DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name CAUGHEY ROLAND. IRA.

Reg. No. 2043517 Rank Gunner

Corps No 4 Sec. Div. Am. Column
Med Unfit

12403

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 3

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A. F. B.- 268- 1
M. F. W. 39a-1
A. F. B.- 122- 1
M. F. W. 67- 1

M. F. W. 62.
50m.—9-16.
H. Q. 1772—39 - 935.

Actual age Claimed
15. 2. 18
Birth Certificate shows date
of birth 5/4/1900
Attestation

NO, 4 SECTION, (M, D, 10)
DIVISIONAL AMMUNITION COLUMN
WINNIPEG, MAN.
CANADA

1 ORIGINAL

ATTESTATION PAPER.

No. 2043517

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Caughey
1a. What are your Christian names?	Rotland Ira
1b. What is your present address?	540 Victor St. Winnipeg. Man
2. In what Town, Township or Parish, and in what Country were you born?	Winnipeg. Man. Canada
3. What is the name of your next-of kin?	Mr. Rotland Caughey
4. What is the address of your next-of-kin?	540 Victor St. Winnipeg Man
4a. What is the relationship of your next-of-kin?	father
5. What is the date of your birth?	April 5 1898
6 What is your Trade or Calling?	Baker's helper
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, Rotland Ira Caughey, 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.

Roland Ira Caughey (Signature of Recruit)

Date JAN 12 1917 191 . Geo Fieldhouse (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Rotland Ira Caughey, 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.

Roland Ira Caughey (Signature of Recruit)

Date JAN 12 1917 191 . Geo Fieldhouse (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 this 12 day of January 191 7

J. A. McCuaig J.P. (Signature of Justice)

M. F. W. 23
750M—8-16
H. Q. 1772-59-841

Description of Rolland Ira Caughey on Enlistment.

Apparent Age	18 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)	
Height	6 ft ½ ins.
Chest measurement — Girth when fully expanded	35 ins.
Chest measurement — Range of expansion	4 ins.
Complexion	Dark
Eyes	Grey
Hair	Black
Religious denominations — Church of England	
Presbyterian	X
Methodist	
Baptist or Congregationalist	
Roman Catholic	
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).

Slight Hammertoe

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 JAN 12 1917 191 .

Place Winnipeg Man

A Brodie Anderson Capt A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

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

APPROVED.
SPECIAL SERVICE BATTALION BOARD M.D. 10
DATE
A. G. Greene Capt C.A.M.C. PRESIDENT
C. F. McCoubrey Capt C.A.M.C. MEMBER
C. C. Pratt Capt C.A.M.C. MEMBER
WINNIPEG, MAN.

CERTIFICATE OF OFFICER COMMANDING UNIT.

Rolland Ira Caughey 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.

J. McCullough Lt (Signature of Officer)
For O.C.

Date JAN 12 1917 191 .

NO. 4 SECTION, (M, D, 10)
DIVISIONAL AMMUNITION COLUMN

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

247

This is to Certify that No. 2043517 (Rank) Gunner

Name (in full) Roland Ira. Caughey. enlisted in

the No 4. Sec. Div. Amm. Column

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 12th

day of January 19 17

HE served in England

and is now discharged from the service by reason of being medically unfit for further service. underage

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

Age 18 yrs 4 mos

Height 6' 1/4"

Complexion Ruddy

Eyes Grey

Hair Black

Marks or Scars nil

R J Caughey
Signature of Soldier

Thom & Cook
Issuing Officer

Lieut
Rank

Date of Discharge 20/8/18

Appointment

Signed at Winnipeg this 20 day of August 19 18

in Military District No. 10

File Reference No. 44-C-967

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

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

DISTRICT CASUALTY
OFFICE,
AUG 24 1918
M. D. 10

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No 2043517 (Rank) Gnr Name Caughey. R. J.

Unit No 4. Sec. Div. Amm. Col.

Address on Discharge 540 Victor St Winnipeg.

Character and Conduct Good.

Former Occupation Baker apprentice

Special Qualifications of Value in Civil Life Baker apprentice

Medals and Decorations nil

Remarks nil

Signed at Winnipeg this 20 day of Aug 1918

R. Greenfield
Name of Officer

Lieut.
Rank

Officer Commanding No. 10 District Depot
Appointment

R. H. Goldstone Capt.
District Casualty Officer,
Military District No. 10

Date of Enlistment

12/11/17

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C

3536

Date of Assignment

3626 April 1st 1917

RATE OF SEPARATION ALLOWANCE

~~20~~	25 00 1/12/17 Pc 3251		

RATE OF ASSIGNMENT

20			

1262 30 Gnl

PARTICULARS OF SEPARATION ALLOWANCE

No. 2043517.

Rank Lgr. Promoted Reverted Discharge

Soldier's Name B. Gra baughey.

Battalion 4th Div. Amn. Col.

Beneficiary Emily baughey

Relationship Dependent Mother.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Emily baughey. (Mother)

Address 540 Victor St. Winnipeg (Man.)

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31/17.		232.	180	412.		
Jan	F ~~62226~~ 62227	30	20	50	7.	31.7.18 A/c Closed
Feb	D 92361	25	20	45	–	Ret'd per Empress of Britain 62221 Car
Mar	A 110541	25	20	45	–	Date 9.7.18
Apr	L 7830	25	20	45	–	11-7-18 Clerk A Hunt.
May	J 19505	25	20	45	–	M.R. 026223.
June	G. 20562	25	20	45	–	
July	Y 30520	25	20	45	–	
		412	320	732		

JR

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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—1772-39-1141
L. L. 22820—M. & D. 1933.

