892350	A R Lidge	Melvern Robertson
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

deceased 18/11/59

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu Box 218

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048 (r. 87/05)

C.E.F. REGIMENTAL DOCUMENTS

NAME ARLIDGE, MELVERN ROBERTSON REGT. No. 892350 UNIT 190 BN. H. Q. FILE No. X 2320

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					DEMOB.
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
	CARDS					
	PAY-SHEETS					

H

H

Deceased 18-11-19

218

190th. OVERSEAS BATTALION C.E.F.

ORIGINAL

ATTESTATION PAPER.

No. 892350

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

COPIED Archives COPIE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Arlidge.
1a. What are your Christian names?	Melvern. Robertson.
1b. What is your present address?	Rivers, Man.
2. In what Town, Township or Parish, and in what Country were you born?	Meaford, Ont.
3. What is the name of your next-of kin?	W.F.C. Arlidge.
4. What is the address of your next-of-kin?	Lakeside Villa, Meaford, Ontario Canada.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	December 25, 1894.
6. What is your Trade or Calling?	Accountant
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, Melvern Robertson Arlidge, 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.

M R Arlidge (Signature of Recruit)

Date June 5, 1916 191 . Art Dilts (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Melvern Robertson Arlidge, 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.

M R Arlidge (Signature of Recruit)

Date June 5, 1916 191 . Art Dilts (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 Winnipeg, Man. this fifth day of June 1916.

H Kennedy LT-COL. (Signature of Justice)

O.C. 190th. OVERSEAS BATTALION, C.E.F.

M. F. W. 28.
600M.—2-16.
H. Q. 1772-39-841.

Description of Melvern Robertson Arlidge on Enlistment.

Apparent Age 21 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft 6 ins.
Chest measurement.	Girth when fully expanded	36½ ins.
	Range of expansion	2 ins.
Complexion	Fair	
Eyes	Blue	
Hair	Fair	
Religious denominations.	Church of England	
	Presbyterian	
	Methodist	
	Baptist or Congregationalist	
	Roman Catholic	
	Jewish	
	Other denominations (Denomination to be stated.)	Disciple

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).

Undescended testicle.

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 5, 1916 191 .

190TH. OVERSEAS BATTALION, C.E.F.

Place Winnipeg, Man.

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:—

MOBILIZATION MEDICAL BOARD APPROVED FIT

PRESIDENT

MEMBER

MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

Melvern Robertson Arlidge 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.

LT-COL (Signature of Officer)

O. C. 190th. OVERSEAS BATTALION, C. E. F.

Date June 5, 1916 191 .

COPIED Archives Ottawa

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

~~A Budge~~
~~#11244~~

THIS IS TO CERTIFY that No. 892350 (Rank) S/Sgt.

Name (in full) Arlidge, Melvern Robertson enlisted in the 190th Bn

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 5th day of June 1916

HE served in England.

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 25

Height 5ft. 6 ins.

Complexion Fair

Eyes Blue

Hair Fair.

Marks or Scars

M Delaney
Signature of Soldier

Date of Discharge

21-5-20.

CANADIAN DISCHARGE DEPOT LONDON

T. W. Mackay Maj.
Issuing Officer

Capt.
Rank

Date 19

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

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

H.S.B.

Number 113062 Rank Spr.

Surname ARLINGTON

Christian Name Edward

Units 4 C M R Theatre of War France

Date of Service 29-1-16

Remarks

Latest Address 543 College St.
Toronto Ont.

Roll No. B. Regt 20436

200m.-6-21.

(This form to be filled in by all ranks on voyage to Canada.)

.....

RANK SURNAME INITIALS UNIT

....

l address..... .....
(Street) (City or Town) (Province)

ne person to be notified of arrival.....

.....

tation in Military District to which a furlough warrant is required.....

..... Railway.....

, is your wife on board.....Number of children on board.....

ination.....

(Sgd.).....

D.G.O. NOV 10 1922 REGN. NO. 1,936,(.)

Deceased November 18th, 1959.

Number 892350 Rank a/

Surname ARLIDGE

Christian Name Melvern Robertson

Units M. R. Theatre of War England

Date of Service 17-10-17

Remarks

Latest Address ~~Lakeside Villa~~ ~~Meaford Ont.~~ c/o Canadian Bank of Commerce Port Perry, Ont.

Roll No. On Page H244

200m.-6-21.M.

(This form to be filled in by all ranks on voyage to Canada.)

.....

RANK SURNAME INITIALS UNIT

....

l address..... .....
(Street) (City or Town) (Province)

ne person to be notified of arrival.....

.....

tation in Military District to which a furlough warrant is required.....

..... Railway.....

, is your wife on board.....Number of children on board.....

ination.....

(Sgd.).....

DEF NOV 10 1922 REGINA 20123

Reg. No. 892350 Name Arlidge. M R.

Rank Sergt. Corps 190th Age 22 Service

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Winnipeg Gen Hospt Winnipeg	14. 3. 17	appendicitis. Acute
Medical Board	9. 4. 17	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
50M-6-19.
1772—39-1332.

No. 892350 RANK Pte NAME Arlidge M.R.

T.O.S. 30-6-16 UNIT 190th Battalion C.E.F.
B.O. 108-30-6-16

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916	1916			
June 30	July 31	✓	To be L/Cpl. 20-7-16	B.O. 124-20-7-16
Aug		✓		
Sept		✓		
Oct		✓	Prom. Cpl. 4-10-16	B.O. 188-4-10-16
Nov		✓		
Dec		✓	Prom. L/Sgt 5-12-16	B.O. 240-5-12-16
1917	1917			
Jan		✓		
Feb		✓		
Mar		✓		
Apl		✓	Trans to #16 C.C.D.	do 97

649-A-4693.

CARD NO.

SURNAME. Arlidge

CHRISTIAN NAMES Melvern Robertson

REGL. No. 892350 RANK Pte Lt/Sgt.

UNIT ~~190th~~ No 1 Independent Coy. (Draft.) Bn

FORMER CORPS Nil

NEXT OF KIN.

NAMES IN FULL Arlidge W. F. C.

RELATIONSHIP TO SOLDIER Father

ADDRESS Lakeside Mills, Meaford Ont

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Meaford Ont DATE Dec 23rd 1894

PLACE OF ATTESTATION Winnipeg Man DATE June 5th 1916

Trans. from 190th Bn to No 1 Independ. Coy attd [redacted] No 1 Independ. Coy M.R. 15/6/17

L. L. 04504. M. & D. 0512. O/S 6-10-17 984

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-330.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Accountant RELIGION Disciple

DESCRIPTION.

