REGIMENTAL DOCUMENTS

Pte NAME Aitken Robert REGT. NO. 1081793 UNIT [illegible] H. Q. FILE NO. 3222

M

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1	M.S.W. 67					
2	R. 149					
2	Cas. Card					
	[illegible]					
	Reg. Check					

H

S

H

4

M 2589
10-11-18
[illegible] 1377

No. 1 Construction Batt

ATTESTATION PAPER.

No. 1081793

No 1 CONSTRUCTION BATT. ORIGINAL

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Aitken
1a. What are your Christian names?	Robert Melbourne
1b. What is your present address?	75 Adelaide St, St John, N.B.
2. In what Town, Township or Parish, and in what Country were you born?	St John N.B.
3. What is the name of your next-of kin?	Mrs Robert Aitken
4. What is the address of your next-of-kin?	75 Adelaide St, St John, N.B.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	19th January 1897 18
6. What is your Trade or Calling?	Grocer 21
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? If so, state particulars of former Service.	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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Melbourne Aitken, 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 Melbourne Aitken (Signature of Recruit)

Date July 8th 1916. Mac B Smith (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Melbourne Aitken, 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 M Aitken (Signature of Recruit)

Date July 8th 1916. Mac B Smith (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 St. John. N.B. this 8th day of July 1916.

John R Mullin J.P. (Signature of Justice)

M. F. W. 25.
600M.—2-16.
H. Q. 1772-20-841.

Description of Robert M. Aitken on Enlistment.

Apparent Age 19 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 7 3/4 ins.

Chest measurement: Girth when fully expanded 36 1/2 ins.; Range of expansion 33 1/2 ins.

Complexion Light

Eyes ~~Hair~~ Blue

Hair Fair

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

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).

Appendicitis Scar

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 July 8th 1916.

Place St Johns N.B.

J. S. Bentley
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 Melbourne Aitken 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)

O.C. No. 1 Construction Battalion C.E.F. Lt.-Colonel.

Date July 8th 1916

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 81 10-8793 (Rank) Sapper

Name (in full) ROBERT MELBOURNE AITKEN enlisted in

the 1st Construction

CANADIAN EXPEDITIONARY FORCE at St. John, NB on the 8th

day of July 1916 (1st Bn. C.R.T.)

HE served in Canada, England and France

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 21 1/12 years.	Marks or Scars
Height 5 feet 7 3/4 inches	
Complexion Fresh	Appendicitis Scar.
Eyes Grey	
Hair L. Brown	

R M. Aitken
Signature of Soldier

Date of Discharge

Dispersal Station "C" Military District No. 7 MAR 31 1919

Issuing Officer

DISPERSAL STATION, ST. JOHN, N. B. FOR O. C. DISTRICT DEPOT #7

Rank

Date MAR 31 1919 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.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

CLASS A
WAR SERVICE BADGE
NO. 130375 Issued

Sheet 2

Army Form B. 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 1st Bn. Cdn. Rlwy. Troops Regimental Number 1081793.

*Substantative Rank Sapper Surname Aitken Christian Names R. M.

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

(A) Report Date.	(A) Report From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
4-1-19	7 Cdn. Sty. Hpl.		Forfeits F.A. & is placed under stoppage of pay at the rate of 50 cents per diem whilst in hospital from 10.12.18 to 3.1.19 (25 days)			O1643/9129 PzO 3 4-1919
14-1-19	CSBD		Tsfd. to Eng. for demob. & posted to CRTD Witley		15-1-19	NR PzO 4 4-1919
27-1-19	URD CRT	DO 19	Tos and posted to Ripon depot Group		15-1-19	
26-2-19		DO 446	Sos to MD No 7		26-2-19	

Chas. Mahafwell.
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon, B. E. F.

R. E. Apperley
LT. O. I/o RECORDS
ALBERTA REGIMENTAL DEPOT.

To be folded on this line.

Nothing to be written in this margin.