File No. 2958-R2

WAR SERVICE GRATUITY.

INV 29-12-14 - W121

Register No. C 2510

Reg. No. 2043517

Name Campbell, Robert S.

Address 540 Victoria St. Winnipeg Man

Dependent Mrs. R. Campbell Mother

Address same

Dec'n No. ... V. S. C.
Award ... days at $ ... per day $ ...
S. A. ... months at $ ... per mo. $ ...
Less P. D. P. Credited $ ...

Less further debit balance $ ...
Net due paid as below

Pay Soldier $ ...

Pay Dependent $ ...

Not eligible.

Days 122 Rate 70.00 Due 280.00

Less P.D.P. credited 175.10

Less further Dr. Bal. or overpayment.

Net 104.90

Clerk Sgt Jacques
A Whitley

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1 18/2/20	52123	549557	104 90		1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
[illegible]
Date 11.12.20

R Coates
29/12/19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

295-8-R-3

Name Caughey, Roland Ira
Surname Christian Name

Regimental Number 2043517 Rank Gnr.

Unit #4 Sec. Div. Amm. Col.

Original Unit

District where paid M.D.10

Date of Discharge 20-8-18

P. D. P. Filing Number 10-280-10

Address (in full) 540 Victor St.
Winnipeg, Man.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
175 10				4396	17-9-18	21 05	4400	16-10-18	21 05	58 00	42 10
				4397	17-9-18	50 00	4401	16-10-18	25 00		75 00

M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks: Advance of 1st payment issued on discharge. S.A. remitted direct to Mrs. Emily Caughey, at above address.

PC. 26-12-19

L. L. Job 4503.—M. & D. 6332.

Assigned Pay.

(Mother)

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

~~SEPARATION ALLOWANCE~~

Name Mrs. Emily Caughey

Address 540 Victor St.,
Winnipeg,
Man.

~~Relation to Soldier~~
Rate
~~wife, child or mother~~ } $20.00

Name of Soldier Caughey, Robt. Ira.

Regtl. No. 2043514

Rank Gr.

Corps #4 Div. Amm. Col.

To what Corps belonging when called out

APR 1- 1917

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

(Mother)

Sheet No. 2. Mrs. Emily Caughey
(Assignee)

Name of Soldier Caughey, Rob. Jra.

2.043.517- Gr. 4 Div. Ann. Col.

L. L. Job 5470—Req. 6888.

#20

Remarks. APR 1- 1917

Month.	Year.	Cheque No.	Amt.	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				18
March				
April				
May		B 8183	40	40 Bo
June		K 16597	20	20 Feb
July		H 20717	20	B.
Aug.		M 30264	20	03
Sept.		L 34606	20	
Oct.		G 46513	20	
Nov.		S 54906	20	
Dec.		P 35644	20	H12. 9m
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

JER

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.				

12. 1. 17 46

L. L. Job 4503.—M. & D. 632.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Emily Caughey.

Address 540 Victor St.
Winnipeg,
Man.

Relation to Soldier wife, child or mother } Dependent Mother

Name of Soldier Caughey. Rolland. J.

Regtl. No. 2043517

Rank Gunner

Corps No 4 Sec Div Amm Col M.D. 10

To what Corps belonging when called out } 5 ✓

PAYMENTS

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

CONSOLIDATED 4 ACCOUNT

12.1.14

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Emily Caughey Mother PAYMENTS. Gunner

Name of Soldier Caughey, Rolland J.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.		0.35500	32		32. R
March		V 33800	20		20
April		W279	20		20
May		V 3492	20		20
June		X6944	20		20
July		W. 9982	20		20
Aug.		B157 2[illegible] ~~1.13208~~	~~20~~ 20.		B 1,3208 Cancelled
Sept.		216450	20		
Oct.		H22504	20		T
Nov.		V24691 ~~24691~~	~~20~~		B 24691 Canc.
Dec.		925083	20.		Ad 732 Am
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

3 52 / 140 / 34 2

G2 / 140 / 24

DO NOT WRITE

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Form R 122
353—100M—9-12-16.

WJ.

Rank — Name CAUGHEY, Roland Ira. — Reg'l No. 2043517

Unit No. 4. Sec. D.A.C. Winnipeg Man. — If in perm. Corps, What Unit? — Married or Single Single.

Place and Date of Enlistment Winnipeg 12th. Jan. 1917. — Place of Birth Winnipeg Man. Canada.

Name and Address, Next-of-Kin Mr. Roland Caughey. 540 Victor St. Winnipeg Man. — Relationship Father.

