

Duplicate

ATTESTATION PAPER.

No. 2448492.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)



1. What is your surname?..... Royan
- 1a. What are your Christian names?..... Sinclair
- 1b. What is your present address?..... 18 1/2 Montmorency St. Windsor, Ont.,
2. In what Town, Township or Parish, and in what Country were you born?..... Scotland
3. What is the name of your next-of-kin?..... Lucile May Royan
4. What is the address of your next-of-kin?..... 18 1/2 Montmorency St. Windsor, Ont., Ca
- 4a. What is the relationship of your next-of-kin?..... Wife
5. What is the date of your birth?..... Jun. 14, 1892
6. What is your Trade or Calling?..... Painter
7. Are you married?..... Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?..... 3 yrs. Territorials
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
14. If so, what was the nature of the disability? .. --
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? No
16. If so, what was the reason?..... --

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date Aug. 9 1917 . Sinclair Royan (Signature of Recruit)
DW Glenburgh (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date Aug. 9 1917 . Sinclair Royan (Signature of Recruit)
DW Glenburgh (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 Windsor, Ont., this 9th day of August 1917.
J. B. Balfour (Signature of Justice)

Description of Sinclair Royan on Enlistment.

Apparent Age.....25 years.....2 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 5ft. 11ins.

Chest measure- ment.	{	Girth when fully ex- panded.....	37 ins.
		Range of expansion....	5 ins.

Complexion Dark

Eves..... Hazel

Hair Dark

(Church of England.....

Presbyterian.....Yes.....

Methodist.....

Baptist or Congregationalist.....

Roman Catholic.....

Jewish.....

Other denominations
(Denomination to be stated.)

Hearing	-	-	R.	E.	N
			L.	E	N
Vision	-	-	R.	E.	20/20
			L.	E.	20/20

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.....**Aug. 9**.....191**7**.....

Place..... Windsor, Ont.,

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....Sinclair Royan.....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.

(Signature of Officer)

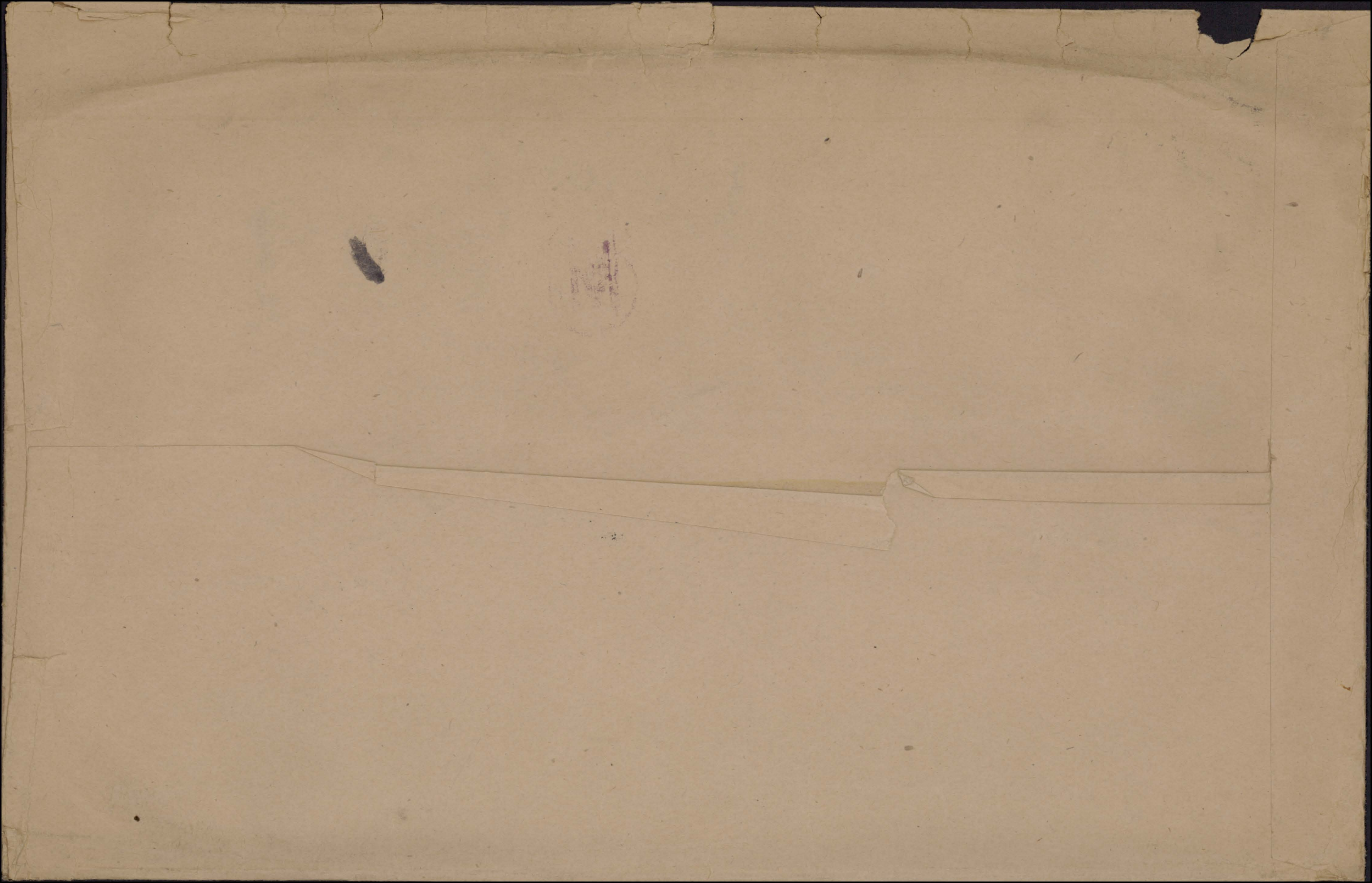
Date 17/8/13 191

for A.C. 214 Regt. O/S Cove

QUAN, SINCLAIR

REGT. NO. 2448492 UNIT 1st. D.B.W.D.R. H. Q. FILE NO.

[illegible]



SURNAME.

CHRISTIAN NAMES

REGL. No.

RANK

UNIT

FORMER CORPS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADD

COUNTRY OF BIRTH

PLACE OF ATTESTATION

NEXT OF KIN.

CHANGE OF ADDRESS

Card No. KT

805 Dig 19.6.19.

Demob FOLL.

80. 17/4 20.6.19.

#100.

30 Ridout St.

London, Ont.

(Saad. 4-11-18)

DATE

DATE

June 14, 1892
Aug 9, 1917

0/8.21.12.17. 1026
14.

Plb. 17.6.19 348
4) Pte

~~FROM HALIFAX PER~~

~~MARRIED~~ ~~MISSABLE~~ ~~21/12/17~~ SINGLE

WIDOWER

TRADE OR CALLING

Painter

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

25 YEARS

2 MONTHS

HEIGHT

5 FEET

11 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

5 INCHES

COMPLEXION

Dark.