W1889—PP1150 500,000 5/18 G.W.P.Co (3490)

(A) Report: Date.	(A) Report: From whom received.	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
26-2-19	CR&D		Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 59. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada. Part 11 Order No. 81			
			R. Jennaway Lieut.			
			For O/C Commanding M.D.7 Wing, Kinmel Park Camp.			
22-3-19			Embarked for Canada S.S. Regina Sailing 42			
			Stuart M. Schneider Capt. Adjt., No. 14, C.T.O.S.			
22-3-19	England		TAKEN ON STRENGTH District Depot No. 7. PART II. ORDER No. 93 St. John, N.B.			
			L.A.W. Stevens Lieut. & Asst. Adjt. For O. C. District Depot No. 7.			
31-3-19			STRUCK OFF STRENGTH District Depot No. 7. PART II. ORDER No. 93			

Nothing to be written in this margin.

...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 No. 1 CONSTRUCTION BATT.

Regimental No. 1081793. Rank Private C. E. F. Name Aitken, Robert Melbourne,

Enlisted (*a*) 8/7/16. Terms of Service (*a*) D. of W. Service reckons from (*a*) 8/7/16.

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*) Tracer

W. O. B. Class A. No.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked, Canada	Halifax, N.S.	13/9/16	
		Dis embarked, England	Liverpool,	23/9/16	
26-10-16	1 Con Batt	Proceeded overseas		25/10/16.	Thos. R. London major. Pt II. D.O. 170. for O.C. No 1 Construction
		Landed in France	Havre	26.10.16	L.R. 6777 Pt II D.O. 184-2.12.16
		Designation of Unit changed to 1st Bn. Canadian Railway Troops. Pt 11 D.O. No. 22 d/- 10/2/17.			
20.10.17	1st C.R.T.	Granted 10 days leave in U.K.		14.10.17	B213 Pt II D.O. 96 d/- 29.10.17
3.11.17	~	Rejd from Leave.	Unit	25.10.17	B213 Pt II D.O. 101 d/- 12.11.17
22.7.18	19.C.G.S.	P.W. adm	19. C.G.S	21.7.18	93457 W.3024
29.7.18	~	~ To	33 A.T.	28.7.18	A36/ 9508

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.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
19.7.18	1 CRT	Awarded 1 G. C. BADGE		8.7.18	KH 18/2397. Pt II DO 70 4-1918
29.7.18	10 Gen. Hpl.	Inf. Larynx 339 "M" Adm	10 Gen. Hpl.	29.7.18	W3034/ G6082
27.7.18	1 CRT.	PUO To	19 CCS	21.7.18	B213
1.8.18	10 Gen. Hpl.	Inf Larynx To 8 A.T. for	Trouville	1.8.18	W3034/ G6687
1.8.18	73 Gen. Hpl. S.	✓ "M" Adm	73 Gen. Hpl.	1.8.18	W3034/ G6687
10.8.18	✓	✓ To	14 Con. D.	10.8.18	W3034/ G8161
10.8.18	14 Con. D.	✓ Adm	✓	✓	✓
4.9.18	CGBD	"A" TOS	CGBD	3.9.18	NR 1250
11.9.18	CGBD	Proceeding to	1 CRT	11.9.18	NR/D 1383
31.8.18	14 Con. D.	Inf. Larynx To	Base	31.8.18	W3034/ H7546
14.9.18	1 CRT.	Rejd from Hpl	unit	12.9.18	B213
17.9.18	1 Aus F.A.	Susp. Gonorrhoea Adm 16/9/18 To	41 Sty Hpl	16.9.18	A36/ K976
16.9.18	41 Sty. Hpl.	Gonorrhoea Adm	✓	✓	W3034/ K1958
21.9.18	1 CRT	VD To	1 Aus F.A.	16.9.18	B213
23.9.18	41 Sty. Hpl.	Gonorrhoea To	Unit	23.9.18	W3034/ K3348
28.9.18	1 CRT.	Rejd from Hpl	Unit	23.9.18	B213
26.10.18	1 CRT	Granted 14 days leave to	U.K.	26.10.18	B213 PRO 102 4-1918
16.11.18	✓	Rejd from leave	unit	14.11.18	B213
6.12.18	3 C.C.S.	V.D.G. Adm 3/12/18 To	14 A.T.	5.12.18	A36/ M9607
6.12.18	130 F.A.	VDG Adm 2/12/18 To	CCS.	3.12.18	A36/ A2961
7.12.18	1 CRT.	VD To	130 F.A.	3.12.18	B213
10.12.18	7 Cdn. S.H.	VDG Adm	7 Cdn. S.H.	10.12.18	AB8

