

ATTESTATION PAPER.

No. 529283

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? Sutherland
1a. What are your Christian names? Robert Richardson
1b. What is your present address? 650 Princess Ave. London, Ont. Can.
2. In what Town, Township or Parish, and in what Country were you born? Dorchester Station, Middlesex, Ont. Can.
3. What is the name of your next-of-kin? Susie Sutherland
4. What is the address of your next-of-kin? 165 Mc. Pherson Ave. Toronto, Ont. Can.
4a. What is the relationship of your next-of-kin? Sister
5. What is the date of your birth? 19th. April 1896
6. What is your Trade or Calling? Druggist Apprentice
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? No
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, Robert Richardson Sutherland, 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.

B. R. Sutherland (Signature of Recruit)

Date JUN 4 1917 1917 W. M. Campbell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Richardson Sutherland, 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.

B. R. Sutherland (Signature of Recruit)

Date JUN 4 1917 1917 W. M. Campbell (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 London, Ont. Can. this 4th day of June 1917

W. M. Campbell (Signature of Justice)

Description of R.R. Sutherland on Enlistment.

Apparent Age 21 years 1 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. 9 ins.

Chest measurement { Girth when fully expanded..... 35½ ins.
 Range of expansion..... 32 ins.

Complexion Clear

Eyes Blue

Hair Dk. Brown

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

R. Eye D. 20/20 L. Eye D. 30/20

Hearing Normal Both Ears

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 26th May 1917 191 .

H. H. Kingmill

Place London, Ont. Can.

Major C. A. M. C.
 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.

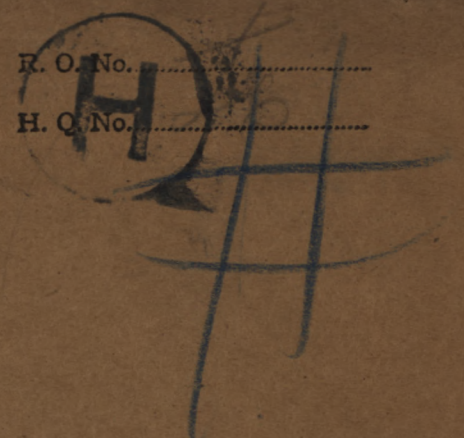
Robert Richardson Sutherland having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Robert C. Lewis Major
 Comdg A.M.C. Training Depot, No. 1, C.E.F. (Signature of Officer)

Date June 4, 1917.

DISCHARGE DOCUMENTS

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



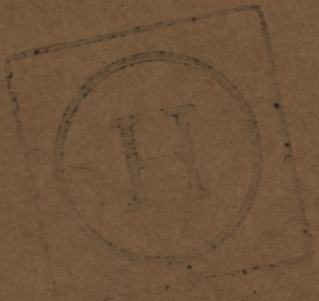
- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *5214*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... *1*
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge..... *1*
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *2*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... *1*
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate..... *1*

Name *Sutherland, Robert Richardson,*
 Regt. No. *529283* Rank *Pvt*
 Corps *A.M.C.T.H. #1*