EYES

Hazel

HAIR

Dark

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Windsor, Ont

DATE

Aug 9th, 1917

Present Address. 18 1/2 Montmorency
St, Windsor, Ont.

No. 2448492. RANK

Pfc.

NAME

Ryan, S.

T. O. S. 9-8-17

UNIT

21st Regiment.

(10066-17-7-17)

(Co. 1. Special Service Co.)

M. D.

1.

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1917
Aug. 9. 1917
Aug. 31. m.



NAME Royan Sinclair

RANK AND CORPS *Pte* 18th Bn. from 21st Regt
CABLE

CABLE ✓

No.	1	DATE
-----	---	------

DATE _____

NATURE OF CASUALTY

REGT'L. No. 2 H H 8 H 8002

H. Q. FILE No 649

FOLLOWS

No.

17

1st R R FOLLOWS

7 of 11

~~(auth c 30 14918)~~

10-6 anth. Sy 7-11-18

N. 291. H-9-18

$$742 \cdot 2885 = 2$$

13-2

W. S. M. 191

Mrs. Lucile May Boyan (wife)
~~1923 Guy's Que. Ward 14~~

990, 30 Ridout St. London, Ont.

Udm No 16 Gen H. Le. Treport Aug 28th

1918 G. S. W. R. thigh

War H. Chester progressing favourably

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS



B308 ³	war Chester	29-18	Gsw R. thigh
B350 ¹²	P.P.C. R.C. BePhill	18-10-18	Gsw R. thigh
B362	Disc.	T-11-18	" " " "

No. 2445492 RANK

Plt.

NAME

Royan Sinclair

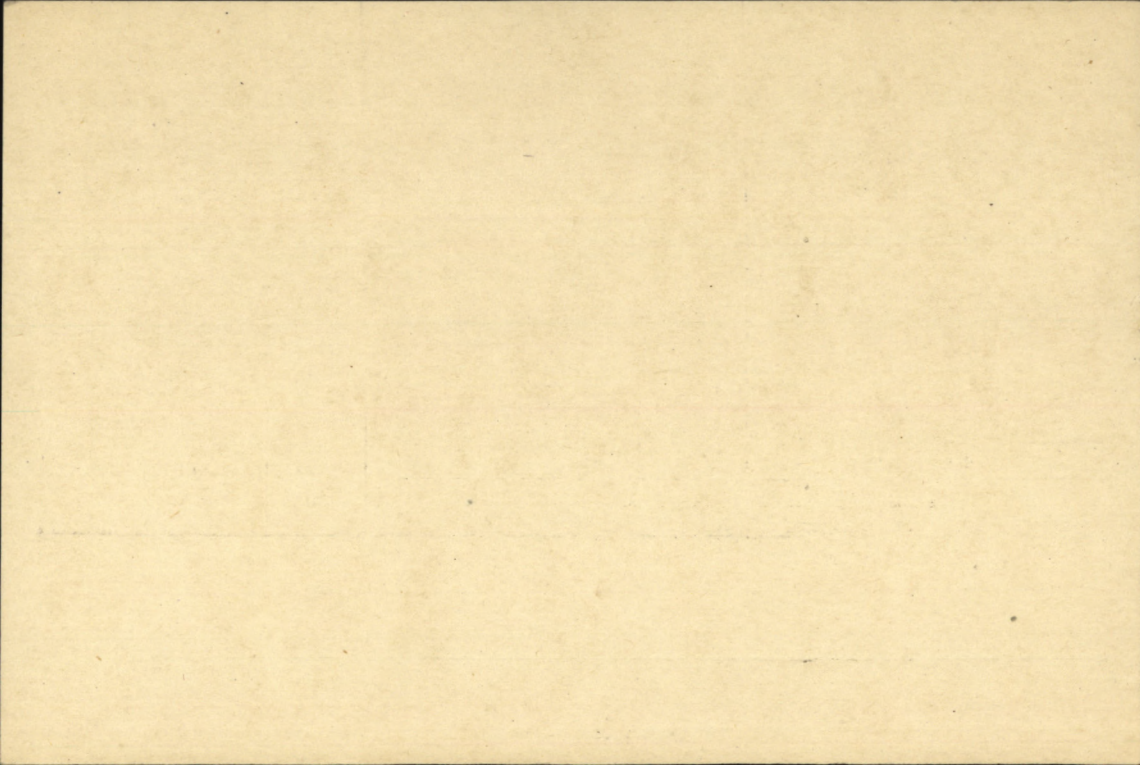
T. O. S.

UNIT

1st Depot Battalion W. O. Regiment

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Sept. 1	1917 Sept. 30	✓	Trans. I.O.S. 8/8/17 Unit not stated	Sept. pay list
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		



es
9mm

Number

2448492

Rank

2/cpl

Surname

ROYAN

Christian Name

Sinclair

Units

18th Bn Cavalry Theatre of War France

Date of Service

1914-18

Remarks

1131 Erie St, Windsor Ont,

Essex County.

Latest Address

~~34 Beech St~~

~~Battle Creek Mich~~

~~U.S.A.~~

Roll No

B
Page 8528

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 _____

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE



THIS IS TO CERTIFY that No. 2448492 (Rank) Private

Name (in full) Seaclair Royan enlisted in

the 21st Regt. Coy.

CANADIAN EXPEDITIONARY FORCE at Windsor on the 9th

day of August 19 17

HE served in France, with 18th Battalion

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 11 mos

Marks or Scars

Height 5' 11"

Complexion Dark

Eyes Blue

Hair Dark

S. Royan
Signature of Soldier

[Signature]
Issuing Officer

Date of Discharge

DISCHARGE SECTION
JUN 19 1919
No. 1 District Depot

D. C. Dispersal Area Sta. "K."

Date 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.

CANADIAN EXPEDITIONARY FORCE DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____

enlisted in _____

the _____

CANADIAN EXPEDITIONARY FORCE No. _____

day of _____ 19 _____

He served in _____

and is now discharged from the service by reason of _____

Discharge Certificate No. _____

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

Age _____	Marks or Scars _____
Height _____	_____
Complexion _____	_____
Eyes _____	_____
Hair _____	_____

Signature of Soldier _____

Signature of Officer _____

Date of Discharge _____

Date _____

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it to an authorized officer in the Secretary, Military Council, Ottawa, Canada.

(Sheet No. 1)
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.

21st Regt. 4th Coy.

ROYAN

Regimental No. *2448499*

Rank.

Pte

Name.