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) AITKEN R. M

REGIMENT 3 N R D. RANK Pte. No. 1081793.

Date of Examination in England 1-2-19 | 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 28. 31,
2. EXTRACTIONS 30,
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

A. D. D. S.
FEB. 1919
HEADQUARTERS:
CANADIAN DIVISION,
Ripon

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 no
- (b) In England no
- (c) In France yes

Signature of Dental Officer R. Ross Capt.

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 Lieut. Name Robert Surname AITKEN

Unit or Corps 104th Bn. C.R.A. (If a soldier) Regtl. No. 1081793

Born at St. John, N.B. on, date 19th January 1892.

Signature (for identification) W. M. Aitken

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

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

Weight 150 lbs.

Height 5 ft. 8 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? 78 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 1 - FEB 1919

Signed [illegible] MAJOR C.A.M.C. M.O.

Signed Capt William Capp 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.*

Ok Recommend
Bde HQ MD#7 3/5/19

D

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.

No. 1 CONSTRUCTION BATT.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 1081793

(3) Full Name of Soldier Aitken Robert Melbourne

(4) Place of Birth St John New Brunswick

(5) Are you married, or not ? no

(6) If married, state,
(a) Full name of your wife —

(b) Present Postal Address

(7) Are you a widower ? —

(8) Have you any children ? —

If so, give number of boys and girls —

Also their names and ages —

M. F. W. 67.

300M.—5-16.
1773-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... ~~Robert Drummo~~ Yes .....

If so, state name and address ..... Aitken Robert Drummond

(10) Is your Mother alive ?..... —

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.

..... —

(15) Are you insured ?..... yes .....

If so, in what Company ?..... Metropolitan .....

Have you made arrangements for payment of your Insurance premium..... no .....

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

..... Thos R. Lawder Major
Officer Commanding.

Date..... 4/9/16 .....

No. 1 CONSTRUCTION BATT.

NO. 1 CONSTRUCTION BATTN C.E.F.

DUPLICATE

DUPLICATE

MEDICAL HISTORY SHEET

Surname Aitken *Christian Name* Robert Melbourne

Examined { on 8th day of July 191 6
at St John N.B.

Approved by Chas P. Fenwick

Rank Capt M.O.

Birthplace { City or Town St John
County N.B.

Apparent age 19

Trade or occupation Tracer

Height 5 feet 7 3/4 Inches

Weight 135 lbs.

Chest measurement { Minimum 33 inches
Maximum expansion 36 1/2 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left
Number 2

When Vaccinated last 1904

(*a*) Marks indicating congential peculiarities or previous disease Appendix Scar 1915

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

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

Date	Result	Vaccinations
19 8/16		C.P. Fenwick M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
31 7/16		C.P. Fenwick
7 8/16		C.P. Fenwick M.O.
28 8/16		Chas P. Fenwick M.O.
		M.O.

Enlisted on 8th *day of* July *191* 6 *at* St John N.B.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	#1 Construction Battalion	1081793		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical 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.

Surname Aitken Christian Name Robert McDonnell

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				

NO 1 CONSTRUCTION BATTN C E F
ORIGINAL
ORIGINAL

MEDICAL HISTORY SHEET

Surname Aitken *Christian Name* Robert Melbourne

Examined { on 8th day of July 191 6
at St John N.B.

Approved by Chas P Emmerick
Rank Capt. M.O.

Birthplace { City or Town St John
County N.B.