APPARENT AGE 21 YEARS 6 MONTHS

HEIGHT 5° FEET 6 INCHES

CHEST MEASUREMENT 35° 1/2 INCHES EXPANSION 2 INCHES

COMPLEXION Fair EYES Blue HAIR Fair

DISTINGUISHING MARKS Undescended testicle

MEDICAL EXAMINATION. PLACE Winnipeg Man DATE June 5th 1916

Present address. Rivers, Man.

(160345). Wt. No. W8304/M2107. 34,813.
4,500,000. 9/17. P. & P., Ltd. 1777.

MORNING SICK REPORT
MEDICAL INSPECTION REPORT*

Army Form B 288

Unit Canadian Record Office

Squadron, battery, or company

Station and date London W C June 18th 1918

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married).	Completed Years of Age.	Completed Years of Service.	Religion.	If for duty†	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's remarks and signature.
892350	Pte Arlidge M			91 Brondesbury Road Queens Park N W				1	Rheumatism	M to Q 1 day

ORDERLY ROOM
CANADIAN CONTINGENT
JUN 18 1918
RECORD OFFICE

3, SO... ST... STRAND, W.C. 2

E J Rowden
Capt

† State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

* Strike out whichever is not applicable.

Orderly N.C.O.

1643

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

Unit _____

Squadron, battery or company _____

MORNING SICK REPORT
MEDICAL INSPECTION REPORT*

Army Form B 256

Station and Date London C 0 25-11-18 191

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married).	Completed Years of Age.	Completed Years of Service.	Religion.	If for duty †	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's Remarks and Signature.
692350	Pte Arlidge H R 91 Brondesbury Road Queens Park N W								Pock specific adhesion T of 8'	2 Hughes Bispham for Sick 0830 29-11-18

CANADIAN RECORD OFFICE, GREEN ARBOUR HOUSE, 3RD BATTY. E.C.
MEDICAL OFFICER CANADIAN CONTINGENT 2 JOHN HARVEY ST. STRAND, W.C. 2
ORDERLY ROOM, CANADIAN CONTINGENT, NOV 28 1918, RECORD OFFICE.
1643

†State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

*Strike out whichever is not applicable.

S/Sgt Ferguson Orderly N.C.O.

(40957) W2245 P1076 4,500,000 6/18 T. & W. & J. M. Ltd. E 3351

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

Army Form B 256

Unit C-R-O.

Squadron, battery or company

MORNING SICK REPORT
MEDICAL INSPECTION REPORT*

Station and Date 21-10-18. 191

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married).	Completed Years of Age	Completed Years of Service	Religion.	If for duty†	Whether a defaulter.	Lines or barracks.	Room.	Disease.	Disposal. Medical Officer's Remarks and Signature.
892350.	Cpl. Ardidge. H. 91. Brondesbury Road. Queens Park. N.W.								Influenza	24 hrs sick Report to M.O. 8.30 22-10-18

ORDERLY ROOM, CANADIAN CONTINGENTS. OCT 21 1918 RECORD OFFICE. 2343 1643

MEDICAL OFFICER SUB-STAFF, CANADIANS, LONDON, ENG. 21 OCT 1918 3, SOUTHAMPTON ST., STRAND, W.C. 2.

†State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.

*Strike out whichever is not applicable.

W. C. Brailsford Orderly N.C.O.

(40957) W2245/P1076 4,500,000 6/18 T. & W. & J. M. Ltd. E 3351

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

COPY

EYE, EAR, NOSE & THROAT CLINIC
Medical Office, Branch of D.D.M.S.,
O.M.F.C., Argyll House, 246 Regent St.
London, W.1.

22nd January 1920.

No.	Rank	Name	Unit	per Nose & Ear Report.
892350	S/Sgt.	ARLIDGE, M.R.	HQ, OMFC.	

Hearing Voice spoken Rt. 21 ft. Left 21 ft.
Each tympanic membrane thickened and retracted.

"A" for ears. Defect due to service. chronic catarrhal otitis media.

--- --- --- --- ---

Nose. Chronic rhinitis.
Enlarged turbinate right nasal cavity.

B.1. for nose. due to service.

R.J. HARDSTAFF,
Capt. C.A.M.C.

COPY

EYE, EAR, NOSE & THROAT CLINIC,
Medical Office, Branch of D.D.M.S.,
O.M.F.C. Argyll House, 246 Regent St., W.1.

22nd January 1920.

No.	Rank	Name	Unit	per Eye Report.
892350	S/Sgt.	ARLIDGE, M.R.	H.Q. OMFC.	

VISION R.V.6/18 plus 1 with correction 6/12
L. V.6/6 " " 6/6

HYPEROPIC ASTIGMATISM.

Bl. for eyes. Defect present before enlistment, not aggravated by service.

R.J.HARDSTAFF, Captain CAMC.

Sheet II

Army Form B. 103—2.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 190th O.S. Battn. Regimental Number 892350.

*Substantative Rank ~~Pte~~ S/Sgt. Surname Ardidge Christian Names Melvern Robertson

*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.
1-8-19	HQ OM 76.	T.O.S.	HQ. OM 76 as Sgt Clerk.	London.	29-7-19	Pt II DO. 176
17 11/19	do	267	appointed a/S/Sgt & graded for pay as S/Sgt. Clerk	do	1 11/19	
29 2/20	do	46	S.O.S. H.2. OM 76 of 6 on transfer to C.E.F. for duty in England	do	29 2/20	
1 3/20	O/Sea Detail C.E.F.	DO. #1	T.O.S. on transfer from OM 76	London	1-3-20	
1 5/20	"	DO. #9	Attached to 2nd CDO pending embarkation to Canada	London	1-5-20	

W. B. Elsden
CAPTAIN & ADJUTANT
H.Q., O.M.F.C.

Wilton
Major DAAG.
for Lt. Col. Commanding
O/Sea Detach. C.E.F.

To be folded on this line.

Nothing to be written in this margin.

(26383.) Wt. W. 9693—P. 2068. 500,000. 3/19. S. & S., Ltd. E. 4602.

(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 5 20		DO 138 17.5.20	S.O.S. No 6 D Depot			
21.5.20		— , —	S.O.S. No 6 D Depot On Demob. RO 1420			

Major.

O. C. CASUALTY COMPANY NO. 6 DISTRICT DEPOT

Major.

O. C. CASUALTY COMPANY NO. 6 DISTRICT DEPOT

Nothing to be written in this margin.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-18.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 190th OVERSEAS BATTALION C.E.F.