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

N/E. R.B. No 1685
File R.L.
Category O.R. Can

Pte

Discharge, Date and Place — Reason — Character

H. W. V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND 29 4 17 S.S. NORTHLAND,			
1-5-17.	Res Bde	T.O.S on arrival from Canada	S'Cliffe.	30.4.17.	Pte II @ 121.
~~30-6-17~~	~~2nd~~	~~S.O.S to 12 C.S. Bttn~~	"	~~28-6-17~~	~~" " 9 Camp Pte II @ 14. 5-~~ 7/6
23-6-17.	do.	S.O.S to 2nd Res Brty.	do.	22-6-17	" 174 Pte II @ 1d/22-6-17 & 2 Res Art
1-7-17	10th CSB	T.O.S from 2nd CRA	"	28-6-17	" 3. Pte II @ 14a 5-7-17 2 " "
17.10.17	"	S.O.S 2a Res art ~~proceeding Leave~~	Gen. Codford	17.10.17	" 83 & 2 Res Art 133 d/1 31/10/17 11/17
19.11.17	2nd Res:	S.O.S to 1 Res Art	" Witley	17.11.17	" 151
15.11.17	"	S.O.S to 14th Sige Brty	"	7.11.17	" 147. Cancelled Pte II @ 149 d/17 11/17
23.11.17	Res Bde & Ha	T.O.S from 2nd Res art	Gen	18.11.17	" 6
16-2-18	do	S.O.S on Posting to Regt Depot	do	14-2-18	Pte II @ 47 to Regt Depot T.O.S. Pte II @ 5-0. D 19-2-18
13-3-18.	Atty Regt Depot	S.O.S on Posting to Young Soldiers Battn Seaford	do	11-3-18	Pte II @ 72. Gen Hosp 16 / Pte II 61 D/12 3/18

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.					
		Minor Born April 5th 1900				
14.5.18	Y.S.Rs.	On comm: C.D.D. Buxton	B'shott	Pte.	14.5.18	Pc. II 115.
29-6-18	✓	A.Q.S. on relieu-to Lan. for disp. of A.F. Auth. RL. 23-6-18 Vol. 1 Lorer R.F. (3) 27618	/	/	22-6-18	Do 154

NO. 4 SECTION, (M, D, 10) DIVISIONAL AMMUNITION COLUMN

WINNIPEG, MAN. CANADA

1-ORIGINAL +2043517

MEDICAL HISTORY SHEET

Surname Caughey Christian Name Rolland Jas

Examined { on 12 day of January 1917 / at Winnipeg Man

Birthplace { City or Town Winnipeg / County Man. Canada

Apparent age 18 years

Trade or occupation Bakers Helper

Height 6 feet 1/2 Inches

Weight 165 lbs.

Chest measurement { Minimum 31 inches / Maximum expansion 35 inches

Physical development Normal

Small-pox Marks None

Vaccination Marks { Arm Right — Left — / Number None None

When Vaccinated last never

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Approved by R Brodie Anderson

Rank Capt A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
		SPECIAL SERVICE BATTALION BOARD M.D. 10 APPROVED.	M.O.
			M.O.
		C.A.M.C. PRESIDENT	M.O.
		C.A.M.C. MEMBER	M.O.
		C.A.M.C. MEMBER	M.O.

Date	Result	Vaccinations	
9/2/17			M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
20.1.17			M.O.
26-1-17			M.O.
2/2/17			M.O.

Enlisted on 12 day of January 1917 at Winnipeg Man

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No 4 Section M.D.10 Div Amm Column	2043517	Good	JAN 12 1917
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.

B. D. C. FOLIO FALSE DOCKET 4

Surname Caughey Christian Name Rolland Irish +2043517

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. 4 SECTION, (M. D. 10)
DIVISIONAL AMMUNITION COLUMN

WINNIPEG, MAN.
CANADA

DUPLICATE.

2-DUPLICATE

+2043517

MEDICAL HISTORY SHEET

Surname Caughey Christian Name Rolland Ira

Examined { on 12 day of January 1917
at Winnipeg Man.

Birthplace { City or Town Winnipeg
County Man. Canada

Apparent age 18 years.

Trade or occupation Bakers Helper.

Height 6 feet 1/2 Inches

Weight 165 lbs.

Chest measurement { Minimum 31 inches
Maximum expansion 35 inches

Physical development normal

Small-pox Marks none

Vaccination Marks { Arm Right — Left —
Number none

When Vaccinated last never

(a) Marks indicating congential peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Approved by A C Brodie Anderson

Rank Captain M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
		APPROVED. SPECIAL SERVICE BATTALION BOARD M.D. 10	M.O.
		DATE A. C. Tennant Capt.	M.O.
		G. F. Wheeler Capt. C.A.M.C. PRESIDENT	M.O.
		G. F. Hall Capt. C.A.M.C. MEMBER	M.O.
		WINNIPEG, MAN. C.A.M.C. MEMBER	M.O.
			M.O.

Date	Result	Vaccinations	
9/2/17		A Gordon	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
20.1.17			M.O.
26-1-17			M.O.
2/2/17			M.O.

Enlisted on 12 day of January 1917 at Winnipeg Man

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No 4 Section M.D.10 Div Amm Column	2043517	Good	JAN 12 1917
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.

B. P. C. FOLIO
FALSE DOCKETS
2

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

Surname Caughey Christian Name Rolland Ira +2043517

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				

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

If so, state name and address ... Rolland Caughey
5240 Victor St. Winnipeg, Man

(10) Is your Mother alive ?... yes

If so, state name and address Mrs. Emily Caughey

5240 Victor St. Winnipeg Man

(11) If your Mother is a widow... no

Are you her sole support, or not ?... yes.

(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.

$45.00 monthly — father invalid

Brother Rolland does not assist

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance ? If not, this must be done.

yes

(15) Are you insured ?... yes

If so, in what Company ?... Prudential Life Ins Co

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.