C. E. F.

Linclaire, Reginald

Enlisted (a)

15/8/17

Terms of Service (a)

CC & D of W

Service reckons from (a)

15/8/17

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)

Painter

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>Embarked</i>	<i>Canada</i>		<i>HMT</i>
		<i>Disembarked</i>	<i>England</i>		<i>HMT</i>
Date. From whom received		Date transferred		Authority.	
<i>1st. Depot Bn., W. O. R.</i>		<i>Transferred u/s. 15-12-17</i>		<i>H.Q. 593-6-7, d/4-12-17.</i>	
		<i>London, Ont. No record</i>			
		<i>EMBARKED St. John's CANADA 18.12.17</i>		<i>H.M.T. Messanahe</i>	
		<i>DISEMBARCKED Glasgow ENGLAND 31.12.17</i>		<i>H.M.T.</i>	
		<i>OVER</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.



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				
1918 Jan 7	O.C. 4th Can. Res Bn.	O.C. 4th Can. Res. Bn. on arrival from Canada	Bramshott	31.12.17	Pt. 2 Order No. 5. ✓
27-2-18	O.C. 4th Res. Bn.	To Lt Col, with pay	Bramshott	27-2-18	Part 2 order No 49. ✓
19-4-18	O.C. 4th Res. Bn.	S.O.S. 4th Can. Res Bn on proceeding to 18th Bn overseas	"	18-4-18	Pt 2 Order No 93
	"	Reverts to permanent rank (Pte) on request on proceeding overseas	Bramshott	19-4-18	Part 2 Order No 93 ✓
					<i>W. Barlow</i> Adjutant 4th Canadian Reserve Battalion. <i>guy</i>
20-4-18	Can I.B. Depot	Arr from 4 Can Res Bn Eng & T.O.S. of 18 Can Bn	Can IBDep ETAPLES	19.4.18	Nom Roll Pt II Ord 36 d-24.4.18
22-4-18	C.C.R.C.	Arr at Can. Corps Reinf. Camp		22.4.18	Nom Roll
10-8-18	18 Bn	Joined 18th Can Bn	In the Fld	8.8.18	AF.B.213
31-8-18	18th Bn	WOUNDED	In the Fld	27.8.18 ✓	AF.B.213

OVER

Regimental Number... 2448492

~~Casualty Form~~ Active Service

18th Battalion, C.E.F.
 Rank *Pte* Regiment or Corps
 Surname *ROYAN* Christian Name *Sinclair*
 Religion Age on Enlistment years months
 Enlisted (a) Terms of Service (a) Service reckons from (a)
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and Rate
 Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
31-8-18	A.T. Carisbrook Castle	Invalided to England, wounded. Posted to Western Ontario Regtl Depot WITLEY		31-8-18	AF.W.3083 (Can. Sect. No. 5893) Pt. II Order 88-17-9-18
		Whogan Major for Lt.-Col., A.A.G. Canadian Section. G. I. O. 3rd Echelon B.E.F.			
4.9.18	W.O.R.D.	L.O.S. from 18 th Bn.	Witley Rte.	2.9.18	D.O. 214. 1 Stanley LIEUT. FOR LT. COL. I/C RECORDS, C.O.M.F.

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c (17591.) Wt. W 1887-P 1124, 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.]



Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
5-11-18	4 th Res. Bn.	I.O.S. on posting from W.O.R.D.	Witley	1-11-18.	Pt 2 D.O.N. 260.
13-12-18	do -	On Boardman, Kimmel Park Camp pending return to Canada.	Witley	13/12/18	Pt 2 D.O. #295
					LIEUT. & ASST. ADJT. FOR C. C. 4TH CANADIAN RESERVE BATTALION.
13/12/18	4 th Res. Bn.	20 S. M. W. #1. Concentration Camp. Embarked for Canada.	Rhyl.	13/12/18	Pt 2. Ord. 2
					Gardner Lieut for "O.C." 1 Wing
13/12/18	ocm D1	20 S. C.C.C. Kimmel Park for return to Canada. Part II Orders No. 67.		19/3/19	
7/6/19		20 S. C.C.C. Kimmel Park on embarking for Canada. Part II Order No. 126.		7/6/19	
					for Major Commanding 1st Wing, Kimmel Park Camp.
					SAILING NO. 82.

S.S. 'ROYAL GEORGE'

L.D. L. POOL 7.6.19

Stewart MacCallum

Capt.
Adj. No. 14, C.T.C.S.

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1st W. I. B.

Regimental No. 2448492 Rank Pvt Name Linclair Royan

C. E. F.

Enlisted (a) 9-8-17 Terms of Service (a) Daw Service reckons from (a) 9-8-17

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)

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				
		TOS No 1 Dist. Depot Displ. Stn. K. 7-6-19 SOS Dispersed 19.6.19 D.O. No. 171 <i>Johnston</i> For O. C. Dispersal Area Sta. K.			

(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.

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				

1st DET OT BN W C REGT 10th LIA BN

TLH Rank Name ROYAN, Sinclair, Reg'l No. 2448492
Unit If in perm. Corps, }
What Unit? Married or Single Married

Place and Date of Enlistment Windsor, Ont. Aug. 9th. 1917 Place of Birth Scotland.

Name and Address, Next-of-Kin Lucile May Royan,
18 $\frac{1}{2}$ Montmorency St., Windsor, Ont. Can. Relationship Wife.

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—9546-16.

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.				
<i>6</i>		Arrived in England		31-12-17	S/S GRAMPIAN
7 1 18	4th RES T.O.S. from CANADA	B'SH TT		31 12 17	PT. 11 5
27.2.18.	-	To be L/Cpl with pay.		27.2.18.	Pt. I: 49.
19.4.18	"	Reverts to P.T. on		19 4 18	" 93.
"	"	proce ops. of P.T.			
"	"	S.O. to 18 th Bu ops		Pt 18 4 18	" 93 & DO 36 of 18 Bu of 24 4 18
3.9.18	WORD (18)	WOUNDED	field	28.8.18	CLA 305
14 9 18	WORD	YOS from 18 Bu	Witty ✓	29 18	20 214
17.9.18	18 Bu	SOS to WORD	field	31.8.18	" 88 06
2-11-18	4 th Res.	T.O.S. from W.C.R.D. Hilly	"	1-11-18	---2608 WORD 260 of 4 18

A.F.B. 103 CHECKED

27 APR 1918



N/E. R.B. No. 3671
Elia R.L.
Category a Kean



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.				
13.12.18	H. Res B.	On Com to V.P. Camp.	M. Hickey	13.12.18	#2 D.O. 295.
		for return to Canada			
19.3.19	P. Cadore MDCWI	9.08 from WTR	" "	13.12.18	" 67.
20.3.19	WDRO	9.08 from H. Res	" "	19.3.19	.6704 Res 76/31/19
9.6.19	1 M.D. Plad.	\$0.5 to C.E.F. SL 82	" "	7.5.19	20 628
S. L. 82-K-54 D/7-6-19.					

MEDICAL HISTORY SHEET

Original



Surname Royan

Christian Name Sinclair

Examined { on 9th day of Aug. 1917
at Windsor, Ont.,

Approved by

W Ballantyne
Lt. Col. M.O.

