</u>

Enlisted on 22nd day of May 1915 at Esquimalt BC

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>C.A.M.C.</u>	<u>50654</u>		
Transferred to.. ..	<u>✓</u>			

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..... Christian Name.....

DUCHESS OF CONNAUGHT,
CANADIAN RED CROSS HOSPITAL,
Taplow, Bucks.

Admission into Hospital.			Discharge from Hospital.		
Day	Month	Year	Day	Month	Year
17	1	16	24	1	16

Influenza

7

Good recovery.

*H. W. Gibson
Capt. R.A.M.C.*

STATION.

Date of Arrival
at the
Station.

DATES OF

Admission
into Hospital.

Discharge
from Hospital.

DISEASE.

Number
of days
in
Hospital.

Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.

Signature
of Medical Officer.

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

**DIRECTIONS TO
DENTAL OFFICERS**

NAME OF SOLDIER (Block Letters) RICHARDSON E.S.

REGIMENT C.A.M.C. RANK Pte No. 50654

Date of Examination in England 3.6.19 Date of Examination in France _____

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 30.
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

[Handwritten Signature]
For A. D. D. S., M. D. No. 11

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 *[Handwritten Signature]*

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. 50654 Rank Pte Surname RICHARDSON
 (Given name in full) Edward Sydney
 Unit or Corps Disposal "U" Birthplace Edinburgh

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

I. GENERAL DESCRIPTION.

Physique good Weight 145 lbs. Height 5 6 ft. Colour of Eyes blue
 Nutrition good
 Pulse 68 reg
 Condition of arteries soft
 Vision Rt. 6/12 Left 6/12
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
Appendix scar
mark on foot

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 yes 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.

Appendixectomy 1913 adherent scar
no disability

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Wally.....(Overseas)

Date 3-1-5-19..... Signed [Signature].....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 [Signature].....

(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.)

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 50654 (Rank) Private
 Name (in full) RICHARDSON Edward Sidney enlisted in
 the 1. a. Inf.
 CANADIAN EXPEDITIONARY FORCE at Vermon Bl. on the 22nd
 day of May 1918.
 HE served in England with the C. A. M. C.
 and is now discharged from the service by reason of
Demobilization.
 Medical Unfitness.

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

Age 26 yrs 9 mos.
 Height 5 ft. 6 ins.
 Complexion Fair
 Eyes Blue
 Hair L. Brown

Marks or Scars.....
Appendix Scar
mark rt. foot

E. P. Richardson
 Signature of Soldier.

[Signature]
 Issuing Officer.

Date of Discharge

14 July 19.

[Signature] Major
 O.C. DISPERSAL STATION "T"
 Rank

Date 14. 7. 1919

Faint header text at the top of the page, possibly including a date or reference number.

First section of faint, illegible text, possibly a list or a set of instructions.

Second section of faint, illegible text, continuing the list or instructions.

Third section of faint, illegible text, possibly a separate entry or note.

Fourth section of faint, illegible text, continuing the list or instructions.

Fifth section of faint, illegible text, possibly a concluding note or signature area.

Sixth section of faint, illegible text at the bottom of the page.

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

Nothing to be written in this margin.

W1899-PP 1150 IM 5/18 G.W.P.Co (3490)

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.
Part I.

(1)*Substantive rank <i>Pte</i> *Acting rank * [To be entered in pencil to facilitate alteration.] (4) Surname <i>A. Richardson</i> (5) Christian Names <i>E. -</i> (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 <i>C. A. M.C.</i>	(3) Regtl. No. <i>50654</i>
	Initials and Rank of an Officer.	

(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)

(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)	(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, Shoing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	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.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

13.5.19	C.A.M.C. Cas Depot	Pt 120 111	L.O.S from C.A.M.C. R + T.D.	Cooden	10.5.19	Pt 2 DO 111
24.5.19	C.A.M.C. Cas Depot	Pt 2 DO 121	L.O.S. to R-Wing Witley	Cooden	23.5.19	Pt 2 DO 121

Frank Smith Capt.
 Officer Commanding C.A.M.C. Cas. Coy.

