NAME AHERN ROBERT REGIMENTAL DOCUMENTS REGT. NO. 1081551 UNIT 1 Cmwth Bn H. Q. FILE NO. 2705

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	Payslips					

Please send to [illegible]

W 2589
100M-11-18
1772-39-1877

ORIGINAL

JUN 1 4 1916

NO. 1 CONSTRUCTION BATTN C.E.

ATTESTATION PAPER.

No. 1081551

No. 1 CONSTRUCTION BATT.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... Ahern
1a. What are your Christian names? ... Robert
1b. What is your present address? ... 185 Woodland Ave. Verdun, P.Q.
2. In what Town, Township or Parish, and in what Country were you born? ... Montreal, P.Q.
3. What is the name of your next-of kin? ... Emma A Ahern
4. What is the address of your next-of-kin? ... 185 Woodland #Ave. Verdun, P.Q.
4a. What is the relationship of your next-of-kin? ... Wife
5. What is the date of your birth? ... August 1st. 1874
6. What is your Trade or Calling? ... Electrician
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? ... 5th Royal Artillery
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Ahern, 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.

Robert Ahern (Signature of Recruit)

Date June 14th 1916. B L Howard (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Ahern, 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.

Robert Ahern (Signature of Recruit)

Date June 14 1916. H R McQueen (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 Montreal, P.Q. this 14th day of June 1916.

P. Ripley - Lt. Col. (Signature of Justice)

O.C. 70-1. Construction Battalion.

M. F. W. 23
750M—3-16
H. Q. 1772-89-841

Description of Robert Ahern on Enlistment.

Apparent Age 42 years ..... 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 3 3/4 ins.
Chest measurement — Girth when fully expanded	33 1/2 ins.
Chest measurement — Range of expansion	3 ins.
Complexion	Fair
Eyes	Blue
Hair	Grey
Religious denominations — Church of England	Yes
Presbyterian	
Methodist	
Baptist or Congregationalist	
Roman Catholic	
Jewish	
Other denominations (Denomination to be stated.)	

Mole on left cheek

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 June 14 1916 .....

Place Montreal, P.Q. .....

.....
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 Ahern .....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 June 14th, 1916

LT.-COLONEL
O.C. No. 1 CONSTRUCTION BATTALION C.E.F.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1081551 (Rank) Private

Name (in full) AHERN, Robert.

enlisted in the No.1 Construction Battalion.

CANADIAN EXPEDITIONARY FORCE at MONTREAL, Quebec on the 14th. day of June 19 16.

HE served in FRANCE.

and is now discharged from the service by reason of DEMOBILIZATION.

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

Age 44 years 7 months.	Marks or Scars NONE.
Height 5 feet 5½ inches.	
Complexion Fair	
Eyes Blue	
Hair Gray.	

R. A. Ahern
Signature of Soldier

Lieutenant,
Officer i/c Discharges Section, District Depot No. 4.
Issuing Officer

March 15th.,1919.
Date of Discharge

Rank

MONTREAL, Quebec 15th. March 19
Appointment

Signed at 4. this day of 19

in Military District No. 4.

File Reference No. 394-19-A-234.

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization tha particulars called for on the back of this tificate will not be co pleted.

To be made out in duplicate. H.Q. 54-21-23-53

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 ..... No. 1 CONSTRUCTION BATT.

(2) Regimental Number 108155

(3) Full Name of Soldier ..... Ahern, Robert

(4) Place of Birth ..... Montreal P.Q.

(5) Are you married, or not? ..... Yes

(6) If married, state,
(a) Full name of your wife ..... Emma A. Ahern

(b) Present Postal Address ..... 185 Woodland Ave
Verdun, P.Q.

(7) Are you a widower? .....

(8) Have you any children? ..... 3 B 4 T.R.L

If so, give number of boys and girls ..... 2 Boys 2 Girl T.R.L

Also their names and ages ..... Beatrice 23
Robert 20
Campbell 17
Emma 15

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes.

If so, state name and address Robert Acheson Verdun Que

(10) Is your Mother alive ? No

If so, state name and address —

(11) If your Mother is a widow —

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 ? Yes.

If so, in what Company ? Oddfellows

Have you made arrangements for payment of your Insurance premium Yes.

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

A Patterson
Officer Commanding.

Date 4/9/16

CAPT. & ADJUTANT
FOR O. C. No. 1 CONSTRUCTION BATT'N.

(AB)

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44
154 (D.P.) 150M-2-19.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 1081551 Rank Pte. Name Ahern Robert (Surname first)

Unit 1st Con. Bn. who was* Discharged.

On 15-3-19 191....., to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 15-3-19 191...
the inclusive date of transfer or discharge.