Apparent age 19

Trade or occupation Tracer

Height 5' feet 7 3/4 Inches

Weight 135 lbs.

Chest measurement { Minimum 33 1/2 inches
Maximum expansion 3 inches

Physical development Good

Small-pox Marks none

Vaccination Marks { Arm Right Left
Number 2

When Vaccinated last 1904

(*a*) Marks indicating congential peculiarities or previous disease Appendix Scar 1915

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

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

Date	Result	Vaccinations
1916	+	M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
3/16	+	M.O.
7/8/16	+	M.O.
12/8/16	+	M.O.

Enlisted on 8th *day of* July *191* 6 *at* St John N.B.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	#1. Construction Battalion.	1081793		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

Surname Quinn Christian Name Robert Malcolm

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				

R—122

G.C. Rank Pte. Name Aitken Robert Melbourne. Reg'l No. 1081793.

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

Place and Date of Enlistment St.John.N.B.8th. July 1916. Place of Birth St.John. N.B.

Name and Address, Next-of-Kin Mrs. Robert Aitken.

75 Adelaide St. St. John. N.B. Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

N/E. R.B. No. 8616
File R.L.
Category Can O R

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

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 HW
9.2.17.		Now known as 1st. Battn. Can. Railway Troops.				Pt. II. O. 22.
5.8.18	1st C.R.T.	Awarded 1. Good Con. Badge	Field.	Spr.	8.7.18.	pt. II 70.
20-1-19	1st C.R.T.	Posted to C.R.T.D. Witley	"	"	15-1-19	" 4
27-1-19	A.R.D.	T.O.S. from 1st C.R.T.	Ripon	Spr.	19-1-19	" 19
26-2-19	"	Sos to MDW 7 Rhyl	"	"	26-2-19	45 PtII 59/28-2-19 MD 7
22-3-19	MD 7	Sos to Canada	Rhyl	"	22-3-19	81

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

19 4/17

P. WSW

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

Mrs.

To Whom Robert Aitken

Address 75 Adelaide St.
St. John, N.B.

Rate $60.00 SEP 1916

By Whom Assigned Aitken Robert Mrs.

Regtl. No. #1081793 1081783

Rank Pte

Corps No. 1 - Coustn -

PAYMENTS

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2.

L. L. Job 4503. - Req. 6832.

Mrs. Robert Aitken

Name of Soldier Aitken Robert M

#1081793 - No 1 - Constn Bttn -

M. F. W. 12a.
50m.—6-16.
1772—39—819.

1917 4

P. 4 SW

SEP 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
				20
April	1916			
May				
June				
July				
Aug.				
Sept.		T 20433	20	
Oct.		D 1519625	20	
Nov.	$60	B 24570	20	
Dec.		B 33141	20	
Jan.	1917	D 37119	20	
Feb.		D 42647	20	20 J.W.
March		D 48742	20	20
April		E 174	20	20 L
May		E 6687	20	
June		E 13091	20	20 E.
July		G 20087	20	S
Aug.		G. 26848	20	D $
Sept.		F 38159	20	20 $265.00 W.D.C.
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.				

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

SURNAME | CHRISTIAN NAME OR NAMES | REG. NO.

AITKEN. | R.M. | 1081793.

RANK | UNIT | CO. | TROOP | BATTY.

Spr. | C.R.T. 1.

HOSPITAL | DATE OF ADMISSION

19. C.C.S. | 21-7-18.

1. 10 G. H. Rouen 29.7.18
73 Gen. Trouville HOSP. 1-8-18

2. 14 Conv. Depot Trouville 10.8.18.
41 Sta. Amiens HOSP. 16.9.18

3. 7. C. Stat Camiers 10.12.18
HOSP.

4. HOSP.

DIAGNOSIS ~~P.U.O.~~

1. Laryngitis a.
① V D G. ~~susp~~ h.

2. ② V W G/o.

3.

DISPOSITION | DATE

C.L. 27-7-18. A276.