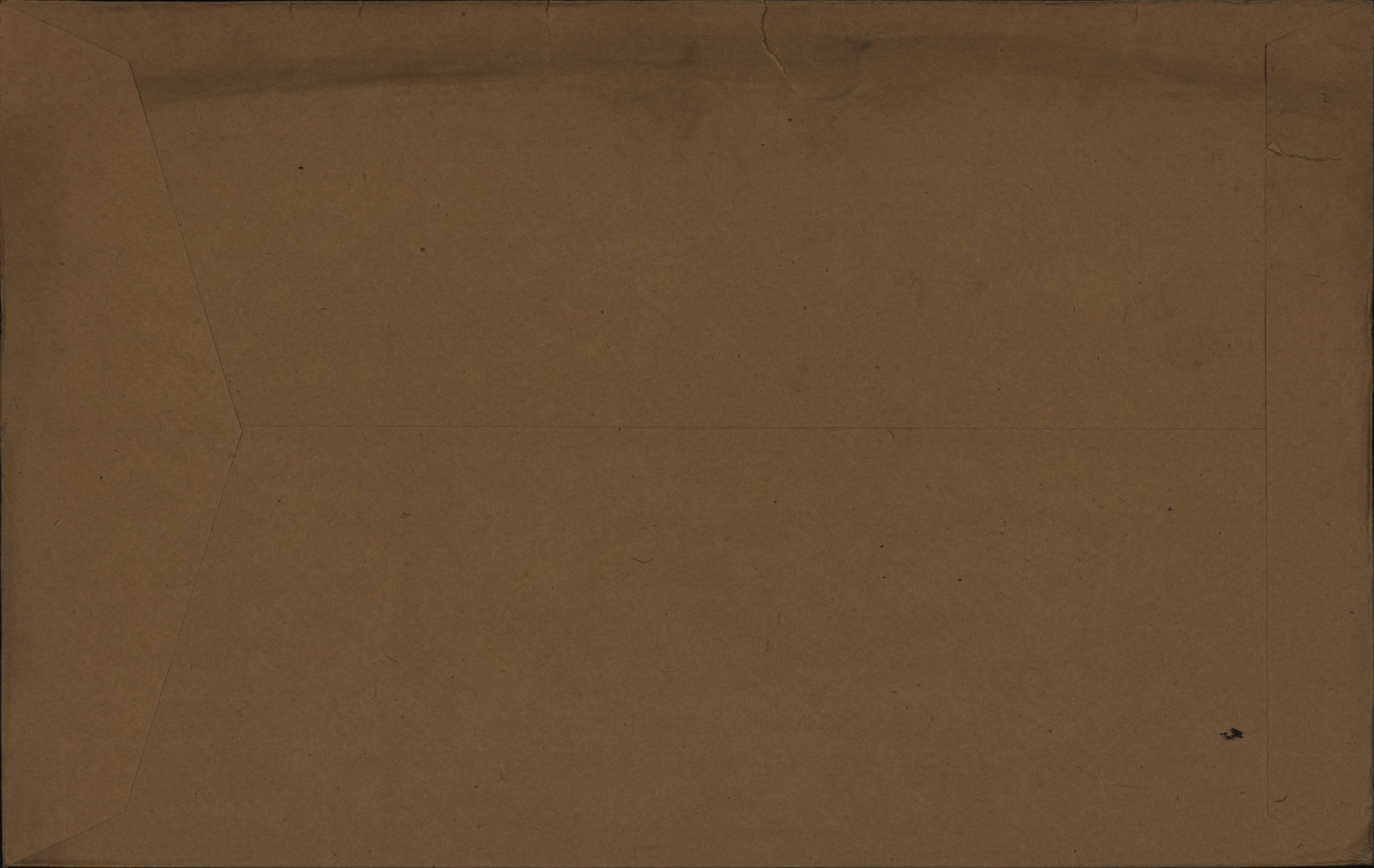
Medically unfit.



50020



Handwritten red scribbles and initials.



SURNAME.

Sutherland

CARD NO. X

CHRISTIAN NAMES

Robert - Richardson

Los. Dio 31-8-17.

FOLL.

REGL. No.

529283

RANK

Pte.

UNIT

C. A. M. C. (I.D. No. 1)

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Sutherland, Susie

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

*165 McPherson Ave,
Toronto, Ont.*

COUNTRY OF BIRTH

Canada, Dorchester Station, Ont.

DATE

April 19th 1896.

PLACE OF ATTESTATION

London, Ont.

DATE

June 4th 1917.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE

Present Address.

650 Princess Ave.,
London, Ont.

Yes

Presbyterian

Druggist
Apprentice

DESCRIPTION.

21

1

5

9

32

3 1/2

Clear

Blue

Dark Brown

Not Stated

London, Ont.