Dr. LPC.	Dr. $	Dr. c	Cr. $	Cr. c
Bal. Dr. or Cr. from prev. month 1.00			43	00
Regimental Pay 43 days at $ 10 c			4	30
Field Allowance ..... days at $ c			15	00
Separation Allowance			35	00
Clothing Allowance			100	00
Post Discharge Pay Subs DO 62-1			12	80
*Other Credits				
Advances 24653	25	00		
Separation Allowance and Assigned Pay Cheque No. 24653	30	00		
*Other Charges				
24652	96	00		
Balance on transfer or on discharge, cheque No.	210	10	210	10
Total				

*Give particulars.

A monthly stoppage of $ 20.00 to dis 15-3-19 (†) has (‡) been paid on account of Mrs. Emma Ahern

Assigned Pay for the month of Do 191.....
and Separation Allce. for month of 191.....

(to) Assignee 185 Woodland Ave. Verdun, Mtl.

(Address) .....

(†) Insert amount to be assigned, whether it has been paid or not.

(‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $.....has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment 14-6-16 married or single.....

(2) Separation Allowance, entitled or not Yes (3) Reason for discharge.....

(4) Authority for discharge or transfer D.D.4 19-A-234

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer, or soldier.

Date .....

Place .....

CAPTAIN PAYMASTER
O.C.—Demobilization Pay Decision Military Dist. 4

Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.

(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.

(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.

(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

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. 108155 Rank Spr Surname Cherm

(Given name in full) R

Unit or Corps D D 4 Birthplace Montreal

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

1. GENERAL DESCRIPTION:

Physique Good Weight 131 lbs. Height 5 ft. 4 1/2 in. Colour of Eyes Blue

Nutrition Good

Pulse 72

Condition of arteries Normal

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 25 ft.

Left 25 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

Nil

Opinion as to general health and physical condition Good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition 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.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

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 Medical Board.)

THIS SECTION FOR ~~USE~~ IN CANADA—

Examined at Montreal (Canada)

Date 13/3/15 Signed A. E. Vining 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 A. E. Vining

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

A.E.V.

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER A Hyman R.

REGIMENT C.R.C. RANK

DISTRICT

No. 108157

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
													U	L	P			Gold	Porcelain				
Condition on first Examination	1919																				Thompson		for discharge

M.F.B. 465.
200m.—6-18.
1772-39-950.

D.M.S. 1375.

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 Spr. Name Robert Surname AHERN

Unit or Corps 12th Bn, C.E.F. (If a soldier) Regtl. No. 1081551

Born at Montreal, P.Q. on, date 1st Aug. 1872.

Signature (for identification) R. Ahern

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. none

Weight 135 lbs.

Height 5 ft. 3 3/4 ins.

2. NUTRITION AND DIATHESIS? good

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? no

4. RESPIRATORY SYSTEM. no

5. HEART?

Abnormal Sounds? no

Abnormal Size? no.

Pulse Rate? 76 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? no.

7. DIGESTIVE SYSTEM? no

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1017 Reaction? acid Albumen? none Sugar? none

9. SKIN, MIDDLE EAR, EYE or any other part? no

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? fit

Examined at Ripon

Date 29/1/19

Signed [illegible] M.O.

Signed W H Wollen Capt 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.*

No. 1 CONSTRUCTION BATTN C.E.F.

ORIGINAL

MEDICAL HISTORY SHEET

Surname Ahern *Christian Name* Robert

Examined { on 14 day of June 1916
at Montreal, P.Q.

Birthplace { City or Town Montreal, P.Q.
County Canada

Apparent age 41

Trade or occupation Electrician

Height 5 feet 3 3/4 Inches

Weight 112 lbs.

Chest measurement { Minimum 30 1/2 inches
Maximum expansion 33 1/2 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left
Number 1

When Vaccinated last 15 years ago

(*a*) Marks indicating congential peculiarities or previous disease

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

Approved by [signature]

Rank Capt M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
18/6		Chas Ahern M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
29/7/16		[signature] M.O.
5/8/16		[signature] M.O.
11/8/16		[signature] M.O.

Enlisted on 14 *day of* June 1916 *at* Montreal, P.Q.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment No.	1 CONSTRUCTION BATT.	#108155		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Montreal	13/3/19	—	Bill for discharge — A.E. Ahern

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

A

Surname Alum Christian Name Robert

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of 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
		Day	Month	Year	Day	Month	Year				

15

POST DISCHARGE PAY OFFICE
MAR 19 1919
Military District No. 4
MONTREAL

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

AHERN

1. Christian names ... Ahern ... 2. Surname ... Robert ...
3. Rank ... Pte ... 4. Original Unit ... 1st C.R.T. ... 5. Reg. No 1081537 ...
6. Address, in full, to which future payments of gratuity are to be forwarded ... C/o 185 Woodland Ave Verdun Montreal ...
7. Date of enlistment in the C.E.F. ... June 14 ... 1916 ...
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge ... Mrs R. Ahern ...
9. Relationship of such dependent ... Wife ...
10. Address, in full, of such dependent ... Mrs R. Ahern ... 185 Woodland Ave Verdun Montreal ...
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? ... Not Applicable
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:— ... Not Applicable ...