Birthplace { City or Town
County Scotland

Rank

EXAMINED FOR RE-ENGAGEMENT

Apparent age 25 yr.

Trade or occupation Painter

Height 5 feet 11 Inches

Weight 147 lbs.

Chest measurement { Minimum 32 inches
Maximum expansion 5 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left X
Number Once

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

External Piles

R. E. 20/20

Vision L. E. 20/20

Date Result

VACCINATIONS

Date Result

ANTI-TYPHOID INOCULATIONS, ETC.

Enlisted on 9th day of Aug. 1917 at Windsor, Ont.,

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	21st Draft.	2448492		9-8-17
Transferred to	4th CAN. RES. BATTALION.			
	18th Bn. 15			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
Windsor, Ont.	AUG 9 1917	on enlistment	Fit A-II
Major, C. A. M. E.			
London, Ont.	NOV. 9th., 17.	Nil.	Capt. C. A. M. E.
Major, C. A. M. E.			
Examined by Medical Board.			

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.

M. F. B. 313.

300M.-1-17.

H. Q. 1772-39-43.

Examinel 24/5/19 A. E. Mc Larty Capt. Level
A. J. Maloney Pres.

CANADIAN



Princess Christian Name Sinclair
Surname Royan

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
London.		24	8	17	11	10	17	Suspicious Gonorrhea <i>from</i> Simple Ven. Eruptions	4	Recovered, Returned to Category A	W. H. Phipps Capt L. M. Jones Lieut. came J. H. Nelson Lieut. came
Chester War. Hp.		2	9	18	6	9	18				
Wolynell Camp		6	9	18	17	10	18	S.S. 2nd. Td. thigh		Nearly healed. Transferred to Can. Con. Hp. Bescall	C. Morris
at Chester War. Hp. Princess Christian Canadian Red Cross Hospital, Cooden Camp, Brixhill,	17 OCT 1918	17	10	18	1	11	18		16	Dis. fit for Duty	M. Mouldy

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.



Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pt Name Royan Surname Sinclair
 Unit or Corps 1st B.B. W.O.R. 4th Res. (If a soldier) Regtl. No. 2448492
 Born at Elgin, Scotland on, date June 14th 1892
 Signature (for identification) Sinclair Royan

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 175 lbs.
 Height 5 ft 4 1/2 ins.

2. **NUTRITION AND DIATHESIS?**

normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?**

normal

4. **RESPIRATORY SYSTEM.**

normal

5. **HEART?**

normal

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 70 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening?

no

7. **DIGESTIVE SYSTEM?**

normal

8. **GENITO-URINARY SYSTEM?**

normal

Urinalysis—s.g.? 1.020 Reaction? ac Albumen? no Sugar? no

9. **SKIN, MIDDLE EAR, EYE**
or any other part?

normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

good

Examined at Kinnel Park Signed John James Giff M.O.
 Date 12.12.18 Signed John Lock Cope M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Medical Examination Report

of the Officer in Charge of the Service

The Service is to be made by the Officer in Charge of the Service

1. Name

2. Age

3. Sex

4. Occupation

5. Date of Examination

6. Place of Examination

7. Name of Officer

8. Signature

9. Date

10. Place

11. Name of Officer

12. Signature

13. Date

14. Place

15. Name of Officer

16. Signature

17. Date

18. Place

19. Name of Officer

20. Signature

21. Date

22. Place

23. Name of Officer

24. Signature

25. Date

26. Place

27. Name of Officer

28. Signature

29. Date

30. Place

31. Name of Officer

32. Signature

33. Date

34. Place

35. Name of Officer

36. Signature

37. Date

38. Place

39. Name of Officer

40. Signature

41. Date

42. Place

43. Name of Officer

44. 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. 2448483 Rank Pte Surname Royan
(Given name in full)
Linclair
Unit or Corps 4th Reg Birthplace Scotland

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

1. GENERAL DESCRIPTION:

Physique good Weight 175 lbs. Height 5 ft 11 1/2 in. Colour of Eyes Brown
Nutrition good
Pulse 80 regular
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.)
Scar R hip
gsw 1918

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 yes 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.

Simple Methylitis 24/8/17 - 6/9/18
Gsw R thigh 6/9/18 - 1/11/18

Copied for
VB

Examined at *Murrel* (Overseas)

Date 24/3/89

Signed.....

Signature *C. A. H. of arc*

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

Examined at (Canada)

Date

Signed M.O.

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 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)

ROYAN. S.

REGIMENT

18th BATT.

RANK

PTE

No.

2448492

Date of Examination in England

16/12/18.

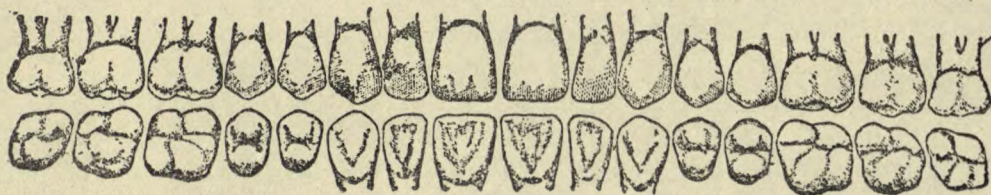
Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

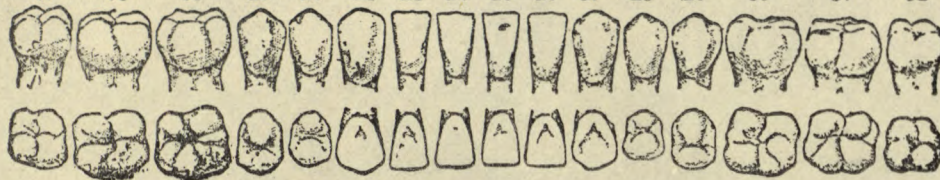
2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 4

2. EXTRACTIONS

3. CROWNS

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 *yes*

(b) In England

(c) In France

Kimber Park
M. Wales

Signature of Dental Officer

H. W. Reid
Capt. M.D.C.

ARMY DENTAL CERTIFICATE
DENTAL CERTIFICATE FOR DENTIST
M.O.I.

18th BATT. PTE
ROYAL N. 2.
10/12/18.
244842

18th BATT. PTE
ROYAL N. 2.
10/12/18.
244842

18th BATT. PTE
ROYAL N. 2.
10/12/18.
244842

PRESENT DENTAL EXAMINATION

✓

18th BATT. PTE
ROYAL N. 2.
10/12/18.
244842

18th BATT. PTE
ROYAL N. 2.
10/12/18.
244842

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

Royan, S.

M.D. 1.

REGIMENT

W.O.R.

RANK

Pte

No

2448492

Date of Examination in England 5/6/19.

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

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

CONTENTS COPIED
C. A. D. C., M. D. No. 1.