May 26th 1917

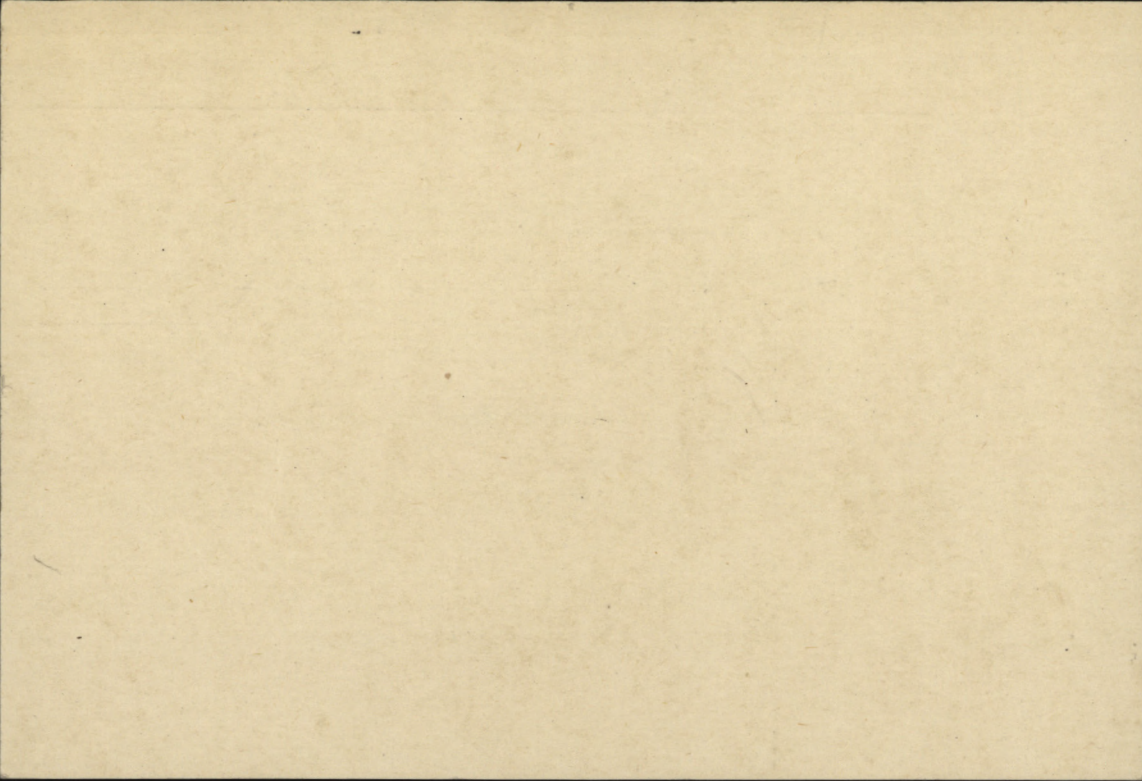
No. 329283 RANK *Pte.*

NAME *Sutherland, R.* R.

T. O. S. 4-6-17 D.O. 130 UNIT No 1 Training Depot. - A. M. C.
of 7-6-17

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917 June 6</i>	<i>1917 June 30</i> <i>fully payd.</i>	<i>2 2 2</i>	<i>Dischgd. 31-8-17.</i>	<i>D.O. 208 of 31-8-17</i>
			<i>a/c closed by payment.</i>	



MEDICAL HISTORY SHEET

Surname SUTHERLAND Christian Name Robert Richardson

Examined { on 26th day of May 1917. Approved by H. A. Kingmill
 at London, Ont., Can.

Birthplace { City or Town Orchestrton Station Rank Major's Cam M.O.
 County Middlesex, Ont., Can.

Apparent age 21/1 Date 28/8/17 Fit or Unfit E EXAMINED FOR RE-ENGAGEMENT J. J. M. Garry Capt. M.O.

Trade or occupation Circuit Apprent.

Height 5 feet 9 Inches M.O.

Weight 135 lbs. M.O.

Chest measurement { Minimum 32 inches M.O.
 Maximum expansion 35 1/2 inches M.O.

Physical development Good M.O.

Small-pox Marks nil M.O.

Vaccination Marks { Arm Right Left 2
 Number 2 Date Result VACCINATIONS

When Vaccinated last 1902 21/6/17 + J. P. Lionel Capt. M.O.

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

(b) Slight defects but not sufficient to cause rejection Date Result ANTI-TYPHOID INOCULATIONS, ETC.

23/4/17 J. P. Lionel Capt. M.O.

30/6/17 J. P. Lionel Capt. M.O.

7/7/17 J. P. Lionel Capt. M.O.

RIGHT EYE D 20 LEFT EYE D 30
 HEARING H normal | normal

Enlisted on 4 day of June 1917 at London, Ont., Can.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>A. M. G. T. D. No. 1. G. E. F.</u>	<u>529283</u>		<u>4-6-17</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>London, Ont.</u>	<u>MAY 26 1917</u>	<u>On Attestation</u>	<u>considered fit</u>
<u>London, Ont.</u>	<u>28 8/17</u>	<u>Epilepsy.</u>	<u>Category "E".</u>
Examined by S.M. Board.	<u>J. J. M. Garry Capt. M.O.</u>		<u>Pres.</u>

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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

EAST PAY CERTIFICATE

The sum to be paid to the holder of this certificate is as follows: The amount of the award is \$100.00.