15

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? ... Not Applicable ...
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service ... Not Applicable ...
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served ... 1st C.R.T. ... June 14 1916 To March 15 1919 ...
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department ... Not Applicable ...
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? ... Not Applicable

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

16

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... Not Applicable .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid Not Applicable

20. Have you been issued with a War Service Badge? If so, what class? ... Yes Class C

21. Have you, during the present war, served in the Imperial Forces? ... Not Applicable

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... Not Applicable

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ..... Not Applicable

(b) If so, was such reversion in consequence of misconduct or inefficiency? .....

24. Are you now serving in the C.E.F.? Not Applicable If not, give:—(a) Date of discharge March 15 1919 (b) Reason for discharge Demobilization Hqs

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit 1st C.G.R.S.

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit 1st C.G.R.S. 27 Oct 1914 Jan 17 1919

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ...

(b) If so, are you in receipt of full pay and allowances from that Department? ... Not Applicable

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: R. Ahern

Place of Residence: 186 Woodland Ave Verdun Montreal

Declared before me at: Montreal

This 17th day of March 19 19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

Geo P Black

Commissioner of the Superior Court for the District of Montreal.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

C.A.D.C. 5009A

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

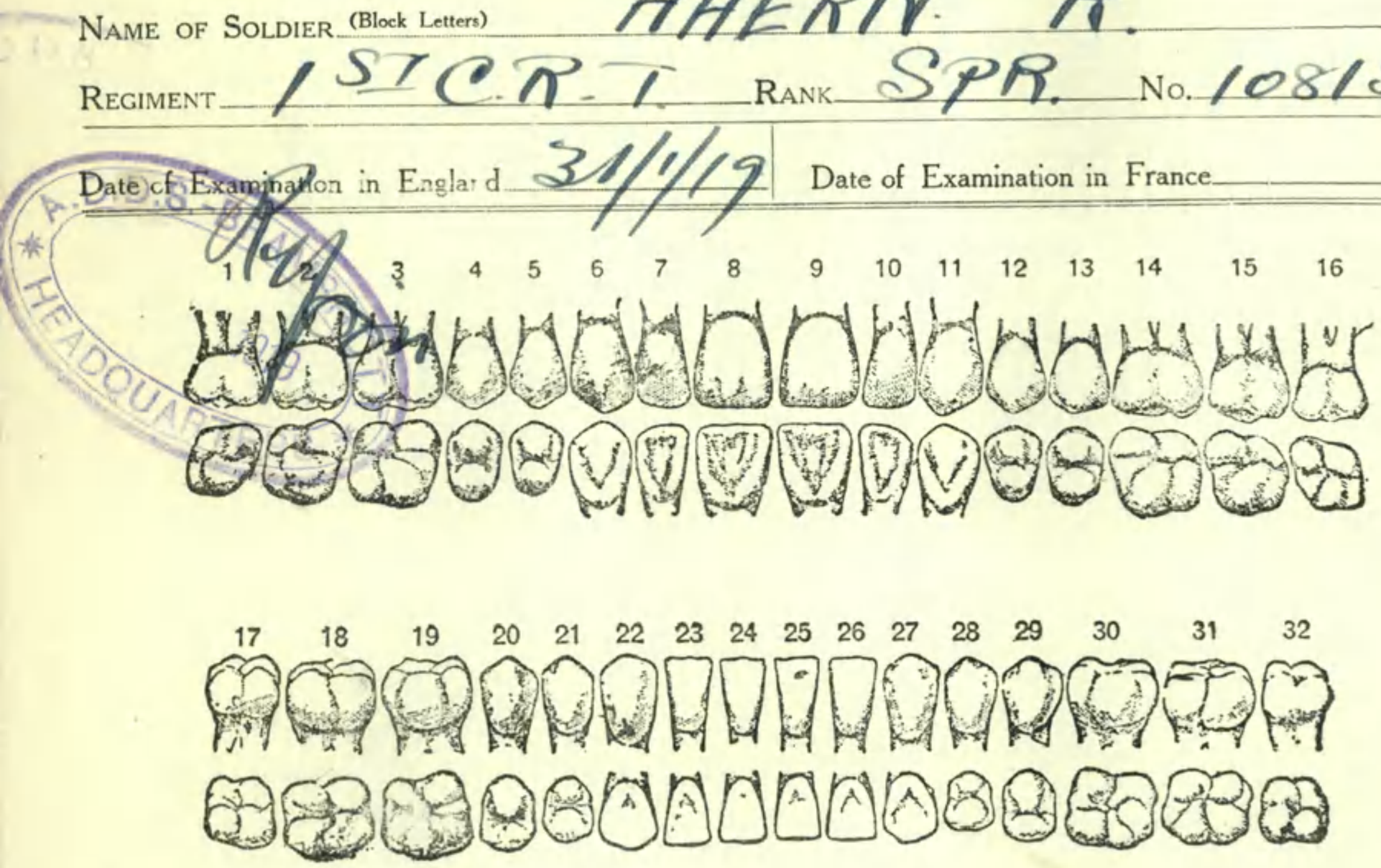
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) AHERN R.