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 Yes

(b) In England

(c) In France

KINMEL PARK,
NORTH WALES

Signature of Dental Officer

W. C. Brager
Capt

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

- (1) Name of Overseas Unit which Soldier joins..... **21st Regt. C/s Coy.**
- (2) Regimental Number..... **2448492.**
- (3) Full Name of Soldier..... **Linclair Royan**
- (4) Place of Birth..... **Murrayshire Scotland**
- (5) Are you married, or not?..... **yes.**
- (6) If married, state,
 (a) Full name of your wife..... **Lucile May Royan.**
- (b) Present Postal Address..... **32 Windsor Ave.**
Windsor Ont.
- (7) Are you a widower?..... **No.**
- (8) Have you any children?..... **yes.**
 If so, give number of boys and girls..... **one girl.**
 Also their names and ages..... **Dorothy May — 11 months**

- (9) Is your Father alive? Yes John Ryan
If so, state name and address Colfield Village, Alves by Forres, Murrayside
Scotland
- (10) Is your Mother alive? Yes Margaret Ryan
If so, state name and address Colfield Village, Alves by Forres,
Murrayside, Scotland
- (11) If your Mother is a widow? No
Are you her sole support, or not? —
- (12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
—
—
- (13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.
—
—
—
- (14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.
Yes
- (15) Are you insured? No
If so, in what Company? —
Have you made arrangements for payment of your Insurance premium? —
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

H. L. Milligan Lieut. Colonel
Q. C. Central Training Depot, C. A. B. No. 1.
Officer Commanding.

Date AUG 16 1917

MEDICAL HISTORY SHEET

Duplicate

Surname Royan Christian Name Sinclair

Examined { on 9th day of Aug. 1917
at Windsor, Ont.,

Birthplace { City or Town
County Scotland

Apparent age 25 yr.

Trade or occupation Painter

Height 5 feet 11 Inches

Weight 147 lbs.

Chest measurement { Minimum 32 inches
Maximum expansion 5 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left X
Number Once

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

External Piles

R. E. 20/20

Vision - - - L. E. 20/20

Approved by

W. Ballantyne

Rank Lt. Col. M.O.

Date

EXAMINED FOR RE-ENGAGEMENT

7/1/17 A. Macdonald Capt. M.O.
12/12/17 A. G. E. M. L. Capt. M.O.

Date Result

VACCINATIONS

7/8/17 W. Ballantyne M.O.

Date Result

ANTI-TYPHOID INOCULATIONS, ETC.

7/8/17 W. Ballantyne M.O.

9/10/17 W. Ballantyne M.O.
16/10/17 W. Ballantyne M.O.

Enlisted on 9th day of Aug. 1917 at Windsor, Ont.,

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>21st Dypt.</u>	<u>2448492</u>		<u>9-8-17</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u>	<u>AUG 9 1917</u>	<u>on enlistment</u>	<u>Fa A-II</u>
<u>Major, C. A. M. E.</u>		<u>Major, C. A. M. E.</u>	<u>Capt, C. A. M. E.</u>
<u>London, Ont.</u>	<u>NOV. 9th., 17.</u>	<u>Nil.</u>	<u>Cat. A.</u>
<u>Examined by Medical Board.</u>			

Macdonald Capt. M.O.
Examined by Medical Board London
13/12/17
Pred.

Sinclair

[illegible]

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. *Lucille M. Royan*

Wife
PAYMENTS.

Name of Soldier *Royan St.*

L. L. Job 4503. - Req. 6332.

Plt. 2448492. 21st. Regt.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.	<i>18895</i>	<i>X 18263</i>	<i>34</i>	<i>R X 18263 cancelled</i>
Oct.		<i>Y 22255</i>	<i>20</i>	<i>B</i>
Nov.		<i>O 25439</i>	<i>20</i>	<i>B</i>
Dec.		<i>N 27991</i>	<i>20</i>	<i>W</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

RE-WRITE

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
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				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

D/A. 9. 8. 17.

MILITIA AND DEFENCE

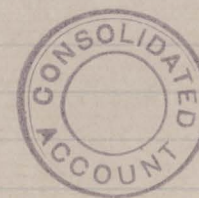
M. F. W. 11.
15m.—6-17.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Lucille May Royan Name of Soldier Royan Sinclair
 Address 18½ Montmorency St. Regtl. No. 2448492
Windsor Rank Plt.
Out- Corps 21st. Regt.
 Relation to Soldier }
 wife, child or mother } Wife
 To what Corps belonging }
 when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June	1916			
July				
Aug.				
Sept.				
Oct.				
Nov.	1916			
Dec.				
Jan.				
Feb.				
March				



MARRIED OR SINGLE

Married

PLACE OF BIRTH

Scotland

NAME OF NEXT OF KIN

Lucille May Royan

RELATIONSHIP

Wife

ADDRESS

18 1/2 Montmorency St.

Windsor, Ontario

NAME OF NEXT OF KIN

RELATIONSHIP

ADDRESS

APPOINTMENTS.
PROMOTIONS AND REVERSIONS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>20. be. L/6 pl.</i>	<i>27.2.18</i>	<i>20.49. 21/21.8</i>

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &c. NAME OF HOSPITAL

REG'L NO.

2448492

RANK

Lt. Col.

NAME

Royan,

Sinclair

PLACE OF ATTESTATION

Windsor, Ontario

DATE OF ATTESTATION

9/8/17

ORIGINAL UNIT

1st Depot Bn, V.O. Regt. of Res. Bn.

ASSIGNED PAY

PER MONTH \$ *20.00* (1) DATE EFFECTIVE *1-12-17* AUTHY. *Monthly Roll*

PAYABLE TO *Lucille May Royan.*

18 1/2 Montmorency St.

RELATIONSHIP

Wife

PER MONTH \$

DATE EFFECTIVE

AUTHY.

PAYABLE TO

PER MONTH \$ (3) DATE EFFECTIVE AUTHY.

PAYABLE TO

PER MONTH \$ (4) DATE EFFECTIVE AUTHY.

PAYABLE TO

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

PRESENT UNIT

PARTICULARS OF TRANSFERS

TO UNIT EFFECTIVE DATE AUTHORITY

STOPPED EFFECTIVE

CAUSE

DATE A3M FORMS REND

STOPPED EFFECTIVE

CAUSE

DATE A3M FORMS REND

STOPPED EFFECTIVE

CAUSE

DATE A3M FORMS REND

STOPPED EFFECTIVE

CAUSE

DATE A3M FORMS REND

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

SEPARATION ALLOWANCE

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE) STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

NEW PAYBOOK ISSUED

NEW PAYBOOK ISSUED

PERIOD		PAY AND FIELD ALLOWANCE		WORKING PAY		SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE	CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS.
FROM	TO	NO. OF DAYS	RATE	\$	C.	NO. OF DAYS	RATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	CREDIT	DEBIT	1	2	ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"

31 DEC 1917

JAN 1 18

Balance from Canada.

MONTH PARTICULARS CR.1 CR.2

Jan & Feb. 59 PP 6490

A.P. Can. Jan & Feb.