Issued at Ottawa, Ontario, Canada, this 1st day of January, 1917.

By the Commandant-in-Chief, Canadian Expeditionary Force.

Signature of the holder of the certificate.

Signature of the Commandant-in-Chief.

The following is a statement of the account of the holder of this certificate:

1. The amount of the award is \$100.00.

2. The amount of the award is \$100.00.

3. The amount of the award is \$100.00.

4. The amount of the award is \$100.00.

5. The amount of the award is \$100.00.

6. The amount of the award is \$100.00.

7. The amount of the award is \$100.00.

8. The amount of the award is \$100.00.

9. The amount of the award is \$100.00.

10. The amount of the award is \$100.00.

11. The amount of the award is \$100.00.

12. The amount of the award is \$100.00.

13. The amount of the award is \$100.00.

14. The amount of the award is \$100.00.

15. The amount of the award is \$100.00.

16. The amount of the award is \$100.00.

17. The amount of the award is \$100.00.

18. The amount of the award is \$100.00.

19. The amount of the award is \$100.00.

20. The amount of the award is \$100.00.

21. The amount of the award is \$100.00.

22. The amount of the award is \$100.00.

23. The amount of the award is \$100.00.

24. The amount of the award is \$100.00.

25. The amount of the award is \$100.00.

26. The amount of the award is \$100.00.

27. The amount of the award is \$100.00.

28. The amount of the award is \$100.00.

29. The amount of the award is \$100.00.

30. The amount of the award is \$100.00.

31. The amount of the award is \$100.00.

32. The amount of the award is \$100.00.

33. The amount of the award is \$100.00.

34. The amount of the award is \$100.00.

35. The amount of the award is \$100.00.

36. The amount of the award is \$100.00.

37. The amount of the award is \$100.00.

38. The amount of the award is \$100.00.

PARTICULARS OF DISCHARGE.

1. Name

Sutherland Robert Richardson

2. Regimental Number

529283

3. Rank

Pte.

4. Corps

A.M.C. I.D., C.R.F.

5. Date of Discharge

31-8-17.

6. Place of Discharge

London Ont.

7. Place to which transport given. (Give street address where possible.)

165 Mc Pherson Ave, Toronto Ont.

Enlisted at London Ont 4-1-17

8. Description at time of Discharge:—

Age 21 years 4 months. Descriptive marks

Height 5 feet 9 inches.

none.

Complexion Clear

Eyes

Blue

Hair

Dark Brown

Trade

Druggist

9. The above named man is discharged in consequence of

Being med. unfit

Epilepsy.

(I.D. 30 S. 386 dated 31-8-17)

C.R.F. Para 322 Sec 1.

(If medically unfit, state nature of disease or disability.)

10. To what extent will it prevent his earning a full livelihood?

not stated

11. Character

not stated

Date

28-9-17

i/c Records.

PARTICULARS OF DISCHARGE

1. Name
2. Regimental Number
3. Rank
4. Date of Discharge
5. Place to which discharged (if overseas address, when possible)

6. Description of kind of discharge
7. Remarks

8. The above named soldier discharged in consequence of

(If medical, state nature of disease or disability)
9. To what extent will he be entitled to gratuity or full pay?

10. Signature

Date

11. Remarks

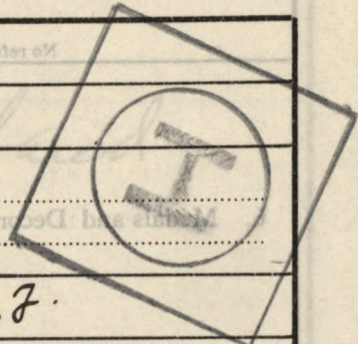
Military District No. 1
 SEP 6 1917
 I. 30-5-386

This space to be for numbers

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).