REGIMENT 1ST C.R.T. RANK SPR. No. 1081551

Date of Examination in England 31/1/19 | Date of Examination in France



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

A.D.D.S.-BRANCH 31/1/1919 HEADQUARTERS

HAS HE EVER REFUSED DENTAL TREATMENT ? No.

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 Nil
- (*c*) In France

Signature of Dental Officer R. Ross. Capt.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9?0.

Casualty Form—Active Service.

Unit, Regiment or Corps. .....

Regimental No. 1021551 Rank Pte. Name Ahern Robert.
C. E. F.

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

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				
17/3/19	S.O.S.	Demob.	D.D. #4	19/3/19	D.O.76

K. W. Lee
Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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				

Nfld

...in only.—Unit, Number, Rank and ...ame.

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps No. 1 CONSTRUCTION BATT. C. E. F.

Regimental No. 1081551 Rank Private Name Ahern, Robert

Enlisted (*a*) 14/6/16 Terms of Service (*a*) D of W Service reckons from (*a*) 14/6/16

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*) Electrician

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked Canada	Halifax, N.S.	13/9/16	
		Dis Embarked, England	Liverpool	23/9/16	
25-10-16	1 Con Batt.	Proceeded overseas		25/10/16	Thos. B. Landon Major. Pt II D.O. 170 for O.C. #1 Construction
		Landed in France	Havre	26.10.16	L.R. 6777 Pt II D.O. 181-2/12/16
		Designation of Unit changed to 1st Bn. Canadian Railway Troops. Pt 11 D.O. No. 22 d/- 10/2/17.			
19.9.17	O.C. Unit	Sentenced to forfeit 4 days Pay 15/9/17, for "When on Active Service" Drunk in quarters, 14/9/17.	Field	14.9.17	B2069 Pt II D.O. 91-2.10.17

CERTIFIED CORRECT. 14 NOV. 1916 CAN. RECORDS, LONDON.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Ahearn R.

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				
24-11-17	1st CRT	Granted 14 days leave in	U.K	19.11.17	B213 Pte II Do. 106 of 4.12.17
8-12-17	~	Rejd Unit	Field	5-12-17	B213 Pte II D.O. 110-1917
16-2-18	1st C.R.T.	off Halwic To Crombeke F.A. 10/2/18	Rejd Unit	12-2-18	B213
28-6-18	43 C.C.S.	PUO Adm	43 C.C.S.	28-6-18	A36/19558
3-7-18	~	~ To	duty	3-7-18	A36/19348
6-7-18	1 CRT.	To 43 CCS 28-6-18 Rejd	Unit	3-7-18	B213
13-1-19	6.F.B.D.	Transferred to England for purposes of demobilization and posted to 6 R.F. Depot, Worthy			P.R.O. No. 4 9/19/19.
27-1-19	ARD (CRT)	T.O.S and posted to Depot Group	Repot	14.1.19	A. Chaffells. Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
		S.O.S to M.D. No 4		19-1-19	0019

31 FEB 1919

To C.C.C. Kinmel Park for return to Canada

Part II Order No.

12/2/19 405

C.C.C. Kinmel Park o

Embarking for Canada Part II Order No

PRESS OF BRITAIN

SAILED FEB 17 1919 ARRIVED FEB 25 1919

R. E. Ajello Lieut.

LT. O.I/c RECORDS

ALBERTA REGIMENTAL DEPOT

Officer i/c Records

No. 4 Canad. Concentration Wing.

R—122

G.C. Rank Pte. Name AHERN Robert. Reg'l No. 1081551.

Unit No.1. Constr. Bn. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Montreal. 14th. June. 1916. Place of Birth Montreal. P.Q.

Name and Address, Next-of-Kin Emma A. Ahern.