" 6-8-18	a 284
8-8-18	a/2863.
15.8.18	a 292-2
6.9.18	a 312-3
23.9.18	a 326 ③ ✓
30.9.18	a 332-3 ✓
20.12.18	a 402-4.
18.1.19	a/ 424-1

REMARKS Dis. 31.8.18
" 23.9.18 ✓
Dis 12.1.19

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.		

FILE No. 107793. VOL.

SUBJECT Aitkin Robt. M

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
SUR		9/12/24			
Env		rec'd Dec 1		12-12-24	
					DHC
Doc	1	1-4-25	EJW		
Doc	1	31-1-25	EJW		
Doc	1	3-3-25	EJW		
PMA		14/6/37			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

N. D. FORM O.S.S. 5
13485—50M—10-24.

FILE No. VOL.

SUBJECT

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
Number	1081793	Rank	Spr.
Surname	AITKEN		
Christian Names	Robert Melbourne		
Unit	1st Can. Rly. Tpo.	Theatre of War	France
Date of Service			25/10/16
Remarks	BPC na		12 11/26
Latest Address	Gen Del St John		
Roll No.	B Page 3340	Robt. D. Aitken (4), 13 Holly St., St. John, N.B.	12 2/25

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

DESP. FEB 14 1925 REGN. No. 10580

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

H.Q.649-A-15622

AITKEN, R.N. # 1081793 Pte. albert melbourne Spr - b R.J.

M & D father Robt.D.Aitken
13 Holly St.,St.John,N.B.

P & S " "

Memorial X-mother, Mrs. Alice M.Aitken,
same as above.

988660

Death is attributable to Military Service

Elig. for B.W.M.
.. B.W.M.

DEP. MAR 11 1925

REGN. No. X-54949

JUL 29 1925

Scroll Desp. Regn. No. 1626

DEC 12 1925

Prague Desp. Regn. No. 2360

Form R. 149.

Robert Melbourne

Name AITKEN Rank Spr Reg. No. 1081793

Unit 1 CRT

Next of Kin (Mother) Mrs R Aitken 75 Adelaide St St John NB

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10-12	4 C Sty H Camiers		20 A402			6305-12
12-1-14	Discharged		S	A 424		6832-5

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A326.	41 stat: Amiens	16-9-18	V D G susp
A332	Disc	23-9-18	" " " "
A402	7 Can Stat: Camiers	10-12-18	20
A424	Disc	12-1-19	"

REGT'L. No. 1081793

NAME Aitken, L. M

H. Q. FILE No 649

RANK AND CORPS Pte. 11 Can. Ry Trps

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A276.	19 Cas. Cl Stat'n	21-7-18.	P.U.O.
A284	10 Gen., Rouen	29-7-18	Laryngitis
A286.	73 Gen; Trouville	1-8-18.	"
A292-2.	14 Conv. Dépôt "	10-8-18	"
A312.	Disc.	31-8-18	"

REGT'L No. 108 1793

NAME Aitken R. M.

H. Q. FILE No. 649.

RANK AND CORPS Pte. 111 Can Ry. Troops

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

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

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

No. 1081793 RANK Pte. NAME Aitken, Robert Melbourne

T.O.S. 8-7-16
S076-22-7-16 UNIT 1st Construction Battalion

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916	1916			
July 8	July 31	✓		
Aug		✓		
Sept		"		

Form R. 149.

Robert Melbourne

Name AITKEN Rank Spr. Reg. No. 1081793

Unit 1 st. C. R. I.

Next of Kin Mrs R. Aitken, 75 Adelaide St. St. John, N.B.

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
21-	7	19 C.C. Stn	P. W. O.		a276			33745
29-	7	10 G.H. Rouen	Laryngitis			a 334		2936-9
1-	8	73 G.H. Trouville	do		a286			3432-19
10-	8	14 C.D. Trouville	do		a 292			3148-1
31-	8	To Base	do		a312			3961-18
					a326			
16-	9	41 Sty. H. Amiens	W.D.					4197
23-	9	To Unit	do		a332			4371

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

Name Aitken Le 8/7/16

Date of Embarkation for England 13-9-16

Proceeded to France. 25/10/16

Returned to England. 15/1/19 Demob

Date returned to Canada. 27/3/19

over

P.R.2855.