7.6.19 R. Wing 50
R. Wing

TOS WITLEY
SOS OMFC TO CEF CANADA

6.6.19
21.6.19

EMB'K'D SOUTHAMPTON 27 19
ARRIVED HALIFAX 3 7 19

W. M. ...
 OFFICER IN RECORDS
 R. WING C.C.C.,
 WITNEY

T.O.S. No 11 D, D, 25 July 19
 S, O, S. CEF July 14-19 T-Area
 No 11 dd DO 198 July 17-19

W. D. Evans
 Asst. Adjutant District Depot, M. D. X.
 Lieut.

Nothing to be written in this margin.

Rank _____ Name **RICHARDSON Edward Sidney** Reg'l No. ~~50207~~
 Unit **C.A.M.C. Reinf.** If in perm. Corps, }
 What Unit? } Married or Single **Single** ^C
 Place and Date of Enlistment **Vernon, B.C. 9 June 1915** Place of Birth **Canada**
 Name and Address, Next-of-Kin **Mrs Wm. Richardson**
Keating, B.C. Relationship _____

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

Discharge, Date and Place Reason Character

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				
28-7-15	O.C. Depot.	On nominal roll of Depot Co.	Shorncliffe.	19-7-15	
15-7-15	O.C. Dof. C.P.	Taken on strength of Depot Co. ^{from}	Taylor.	13-7-15	Part II orders no 63.
3. 11. 15	O.C. Muster	On strength	"	3. 11. 15	
21. 1. 16.		adm. Dep. C. C. R. X. H. (Influenza).	"	18. 1. 16.	C.R. 29. D Can. R. X. H. P.I.I. O. 17.
25. 1. 16.		Disch from HP.	"	24. 1. 16	P.I.I. O. 24. C-d. 33 (can R. # X.H.)
15. 2. 16	O.C. Muster	On strength Dof. Hqs	do	15. 2. 16	Muster Roll
11. 10. 16	O.C. Dof. C.P.	S.O.S. on trans to C.A.M.C.S	Taylor	10. 10. 16	P.I.I. O. 282.
13. 10. 16	C.A.M.C. TS.	T.O.S. from D. of L. to Cheriton	"	"	" 290. (as M.S. 156H)
20. 10. 16	C.A.M.C. TS.	S.O.S. on trans to Cheriton	"	21. 10. 16	P.I.I. O. 300. (as M.S. 1671)
24. 10. 16.	G.C. S. H.	T.O.S. from C.A.M.C. TS.	Ramsgate.	21. 10. 16	298.
7-6-17	do	one Iron Conduct Badge	"		P.I.I. 158.

50654

Richardson Edward Sidney

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				
14.7.17	Can Off. Hp postio from G.C.S.Hp Regal Bstair			14.7.17	PT II 20 1 + 503.H. 9150 194 d. 13.7.17
30.9.17	do SOS to came d.	do	Pte	29.9.17	- - 14
1.10.17	came d TOS from Can Off Hp Bstair w hgt		"	29.9.17	- - 274
19 2 18	PPbRxH. TOS from bambd.	Bethies	Pb	18 2 18	H:25 bambd H:25 d/18.2.18 (SOS) came d.
6.5.18	-H- sos to bambd and att'd to this H.	"	Pb	6 5 18	"83 4 #124 423-6-18
20-10-18.	bambd pl. Rel'd: from "Orbon" to P.R.B.RxH.	Schiffe	Mc	19-10-18.	- - 293.9 d/19-10-18. PPbRxH Pte 20207.
10/5/19	bl med SOS to Camp Bexhill Camp Bexhill.	Schiffe	Pte.	10/5/19	bambd PT. II 130 d. 111. d 13.5.19.
24.5.19	Ramp ceo L.O.S from bambd	Wiley	v	23.5.19	- 384-121 d/24-5-19 RPMC & Coy
97-24-198 d/2-7-19					
3-7-19	do SOS to Canada	Wattley	Pte	2-7-19	DO 72

Casualty Form—Active Service.

Regiment or Corps C.A.M.C.

Regimental No. 50654.