185 Woodland Ave. Verdun P.Q. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 18342
File R.L.
Category Can OR

A.F.B. 103 CHECKED 31 OCT. 1916

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	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.
		ARRIVED IN ENGLAND S.S. NORTHLAND 23-9-16.			
25.10.16	1. Con Batt	Proceeded Overseas	Witley	25.10.16	Pt.II 170
9, 2, 17.		Now known as 1st. Battn. Can. Railway Troops.			Pt.II. O. 22.
20-1-19	1st Rn CRD	Posted to CRD Witley	Field	Spr 14-1-19	Pt II po 4
27-1-19	a.R.D.	Y.O.S. from 1st C.R.T.	Ripon	" 19-1-19	" 19
3-2-19	a R D	Leave Att to 15th Res Batt & SOS to MD 16 4 Khyl.	Ripon	" 3-2-19	— 1 — 25 MD 4 Pt II O 32 d/6/2/19
22-2-19	MD 4-5	SOS to Canada	Khyl	" 16-2-19	— 47

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.					

L-L. Job 5470 M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H.Q. 1772-39-819

P. 19 4/17

WIFE

To Whom Mrs. Emma Akers

Address 185 Woodland Ave. Verdun, P.Q.

By Whom Assigned Akers, Robert

Regtl. No. #1081351

Rank Pte.

Corps No. 1 — Coulson — Bttn.

Rate $20.00 SEP 1916

PAYMENTS

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

CONSOLIDATED 2 ACCOUNT

Consolidated Account.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Mrs. Emma Ahern WIFE

Name of Soldier Ahern J. Robert

#1081551 – Pte – No 1 – Canadian Pioneers

Month.	Year.	Cheque No.	Amt.		Remarks.
				#R0.00	SEP 1916
April	1916				
May					
June					
July					
Aug.					
Sept.		T 20434	20	✓	
Oct.		B19527	20		
Nov.	#60	B 24474	20		
Dec.		B 33047	20		
Jan.	1917	D 36987	20		
Feb.		D 42519	20		20 J.W.
March		D 43611	20		20.L.
April		E 42	20	✓ 240	20.L
May		E 6548	20		
June		E 12962	20		20.E.
July		19925	20		S
Aug.		26687	20		→ #260.00 W.D.C. ✓
Sept.		X 33330 ~~F 38005~~	~~20~~ 20		F. 38005. Cancelled 22 8/17 RJS.
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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.				

L. L. Job [illegible] M. & D. 6574.

14/6/16.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

262

SEPARATION ALLOWANCE

Name Emma Ahern

Address 185 Woodland Ave., Montreal, P. Q.

Relation to Soldier wife, child or mother } wife.

Name of Soldier Ahern Robert,

Regtl. No. 1081557

Rank Cte.

Corps #I Construction Battn.

To what Corps belonging when called out }

PAYMENTS

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

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS. CONTINGENTS

PAYMENTS.

M. F. W. 11a. 262
50m.—4-16.
1772—39—818.

Sheet No. 2. Emma Aherne wife

Name of Soldier Aherne Robert Cte.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		#10314	~~31~~ 31	~~31.~~ (710449 Cancelled) rewrite.
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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.				

L- L. Job [illegible] M. & D. 6574.

14 – 6 – 16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

93

SEPARATION ALLOWANCE

Name Emma Ahern

Address 185 Woodland Ave
Montreal
Que

Relation to Soldier wife, child or mother } wife.

Name of Soldier Ahern Robert

Regtl. No. 1081551

Rank Pte

Corps #1 Const. Bn.

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				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT 1

14x20
280
31
311
260
571.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

L. L. Job 310.—Req. 6574.

Sheet No. 2. Emma Ahern Wife PAYMENTS.

Name of Soldier Ahern Robert Pte

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July		H 10314	31		F 10449 Cancelled
Aug.		A 11088	20	20	
Sept.		B 14508	20	20	
Oct.		B 17979	20	20	
Nov.		B 21181	20	20	
Dec.		B 24776	20	20	
Jan.	1917	B 28307	20	20	
Feb.		B 31107	20	20	
March		B 34195	20	20	
April		C 103	20	20	
May		C 3689	20	20	
June		D 7438	20	20	
July		C 10505	20	20	
Aug.		E 13775	20	B	
Sept.		D 18234	20		"311 - 4 Lt. ✓
Oct.			20	B	
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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.				

*Name AHERN, Robt. Rank Spr. Regtl. No 1081551

Original unit #1 Con. Bn. Present unit DD 4 M. or S. M Age 44 Religion C.E. Fyle Depot 19-A-234 Ref. H.Q

Port, ship, and date of arrival Halifax, N.S. "EMPRESS OF BRITAIN" 25-2-19

Next of kin E.A. Ahern, 185 Woodland Ave. Verdun (W)

Address on leave as above

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Electrician Date and place of enlistment June 14-16 Montreal

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
3-3-19	T.O.S. from O/S 17-2-19 Posted to Cas. Coy. 26-2-19	
	Fur. w-s to 13-3-19	62.