Date... Jan 12/17

J. McCullough Lt.
Officer Commanding.

NO. 4 SECTION, (M. D. 10)
DIVISIONAL AMMUNITION COLUMN

NO, 4 SECTION, (M, D, 10)
DIVISIONAL AMMUNITION COLUMN

To be made out in duplicate.

H.Q. 54-21-23-53

1-ORIGINAL

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins ..... NO, 4 SECTION, (M, D, 10)
DIVISIONAL AMMUNITION COLUMN

(2) Regimental Number 2043517

Gr. (3) Full Name of Soldier ..... Rolland Ira Caughey

(4) Place of Birth ..... Winnipeg, Man.

(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 ? ..... no

If so, give number of boys and girls .....

Also their names and ages .....

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

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

M. F. W. 54. (A. F. B. 19[illegible])

250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps No 4 Section 2nd D.A.C. Divisional Ammunition Column

Regimental No. 2043517 Rank ~~Gunner~~ Pte Name Caughey Rolland Ira

C. E. F.

Enlisted (a) Jan 12 17 Terms of Service (a) Period of War + 6 months Service reckons from (a) Jan 12 1917

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) Baker's Helper

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				
		Cm Marked. Discontinued	Halifax Kingsmere	4/4/17 29/4/17	A. M. S. Yorkland.
1-5-17	O.C. RES. BDE.C.F.A.	Taken on Strength RES.BDE.C.F.A.	Shorncliffe	30-4-17	B.O.Pt.11, 121.
~~30-6-17~~ 5/7/17	OC 2nd Bde C.R.A.	D.O.S. 10th Siege	S'CLIFFE. Bruay	2-6-17	B.O. Pt II ~~#~~ 1/4
2/7/17.	O.C. 2nd Bde C.F.A.	J.O.S. 10th C.S.B.	"	28.6.17	2 Bde C.R.A. Pt II 2. 30-6-17
23-6-17	OC Res Bde C.F.A.	D.O.S. Res Bde C.F.A. to 2nd Bde C.R.A. for duty	D'Cliffe	22-6-17	B.O. Pt II #174
~~17/8/17~~ (B.11.-1)	~~OC C.R.A.~~				
	OC 2nd Bde C.R.A.	D.O.S. on posting to ~~2nd Bde C.R.A.~~ 11th Can Siege	Witley		Cancelled

(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				
1-11-17.	O.C. 2nd Bde CRA.	T.O.S. on posting from 10th Can Siege Batty	Witley	31:10:17	B.o.part II: 133.
15-11-17	OC 2nd Bde C.R.A.	S.O.S. on posting to 11th Can Siege	Witley	14.11.17	Bo pt II 147
15/11/17	OC 2nd Bde CRA.	T.O.S. posting from C. Batt. 2nd Bde CRA.	Witley	14/11/17	Ba pt II. 149.
17/11/17	OC 2nd Bde CRA.	S.O.S. on posting to 2nd Batty 2nd Bde CRA.	Witley	14/11/17	B.O. pt II. 149.
17.11.17.	OC 2nd Bde CRA	S.O.S. to Res Bde CFA on absorption	Witley	17.11.17.	Bo pt. II 149.
18.11.17.	OC Res Bde CFA	S.O.S. from 2nd Bde CRA	Witley	8.11.17.	Bo pt. II. 1.
18.11.17	O.C. 1st Bde C.R.A	S.O.S to Res. Bde C.F.A	Witley	17.11.17	Bo pt II 150 A. Delevenne LIEUT. & ASST. ADJUTANT BRIGADE, CANADIAN RESERVE ARTILLERY
18.11.17	OC Res Bde C.F.A.	T.O.S. from 1st Bde C.R.A	Witley	18.11.17	B.O. pt II 1
16-2-18	Res Bde C.F.A	S.O.S. to C.A.R.D. Minor	Witley	14-2-18	Bo pt II 47 A. Delevenne LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY
14-2-18	C.A.R.D	T.O.S. Res Bde C.F.A Posted to Depot Section Res Batty C.F.A.	Witley	14-2-18	pt II O.O. 50
20-2-18	Do	On Com. & L of C	Do	18-2-18	Pt II O.O. 51 Agnew CAPT. & ADJT. For O.C. CAN. ART. REGIMENTAL DEPOT

Temporary form. Original not available.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps Can. Artillery Regt Depot

Regimental No 2043517 Rank Gnr. Name Caughey Rolland Ira

Enlisted (a) 12-1-17 Terms of Service (a) Dur v 6 Mos Service reckons from (a) 12-1-17

Date of promotion to present rank } _____ Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. } _____

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
14-2-18	C.A.R.D.	T.O.S. from Res Bde C.F.A. On Com. Dep. Lect. Res Batty C.F.A.	Witley	14-2-18	Pt II A.O. 50
20-2-18	CARD	On Com. Res Bde C.F.A.	Do	18-2-18	Pt II A.O. 51
9-3-18	CARD	On Com Dep Lect Res Batty C.F.A.	Do	7-3-18	Pt II A.O. 68
12-3-18	CARD	S.O.S. to young Soldiers Batt Bramshott	Do	11-3-18	Pt II A.O. 71
12-3-18.	O.C. Y.S. Bn.	T.O.S. from C.A.R.D.	Bramshott	11-3-18	Pt II A.O. 61

J. S. Bagnall CAPT. & ADJT.
For O.C. CAN. ART. 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				

Army Form B. 103. Sheet "2" Regimental Number 3043517

Casualty Form—Active Service.