Rank Pte

Name Richardson

Enlisted (a) 6-11-14

Terms of Service (a) D of War

Service reckons from (a) 6-11-14

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)

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.			Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Place	Date		
10-10-16	b.b.D of b. R. b. S.	Returned to b. A. M. b. T.S.	Cheriton	10-10-16	Embarked Canada 28-6-15 Disembarked England 7-7-15 Auth: Phone message from Lt J. S. Cleveland House S. James Sq. W. 3-10-16.
15-10-16	Taylor	TAKEN ON STRENGTH C.A.M.C. T.S.	Cheriton	10-10-16	R/O 290
22-10-16	b. A. M. b. T.S.	Transferred to b. b. S. H.	Ramsgate	27-10-16	Capt M. Wallace, Capt. Adjutant, for O.C. C.A.M.C. Training School.
24-10-16	O. G. S. H.	Taken on Strength	Ramsgate	23-10-16	Part II D.O 298.
7-6-14	" "	One Good Conduct Badge.	Ramsgate	21-5-14	Part II D.O 198.
13-7-14	" "	S.O.S. to C.O. H. Messon B. Stairs.	Ramsgate	11-7-14	Part II D.O 194.

(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 or corps duties.

Major, C.A.M.C.
F. T. O. Ramsgate.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Miss M. Richardson*By Whom Assigned *Richardson E.S.*Address *Keating P.O.
Victoria BC*Regtl. No. *~~50654~~ 210*Rank *Pte*Corps *"B" Section No 1 Field Amb*Rate *15⁰⁰/₁₀₀*

JUL 1 1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July		T2010	15 -	
Aug.		R5383	15 -	
Sept.		m6498	15 -	
Oct.		n7435	15 -	
Nov.		Q8438	15 -	
Dec.		R 10796	15 -	
Jan.	1916	U10602	15	
Feb.		V13546	15	
March		W13512	15	



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ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Miss M. Richardson

Name of Soldier

Richardson E.S.

L. L. Job 89002.-Req. 6213.

PAYMENTS.

Plt "B" Sec.

No 1 Field Amb.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$15⁰⁰</i>
April	1916	<i>2849</i>	<i>15</i>	
May		<i>04725</i>	<i>15</i>	
June		<i>93899</i>	<i>15</i>	
July		<i>W11288</i>	<i>15</i>	
Aug.		<i>J 13148</i>	<i>15</i>	
Sept.		<i>J-I 18160</i>	<i>15</i>	
Oct.		<i>J 22833</i>	<i>15</i>	
Nov.		<i>J 27873</i>	<i>15</i>	
Dec.		<i>R 31742</i>	<i>15</i>	
Jan.	1917	<i>Q 3965</i>	<i>15</i>	
Feb.		<i>Q 46290</i>	<i>15</i>	
March		<i>D 53205</i>	<i>15</i>	<i>15⁰⁰</i>
April		<i>N 4460</i>	<i>15</i>	<i>15⁰⁰</i>
May		<i>W 11159</i>	<i>15</i>	
June		<i>C 18161</i>	<i>15</i>	<i>15⁰⁰</i>
July		<i>H 26167</i>	<i>15</i>	<i>15⁰⁰</i>
Aug.		<i>S 32428</i>	<i>15</i>	
Sept.		<i>W 40895</i>	<i>15</i>	<i>closed in error for ace of</i>
Oct.		<i>J 45112</i>	<i>15</i>	<i>S.M.S. Richardson C.A. & C.</i>
Nov.		<i>J 52420</i>	<i>15</i>	<i>To be reopened without</i>
Dec.		<i>Q 60375</i>	<i>15</i>	<i>loss of time 7/3/17</i>
Jan.	1918		<i>15</i>	<i>mailed 4/12/17</i>
Feb.				<i>Clerk</i>
March				<i>410⁰⁰</i>
April				
May				
June				
July				

CB

W

u 42377 150

closed in error for ace of S.M.S. Richardson C.A. & C. To be reopened without loss of time 7/3/17 mailed 4/12/17 Clerk

9/9/17

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
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July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

3032

Jul 1-1915

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15			
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R

10/24 R8
P.M.G.

PARTICULARS OF SEPARATION ALLOWANCE

No. 50654 (2110)
 Rank pte Promoted Reverted Discharge
 Soldier's Name E. S. Richardson
 Battalion B. sec. no 1 Fld Amb.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

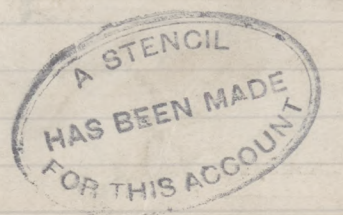
Name Miss M. Richardson
 Address Heating P. O.
 Change of Address Victoria B.C.
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec 31			450	450
Jan	65705		15	15
Feb	66535		15	15
Mar	91957		15	15
Apr	9669		15	15
May 1918	12166		15	15
June	23055		15	15
July	24230		15	15
Aug	37440		15	15
Sept	46722		15	15
Oct	52219		15	15
NOV	60506		15	15
Dec	63211		15	15
Jan	72785		15	15
Feb	80555		15	15
Mar	82176		15	15
Apr	82701		15	15
May	6062		15	15
June	9209		15	15
July	12738		15	15
			735	735