Regimental No. 892350 Rank ~~Pte~~ Sgt. Name Arlidge, Melvern Robertson

Enlisted (a) 5/6/16 Terms of Service (a) During War Service reckons from (a) 5/6/16

Date of promotion to present rank. 20/7/16 (Cpl) 4/10/16 Date of appointment to lance rank 20/7/16 Numerical position on roll of N. C. Os.

Extended Re-engaged Qualification (b) Accountant. Infantry School Kinmel

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 Halifax N.S. R.M.S. Metagama Oct. 4th 1917			
		Disembarked, Liverpool, Eng. Oct 17th 1917.			
29-10-17	Ocn.	Apptmt of C/sgt held on arrival in England	Dibgate	17-10-17	Pt II B.O 254
29-10-17	O.C. 11th	T.O.S. 11th C.R.Bn.	Dibgate	17-10-17	Pt II Bn.O. 254
29-10-17	"	Reverted to Ranks.	"	29-10-17	" " 254
18-12-17	OC 11th	~~Supplnt to Entertainment~~ SOS on posting to M.R.D.	Dibgate	18-12-17	" " 297.
20/12/17	M.R.D.	T.O.S & Comn 11th Res.	Aldgate	18-12-17	Pt II DO 286,

Lieut. & Adjutant,
11th (Res.) Battalion.

Lieut. & Adjutant,
Manitoba Regimental Depot.

(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				
18.12.17	O.C. 11th	Attached 11th C.R. Bn.	Dibgate	18.12.17	Nt. 11 Bn. 0297.
18.4.18	O.C. 11th	Ceases to be attached from M.R.D.	Dibgate	18.4.18	Nt. 11 Bn. 092. Lieut. & Adjutant 11th (Res.) Battalion.
20/4/18	M.R.D.	Cease 11th Res. & Det. Dep. Coy. S'cliffe.	S'cliffe.	19.4.18	Nt. 17 D.O. 110.
10.5.18	—	Lon. Can. Record Office (London)	Deaford	10.5.18	131 Lieut. & Adjutant, Manitoba Regimental Depot.
11.5.18.	C.R.O.	Rtd from Mem R.D.	London	10.5.18	P.E. 109(a)
6.6.18	"	Awarded one G.C. Badge	"	5.6.18	" 109(a)
12.2.19	"	appd A/Cpl.	"	10.2.19	" 36(a)
29.7.19	"	appd A/Sgt., Group Clerk	"	26.7.19	" 172a.
28.7.19	"	S.O.S. on transfer to Hdqrs. O.M.O.C. (A.S.2)	"	28.7.19	" 171a

E.W. Johnson Capt. Adjt.
FOR Officer i/c Records
Canadian Overseas Military Forces.

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) ARLIDGE M. R.

REGIMENT C. R. O. RANK ~~C/Sgt~~ S/Sgt. No. 892350

Date of Examination in England 14/7/19 | 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 6. 8 & 9
2. EXTRACTIONS No
3. CROWNS No
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

   } No

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 Yes
- (b) In England Yes
- (c) In France No

Signature of Dental Officer [signature]

Name:	Melvern Robertson ARLIDGE	
Service Rank or Number:	892350	
Branch of Service:	Canadian Expeditionary Force	
Date and Place of Birth:	28 December 1894	Meaford, Ont.
Date and Place of Appointment, Enlistment or Enrolment:	5 June 1916	Winnipeg, Man.
Theatres of Service:	Canada and Britain	
Date and Place of Retirement or Discharge:	21 May 1920	Halifax, N.S.
Type of Retirement or Discharge:	Honourable	
Rank on Retirement or Discharge:	Staff Sergeant	
Medals and Decorations:	British War Medal	
Remarks:	Nil	

Date 26 February 1988

Director
Personnel Records Centre

also WWII

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 13 Dec. 1917.

No. 892350 Rank ~~Pte~~ 5/Sgt. Name Arlidge M.R.

Local Unit 11th Res. Bn. Overseas Unit ~~~~ Age 22

Examination held at St Martin's Plain.

DISABILITY.
~~Overseas~~—Local
(scratch one out).

Appendectomy Adhesions.

PRESENT CONDITION.

Enlisted June 1916. Came Overseas October 1917. Has trained since, except for 3 weeks, during which time he says he could not stand the training. Operated on in Winnipeg - 14-3-17 for appendicitis. Discharged from Hospital 9-4-17 but wound broke down after 10 days and he was again laid up for 3 weeks with a discharging wound. Wound ~~was~~ healed up finally about middle of July.

Complains of pains radiating up right side of abdomen from region of scar, on taking any bodily exercise. Also of tenderness in this region.

Examination - Right Testicle missing - Removed Dec. 1915 - Tubercular ~~his~~ says. appendectomy - Scar shows evidence of suppuration. Right Rectus shows more rigidity than left. Is quite tender around wound area. Says ~~Right~~ left ankle is weak as result of a sprain. ~~In~~ Has slight pronation of foot.

BOARD RECOMMENDS:—

1. Fit for Duty
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty General condition good. Wears glasses but says eyes are good. ..... weeks.
4. Fit for Permanent Base Duty Other systems normal
5. Discharge Is a clerk. B III - 3 months

20 MAY 1918

Signatures:—

Members { J. Murray ..... President.
R. J. Dwyer, Lt. C.A.M.C.

APPROVED

14 DEC 1917

Dated ..... 1917.

[signature] CAPT.
FOR A.D.M.S. CANADIANS, BRONCKHORST

For A.D.M.S.

196TH OVERSEAS BATTALION C.E.F.

S/Sgt.

MEDICAL HISTORY SHEET.

Surname Arlidge *Christian Name* Melvern Robertson

Examined { on fifth day of June 1916
at Winnipeg, Man.

Birthplace { City or Town Meaford, Ont.
County Ontario

Apparent age 21 Yrs. 6 Months.

Trade or occupation Accountant

Height 5 Feet 6 Inches.

Weight 141 Lbs.

Chest measurement { Minimum 33½ inches.
Maximum expansion 35½ inches.

Physical development Normal

Small-Pox Marks None

Vaccination Marks { Arm Right. Left.
Number None

When Vaccinated last Never

(*a*) Marks indicating congenital peculiarities or previous disease ------

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

Approved by
Captain
Rank M.O.

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

MOBILIZATION MEDICAL BOARD APPROVED FIT — President, Member, Member

Date.	Result.	Vaccinations.	
16/2/17	Pos.	G W Brazier	M.O.
			M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.	
19/1/17	Pos	G W B	M.O.
26/1/17	Pos	G W B	M.O.
1/2/17	Pos	G W B	M.O.