OK 1378 14/1 4/185 1947

1298 21 487

1496 72 243

Mik 2/6. 27/2/18 6490

31 L/6/P. 3565

OK 1704 26/2 4/185 243

2045 20/3 973

3575

1216

20

1723

205198

3216

2087

1910

40

Assigned Pay deducted on Pay List for month of December.

[illegible]

ASSIGNED PAY. ENGLAND or CANADA.		SEPARATION ALLOWANCE. ENGLAND or CANADA.		NAME: ROYAN <i>Sinclair</i>							
EFFECTIVE DATE: 1-1-18		EFFECTIVE DATE:		NUMBER: 2448492							
AMOUNT: 20⁰⁰		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							
<i>Lucille May Royan. (wife)</i> <i>18 1/2 Montmorency St., Windsor</i> <i>Ont Can</i>				<i>2049. 27/2/18. 27.2.18 L/H/L</i> <i>2093 19/4/18 4 Res. 19.4.18. Reverts to P6</i>							
STOPPED EFF. 1-1-19											
				UNIT AND TRANSFERS							
				ORIGINAL UNIT: <i>1st Dep Bn. W.O.R.</i>							
				DATE ACCOUNT FIRST OPENED: <i>1-1-18.</i>							
				AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S F'D UNIT TRANSFERRED TO							
				<i>36 19.4.18 22.5.18. 18 Bn.</i> <i>1-1-19 Canada Sect</i>							
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK											
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT				
11-12-18	3459	WITNEY	74.60								
		<i>4 Res.</i>									
DAILY RATES OF PAY AND ALLOWANCES											
AUTHORITY				PAY		F.A. P.F.A. SUBS'CE ALL'CE					
				1 05		10					
				1 00		10					
PARTICULARS OF RENDERING NON-EFFECTIVE: <i>TRANSFERRED TO CANADA DISPOSAL 1-1-19 N.R. 1006 WITNEY H.P.C. 2753</i>											
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
3/3/18	Balance Forward								3082		
April	1-18 @ 1 ¹⁵	2070		<i>Can pay.</i>				20-			
	19-30 @ 1 ¹⁰	1320		<i>AR 1141 12/4/18 4 Res</i>	730						
				<i>268 18/4/18 ✓</i>	243				2499		
May	P.P.	3390		<i>C.A.P.</i>	973			20			
		3410		<i>AR 838 15/5/18 C.C. Sig Co</i>	446			20			
				<i>✓ 1624 31.5.18 C.C.H.Q. Bn</i>	357				3106		
June	P.P.	3410		<i>C.A.P.</i>	803			20			
		33		<i>AR 1036 32-1-6-18 #2 CCR</i>	30			20			
				<i>AR 153 8-6-18 CCHQ Bn</i>	357						
				<i>✓ 2383 20-6-18 CCHQ Bn</i>	446				3573		
July	P.P.	3410		<i>C.A.P.</i>	833			20			
				<i>AR 1056 4.7.18 #2 CCR</i>	446						
				<i>✓ 1294 16.7.18 ✓</i>	357				4180		
Aug	P.P.	3410		<i>C.A.P.</i>	803			20			
		3410		<i>AR 1545 3.8.18</i>	357						
				<i>✓ 607 19.8.18 18th Bn</i>	357				4876		
Sept	P.P.	3410		<i>AR 9361 14-2-22 Can. AR</i>	714			20	6196		
				<i>Hop Rem 34461 15-9-18</i>	487				5689		
Oct		33		<i>✓ 39449 3-10-18</i>	487			20			
		3410		<i>AR 9392 22-10-18. Serhill</i>	973				6739		
				<i>3013 16.11.18 4 Res</i>	973			20			
Nov		3410		<i>3103 25.11.18 ✓</i>	3893						
	<i>8426 1/8 to 6 1/8. Do 281 27/11/18. 4 Res</i>	730		<i>3459 11.12 ✓</i>	8			20	2753		
Dec		3410			6326			40			
		7440		<i>22/12 K.R. (Pud)</i>	973						
July				<i>606 9/1/19. Ryle ✓</i>	487				1293		
					1460						

Checked
13/2/18

RANK

NAME _____

ROYAN

5.

[illegible]

Forms
1237
12

Army Form I. 1237.
SURGICAL.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>FC 575</i>	Regimental No. <i>2448492</i>	Rank. <i>Plt</i>	Surname. <i>Royan</i>	Christian Name. <i>S</i>
Year	Unit. <i>18th Canadian</i>	Age. <i>26</i>	Service. <i>17</i>	
Station and Date. <i>Chester War Hospital.</i> <i>2 SEP 1918</i>	Disease <i>Shw R. Injury.</i>			
	Slight. Severe Dangerous			
	Shell. Shrapnel. Rifle Bullet. Bomb. Bayonet or other.			
Religion. <i>Pres</i>	Date when wounded. <i>26/8/18.</i>			
	If in action, where? <i>Asker Front.</i>			
Next of Kin. <i>Mr. Royan.</i>	Stations and hospitals where treated. <i>33. C. C. S. 16 General. War. Hospital Chester.</i>			
	<i>259. Talbot St. London. Canada.</i>			
	A.T.S. given. <i>26/8/18. 1st. 750. until 2nd. 500 2/9/18</i>			
	<i>3rd 500 6/9/18 4th. 500 - 13/9/18</i>			
	(To be entered on Field Medical Card (A.C.I. 826 of 1917))			
	Condition on admission. <i>Shw R. Injury. 26/8/18</i>			
	<i>Exit wound in the groin. Has been treated. Both wounds clean & dry. No Pus</i>			
	<i>17. 9. 18</i>			
	<i>20. 9. 18</i>			
	<i>Small of back - all in union (atrae)</i>			
	<i>Muscle & Bone in union</i>			
	<i>Side a trace of all in union</i>			

ies will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

7-10-18

Still a trace of Albumen.

8-10-18

Transferred to Crown L. C. H.



Princess Patricia Canadian Red Cross Hospital,
Coodan Camp, Bexhill.

27 OCT 1918

1-11-18

Dis fit for Duty

No disability

Monmouth

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch 07661

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00	30	
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RATE OF ASSIGNMENT

20			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 2448492

Rank Pte Promoted

Reverted

Discharge

Soldier's Name Sinclair Royan

Battalion 21st Battr

Beneficiary Mrs. Lucile May Royan

Relationship wife

Address 18 1/2 Montmorency St. Windsor Ont.

PARTICULARS OF ASSIGNMENT

Name Mrs. Lucile May Royan

Address 18 1/2 Montmorency St.

Change of Address Windsor, Ont.

1 259 Talbot St. London Ont.

2 30 Ridout St. London Ont. 31st 18.