Regiment or Corps Res Bde 62a

Rank Pte. Surname Caughey Christian Name Rolland Ira

Religion ..... Age on Enlistment ..... years ..... months.

Enlisted (*a*) 12-1-17 Terms of Service (*a*) Dof War 6mths Service reckons from (*a*) 12-1-17

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (*b*) .....

or Corps Trade and Rate .....

..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
21-2-18	Res Bde 62a	Att. from 6a R.D. for Emp.	Witley	18-2-18	B of B 52
20-2-18	6a R.D.	Ex Com Res Bde C.F.A	Do	18-2-18	Pte D.O. 51
9-3-18	Do	Ex com Depot Res Bty 62a	Do	7-3-18	Pte D.O. 66
			J Bagnall CAPT. & ADJT. For O.C. CAN. ART. REGIMENTAL DEPOT		
	C.F.A. Res	Ceases to be attached	Witley	7-3-18	B.O. Pte 67
8-3-18	Bde C.F.A	from 6a R.D.	A E Wolferen LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.		

(*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*) Signaller, Shoeing-Smith, &c.

[P.T.O.

[M1|01] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
13-3-18	C.A.R.D.	S.O.S. to Y.S.B. Bishott	Witley	11.3.18	Pte 92
					J. Bagnall CAPT. & ADJT.
					For O.C. CAN. ART. REGIMENTAL DEPOT.
12-3-18	O.C. Y.S. Bn	T.O.S. from C.A.R.D	Bramshott.	11-3-18	Pte II D.O. 61
14-5-18	O.C. Y.S.B.	On command to D.D. Buxton	do	14-5-18	Pte II D.O 114
					LIEUT. ASSISTANT ADJUTANT,
15 MAY 1918	TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No 114				
22 JUN 1918	EMBARKED FOR CANADA FROM LIVERPOOL			Lieut. for Commanding	Lieut.-Col. Canadian Discharge Depôt.
JUN 22 1918	T.O.S. No. 10 DISTRICT DEPOT D.O. 84 PARA. 562.				
				20-8-18	Discharge 193 Para 3498 D.O. 121

P.830-25M-21-2-18. 2043517 Caughey R.J.

LAST PAY CERTIFICATE. PARTICULARS.

1. L.P.C. Issued, date 16/5/18 2. Authority A.C. 392 / SC. 293 28/4/18

3. Discharged to Canada 31/5/18 4. Pay Book Verified 16/5/18

5. Balance shown on L.P.A. $ 20.51 6. Balc. shown on Ledger Sheet $ 27.81

7. Full particulars of entries making difference between 5 and 6 if any:-

No.	Date	Unit and Particulars of Entry	Amount Debit	Amount Credit
230	16/5/18	1/3 Bn £1-10-0	7 30	

8. Ass'd Pay Cancelled A3M forms rendered Stopped Effie 1/6/18

or

9. Sep. Allce. and Assd. Pay continued to dependent in England and transf'd to Acc'ts Br. for payment

C Heath
Certified Correct.

H Thompson Lieut
Officer i/c Group "L"

C.A.D.C.5009-10M.
3494-30-8-17.

10.

#[redacted]043 517.

Pte Caughey R.I.

Y.S.B.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
15/5/18	Nil			

B. P. C. FOLIO
FALSE DOCKET
3

F. H. Ellis
Capt CADC

SURNAME. Caughey

CHRISTIAN NAMES Rolland Ira.

10 CARD NO.

S.O.S. Hus. M.U. 20-8-18.
D.O. 1217 16-8-18.

REGL. No. 2043517 RANK Gr.

UNIT ~~Draft going Depot No. 4 Sect. Div. Amm. Col (M.D. No 10)~~ 10.D.D.

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Caughey Rolland,

RELATIONSHIP TO SOLDIER Father

ADDRESS 540 Victor St. Winnipeg. Man.

COUNTRY OF BIRTH Canada, Winnipeg. Man DATE April 5th 1899.

PLACE OF ATTESTATION Winnipeg. Man. DATE Jan. 12th, 1917.

R/C 3-7-18. K/S 21. 10.

L. L. 10137. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Baker's Helper RELIGION Presbyterian.

DESCRIPTION.

APPARENT AGE 18 YEARS 9 MONTHS

HEIGHT 6 FEET 1/2 INCHES

CHEST MEASUREMENT 35- INCHES EXPANSION 4 INCHES

COMPLEXION Dark EYES Grey HAIR Black.

DISTINGUISHING MARKS Slight hammer toe.

MEDICAL EXAMINATION. PLACE Winnipeg, Man. DATE Jan 12th, 1917.

Present Address - 540 Victor St., Winnipeg, Man.

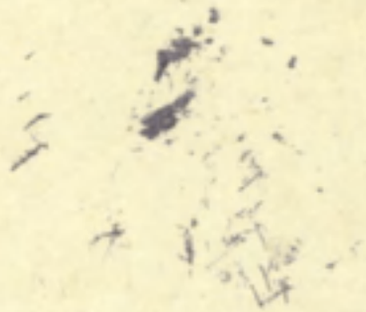
No. 2043517. Rank Gnr. Name Caughey. R. J.