Enlisted on fifth *day of* June *1916 at* Winnipeg, Man.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	196TH OVERSEAS BATTALION C.E.F.	892350		June 5. 1916.
Transferred to	No. 1 Int. Regt. Co. C.M.R.			June 9. 1917.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
St Martin's Plain	13-12-17	Adhesions appendicitis	B III - 3 months
do	12-3-18	Defective Vision. Paralysed Post op. Scar tissue	B III Perm. Unfit for Military Service Capt
London.	21 MAR 1918 22 MAY 1918	APPROVED category B 3 ca.h. B 3 ca.h.	
	22. 1. 20	& Chronic Rhinitis	Otherwise Capt

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

M. F. B. 313.
200M—11-15.
H. Q. 1772-39-439.

43 Lascelles Field Rd Ford 26-4-203 A-Adhesions Defective Vision C-Ch. Rhinitis

CAPT. O.C. A.D.M.S. CANADIAN, SHORNCLIFFE

Fit - Mo Manor Card

Surname Ardidge Christian Name Melvern Robertson

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
Winnipeg	5 6 16	14	3	17	9	4	17	Appendicitis	26	Recovery	[illegible]
St Charles Hospital		3.	9.	17	10.	9.	17	Tonsillitis.	4	Recovery	[illegible]

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.....
I90th Overseas Battalion C.E.F.

(2) Regimental Number 892350

(3) Full Name of Soldier Arlidge, Melvern Robertson.

(4) Place of Birth Meaford, Ont.

(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 ? No

(8) Have you any children ? ----
If so, give number of boys, and girls ----
Also their names and ages

M. F. W. 67.
200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....Yes.....

If so, state name and address ....W.F.C. Arlidge, LakesideVilla, Meaford, Ont.

(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.

.....---.....

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

If so, in what Company ?....Great West Life, Manufacturers Life, Canada Life.

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.

G. Kemmerson Lt.-Col.

Officer Commanding.

Date.....June 5, 1916..... O.C. 190th Overseas Battalion C.E.F.

Form R 122.
2353—100M—9-12-16.

CR. Rank Name ARLIDGE, Melvern Robertson Reg'l No. 892350.

Unit No 1. Indep. Co to Man R. D- If in perm. Corps / What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg, June 5th, 1916. Place of Birth Meaford, Ont.

Name and Address, Next-of-Kin W.F.C.Arlidge.
Lakeside Villa, Meaford, Ont., Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character X 177

H. W. V., Ld.—9546-16.

COPIED Archives COPIE

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		17-10-17	S/S Metagama
29.10.17.	11th Res. Bn.	Taken on strength. a/12/094	Seliffe.	17.10.17	Pte II O 254.
29.10.17.	"	Reverts to the Ranks	"	29.10.17	" 254
18.12.17.	"	S.O.S to M. Bg Depot. attached	" do.	18.12.17	Pte II O 297 (M.R. Dep. 20.12.17)
18-4-18	11th Res	Ceases to be attd from MRD	Pte —	18-4-18	Pte II O. 92. MRD. Pte II O. 110 d/20/4/18
22-4-18	1st CCD.	attd for P.P.C.L.I.	Pte Seaford	19-4-18	Pte II O. 110. MRD. Pte II O. 110 d/20/4/18
30-4-18	—.—	Ceases to be attd from MRD.	Pte Seliffe	25-4-18	Pte II O. 118. MRD. Pte II O. 117 d/27-4-18
27-4-18	MRD.	attd to 11th Res Bn for P.P.C.L.I.	Pte Seaford	26-4-18	Pte II O. 117. Pte II O. 101 d/29-4-18
13-5-18	11th Res Bn	Ceases attd from MRD for P.P.C.L.I.	Pte Seaford	10-5-18	Pte II O. 113. MRD. Pte II O. 131 d/11-5-18
11-5-18	MRD.	On Com, to Can Record Office London.	Pte —.—	10-5-18	Pte II O. 129.

COPIED Archives COPY

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.
					M.R.D.
11.5.18.	C.R.O.	T.O.S. from M.R.D.	Pte London	10.5.18.	Pte-II 0109 a Pte II 1334/3/5/18.
6-6-18	C.R.O.	Granted 1.G.C. Badge	" London.	5-6-18	— 139
12.2.19	C.R.O.	A/Sgt. 4 Cpl	Pte London	10.2.19	— 36a
24.7.19.	C.R.O.	A/Sgt. Qr. Clerk.	Qr. -do-	26.7.19	— 172.
24.7.19.	C.R.O.	A/Sgt. Q.S.Sgt. Clerk	Qr -do-	26.7.19	— 172. HQ 0 m FC
28.7.19.	C.R.O.	S.O.S. to HQ 0 m F.C.	Qr. -do-	28.7.19	— 171. P.O. 176 a/1.8.19.
	HQR.E				
17.11.19.	H.Q.0.m.F.C.	A/Sgt a/S/Sgt	a/s ✓	1-11-19	- 267.
29.2.20.	✓	S.O.S. to C.E.F. for duty in England	a/s/s. ✓	29.2.20	- 46
1-3-20	O/Sea Detach C.E.F.	S.O.S. on transfer from 0 m F.C.	a/s/sgt London	1-3-20	— 17 O/Sea Detach C.E.F. D.O. # 1 d/1-3-20
1.5.20	✓	Attached to 2nd Can Res pending embarkation	✓ ✓	27/4/20	— 9.
7.5.20	✓	Left to Canada	✓ ✓	4/5/20	D.O. 11

S.L. 165 d/4/5/20

Form P. 812B.
31845 2m 28/11/19 726

Serving

FILE NO. 20266

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

892350

Payable to Arlidge Melvern R. Dependent

Address 91 Brondesbury Rd Address

Queens Pk. NW6.

Date	Cheque No.	Gratuity	Payments	Balance Due	Remarks
Jan 13	Grat.	8 6 0			
13	156371		5 7 10 8	2 8 15 4	1, 2, 3 & 4 Instl authy Capt Underwood
Feb 2	162516.		2 8 15 4	0 0	5 & Final
		8 6 -	8 6 6 =		

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

A 3553

OVERSEAS CONTINGENTS

Date of Assignment

Dec. 1/17.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

~~20.~~	15		

1-1-19

PARTICULARS OF SEPARATION ALLOWANCE

No. 89235-0.