REMARKS 0153 23 - E-46

A/c closed 31-7-19
 Ret'd per... Slymper
 Date... 7-7-19 m.d. 11...
 Clerk... Pynch 21-7-19
 m d L P 114752 bsg

M. F. W. 128
400M-6-17-172-39-1141
L. L. 22230-M. & D. 7593.



Rank

Name

RICHARDSON Edward Sidney

Reg'l No. 50654

P-56

Unit

C.A.M.C. Reinf.

If in perm. Corps,
What Unit?

Married or Single Single

Place and Date of Enlistment Vernon, B.C. 9 June 1915

Place of Birth Canada

Name and Address, Next-of-Kin Mrs Wm. Richardson

Keating, B.C.

Relationship

Assigned Pay Monthly \$ 15.

Payable to

Miss M Richardson

Relationship

Separation Allowance \$

Payable to

Relationship

1915 Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
13/4	31/8	50	1	50	50	10	5.16	2/1				31 63 15			61 63 9 37		Transferred C.A.C. No. 1077 C.A. Allowance Vernon B.C.
1/9	30/9	20	1	30	30	10	3.19	3/42 8/4				14 60 15			29 60 12 7/1		
1/10	31/10	31	1	31	31	10	8 10/2	4/46 8/4				19 46 15			34 46 12 4/1		
1/11	30/11	30	1	30	30	10	3 12 4/1	45 4/1				12 03 15			32 03 13 38		
1/12	31/12	31		31	31		3 10 13 38	47 48				14 60 15			29 60 17 88		
1916	1/11/16	31/1/16	31	31	31		3 10	57 98				19 47 15			34 47 17 57		
	1/2	29/2	29	29	29		2 90	49 41				21 90 15			36 90 12 51		
	1/3	31/3	31	31	31		3 10	46 61				14 60 15			29 60 17 01		
				263 60		26 30	16	305 30				153 29 135 00			288 29 17 01		61 Bal.

Checked

Edward

BALANCE TRANSFERRED TO NEW LEDGER

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: RICHARDSON - E. S.
EFFECTIVE DATE: 1-7-15		EFFECTIVE DATE: -		NUMBER: 50654
AMOUNT: 15		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	DATE EFFECTIVE	RANK OR APPOINTMENT
Miss M. Richardson, Keating, B6				Pte

UNIT AND TRANSFERS	ORIGINAL UNIT: -	DATE ACCOUNT FIRST OPENED: -

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
24.5	3702	Lea. P.	973	24.5	3702	Lea. P.	973
11.6	4716	-	35.93	11.6	4716	L.P. 6	1.08
			48.66				

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

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

PARTICULARS OF RENDERING NON-EFFECTIVE: 30/6/19 (R.G. 10626) (B. Short 13/6/19 (W. Hleyth))

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Bal. fwd								22.04	nil	
Apr.	R.P.	33.		Cap.				15.	40.04		
				AR 119. S.P.C.R. x 24. 12/4. 6	973.				30.31		
				- 279.	26/4. 6	973.		15.	20.58		
May		33.	34.10	Cap.				15.	54.68		
				513.	14/5. 3	973			29.95		
				828	28/5. 12.	1460		15.	15.35		48.35
June		33.	34.10	Cap.				15.	48.35		22.62
				AR 116. P.P.C.R. x 24. 14/4. 8 (2)	973				33.35		
				AR 1542	28/4. 8 (9)	730		15.	23.62		50.02
July		33.	34.10	Cap.				15.	16.32		37.03
				AR 1892. P.P.C.R. x 24. 25/7. 18 (0)	973				50.72		19.37
				- 2267	24/7. 8 (8)	730		15.	25.69		50.00
Aug		33.	34.10	Cap.				15.	18.39		27.17
				AR 2987. P.P.C.R. x 24. 14/4. 8 (3)	12.17				52.49		25.37
				AR 3694	24/4. 18 (9)	973		15.	37.49		
Sept		33.	34.10	Cap.				15.	25.32		
				AR 15.	4/9. 18 (1)	2433			15.59		
				AR 144	21/9. (14)	484		15.	48.59		
									33.69		
									9.26		
									4.39		
									29.20		