T. O. S. 12-1-17. Unit 1/04 Section. Div. Amm. Column.

Do. 12 of 12-1-17.

M. D. 18.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc. — Particulars	Authority
1917.	1917.			
Feb. 1.	Feb. 28.	J.		
	mav.	J.		
April 1	April 15	J		



No. 2043517. RANK Gnr. NAME Caughey, R. J.

T. O. S. 12-1-17. (B.O. 12 of Jan. 1917) UNIT 76th Depot Battery, C. F. A. # 4 Sec. Div. Ammn. Column.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917.			
Jan. 12	Jan. 31	✓		

Ham Mus

Number 2043517 Rank Gnr

Surname CAUGHEY

Christian Name Rolland Ira

Units C.F.A. Theatre of War England.

Date of Service 29-4-17

Remarks

Latest Address 540 Victoria St
Winnipeg Man.

Roll No. Stage #680

200m.-6-21.

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

D.....

R RANK SURNAME INITIALS UNI

....

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

one person to be notified of arrival.....

.....

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

..... Railway.....

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

stination.....

(Sgd.).....

DEP. JUN 30 1928
Form No. 39 3/0

515-4-9-18

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Discharge owing to underage, and medically unfit.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

W. J. Shirley Capt. *President.*

PLACE Winnipeg, Man.

DATE July 25/1918.

Members.

APPROVED BY

W. Nichols Col
Assistant Director of Medical Services.

DATE JUL 27 1918

APPROVED BY

F. F. Shuttleworth Capt for
Director-General of Medical Services.

DATE 1918

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 soldier 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 .....

DATE .....

Members.

B.P.C. ORIGINAL 94-C-567

MEDICAL HISTORY OF AN INVALID

RECEIVED AT MILITIA DEFENCE SEP -4 1918

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 soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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.

Draft July 9/1918. STATION Winnipeg, Man. DATE July 25/1918.

1. 1 (a) Unit 5th D.A.C. 10th Garrison Artill. Y.S.B. 10D.D. (b) Regimental No. 2043517 (c) Rank Pte.

(d) Surname CAUGHEY (e) Christian name Roland Ira

2. Age last birthday 18 Date of birth April 5/1900

3. Enlisted at Winnipeg, Man. on Jan. 8/1917.

Military District No. 10 JUL 26 1918 Winnipeg, Man.

4. Personal description:—

(a) Height 6ft. ~~in.~~ (b) Weight 160 (stripped) (c) Complexion Dark

(d) Colour of hair Black (e) Colour of eyes Brown (f) Identification marks

1 vacc. mark left arm. Scar right leg.

5. Address after discharge (for the use of the Board of Pension Commissioners)

540 Victor St., Winnipeg, Man.

6. Former trade or occupation Baker's Apprentice.

RECEIVED JUL 26 1918 A.D.M.S.M.D. 10

7. (a) Service

	Years	Days	Periods From	Periods To
C.E.F.			Jan. 8/1917.	July 25/1918.

(b) Has he been overseas? England-15 mos. 8. Original disease or disability 1. Underage. 2. V.D.H.

(a) Date of origin 1. Born April 5/1900 2. ~~Unknown~~ Summer 1916 (b) Place of origin 1. Not applicable. 2. Headingly, Man.

(c) Cause* 1. Not applicable. 2. Unknown

(d) Present disease or disability 1. Underage. 2. V.D.H.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (*a*) weakness, (*b*) loss (complete or partial) of any organ or member of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

1. This man is underage.

2. Moderate shortness of breath, after climbing flight of stairs. Can walk four miles slowly, cannot run more than one block. Diffuse prae.

MD.

M. F. B. 227.

300M.—2-18. 1772—39—117.

FALSE DOCKET 5-

9

9. Present condition.—(*Continued.*)

cordial pulsation. Apex beat 5" below nipple in nipple line. Heart markedly enlarged. Mitral systolic murmur heard, especially after exercise, transmitted to axilla. 3rd,4th & 5th toes of right foot are hammer, the 5th toe of the left foot.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous Yes. Digestive Yes. Respiratory Yes. Cardiac Except as above stated.

Genito-Urinary Yes. Skin, Middle Ear, Eye or any other part Yes.

10. History: (*a*) of Condition referred to in "a" section 9.

Measles - when child. No history of rheumatism, tonsilitis, scarlet fever or diphtheria.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

1. Not applicable. 2. Pre-existed enlistment, not aggravated by service.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? 1. Not applicable. 2. NO. NO. NO. 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. Not applicable. 2. Permanent.

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

None.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration.)

No.

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

17. Recommendations Discharge owing to underage, and medically unfit.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned Roland Ira Caughey 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

Roland Ira Caughey

Signature of soldier examined.

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 criticized.

Yes.

19. Is the soldier fit for

(a) General service,	(Category A)	(~~Yes~~ or No).
(b) Service abroad, not general service,	(" B)	(~~Yes~~ or No).
(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 soldier
(a) ~~Does require treatment~~. (Give the nature of the condition and of the treatment required and its probable duration).

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

B. P. C. FOLIO
FALSE DOCKET

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

252

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Orders-in-Council (P.C. 3165), dated 21st December, 1918, as amended by P.C. 285, dated 8th February 1919, and P.C. 1168, dated 23rd June 1919.