Rank Pte. Promoted Reverted Discharge

Soldier's Name Melvern R. Arlidge,

Battalion 190th Batt.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name ~~Talmage C. Stinson,~~

Address ~~Treherne, Man.~~

Change of Address

1 The Canadian Bank of Commerce Carman, Man.

2

3

4

277-M6-2

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec	66495 U.		20	20	B.	2. M. 18.12.17. mailed 31/12/17.
Jan	70858 M		20	20	R	
Feb.	93377 B ✓		20	20	B	A/P transferred to Bank eff 1st Jan 1919 Auth 2M. M.R.O. 55553-24-12-18.
Mar	100605 G		20	20 ✓	B	
Apr	8397 H		20	20	B	
May	7768 C		20	20	B	
June	16179 B		20	20	B	
July	29169 V		20	20		
Aug	31712 A		20	20		
Sept	38449 A		20	20		
Oct	45085 A		20	20	M6	
Nov	53174 A		20	20	M6	
Dec.	64552 B		20.	20	M6	
Jan	72372 B		15	15	M6	
Feb	79257 A		15	15	M6	
MAR	84879 D		15	15		
APR	2259 C		15	15	M6	
MAY	7080 H		15	15		
JUN	9945 A		15	15		
JUL	11876 A		15	15		
Aug	13358 A		15	15		
Sep	15848 A		15	15		
Oct	13766 B		4/5 0	4/5 0		

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22230—M. & D. 7668.

Date of Enlistment

OK 10 2/4 0
Jy 1

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Details

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

a 3353

PARTICULARS OF SEPARATION ALLOWANCE

No. 892350

Rank Pte Promoted Reverted Discharge

Soldier's Name Melvern R. Arlidge

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name The Canadian Bank of Commerce

Address Carman, Man

Change of Address

1

2

3

4

277-M-2

Date	Cheque No.	Amount S/A	Amount A/P	Total
			410	410
Nov.	C 13740		15	15
Dec	D 13701		15	15
1920				
Jan	E. 13685		15	15
Feb.	F. 13677		15	15
Mar	G. 13676		15	15
April	H 13674		15	15
May 1	13669		15	15
			505	565

REMARKS

W.S.S. taken into payment in England - 17-2-20

A/c Closed 31-5-20 Royal George

Ret'd per ..... Mgo.

Date 4/5/20 ..... J. Graham

..... M.R.O. Destroy L.P. 12476

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22520—M. & D. 7493.

EYE, EAR, NOSE & THROAT CLINIC
Medical Office, Branch of D.D.M.S.
O.M.F.C. Argyll House 246 Regent St. W.1.

22 Jan 20 ..... Date

No. Rank Name Unit per Nose. Ears. Report

F 92350 P/sgt Christie MR HQ Orse.

Hearing voice spoken Rt 21 ft. Left 21 ft

Each tympanic membrane thickened & retracted

"A" for ears. Defect due to service. Chr catarrhal otitis media.

Capt. CAMC

Nose. Chronic rhinitis

Enlarged turbinates at usual cavity

B+ for nose Due to service

Returned Base.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

Form (D.M.S. 1312). A.F.B. 179 Canada Revised). 12367. 50M. 29-12-17.

Reserved for M.H.C.

Regt. No. 892350 Rank Pte 5/36th Surname ARLIDGE Christian Name MELVERN ROBERTSON.

Unit or Corps—(*a*) Overseas from United Kingdom no (*b*) In United Kingdom M.R.D. att 11th Res Bn

Born at—Town Meaford County or Province Ont. Country Can.

Date of Birth—Day 28 Month Dec. Year 1891 Age 23 yrs. 3 months.

Joined at Winnipeg Can. Date June 5. 1916

Former Trade or Occupation Accountant

Permanent marks or peculiarities that will serve for future identification:

Tattoo on left side chest
"892350
CANADA"

Height—feet 5 inches 7 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) ARLIDGE

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) DEFECTIVE VISION

Disabilities Group (*b*) PAIN-FUL POST OPERATIVE SCAR ABDOMEN

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Congenital	Canada	
(*ii.*) As to Group (*b*) above.	Appendectomy	Canada	1917
(*iii.*) As to Group (*c*) above.			

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? yes If yes, has Active Service aggravated it?

(*ii.*) As to Group (*b*) above? no If yes, has Active Service aggravated it?

(*iii.*) As to Group (*c*) above? If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? no

(*ii.*) As to Group (*b*) above? yes

(*iii.*) As to Group (*c*) above?

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? yes (*ii.*) While off duty? no

(*iii.*) Was a Court of Inquiry held? no (*iv.*) Where? (*v.*) When?

(*vi.*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*). Enlisted June 5. 1916. To England Oct 1916. Has not been in France. C.F. complains of poor eyesight pain in region of Right side abdomen. and weak left ankle. He states He was operated on for appendicitis March 1917 in hosp. 4 weeks. wound broke down 10 days after leaving hospital confined to bed 3 weeks. since that time has had pain in region of operation scar on bending or walking more than 2 miles. Right testicle removed before enlistment 1914. as result of injury. Sprained left ankle 1914 has given considerable trouble on marching. states He has to fall out and on wearing putties the left ankle swells. He states he has frequent colds and ~~cou~~ constant expectoration.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*) Examination Appendectomy scar present marked tenderness on light pressure in area of scar and on bending exercises or making time at quick march time. Scar on right side scrotum where testicle removed before enlistment. no present disability. Eye Specialists report Westcliffe Feb. 8. 1918 Rt V. 6/12 with glasses 6/9 R Amblyopic hyperopic astigmatism Lt V. 6/9 " " 6/6 Left hyperopic astigmatism. He is fit for overseas service. Recommend B III. Small cut on right hand. no disability: Heart and lungs and other systems normal. In my opinion He will not be able to walk five miles within six months. Right ankle condition only slight disability

8. OPERATION. (*i.*) Was one performed? yes Testicle removed before enlistment 1914. appendectomy Mar 1917.

(*ii.*) If so, state what.

(*iii.*) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service?

(*ii.*) If so, describe. no.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? no

(*b*) Fit for base duty? yes B III Not likely to be raised in category within six months.

(*c*) Invalid to Canada? no

(*d*) Discharge from the Service as permanently unfit? no

Date of Report Mar 12. 191 8 Signed G.F. Elkerton Lt

Station St Martins Plain Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

Officer i/c / S.M.O. Hospital / Brigade / Strike out one of these.

Dated at Station, on 191

S.M.O. 2nd C.R.B.

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)?