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

(over)

Date.	Remarks.	Pt. 2 Order No.
18-3-19	SOS Discharged RO 1420 Para C Demob	#77
	Eff. 15-3-19 Cat A	

M.F.W. 192
150M—6-18.
1772-39-1243.

D M S. 1300 50M-21-1 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Ahern	R.	1081551

RANK	UNIT	CO.	TROOP	BATTY.
Spr.	C.R.E. 1			

HOSPITAL — DATE OF ADMISSION

43 C.C.S. — 28.6.18

1. ..... HOSP. .....

2. ..... HOSP. .....

3. ..... HOSP. .....

4. ..... HOSP. .....

DIAGNOSIS P.U.O. a.f.

1.

2.

3.

DISPOSITION — DATE

C.L. 5.7.18 a 257-2 — Dis. 3.7.18.

11.7.18 a.i. 262-2

REMARKS

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

No. 1081551 RANK Pte. NAME Ahern, Robert

T. O. S. 14-6-16 UNIT 1st Construction Battalion
DOH 1-17-6-16

M. D. 2

PAID FROM	PAID TO	SIG. CR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 June 14	1916 June 30	✓		
July		✓		
Aug		✓		
Sept		"		

Form R. 149.

Name AHERN. Robert. Rank Spr Reg. No. 108155

Unit 1st C.M.T.

Next of Kin E. A. AHERN. Wife 185 Woodland Ave, Verdun PQ

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
28-6	[illegible]	[illegible]	[illegible]	9/257		3355-0
3-9	[illegible]	[illegible]	do	9/262		3280-1

Date	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

NAME Ahern. R.

REGT'L No. 1081551

H. Q. FILE No. 649.

RANK AND CORPS Pte 1th Bn.

CABLE	
NO.	DATE

NATURE OF CASUALTY

FOLLOWS No.

FOLLOWS

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A257	436 Assembly Stn	28-6-18	P. W. O.
A262	Discharged	3-7-18	" " "

Date of Enlistment

June 14/16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

A

Date of Assignment

794 Sept 1. 1916

RATE OF SEPARATION ALLOWANCE

$20	1-12-17 ~~$5~~	30 1-9-18	

P.C. 3259 / 627553 M040220

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 108551

Rank Pte Promoted Reverted Discharge

Soldier's Name Robert Ahern.

Battalion No 1 Construction Battn

Beneficiary Mrs. Emma Ahern

Relationship wife MFW 2554 6/18

Address 185 Woodlawn Ave; Montreal, Que.

PARTICULARS OF ASSIGNMENT

Name Mrs Emma Ahern (Wife)

Address 185 Woodlawn Avenue

Change of Address Verdun. Que.

1

2

3

4

138-R-2

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Sept. 1917.		$11.00	$260.00	$571.00		MFW 2554 ok HB 21/11/18 (74620)
Oct.	C 50191	20 -	20 -	40 -		
Nov.	C 52002	20	20	40	T	
Dec	C 59735	20	20	40	C	Br.
Jan	F 60992	30	20	50	S.	
Feb.	B 90755	25	20	45		
Mar	G 97983	25	20	45	✓	
Apr	G 77560	25	20	45	6	
May	A 10687	25	20	45	6	
June	B 13606	25	20	45	6	
July	Y 26565	25	20	45	6	
AUG	A 29044	25	20	45	6	
SEP	A 35654	25	20	45	6	
OCT	A 42293	25	20	45	6	
NOV	A 50395	25	20	45	6	
DEC	A 62450	45	20	65	6	
JAN	B 69823	30	20	50	6	
FEB	A 76957	30	20	50	6	
MAR		~~30~~	~~20~~	~~50~~	6	
		375	600			

A/c Closed 28/2/19

Ret'd per Emp. of Britain

Date 25/2/19 M.F.W.187 3/3/19

Clerk M.K. 4 Gallier

CANADIAN
ASSIGNED PAY AUDITED
A/c. Ok to 31-1-19
J Bagelock
AUDIT CLERK
DATE 19-5-19

ACCT CONSOLIDATE

M. F. W. 128
400m.—6-17—172-89-1141
L. L. 22520—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—172-39-1141
L. L. 22330—M. & D. 1993.

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. 1081551 | RANK Pte. | NAME (IN FULL) Ahern, Robert. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? 30^00 | DATE EFFECTIVE 1-3-19

TO WHOM PAID a.a.f. | RELATIONSHIP

ADDRESS Mrs R. Ahern ~~same address~~

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	17-2-19	20 62/1
Casualty	26-2-19	20 62/1
L. W.S. to	13-3-19	20 62/1

ORIGINAL UNIT C. E. F. 1st Can. Bde.