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

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

On completion this Declaration is to be returned to THE ASSISTANT DIRECTOR PAY SERVICES OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Reg. No. 20H3517 2. Rank Gnr 3. Original C.E.F. Unit 5th D.A.C.
4. Christian Names Roland Ira 5. Surname Caughey
6. Address, in full, to which future payments of gratuity are to be forwarded
540 Victor St.
Winnipeg Man
7. Give the following particulars of service with Pay and Allowances for each enlistment which you have had in the Naval or Land Forces of Canada or the British Empire on or since the 4th August, 1914. Answer in the following order in space allotted.

	Regt. No.	Rank on Enlistment.	Unit. (State whether Active Militia, Permanent Force, C.E.F. or Naval. If R.A.F. state Wing.)
		CANADIAN SERVICE.	
1st Enl.	20H3517	Gnr	C.E.F. 4th D a b.
2nd Enl.			
3rd Enl.			
4th Enl.			
		IMPERIAL SERVICE.	
Imp. Enl.			

	Date of Enlistment.	Date of Discharge.	Rank on Discharge.	Unit from which discharged	Place of Discharge.	Reason for Discharge.
		CANADIAN SERVICE.				
1st Enl.	12/1/17	20/8/18	Gnr	Reg. Depot 5th D. Id.	Winnipeg	Being medically unfit for further service
2nd Enl.						
3rd Enl.						
4th Enl.						
		IMPERIAL SERVICE.				
Imp. Enl.						

M. F. W. 2595 (b)
494-D.P.-100M-6-19.
1772-39-1389.

8. (a) Did you revert overseas to a rank lower than the temporary substantive rank held by you on your arrival in England? ..... (b) If so, give date and ranks and state if such reversion was in consequence of misconduct or inefficiency .....
Not applicable

9. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:
10th Can Siege Battery England
from ~~Sept~~ May 14/17 to Sept 20/17

10. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? Not applicable

11. Have you been issued with a War Service Badge? If so, give number and class B

12. Are you at present a member of and in receipt of pay and allowances from any Canadian Naval or Land Forces? If so, give unit Not applicable

13. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received, from where paid, and on what dates Aug 20/18 Sept 20/18 Oct 20/18 $100.00
" 20/18 " 20/18 " 20/18 $75.00
$175.00

14. Are you entitled to receive, or have you received any payment in the nature of Post Discharge Gratuity from the Imperial Forces? If so, state amount received, or to which you are entitled
Not applicable

15. Were you at the time of enlistment a civil employee of the Dominion or a Provincial Government? If so, state what Government, what Department, and whether civil pay was issued on your account while you were on active service Not applicable

16. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-Establishment? .....
(b) If so, are you in receipt of full pay and allowances from that Department? Not applicable

17. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs R Caughey

18. Relationship of such dependent Mother

19. Present address, in full, of such dependent 5 Ho. Victor St. Winnipeg Man

20. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? If so, give his regimental number, rank, unit and full name
Sgt J R Caughey # 226030. 50th Company, Can. Forestry Corps

REMARKS .....

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

Signature of applicant: R Caughey

Place of Residence: 540 Victor St.

Declared before me at: Winnipeg.

This 18. day of December. 1919.

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

NOTICE.—If the dependent has not forwarded a Statutory Declaration to Ottawa, in connection with Separation Allowance, it will be necessary to forward one with this application. These are for wife, M.F.W. 148, mother, M.F.W. 147, and guardian, M.F.W. 149, and may be obtained from the Assistant Directors Pay Service, or the Patriotic Fund. Guardian forms must be completed by the present guardian.

Space below this line to be used only by the Assistant Directors Pay Service.

POST DISCHARGE PAY.

Dates paid.	Amounts paid soldier.	Amount paid dependent.

REMARKS .....

Certified correct. .....

Assistant Director Pay Services, Mil. Dist. No. .....

Date .....

40. Are you already in receipt of Separation Allowance from any source? If so, how much? Yes $25 from this Son

41. Was soldier a member of Permanent Force at time of attestation in C.E.F.? If so, give regimental number, rank and unit. 2043517 Gunner Ira Caughey artillery

42. Was the soldier at the time of his enlistment an employee of the Dominion or a Provincial Government? no

43. If so, in what capacity and in what place? no

44. Is he in receipt of a salary from the Dominion or a Provincial Government on account of having been employed by them prior to his enlistment? If so, how much per month? no.

45. Are you in receipt of any payment from any Patriotic or Red Cross Fund? If so, how much? $10 per month from Patriotic

And I make this solemn declaration conscientiously believing it be true and knowing that it is of the same force and effect as if made under Oath and by virtue of the Canada Evidence Act.

Signature of Applicant Mrs Emily Caughey

Place of Residence 5740 Victor St Winnipeg

Declared before me at Winnipeg Man.

this 13 day of June 191 8

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

This application must be signed by two responsible persons, one of whom must be a Clergyman, the other the Secretary, or Chairman, of the Relief Committee of the Local Canadian Patriotic Fund, or if the Applicant is in the United States, by the Secretary, or Chairman of the Local Red Cross Committee, certifying that to the best of their knowledge, after careful investigation, the above statements are correct, and the above soldier, first mentioned, is the sole support of the applicant.