If not, indicate it. yes

12. Is the cause of the disability fully indicated in Part I. (2)?

If not, indicate it. yes

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? no / Aggravated? no } (*b*) Misconduct of the Soldier { Caused? no / Aggravated? no }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)' not applicable

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, ½, ⅔, ¾, ⅘, *or all.*) not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).

(*i.*) Is it permanent? not applicable

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applicable.

18. Remarks.

19. Recommendation :—(*a*) Fit for duty? no

(*b*) Fit for base duty? yes B III not likely to be raised in category within six months

(*c*) Invalid to Canada? no

(*d*) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission.

Date of Board 12-3-18

Station St Martins Plain

Signatures of the Board. Hattyttenrauchlerpt *President.* George Hooper Capt

Approved A.D.M.S.

Dated at CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE Station 1 MAR 191 191

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Concur.

19. Is the invalid fit for

(a) General service, ~~(Category A) (Yes or No.)~~
(b) Service abroad, not general service, (" B) (Yes or No.) B
(c) Home service (Canada only), ~~(" C) (Yes or No.)~~
(d) Temporarily unfit. ~~(" D) (Yes or No.)~~
(e) Unfit for service in Categories A, B and C ~~(" E) (Yes or No.)~~

20. It is certified that the invalid

~~(a) Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

~~(b) Does not require treatment.~~ Yes Obs.
~~(c) Should pass under his own control.~~
~~(d) Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

Returned to Canada asstt. a. q. m. at 90831.
11/11/18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE Argyll House London — *President.*

DATE 22. 1. 20 — J. R. Wilson Capt. — Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE..... — Members

DATE.....

APPROVED BY — *Assistant Director of Medical Services.*

DATE.....

APPROVED BY — *Director-General of Medical Services.*

DATE 22/1/20

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

Argyll House
STATION London. DATE 22. 1. 20.

1. 1 (a) Unit H. Q. O.M.T.C. (b) Regimental No. 892350 (c) Rank S/Sgt.
(d) Surname Arlidge (e) Christian name Melburn Robertson
(f) Home address Meaford. Ont.
(g) Next of Kin Miss Eula Arlidge (h) Relationship Sister.
(i) Address of Next of Kin Meaford. Ont.
2. Age last birthday 25. Date of birth Dec 28. 1894
3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg (b) Date 5 June 1916.
4. Personal description:
(a) Height 5. 7 (b) Weight 142 Est. (stripped) (c) Complexion Fair.
(d) Colour of hair L. Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Tattoo on left side of chest 892350. Canada. Rt. testicle missing. Two abdominal scars on right side.
5. Former trade or occupation Accountant.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	231

(Soldiers Statement)

	Periods From	Periods To
Canada	5 June 1916	29 Sept 1917
England	10 Oct 1917	present date
France or other theatres of War		

7. Original disease, or injury (1). Appendicitis
(2). Defective Vision.
(3) Chronic Rhinitis
(a) Date of origin (1) 1917. (2) In childhood (3) 1915. (b) Place of origin (1) Canada. (2) Canada (3) Canada
(c) Cause (1). Natural causes and service conditions. (2) Natural Causes (3) Natural Causes.

M. F. B. 227.
400m.—11-18.
1773-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

(1) Abdominal adhesions of old appendicitis wound
(2) Defective Vision partial loss of function of right Eye.
(3). (Chronic Rhinitis) with a Chronic discharge present

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Patient is well developed and well nourished. Has a scar of old appendicitis operation also a small one higher up on abdominal wall right side: Right testicle missing. Some tenderness of left ankle especially after doing much walking no disability found on examination.
(1) Old appendix wound scar adherent with some local tenderness especially on stretching of abdominal wall or extension of right leg Soldier complains often of dragging pain in right groin and local tenderness on palpation about the old scar
(2) Defective Vision Specialists report 22. 1. 20.
Vision R.E. 6/18+1 with correction 6/12
L.E. 6/6 with correction 6/6. Hyperopic Astigmatism
"B" for Eyes Defect present before Enlistment not aggravated by service
(3). Chronic Rhinitis with a chronic discharge from nose and pin hook throat Specialists report: Chronic Rhinitis Enlarged turbinate rt. nasal cavity BT. for nose due to service Rt 20 ft Left 20 ft: Excl. tympanic membrane thickened Hearing for Spoken and retracted. ("A") for ears Defect due to service. Chr. Catarrhal Otitis Media

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No. Cardio-Vascular System No. (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System Yes (Albumen and Sugar will be excluded.)

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

Right testicle removed pin Dec. 1914 prior to Enlistment caused Tuberculosis of testicle. Result necessary.

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

Soldier States he was operated for Appendicitis in March 1917. Result recovery but some abdominal adhesions now persist, Defective Vision began in childhood and has persisted: see well with proper glasses. Chronic Rhinitis began in 1915 following Pleuro Pneumonia a Chronic discharge now persists

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Tuberculus testicle 1914. Operation & removal. Cured.
Pleuro-Pneumonia 1915. Result recovery.
Laryngitis 1915. Result recovery

(*c*) (Here give a description of wounds, scars and deformities.

Two abdominal Scars on right side of abdomen result of appendicitis operation. Right testicle removed

11.—(*a*) Did the disabling condition have its origin before enlistment? 1. No 2. Yes 3. Yes.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

(1) No. (2). No. (3) Yes. see specialists report

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (1) (a & b) - no. (2) (a & b) - no. (3). (a & b) no.

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (1) permanent - (2) permanent (3) permanent unless operated on. Chr.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

(1) Operation: appendicitomy
(2). Fitted with glasses
(3). Nil

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? 1. No 2. No 3. Yes. No
(If the answer is "yes" state nature of treatment required and probable duration)

Yes no. (3) Specialists treatment for enlarged turbinate & chronic Rhinitis duration 6 weeks CRW

16. Can the former trade or occupation be resumed? Yes.
(If not, briefly state why)

17. Recommendations

x-Ray of left ankle

C. R. Wilson Capt C.A.M.C
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned M. R. Arlidge have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of nil

M Arlidge 8/6/18 Rank.
Signature of invalid examined.

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.I. 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.I. 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

No. of Dependents..None.

War Service Badge, Class "A" No.....4

Religion..Church of Christ

Dispersal Area.....M

Next of Kin..Father

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

H

M

1. No. 892350

2. Rank a/Sgt.

3. Name Arlidge, Melvern Robertson

4. Unit Overseas Detachment C.E.F.

5. Date of Discharge 21-5-20 | Place Halifax N.S.

6. Reason for Discharge Demobilization.

Trade..Accountant Category..B.iii

Service in France...None. Occupational Group...3..