Certified 4/11/23

Leas Sheet 21/7/18 PAD

29-7-18 Inf of Laryngitis to duty 3/9/18

16-9-18 Susp. Gonorrhoea to duty 23/9/18

3/12/18 V.D.G to duty 3/1/19

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch A

OVERSEAS CONTINGENTS

962

Date of Assignment

Sept. 1916

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

$20 –			

PARTICULARS OF SEPARATION ALLOWANCE

No. 1081793 (1081783)

Rank Pte Promoted Reverted Discharge

Soldier's Name Robert M. Aitken

Battalion No. 1 – Coustn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Robert Aitken

Address 75 Adeliade St, St. John, N.B.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Sept			260.	$260.00	
Oct.	C 50364		20 –	20 –	
Nov.	C 52173		20	20	T
Dec	C 59896		20	20	C
Jan	F 61146		20	20	S
Feb	B 90919		20	20	
Mar	G 98145		20	20 ✓	
Apr	G 7917		20	20	C
May	X 24431		20	20	C
June	B 13767		20	20	C
July	Y 26731		20	20	C
AUG	A 29209		20	20	C
SEP	A 35833		20	20	C
OCT	A 42469		20	20	C
NOV	A 50570		20	20	C
DEC	B 62771		20	20	C
JAN	B 69983		20	20	C
FEB	A 77096		20	20	C
MAR	D 82864		20	20	C
APR			620	620	

REMARKS 158-R-42

A/c Closed 31/3/19

Ret'd per Regina

Date 30/3/19 M.F.W. 187 5/4/19

Clerk MD 7 J Collins MRO 88335

AUDITED

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

CONSOLIDATED

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—1772-38-141
L. L. 22320—M. & D. 1933.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (D.D.S.)
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A
Checked by No. 25
Date 21/3/19

W. S. B. O. Class A. No. M

SAILING NO. 42
S S REGINA FROM
L POOL 22 ... 14/6/37

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

130575

DC

1. No. 1081793		Category A1	
2 Rank. Pte			
3. Name. AITKEN		Robert	
4. Unit. 1st Cons.		CRTD	D. D. NO. 7
5 Date of Discharge	MAR 31 1918	Place	ST. JOHN N. B.
6 Reason for Discharge Demobilization			
Service in France 27/12			
Next of Kin Mother			
7. Authority. R. O. 14201			
8. Proposed Residence after Discharge St John			
Occupation Clerk			

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.? 39 R. M. Aitken

Dispersal Station "C" MAR 31 1919 Military District No. 7

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Dispersal Station "C" MAR 31 1919 Military District No. 7

Signature Rawson Capt. (O. C. Discharging Unit.)

DISPERSAL STATION ST. JOHN, N. B. FOR O. C. DISTRICT DEPOT #7

Auth 22 3-12-1924

M.F.B. 218a—300M.-11-18—1772-39-113.

M.D. No. 7

M. OR S.

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

~~P.O.~~ St. John, N.B. 175 Adelaide St. | AUDITOR | PAYMASTER

REGT. No. 1081793 RANK Pte. NAME (IN FULL) Aitken. Robert Melbourne (BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT C.E.F. 1st Con. Bn. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 8-7-16 — TRANSFERRED TO — DATE — AUTHORITY 2595

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE

PAYABLE TO Mrs. R. Aitken (Mother) — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 175 Adelaide St., St John N.B.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE St John — DATE 31-3-19 — REASON Demob — AUTHORITY D.O. 93 — IF ENTITLED TO POST DISCHARGE PAY