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec.					
Jan.	I 65738	30		30	M.F.W. 2554. O.K. Est. 22-15-18. See consolidated A.P. in stop led.
Jan.	U 67806		40	40	mailed 10/1/18. Transferred to above.
Feb.	D 72565		20	20	M.R.O. 1A rendered 10/2/18.
Feb.	U 72498	25		25	mailed 8-2-18. * remailed 16-4-18.
Feb.	U 72181	25		25	mailed 6/2/18. Two. S.A. adj. chs. mailed in error. for Feb.
Mar.	U 80664		20	20	mailed 9/3/18. * M.R.O. 2B rendered 9/2/18.
Apr.	S 8782	25	20	45	M.R.O. 1C rendered 4/3/18.
May.	V 16561	25	20	45	A.C.O. #1149 for 20 A.P. for Mar. rendered 7/3/18. J.P.S.
June.	S 27338	25	20	45	M.R.O. 1B rendered 16-4-18. J.P.S. (Chg. add.)
July.	E 21952	25	20	45	M.R.O. Sp. 17506 (new add.) rend. 30 ¹⁰ / ₁₈ 11 ¹⁰ / ₁₈ 25.
August	U 34452	25	20	45	
September	X 44217	25	20	45	
Oct.	L 48714	25	20	45	SL
Nov.	X 56524	25	20	45	SL
Dec.	H 67405	45	20	65	SL
1918					
Jan.	G 69869	30	20	50	SL
FEB	H 78819	30	20	50	
Mar.	B 85968	30	20	50	
Apr.	S 2857	30	20	50	
May	M 8568	30	20	50	
Jun.	M 10798	30	20	50	
		599	380	979	

15738-8-2

M. F. W. 123.
4000-17-1773 38-1141
L. L. 2230-M. & D. 7883.

Saxap A 30-6-19
A/c Closed
Ret'd per Royal George
Date 16/6/19 24/6/19
F.X.
Clerk Laurence
LP 99914

SHORT FORM.
PROCEEDINGS ON DISCHARGE
(Demobilization.)

SAILING NO. 82,

S S ROYAL GEORGE

JUN 7 1919

Class A No. 243373 Issued

1. No. 2448492

2 Rank. Private

3. Name. ROYAN Sinclair

4. Unit. 1st D.B. W.O.R. Reserve 4th

5 Date of Discharge

JUN 19 1919

Place

LONDON, ONT.

6 Reason for Discharge

DEMobilIZATION

Category A 111

Next of Kin Wife

Occp Group 2

7. Authority.

R. O. 1894

8. Proposed Residence after Discharge

~~London Ont~~

Casualty Yes

Decorations None

Service in France 6 Months

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.?

Signature of Soldier.

10.

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

LONDON, ONT.

Place

Date

JUN 19 1919

Signature

(O. C. Discharging Unit.)

PROCEEDINGS ON DISCHARGE
Consolidation

1. Name	
2. Rank	
3. Grade	
4. Unit	
5. Date of Discharge	
6. Reason for Discharge	
7. Remarks	
8. Signature of Dischargee	
9. Signature of Officer	
10. Signature of Chaplain	
11. Signature of Surgeon	
12. Signature of Adjutant	
13. Signature of Quartermaster	
14. Signature of Commissary	
15. Signature of Chaplain	
16. Signature of Surgeon	
17. Signature of Adjutant	
18. Signature of Quartermaster	
19. Signature of Commissary	
20. Signature of Chaplain	
21. Signature of Surgeon	
22. Signature of Adjutant	
23. Signature of Quartermaster	
24. Signature of Commissary	
25. Signature of Chaplain	
26. Signature of Surgeon	
27. Signature of Adjutant	
28. Signature of Quartermaster	
29. Signature of Commissary	
30. Signature of Chaplain	
31. Signature of Surgeon	
32. Signature of Adjutant	
33. Signature of Quartermaster	
34. Signature of Commissary	
35. Signature of Chaplain	
36. Signature of Surgeon	
37. Signature of Adjutant	
38. Signature of Quartermaster	
39. Signature of Commissary	
40. Signature of Chaplain	
41. Signature of Surgeon	
42. Signature of Adjutant	
43. Signature of Quartermaster	
44. Signature of Commissary	
45. Signature of Chaplain	
46. Signature of Surgeon	
47. Signature of Adjutant	
48. Signature of Quartermaster	
49. Signature of Commissary	
50. Signature of Chaplain	
51. Signature of Surgeon	
52. Signature of Adjutant	
53. Signature of Quartermaster	
54. Signature of Commissary	
55. Signature of Chaplain	
56. Signature of Surgeon	
57. Signature of Adjutant	
58. Signature of Quartermaster	
59. Signature of Commissary	
60. Signature of Chaplain	
61. Signature of Surgeon	
62. Signature of Adjutant	
63. Signature of Quartermaster	
64. Signature of Commissary	
65. Signature of Chaplain	
66. Signature of Surgeon	
67. Signature of Adjutant	
68. Signature of Quartermaster	
69. Signature of Commissary	
70. Signature of Chaplain	
71. Signature of Surgeon	
72. Signature of Adjutant	
73. Signature of Quartermaster	
74. Signature of Commissary	
75. Signature of Chaplain	
76. Signature of Surgeon	
77. Signature of Adjutant	
78. Signature of Quartermaster	
79. Signature of Commissary	
80. Signature of Chaplain	
81. Signature of Surgeon	
82. Signature of Adjutant	
83. Signature of Quartermaster	
84. Signature of Commissary	
85. Signature of Chaplain	
86. Signature of Surgeon	
87. Signature of Adjutant	
88. Signature of Quartermaster	
89. Signature of Commissary	
90. Signature of Chaplain	
91. Signature of Surgeon	
92. Signature of Adjutant	
93. Signature of Quartermaster	
94. Signature of Commissary	
95. Signature of Chaplain	
96. Signature of Surgeon	
97. Signature of Adjutant	
98. Signature of Quartermaster	
99. Signature of Commissary	
100. Signature of Chaplain	

LIST OF DISCHARGE DOCUMENTS

Medical Form W-23	Attending Physician's Report
Medical Form W-183	or Extension of Record
Medical Form W-173 or W-174	Field Control Sheet
Medical Form W-144 or W-145	Casualty Form
Medical Form W-44	Last Day Certificate
	Certificate that passing documents are unobtainable
Medical Form W-216 or W-217	Medical History Sheet
Medical Form W-173 or W-174	Proceedings of Medical Board
Medical Form W-183	Medical History Sheet
Medical Form W-173 or W-174	Medical Report
Medical Form W-183	Regimental Control Sheet
Medical Form W-216	Company Control Sheet

100-1001

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

Group.....
Checked by No. 4
Date 6/1/9

9

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Dec. 1-17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20.			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 2448492
Rank Pte Promoted Reverted Discharge
Soldier's Name Sinclair Royan
Battalion 1st Wep. Batta W.O.R.
Beneficiary
Relationship
Address

PARTICULARS OF ASSIGNMENT (Wife)