7. Authority R.O. 1420

8. Proposed Residence after Discharge
Lakeside Villa, Meaford, Ontario.

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

Deceased 18-11-59

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Halifax N.S.

Date 14. 5. 20

Signature

(O.C. Discharging Unit.)

M.F.B. 218a—150M-3-19—1772-89-113.

Not on Strength

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 892350 RANK S/Sgt. NAME (IN FULL) Arlidge M.R (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 12. — DATE EFFECTIVE

PAYABLE TO Canadian Bank of Commerce — RELATIONSHIP

ADDRESS Carmen Man.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS 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 $	CASH PAYMENTS COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
	30 4 m	Debit	Bal								Boat Cheque						48 7										7 45				12 32						
	1-21 5/20	21	2 10	44 10					44 10		Train Pd						5 00														5 00						
	1-4 5/20	4	1 50	London Suit	6 00				6 00		Cheque 10620105						52 78														52 78						
	Clothing				35 00				35 00		a/P												Mem 15 00								15 00						
									85 10																						85 10						
	600								600												600										600						Unearned 4 days London Salad 1 50 5 6 8 20 0 52 with Mrs Douglas

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1172-39-1390.

P. 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH: Meaford. Ontario. Canada.

NAME AND ADDRESS OF NEXT OF KIN: W. T. C. Arlidge, Meaford. Ontario.

RELATIONSHIP OF NEXT OF KIN: Father

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
Reverted to ranks (Surplus)	29.10.17	Bo. 354. 29/10/17 11 Res.

ADMISSIONS TO HOSPITAL, &c.

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

Re.

REG'L NO. 892350. RANK ~~Gnr~~ NAME Arlidge, Melvern Robertson 129

IF IN PERMT. CORPS WHAT UNIT: #1 Inf. Co. Draft Unit 11th Res Bn

UNIT: 11th Res Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION: Winnipeg. Manitoba

DATE OF ATTESTATION: ~~30/10/16~~ 3/6/16

TRANSFERRED TO / DATE / AUTHORITY

ASSIGNED PAY MONTHLY $: 20.00 DATE EFFECTIVE: 1/12/17 a.s.m. forms rend. 19/12/17

PAYABLE TO: Mr. Talmage C. Stinson, Trehorne, Man. RELATIONSHIP: Friend

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)

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
1/10/17	Balance from Canada													29.45	29.45

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
							29.45				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEPR. REG. PAY	SER. ALLCE. ENG.
									29 45		
Oct.	Qtrs pay 92 days	36 90							66 35		15
	Q. Pay 3 "	30 40									
Nov	S.P.	34 00		A.R. 335. 26/11/17 M.R.D.	4 87						30
Dec	"	34 10		A.R. 1344 7/11/17 M.R.D. 11 Res.	34 07						
				A.R. 1478. 29/11/17 M.R.D.	12 17						
				CAP.			20	62 34			
		67 10			51 11		20				
Jany 1918	S.P.	34 10		Cap			20				
				A.R. 1547. 6/12/17 11 RES.	34 33						
				" 1808. 17/11/17. "	7 30				44 81		
		34 10			31 63		30				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEPR. REG. PAY	SER. ALLCE. ENG.
1918									29 45		
Jan'd									44 81		
Feby	P.P.	30 80		C.O.P.						20	
				A.R. 1688 14-1-18 11 Res.	7 30						
				" 1800 28-1-18 "	7 30						
				" 1930 12-2-18 "	4 87				36 14	30	
		30 80			19 47					20	
Mch.	"	34 10		C.O.P.						20	
				A.R. 2051 - 28/2/18 11 Res	4 87						
				" 2240 14/3/18 "	7 30						
				" 2405 23/3/18 "	7 30				30 77	30	
		34 10			19 47					20	

89350 (Pt) Coolidge A. R.

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.																			
													1		2		3		4		1	2	3	4				Credit	Debit			
													No.	Date	No.	Date	No.	Date	No.	Date												
MONTH	PARTICULARS		CR. 1	CR. 2			PARTICULARS					DR. 1	DR. 2																			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-1-19	EFFECTIVE DATE:-
AMOUNT:- 1/5 00	AMOUNT:-

NAME:- ARLIDGE. M R.

NUMBER:- 892350.

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.
Can. Bk. of Commerce Carmen. Man. Can.	

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D0176. HQ	29.7.19.	Sgt Cdr.
" 267 "	1-11-19	3/Sgt Cdr.

UNIT AND TRANSFERS

ORIGINAL UNIT:-

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			ADJ GEN'L
D046 HQ OMFC 29/10	29.2.20		G. E. F.

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
4/10	Bankmoney Ent	4 87	LPC.			D/Bal	7 45
			Transf to Can 30/10				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
D0 176.	1 35	50		1 50.
	1 60	50		1 50

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919.				Fwd.					90 24	30 —	
Sept.	—			CP. 86915 Tao. 12.9.	24 33				65 91		
				aR. 86683 Tao 10.9.	43 80				22 11		
				aR. 8766 ~ 24.9.	34 07				11 93	25	
					10220	—	—	—			
Oct	LONDON SUBSTINENCE ALLOWANCE	103 85		Apr 01316 Lab 15/10	38 93					30 —	
	UNIT.....			2445 ~ 29/10	34 07						
	CANCELLED D.O..... DATE.....			CAP. Oct				15	3 92		
		103 85			73 00 / 73			15			
Nov	✓	100 50		CAP. Nov				15	86 42	30 —	
	Appt: 3/Sgt 14/9 30 days to expire	7 50		CP 3196 — 14/11	38 93				47 49		
Dec.	Pra.	111 60		3344 ~ 14/11	38 93				8 56	30 —	
				CAP. Dec				15	112 / 127 66		
				4185 ~ 26/11	48 67				63 99		
				4658 ~ 5/12	29 20				34 79		
				5321 ~ 9/12	34 07				3 72		
		219 60			189 80			30			
1920	War Service Gratuity in Force										
Jan	Pra	111 60		Cap				15	100 32	30 —	
				6141 HQ 13/1 1	48 67				51 65		
				6495 ~ 27/1 3	48 67				2 98		
		111 60			97 34			15			
Feby	✓	104 40		Cap				15	92 38	30 —	
				6984 ~ 11/2 1	43 80				48 58		
		104 40			43 80			15			
Mch		111 60		329 London 10/3	48 67						
	Bal c/f			Cap							

NUMBER 89235 RANK NAME Arlidge M.C.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	B/fwd.	111 60		B/fwd.	48 67				48 58		
				London Scot Sub	58 40						
				Capt				15	38 11		
Apl	Pra 30 @ 2/10 SA 30 @ 1.50 3d a/c Sydney 3.87	160 37		1057 ap	38 93						
	Pra 5 9/16 - 29 9/16 @ 1.10 25 days SA 60 p/a "	112 50		1257 "	38 93						
				1445 "	48 67						
				1513 "	58 40						
				Capt				15	1 45		
				Error in Pra above		6 ..			7 45		
				—							
				—							
May	L.S.A. 1.45 to End of P.C.	6 ..		—					1 45		

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	~~1-12-17~~ ~~1-12-18~~ 1-1-19	EFFECTIVE DATE:-	
AMOUNT:-	~~20.00~~ 15.00	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.