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

BALANCE FROM PREVIOUS ACCOUNT

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.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 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.
Mar.							18	17	18	17																										
Apr.	6	1.10	6	60	35 00 / 70 00				111	60	68	68			61		487	50	79	90							40	50			129	77				
					W.S.G.				WAR SERVICE GRATUITY.														W.S.G.								Soldier				
153 dys at Mon			350	00					350	00													70	00							70	00	280	00		
																			6	60							6	60			6	60	273	40		
			20	00					20	00																							293	40		
																				01											01	293	39		
																							83	39							83	39	210	—		
																							70	—							70	—	140	—		
																							70	—							70	—	70	—		
																							70	—							70	—				
																															Non-Effective.					
			370	00					370	00							363	39	6	61											370	00				

PARTICULARS OR REMARKS

Regina 29-3-19
C. Gal Reg 2 P.L. 31-3-19
to Clo Allce 1st P.W 2 Sq apr
a.P.pd by Ottawa. mde
1st P.W 2 Sq as above
Over e.P.a. on Disc
a.P. Apr. not pd by Ottawa
Imprest on 2 Pty over-
credited
Ch. 396312 A.R. 31. 1/5/19
Ch. 873158 A.R. 57. 31/5/19
Ch. 1052917 A.R. 84. 3/7/19
Ch. 1252648 A.R. 105 3/11/19

160M-1-19.—L.L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

MARRIED OR SINGLE S

PLACE OF BIRTH St John. N.B.

NAME AND ADDRESS OF NEXT OF KIN Mrs Robert Aitken
75 Adelaide St, St John. N.B.

RELATIONSHIP OF NEXT OF KIN Mother

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. 1081793 RANK Pte NAME Aitken, R M (Robert M)

IF IN PERMT. CORPS WHAT UNIT UNIT No 1 Cmch Batt'n TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION St John N.B TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 8th July 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20 DATE EFFECTIVE Sept 1st 1916

PAYABLE TO Mrs R Aitken, 75 Adelaide St, St John. NB RELATIONSHIP Mother

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)

BR

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 f Canada	27 30															27 30					Balance from Canada
Oct	31	1.00	31	..	31	10	3	10							34 10	31	29/9	47	11/0					14 60	7 30			20 ..		41 90	19 60				
Nov	30	1.00	30	..	30	..	3	..							33 .			117	6/11						3 49			20 ..		23 49	29 01				
Dec	31	..	31	..	31	..	3	10							34 10	188	25/11							5 23				20 .		25 23	37 88	. .			
1917 Jany	31	1.00/10	34	10											34 10	285	15/2							8 72				20 .		28 72	43 26	. .			
Feb.	28	..	30	80											30 80	413 270	3/1/1 15/1							4 36 4 36				20		28 72	45 34	. .			
Mar 1-31	31	..	34 200	10 20											34 10 247 60	251	15/4 ~~17~~	519	21/3					8 72 45 99	8 72 19 51			20 120		37 44 165 50	42 00				
Apr 1-30	30	..	33	.											33 .													20 .		20	55 00				
May 1-31	31	..	34	10											34 10	39	24/4							8 92				20 .		28 92	60 38				
June 1-30	30	..	33												33	95	25 5							8 92				20		28 92	64 46				
July 1-31	31	..	34	10											34 10													20		20	78 56				
Aug 1-31	31	..	34	10											34 10	134	25 6							8 92				20		28 92	83 74				
Sept 1-30	30	..	33												33	195	25 7	285	25 8					8 92	8 93			20		37 85	78 89				

UDT 30

27 30 478 80

C

Assigned pay paid by A.P. Branch for September 1916 and received on September pay list (Canada)

1081793- Shr. Aitken, R. M.