No.	529283	
Rank	Private	
Surname	Sutherland	
Christian Name	Rt. Richardson	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.		
Corps (Squadron, Battery or Company)	amc, 20, 701, 6.8.7.	
Date of Discharge	31-8-17	
Place of Discharge	London Ont.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age	21 years 4 months	Descriptive Marks None
Height	5 feet 9 inches	
Complexion	Clear	
Eyes	Blue	
Hair	Dark Brown.	
Trade	Druggist.	
Intended place of residence (To be given as fully as practicable.)	165 McPherson Ave Toronto, Ont.	
2. The above-named man is discharged in consequence of <i>medically unfit (epilepsy)</i> <i>CK. R. & O. Para 322 - Sec. 1.</i> <i>(I.D. 30-8-386, d/31-8-17)</i>		
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.		
3. Conduct and character while in the service have been, according to the records, etc.		
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.		
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		



To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.
 100M.-1-17.
 H. Q. 1772-39-113.

(OVER)

Rec'd
28-8-17

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) London Ont

(Signature) [Handwritten Signature]

(Date) 31-8-17

Com'dg A. M. C. Training Depot, No. 1, O. C. F. Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) London Ont P. R. Sutherland (Signature of Soldier.)

(Date) 31-8-17 Geo. Christat (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) London Ont

(Signature) [Handwritten Signature] Com'dg A. M. C. Training Depot, No. 1, O. C. F.

(Date) 31-8-17

Reservations referred to as Part 8. (To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier)

10. Statement of Service.

Service toward Engagement to ... (the date to which the Record of Service is completed) ... years ... days

Total ... years ... days

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Signature)

MEDICAL HISTORY OF AN INVALID.

1. Station. London, Ont. 8. General remarks on his:—
2. Regiment or Corps. A.M.C. (a) Conduct.
3. Regimental No. and Rank. 529283. (b) Habits. 649-8-16762
- Pte.
4. Name. Sutherland R.R. (c) Temperance.
5. Age last Birthday. 21. (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
6. Enlisted on 4/6/17.
- at London, Ont.
7. Former trade or occupation. Druggist. Date. 28/8/17.

DEPT.
MILITIA & DEFENCE
SEP 27 1917
CANADA

9. Service. Years. Days.

PERIODS

	FROM	To
A.M.C.	4/6/17.	28/8/17.

10. (a) Disease or disability. Epilepsy.
- (b) Date of origin. 1914.
- (c) Place of origin. London, Ont.
- (d) Cause. Unknown.

11. Present condition. (Most Important.) **This soldier has been under observation for Epilepsy but has not had any attacks during this time, a certificate from a reputable medical man his family physician stating he has had him under treatment for this trouble for some time is attached, otherwise fit. Heart, lungs and other organs normal.**

12. (a) Is the disability the result of service or climate? No.
- (b) Has it been aggravated by intemperance, vice or misconduct? No.

MEDICAL HISTORY OF AN INVALID

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

None.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

Not applicable.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

14. Treatment.

L.H.H. London, Ont.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not at all.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

Permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

1/12 (one twelfth)

18. State if for discharge on account of unfitness for Service.

Yes.

A. E. Mc Larty Capt. R.M.C.
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

Yes.

10.

11.

12.

15.

16.

17.

18. Is he unfit for Military Service.

Yes.

Category "B".

Recommendations :

For discharge as unfit for Military Service and hospital or Sanitarium treatment is not likely to improve the dischargee's condition.

Signatures :—

E. J. M. Gally Capt. M.C.
President.

W. Galloway Capt. M.C.

Station. London, Ont.

Date. 28/3/17.

A. E. M. Larty Capt. M.C.
Members.

Date.

30/3/17

Approved.

Date.

28. 7. 17

J. J. McKay Capt.
Assr. Director of Medical Services.

R. W. Tomes Capt.
Director-General of Medical Services.

I 288

27-9-17 NOT CHARGED N.S. SEP 27 1917

OPINION OF THE MEDICAL BOARD

R. C.

SEP 28 1917

SEP 28 1917

181
11/17

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Stat on or Depot.

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Date of final Medical Board or decision. } Administrative Medical Officer.

Militia Form B. 227.
200m, 8 & 6.
H. Q. 1772-89-117.

DETAILED MEDICAL HISTORY OF INVALID.

Station	Corps	Regimental No.	Rank	Name	Disability	Date	Hospital or Station transferred to for final disposal.	Date of final disposal	How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.