COMPILED BY: *Billie Dool*
CHECKED BY: *[Signature]*

NUMBER

50654 RANK

NAME

Richardson E.L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1908	Paul's Fund								439		
	GP								3849		
		3410		Gap				15-	2349		
				CR 290 Bushill 10/10 (22)	730				1619		
				CR 240, earned 29/10 (89)	243				1376		
		3410			973			15-			
Nov		33-		Gap							
				2718 earned 17/11 6	736						
				2683. - 27/11 32	730				1710		
		3410			1466						
Dec				Gap							
				3021 - 11/12 66	1955				15- 3620		
		3410							1665		
Jan				Gap							
									15- 3575		
		10120			3471			15-			
Feb				3300 earned 13/1 20	985				2590		
				3552 - 28/1 52	730				1860		
				399 - 14/2 87	742				1118		
				4184 - 27/2 110	973				145		
		3080		Gap	3430				15- 1725		
Mar		3410							15- 3635		
				4487 - 13/3 138	730				2905		
				4810 - 25/3 159	981				1924		
		6490			5141			30-			
Apr		33-		Gap					15- 3724		
				455 - 14/4 21	973				2751		
				224 11 Gen 29/4 39	973				1778		
				266 earned 4/5 75	730				1048		
		3300			2670			15-			
May		3410		Gap					15- 2958		
		6710			2676			30-			
Jun		33-		Gap					15- 4758		
				CR 3707. R. Thurg. 29.5.19 5	973				3785		
				" 4716 " 11.6. 17	3893				108		
				" 6450 " R.P. G. 25.6. 36	973				1081		
		33			5839			15-			

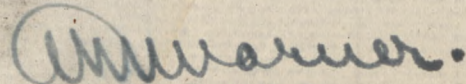
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 79.21
 3575

P.O.S. to Canada 2.7.19. P.L. 97 to Amce

Hastings Park, Vancouver, B.C.

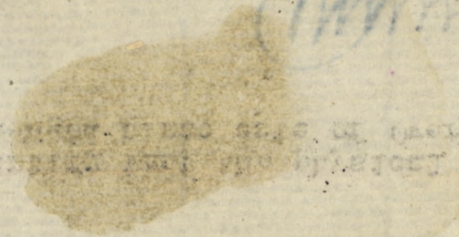
This is to certify that the physical condition of the
within named man has not changed since date of Overseas Board
herewith attached.

JUL 14 1919



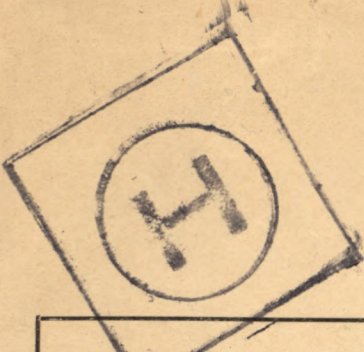
Capt. C.A.M.C.

OFFICE OF THE
COMMISSIONER



THE STATE OF NEW YORK
IN SENATE
January 10, 1900

REPORT OF THE



SHORT FORM.
PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

O.G. 7.
 S.G. 21.
 D.A.U.

1. No. 50654.

2. Rank. Pte

3. Name. RICHARDSON, Edward Sidney

4. Unit. 6. a. m. t. Vancouver

5. Date of Discharge 14/7/19 Place Victoria B.C.

6. Reason for Discharge Demobilisation

7. Authority. No 11 dd DO 198 July 17-1919

8. Proposed Residence after Discharge Keating P.O. South
Saanich 5. S. 16/Bl.
22/5/15'

9. CERTIFICATE TO BE SIGNED BY SOLDIER.
 I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
 M. F. W. ? 39
E. Richardson
 Signature of Soldier.

10. CONFIRMATION.
 The discharge of the above named man is hereby confirmed.
 Place
 Date
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86-29-454



SHORT FORM
PROCEEDINGS ON DISCHARGE
(Transposition)



1. Name of Soldier: *James M. Thompson*

2. Unit: *1st Infantry Division*

3. Date of Discharge: *July 17, 1919*

4. Reason for Discharge: *Discharged*

5. Authority: *No 11 64 DO 198 July 17-1919*

6. Proposed Residence after Discharge: *Home*

7. Signature of Soldier: *James M. Thompson*

8. Signature of Discharging Officer: *G. C. [illegible]*

9. Date: *July 14 1919*

10. Place: *Discharge Station*

The discharge of the above named man is hereby confirmed.