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.	Acquittance Rolls 1: Date	Acquittance Rolls 2: No.	Acquittance Rolls 2: Date	Acquittance Rolls 3: No.	Acquittance Rolls 3: Date	Acquittance Rolls 4: No.	Acquittance Rolls 4: Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance: Credit	Balance: Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
MONTH	PARTICULARS				CR. 1			CR. 2	PARTICULARS					DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SEP. ALLCE. ENG.														
			Bal		78 89													78 89																	
Oct.	99				34	10											20	92 99																	
					34	10											20																		
Nov					33				AR347 25/9/17 1 CRS					8 92			20																		
									AR1675 13/10/17 "					9 73																					
									" " " "					38 93																					
									" 365 25-10-17 "					1 78																					
Dec					34	10											20	60 73																	
					67	10								59 36			40																		
Jan									AR490 25/11/17 1 CRS.					16 95			20																		
					34	10			" 562 20.12.17 "					8 03				49 85																	
					34	10								24 98			20																		
Feby					30	80			LRW 3069 P813 DN.					1 70																					
									AR 638 20-1-18 1 CRS.					8 03			20	50 92																	
					30	80								9 73			20																		
Mar					34	10			AFW. 3069 7/11/17					35																					
									AR 703 20.2.18 1 CRS					8 03			20																		
														8 38																					
									" 772 20.3.18 "					8 03				48 61																	
														16 41				48 61																	

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:- 20⁰⁰		AMOUNT:-	

NAME:- AITKEN Robert M

NUMBER:- 1081793

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 R. Aitken
75 Addelaide St
St John
Mother N.B.
Stopped Eff 1/3/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- 301 Constr Bn

DATE ACCOUNT FIRST OPENED:- 1.10.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			16 R.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
2/2/19		~~RRGD~~	~~14 60~~				

DAILY RATES OF PAY AND ALLOWANCES

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

C.R.B. 8/4/19 Credit
L.P.C.B. 6/2/19 Debit

PARTICULARS OF RENDERING NON-EFFECTIVE:- Distd on 28/2/19 Auth: W.R. 2909 Repon 11/2/19 Repon W.D.-7

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal forward.								48 61		
April	Spr Pay	33 -		A.P.				20			
				42. 1 C.R.T. 20/4/18	8 03				53 58		
		33 -			8 03			20 -			
May	✓	34 10		A.P.				20	67 68		
				132 ✓ 20/5	8 03				59 65		
		34 10			8 03			20			
June	P.P.	33						20			
				A.P. 272 20/6/18 1 C.R.T.	8 92						
		33			8 92			20	63 73		
				✓ 385 20/7 ✓ ✓	8 92						
July	✓	34 10		A.P.				20 -			
		34 10			8 92			20	68 91		
Aug	✓	34 10		C.A.P.				20			
		34 10						20	83 01		
Sept	✓	33 -		C.A.P.				20			
				✓ 3477 13-8-18 ✓	2 68 -						
				✓ 4514 26-8-18 13 C.M.R.	1 78 -						
				✓ 9621 8-9-18 C.R.B.D.	8 92 -						
		33 -			13 38			20	82 63		
Oct		34 10		C.A.P.				20	96 73		
				✓ 828 36 28-10 1 C.R.T.	9 33 -				87 40		
				6686 38 26-10 ✓	6 13 -				19 27		
		34 10			77 46			20			
Nov		33 -		C.A.P.				20	32 27		
				✓ 440 25 30-10 S.C.C. Dublin	4 87 -				27 40		
				✓ 961 28 24-11 1 C.R.T.	18 66 -				87 4		
				508 37 31-10 Dublin	4 87				387		
Dec		34 10		C.A.P.				20	17 97		
					24 40						

COMPILED BY ..... [illegible]

CHECKED BY ..... [illegible]

NUMBER 1081793 RANK Spr NAME AITKEN Robert M

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balance Forward	67 10			28 40			40	17 97		
Jany		34 10		Cap.				20	32 07		
		101 20			28 40			60			
				VD Stopp 10.12.18 to 3.1.19 25 dup DO3. 15.1.19 1 CRT		15.00			17 07		
Feby		30 80		Cap.				20	27 87		
				aR 8183 37 22.1. 2 Cer	19 47	-			8 40		
				- 8879. 58. 6.2. ✓	14 60	-			6 20		
				✓ 1885 103. 7.3. End R.D	4 87	-			11 07		
		30 80			38 94	15		20			
				A.R. 2591. K.P. 21.3. End. (1)	4 87				15 94		

SoS to CANADA
22-3-19 SL 42 C.R.T.