Name Mrs Lucile May Royan
Address 18 1/2 Montmorency St.
Change of Address Windsor Ont.
1
2
3
4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					
Jan	U 67806		40	40	R Mailed 10/1/18. Transferred to current led.
Feb.	D 72565		20	20	
			20	20	
			20	20	

Cancel

1294-R20

68

M. OR S. *Gu*

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

REGT. No. 2448492. RANK Pte

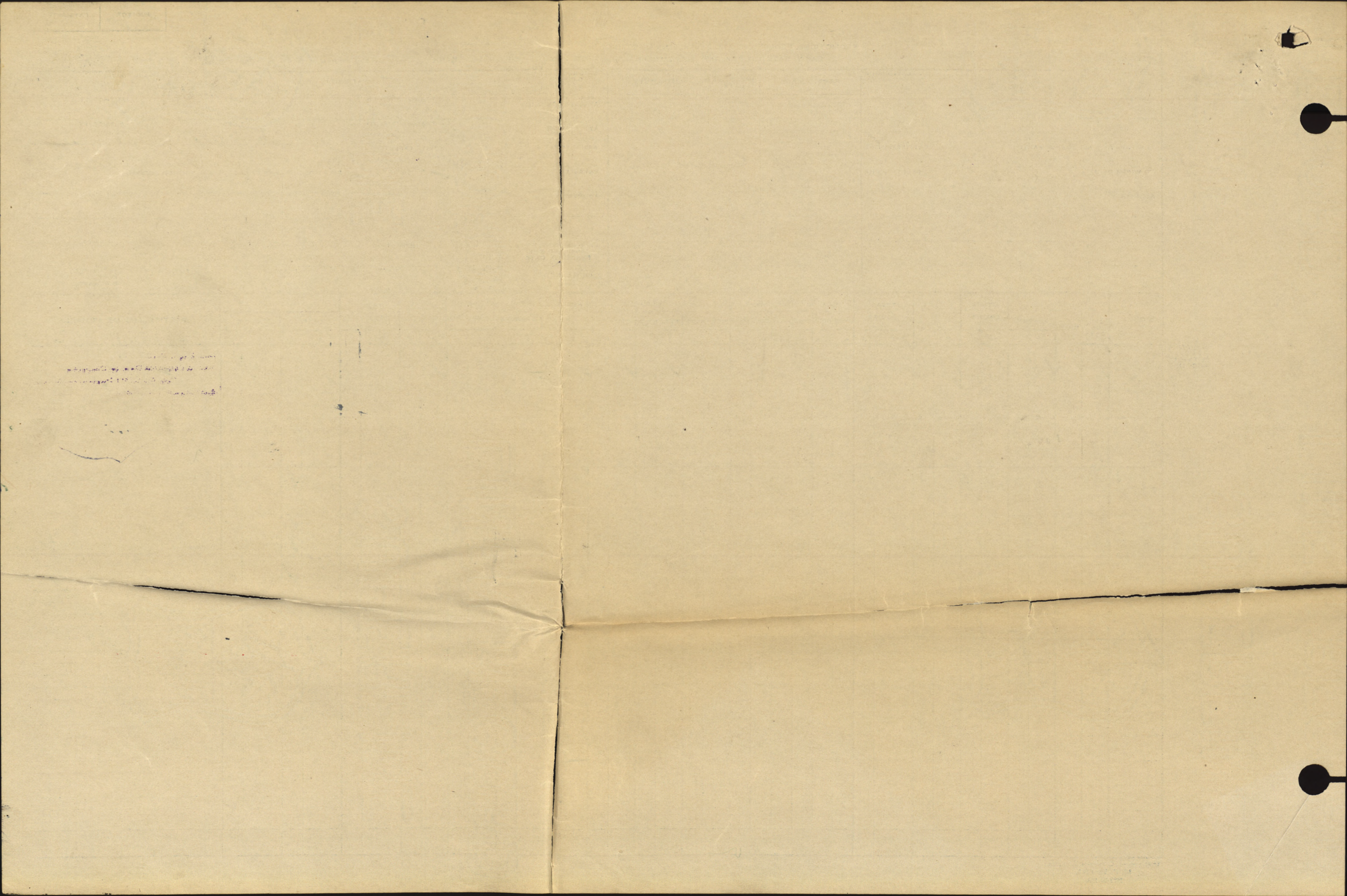
NAME (IN FULL) *ROVA*

Sen Clair

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY
Mrs. Lucile May Royan ADDRESS 30 Ridout St. London, Ont.	wife			
IS SEPARATION ALLOWANCE PAID? 30.6.19 Paid and Closed by Ottawa	DATE EFFECTIVE 30.6.19	1014 Lapeer St.		
TO WHOM PAID Mrs. Lucile May Royan ADDRESS 30 Ridout St. London, Ont.	RELATIONSHIP wife	Flint, Mich.		
		Mrs. Lucille Royan 34 Beech St. Battle Creek		
		Mich U.S.A.		

ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
1st Depdt. Bn. W.O.R.		600 Battle Creek Mich
PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
DATE OF ATTESTATION	7.0.8.22 #1	7.6.19 ✓ 2.0.191
ASSIGNED PAY \$ 20.00	8-8-17	DATE EFFECTIVE 1014 Lapeer St.
PAYABLE TO Mrs. Lucile May Royan ADDRESS 30 Ridout St. London, Ont.	RELATIONSHIP wife	ANY CHANGE IN ASSIGNEE OR ADDRESS Flint Mich 19
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
DISCHARGED PLACE London	DATE 10.6.19	REASON Genl
		AUTHORITY 2.0.191
		IF ENTITLED TO POST DISCHARGE PAY

[illegible]



ROYAN

РТЕ

2448492

18 BN

CANADA

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918.						
28. 8.	16 BH Le Treport	B SW R-ship		#305	#291.	370214
1-9	Mar. H. Chester	do.		B308.		25590
18 10	1 PCKCH Bahell	.		B330.		29626
9 11.	Discharged	do		B362.		9103
11/18	Will report it he Wiley.	No SF parked			R 1-11-18.	

[illegible]

Royan.

SURNAME

CHRISTIAN NAME OR NAMES

D.M.S. 1300-50M-21-11-17.

REG. NO.

~~Royan~~

S

2448492



RANK

UNIT

Co.

TROOP

BATTY

Pte

W.O. 18.

HOSPITAL

DATE OF ADMISSION

16 G.P. Report

28.8.18

1. ~~Crofton War~~ Chester.

HOSP. 2.9-18

R. D. Bickill

18.10.18

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

gfw Rt thigh H-6.

1.

2.

3.

DISPOSITION

Disch - 7.11.18

DATE

REMARKS

Adm. 3.9.18 a 305 ✓

11-9-18 B 308/2

30.10.18 B 355/2

13.11.18 B 362.

A.M.D. 2 DEPT.

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

REG-10
EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

NAME

HOSPITAL

15

U.S. 205 710

CHITAM