PLACE OF ATTESTATION Montreal

DATE OF ATTESTATION 14-6-16

IF IN P. F. WHAT UNIT? X

TRANSFERRED TO | DATE | AUTHORITY

TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY. $ 20^00 | DATE EFFECTIVE 1-3-19

PAYABLE TO ~~Mrs. Emma Ahern (wife)~~ | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 186 Woodland Ave Verdun-Montreal P.Q.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Montreal | DATE 15-3-19 | REASON WD 4-19- A 234 | AUTHORITY DO 76/1A | IF ENTITLED TO POST DISCHARGE PAY

	MONTH	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account from	Mar 1-3-19 to		1^0			12 80																						59 10										59^0 Sr. L.P. 6. 31-1-19
	15-3-19	43		47	30	35 00				95 10														10 00						69 10				70 00		W S G
			S/a			15 00				15 00														S/a 15 00						15 00						
										110 10														30 00						30 00				39 00		W S G S/a
										96 00														96												
																																210 10				

WAR SERVICE GRATUITY

	OTHER CREDITS W.S.C.	S.A.		OTHER DEBITS W.S.C.	S.A.	SOLDIER DEP'T	
15-3-19.	350.00	150.00	300.00	70.00	30.00	100.00	280.00 120.00
15-4-19				70 00	30 00	100 00	210 00 90 00
15/5/19				70 00	30 00	100 00	140 00 60 00
15 6 19				70	30	100	70 30
15-7-19				70	30	100	
						500 00	

231574 231575
302569 302570
907713 907714
1066551 1066552

How call Final

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

MARRIED OR SINGLE M

PLACE OF BIRTH Montreal, P.Q.

NAME AND ADDRESS OF NEXT OF KIN Emma A Ahearn

185 Woodland Ave, Verdun, P.Q.

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L NO. 108551 RANK Pte NAME Ahearn, Robert

IF IN PERMT. CORPS WHAT UNIT UNIT No 1 Constr Bn TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Montreal TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 14th June 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20 DATE EFFECTIVE Sept 1st 1916

PAYABLE TO Emma A Ahearn, 185 Woodland Ave, Verdun, P.Q. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

c

DATE	PAY: No. of Days	PAY: Rate	PAY: Amount $	PAY: Amount c.	FIELD ALLOWANCE: No. of Days	FIELD ALLOWANCE: Rate	FIELD ALLOWANCE: Amount $	FIELD ALLOWANCE: Amount c.	WORKING OR SPECIAL PAY: No. of Days	WORKING OR SPECIAL PAY: Rate	WORKING OR SPECIAL PAY: Amount $	WORKING OR SPECIAL PAY: Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1: No	1: Date	2: No.	2: Date	3: No.	3: Date	4: No.	4: Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE: Credit	BALANCE: Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916													Balance from Canada		25 10															25 10				Assigned pay paid by A.P.D. Canada for September and recovered on September pay sub (Canada)
Oct	31	1.00	31	..	31	10	3	10								34	10	1	33/9	67	11/10			12 17	7 30			20	-	39 47	19 73				
Nov	30	-	30	-	30	-	3	..								33	-			131	6/11				3 49			20	-	23 49	29 24				
Dec	31	..	31	..	31	-	3	10								34	10	149	25/11					5 23				20	-	25 23	38 11				
1917			920																															
July	31	100/10	34	10												34	10	244	15/12					4 36				20	-	24 36	47 85				
Feb.	28	.	30	80												30	80	393 289	31/1 15/1					4 36 4 36				20	-	28 72	49 93				
Mar	1-31	31	..	34	10											34	10	439	15/7	500	21/3			4 36	8 92			20		33 08	50 95				
				200	20											275	30							54 94	19 51			120		174 35					
Apr	1-30	30	..	33	-											33	-											20		20	63 95				
May	1-31	31	..	34	10											34	10	19	24/4					8 92				20	-	28 92	69 33				
June	1-30	30	..	33												33		67	13/5					8 92				20		28 92	73 41				
July	1-31	31	..	34	10											34	10											20		20	87 51				
Aug	1-31	31	..	34	10											34	10	134	25-6					8 92				20		28 92	92 69				
Sept	1-30	30	..	33												33		195	25-7	254	25-8			8 92	8 98			20		37 85	87 84				
				401	50											75 10		4266						70 32	28 44			240		338 76					