LIST OF DISCHARGE DOCUMENTS

Medical Report	1
Medical History Sheet	2
Physical Examination Sheet	3
Diagnostic Test Results	4
Operative Report	5
Pathology Report	6
Discharge Summary	7
Referral Letter	8
Insurance Claim Form	9
Medical Certificate	10
Physician's Statement	11
Medical Record	12
Medical History Sheet	13
Physical Examination Sheet	14
Diagnostic Test Results	15
Operative Report	16
Pathology Report	17
Discharge Summary	18
Referral Letter	19
Insurance Claim Form	20
Medical Certificate	21
Physician's Statement	22
Medical Record	23
Medical History Sheet	24
Physical Examination Sheet	25
Diagnostic Test Results	26
Operative Report	27
Pathology Report	28
Discharge Summary	29
Referral Letter	30
Insurance Claim Form	31
Medical Certificate	32
Physician's Statement	33
Medical Record	34
Medical History Sheet	35
Physical Examination Sheet	36
Diagnostic Test Results	37
Operative Report	38
Pathology Report	39
Discharge Summary	40
Referral Letter	41
Insurance Claim Form	42
Medical Certificate	43
Physician's Statement	44
Medical Record	45
Medical History Sheet	46
Physical Examination Sheet	47
Diagnostic Test Results	48
Operative Report	49
Pathology Report	50
Discharge Summary	51
Referral Letter	52
Insurance Claim Form	53
Medical Certificate	54
Physician's Statement	55
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Medical History Sheet	57
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Diagnostic Test Results	59
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Medical Record	78
Medical History Sheet	79
Physical Examination Sheet	80
Diagnostic Test Results	81
Operative Report	82
Pathology Report	83
Discharge Summary	84
Referral Letter	85
Insurance Claim Form	86
Medical Certificate	87
Physician's Statement	88
Medical Record	89
Medical History Sheet	90
Physical Examination Sheet	91
Diagnostic Test Results	92
Operative Report	93
Pathology Report	94
Discharge Summary	95
Referral Letter	96
Insurance Claim Form	97
Medical Certificate	98
Physician's Statement	99
Medical Record	100

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 1000a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 44)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 29a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Certificate (Form M.F.W. 2595).
15. Sundry Documents.

+ Dupl.

..... Date Group B

..... Checked by No. 10

..... Checked by No. (Pm)

..... Date 20-6-19

To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits
and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Richardson Christian Name E.D.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Keating County B.C.

Examined ... { on 21st day of May 1916
at Esquimaux

Declared Age ... 23 years 8 months days.

Trade or Occupation ... Teamster

Height ... 5 feet, 6 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. 37 inches.
Range of Expansion 1 1/4 inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number 2

When Vaccinated ...

Vision ... { R.E.—V=
L.E.—V=2

(a) Marks indicating congenital peculiarities or previous disease ...

(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) J.W. Fowler Capt
(Rank) Comd Medical Officer.

Enlisted ... { at
on ... day of ... 191 ...

Corps.	Regtl. No.
<u>Comd</u>	<u>50654</u>

Became non-effective by

on ... day of ... 191 ...
(Signature)
(Rank)

List in the case of Warrant Officers treated in quarters.

cases bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

Olympic 7.7.19

AUDITOR *R.M.* PAYMASTER *R.M.*

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

REGT. No. *50654* RANK *PL* NAME (IN FULL) *RICHARDSON, E. S.*

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
NEXT OF KIN							
ADDRESS		<i>Empst. 2 P.B. day</i>	<i>30/6/19</i>				
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
<i>N/A</i>					DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE	
					<i>15</i>	<i>11/8/19 done</i>	
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
							<i>Bert A. Cammrose</i>
					ADDRESS		<i>Nickie B.C.</i>
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
DISCHARGED	PLACE	DATE	REASON	AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY		
<i>MDX1</i>		<i>14/7/19</i>					

Certified that all payments have been made on this account for which covering authority has been received to date.
Added. Lieut., Paymaster, Demobilization Pay M.D. No. 11

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	\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	



Original

of the original

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