~~Mr Talmage A Stinton~~
~~Brother in law~~
~~Friend~~ Canada
The Canadian Bank of Commerce
1/12/18 Carman, Manitoba, Canada — Ave

NAME:- ARLIDGE Melvern Robertson
NUMBER:- — 892350 —

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D.O. 109	10-5-18	Pte / Clk.
D.O. 133A Records	10-6-18	Class II Clerk
D.O. 133A "	11-6-18	Class I Clerk
Rec D.O. 36 12-2-19	10-2-19	A/Cpl.
D.O. 176 HQ	29-7-19	Sgt Clerk

UNIT AND TRANSFERS

ORIGINAL UNIT:- #1 Ind Co Draft
DATE ACCOUNT FIRST OPENED:- 1-10-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			MRD.
L R	1/6/18	19/6/18	Rec. L.D. N
D.C. 141		25-7-19	HQ L.D.

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

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSICE ALLICE
D.O. 109.	1 —	10		1 —
~~D.O. 133A Rec.~~				
D.O. 133A Rec	1 —	50		1 —
D.O. 133A Rec	1 20	50		1 50
HQ DO 176.	1 35	50		1 50

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mch	Bal. Forward								30 77	30	
Apr	P P	33		C.A.P.				20		"	
				A.R 92 13 4/18 11 Res.	4 87						
				" 191 20 4/18 "	4 87						
				" 587 22 4/18 1st C.C.D.	1 30				26 73		
		33			17 04			20			
May	P Pay	34 10		C.A.P.				20			
				A.R 161 9/5/18 11 Res	4 87						
				D.R 6250 13/5/18 Records	19 47						
				" 8013 27/5/18 "	24 33				4 84	30	
		34 10			48 67			20			
JUN	P & A	63 00		A.P. Can				20			
	w c subs 10-5-18 - 31-5-18	22 00		A.R. 10243 = 12-6-18	19 47						
		85 00		" " 13583 - 26-6-18	19 47				18 22		
					38 94			20			
	Un. Credit. 10/6/18 - Class II Clk.	40		A.P. Can				20			
	" " 11/6/18 to 30/6/18 = 20 days @ 60¢	12 00		A.R. 14564 - 4-7-18	9 73						
July	P & A.	83 70		" " 16322 - 12-7-18	14 60						
				" " 17350 - 17-7-18	9 73						
				" " 19102 - 26-7-18	34 07						
		96 10			68 13			20	26 19	30	
Aug	P & A	83 70		A.P. Can				20			
				A.R. 23191 - 13-8-18	29 20						
				" " 27559 - 27-8-18	29 20						
		83 70			58 40			20	31 40		
Sept	P & A	81		A.P. Can				20			
				A.R. 33661 18-9-18	29 20						
				A.R. 38944 - 27-9-18	29 20				34 09		
		81			58 40			20			

NUMBER 892350 RANK Pte NAME ARLIDGE. W.R. A.P. CAN. 26[00]

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Brgt. forw								34 09	30	
Oct	T.A	83 70		a.P Can.				20	97 79		
				AR. 46940. 11-10-18	34 07				63 72		
				" 55900 28-10-18	29 20				34 52		Bal owed.
		83 70			63 27			20			
Nov.	Pay.	81		Can.				20	95 52	30	
Dec	Pad	83 70		C.A.P.				20			
				AR 65272 13.11.18	29 20				130 02		
				AR 74251 24.11.18	29 20				100 82		
				AP 77261 5.12.18	34 07				66 75		
1919				AR 88594 18.12.18	34 07				32 68		
Jan	P.A.a 3[20]	99 20		A.P. Can				15	44 88		
		263 90			126 54			5	116 84		✓
Feb	Pa a 3[20]	89 60		AR 2075 8.1.19	34 07						
				AR 15840. 23.1.19	43 80						
				C.A.P.				15	113 61	30	
				AR 34437 11.2.19	48 67				64 94		
				AR 42575 28.2.19	48 67				16 27		
Mar	P.all a 3[20]	99 20		Can				15	115 47		
				AR 49951 14.3.19	34 07				100 47 / 66 43		
				C.P. 51628 18.3.19	24 33				42 07	30 -	
				AR 56433 28.3.19	9 73				32 34		
		188 80			243 34			30 -			
Apl	P.all a 3[20]	96 -		Can. R. Pay.				15 =	113 34		
				AR 62990 14.4.19	43 80						
				AR 66036 28.4.19	38 93						
May	P.alloc a 3[20]	99 20		Can a Pay				15 =	114 81	30 =	
				AR 69811. 14.5.19	43 80				71 01		
				AR 72330. 29.5.19	38 93				32 08	✓	
		195 20			165 46			30 -			
June	P.a a 3[20]	96 -		C.A.P.				15 -	113 08		
				AR. 74592 13.6.19	43 80				69 28		
July	P.a a 3[20]	99 20		AR 77016 26.6.19	38 93				168 48 / 129 56		
				CP. 76850 27.6.19	34 07				95 48		
				C.A.P.				15 =	80 48		
		195 20			116 80			30 =			
				AR 81641 28.7.19	38 93				41 55		
				CP 80479 18.7.19	38 93				2 62		
		0			77 86						
Aug	P.a a 3[20]	99 20		C.A.P.				15 =	86 82		
	Sgt Clk 29/7/19 to 31/8/19 34 days @ 15	5 10							91 92		
	Sgt Clk 26/7/19 to 28/7/19 3 days @ 15	1 15							92 37		
				AR. 83972. 15-8-19	38 93				53 44		
		104 75			38 93			15			
Sept	P.a.	100 50		C.A.P.				15	138 94		
				AR. 85416. 28-8-19	48 67				90 27	✓	
		100 50			48 67			15			