1081551 - Spr. Ahern, R.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
JAN	PARTICULARS				CR. 1				CR. 2				PARTICULARS			DR. 1		DR. 2		DR. 3		DR. 4		BALANCE		DEFERRED PAY	SER. ALLCE ENR.								
	Bal.		89	84																													87	84
													00 91 2/0/17																					
Oct	pp.				3H	10							Sent. L. Infant wdp/ex.		11 40					20				99	524									
					3H	10									4 40					30															
Nov					33								AR 316 24/9/17 1 CR 1		8 92					20															
													" 388 25-10-17 "		5 35																			
Dec					3H	10							CP 19653 2/2/17		19 42					20		90	90												
					67	10									33 74					40															
Jan					3H	10							CR 443 18/1/18 1 CR 1.		4 46					20															
													" 2135 17 11/17 1 CRT.		9 73																				
													" 2135 17 11/17 "		53 53																				
													" 331 20.12.17 "		8 03							29	25												
					3H	10									75 75					20															
Feby					30	80							" 609 20-1-18 "		8 03					20															
																						27	56											
					30	80							" 654 1/2/18 "		4 46					20															
															13 49																			
Mar					3H	10							" 674 20.2.18 "		8 03					20															
													" 781 20.3.18 "		5 35																				
																						28	28											
																						28	00											

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.9.16	EFFECTIVE DATE:-
AMOUNT:- 20.00	AMOUNT:-

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.

Mrs Emma A Ahearn
185 Woodland Avenue
Verdun PQ

Stopped 1.2.19

NAME:- AHERN Robert

NUMBER:- 1081551

PARTICULARS OF RANK OR APPOINTMENT C

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2nd Constr Bn

DATE ACCOUNT FIRST OPENED:- 1.10.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			1 CRT

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
~~13.1.9~~	~~1442~~	Fwd	~~933~~			31.1.19 CoBde L.S.	78 50
21.1.	8183	?	~~4867~~			L.P.C.	20 50
			58 00				
							58

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada per HT 2379 Ripon 26.1.19 Ripon MS 4

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									28 28		
Mch 31	Bcf forward.										
April	P. Pay	33 00		A.P.				20			
				AR. 74. 9 RnCRT. 17/4/18.	4 46						
				108. ✓ 20/4/18	3 57				33 25		
		33 00			8 03			20 00			
May	✓	34 10		A.P.				20	47 35		
				132. 1 CR.T. 20/5.	5 35				42 00		
		34 10			5 35			20 20			
June											
	P.P.	33		AP 272 20 6/18 1 CRT	8 92						
		33			8 92			20	46 08		
				✓ 385 20/7 ✓ ✓	8 92						
July	✓	34 10		A.P.				20			
		34 10			8 92			20	51 26		
Aug	✓	34 10		CAP.				20			
				✓ 609 28/8/18 ✓	8 92						
		34 10			8 92			20	56 44		
Sept	✓	33 -		CAP.				20			
				✓ 698 20-9	8 92						
		33 -			8 92			20	60 52		
Oct		34 10		CAP.				20	74 62		
				✓ 828 36 28-10 ✓	9 33				65 29		
		34 10			9 33			20			
Nov		33 -		CAP.				20	78 29		
				✓ 961 28 24-11 ✓	18 66				59 63		
Dec		34 10		CAP.				20	73 73		
				✓ 1140 60 22.12	9 33				64 40		
Jany		34 10		CAP.				20	78 50		
		101 20			27 99			60			

NUMBER 1081551 RANK Spr NAME AHERN Robert

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balance Forward								78 50		
				ARINR. 9. 13.1. ICR.	9 33				69 17		
				✓ 8183. 37 22. 2 CER	48 67				20 50		
				✓ 601 73. 13.2 End Hosp.	9 73				10 77		
					67 73.						
				SOS. 17.2.19 SLrt							

CANADIAN
ASSIGNED PAY AUDITED
O K
Avg Harris
CREDIT CLERK
DATE 19-5-19

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper or Particulars of Recruit	Militia Form	W. 23 / W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

This space to be for numbers.

M

WAR SERVICE BADGE
Class "A" No. 248430 ISSUED

Proceedings on Discharge.

16

22-9-'39

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

No. 1081551

Rank Pte.

Surname AHERN,

Christian name Robert.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) No.1 Const. Bn.

Date of discharge March 15th., 1919.

Place of discharge MONTREAL, Quebec.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 44 years 7 months.
Height 5 feet 3½ inches.
Complexion Fair
Eyes Blue
Hair Gray
Trade Electrician
Intended place of residence (To be given as fully as practicable.) 185 Woodland Ave MONTREAL, Quebec

Descriptive marks

NONE.

2. The above-named man is discharged in consequence of

R.O.# 1420.Para (c).Cat. "A". DEMOB.

Authority for discharge.....

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.

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

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.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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).....

(Date).....

.....

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, and that I have received my permanent discharge certificate.

(Place) MONTREAL, Quebec. A. E. Gibson *(Signature of Soldier.)*

(Date) March 15th., 1919. T. C. Davies *(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) MONTREAL, Que.

(Signature).....Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

(Date) March 15th., 1919.

Reservations referred to at Para. 8.

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

NO RESERVATIONS.

A. E. Gibson