Signature of Clergyman A. Bruce Thornton

Signature of Secretary, or Chairman of the Relief Committee of the Local Canadian Patriotic Fund D. M. Solandt per A. Black

MEDICAL CERTIFICATE

1. Is husband of applicant a chronic invalid and totally incapacitated? yes

2. Of what nature is disability? Bronchial Asthma + Emphysema

3. From what date has this total incapacity been existent? 1917

4. How long is total incapacity likely to continue, and what will be effect on his earning power? Life time - will not be able to work.

5. If not totally incapacitated by what percentage in your opinion is capacity for work reduced, and from what date? Totally incapacitated, not able to go to do any work.

6. Are you the regular attending physician? yes

I certify that the above statements are correct.

J. Bowman M.D.
Physician

Winnipeg *Place.*

June 12 1918 *Date.*

20

B. F. to L.
S. & A.P.
JUN 17 1918
C. R.

MOTHER

CANADIAN EXPEDITIONARY FORCE

(Information for Separation Allowance Board)

NOTICE

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question. There must be no blanks and no dashes.

If the Applicant will take this form to the office of the Local Canadian Patriotic Fund, or, if the Applicant resides in the United States, to the office of the Local Red Cross Committee, the Officials of these Organizations will assist the Applicant to fill in this form in the required manner, in order that no delay may be caused by lack of information required by the Separation Allowance Board.

Each statement is considered as being made on Oath, and this form is to be signed and declared before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. In localities where there is an Official before whom this Declaration may be declared free of charge, the Officers of the above mentioned Organizations will direct the Applicant to same.

On completion this Declaration is to be returned to:—

S. A. & A. P. DIVISION
MILITIA & DEFENCE,
OTTAWA, CANADA.

(This application to be made out for the last unmarried son that enlisted).

1. Name of Soldier	Rank	Regt. or Unit	Regtl. No.
Rolland Ira Caughey	Pte	4 See D.A.C.	2043517

2. Age of Soldier 18 — Married or Single Single

3. Date of enlistment of Soldier January 1917

4. Is Soldier at present in Canada or Overseas? Overseas

5 Name in full of Mother of Soldier	Age	Occupation	Address
Emily Caughey	38		5740 Victor St Winnipeg Man.

6. Name of your husband.	Age	Occupation	Where Employed
Rolland Caughey			

7. If your husband is alive, state amount of support received from him during the past year. My husband is alive but receive no support

8. If your husband is alive but not contributing to your support, state the reason and the date from which husband ceased contributing to your support. On account of ill-health and it is several years since he has worked

9. If your husband is a chronic invalid and totally incapacitated, state nature of malady. **(Form of Medical Certificate attached hereto, must be filled out and returned with this Declaration).** Chronic Asthma

M. F. W. 147
50m.-11-17
1772-39-1181

93

10. What amount did your husband earn during the past year? not any.

11. What amount did you earn during the past year? not any

12. If you are a widow, state date and place of death of your husband. Not a widow Husband an invalid

13. If you are a foster-mother, give date you took charge of soldier, and state places and dates of his parents' death. Boys own mother

14. Have you married again since death of your above mentioned husband? If so, give date of said marriage. Husband living

15. Names of all your other *unmarried* children. **(If a soldier, give regimental number and unit).** Address in full Age. Occupation.

Pte Garnet Caughey 150045
3rd Canadian Divisional
Motor Transport Company France
age 29

Sgt J. R. Caughey
Company 50 C. F. C.
France age 36
226030

Marie Caughey 570 Victor St Winnipeg - 12 years

16. Names of all your other children. **(If a soldier, give regimental number and unit).** Address in full. Age. Date married.

William George Caughey. Alsask Sask.
Married Sep. 11/1913 age 34

Mrs F. C. Swan St Claude Man.
Married Dec 13/1905 age 39

Mrs W. St. Iverson 373 Lipton St Winnipeg
Married Oct 19/1916 age 26

17. Are any of above unmarried sons eighteen years of age or over, totally incapacitated? **(If so, Medical Certificate, similar to attached form, must be furnished showing such incapacity).** all unmarried are overseas

18. State amount earned at present per month by
(a) yourself
(b) your husband Not any

19. State amount and source of any other income.
Only from my other two sons in France.
$15 + $20 of assigned pay from them
The $15 being signed to Marie Caughey my little girl from Pte Garnet Caughey.

20. State value of real property belonging to you and your husband. State amount of mortgage on this property. Only one Homestead but not yet received patent.

21. State value of personal property belonging to you and your husband. Have nothing except above mentioned Homestead and unable to work it

22. If husband is dead, state value of real and personal property left by him. Husband an invalid

23. State amount contributed in cash by soldier during the year prior to enlistment. about $500 as near as I can remember

24. Was this amount contributed weekly or monthly? Weekly

25. Did soldier live with you during the year prior to enlistment? Yes

26. State your son's trade or occupation prior to enlistment. Worked at Canada Bread Co Winnipeg

27. State amount of his wages per week. $12 increasing to $15

28. State name and address of his last employer. Canada Bread Co. Burnell St Winnipeg

29. State amount of support monthly from soldier since enlistment. $40 until January then $25 per month

30. State amount of ASSIGNED PAY received by you from soldier monthly. $20

31. From what date did you receive ASSIGNED PAY? January 1917

32. Actual amount contributed by other children during the year prior to enlistment of soldier. Weekly Monthly about 300 for the year

33. Actual amount contributed by other children at present. Weekly Monthly $20 from Son in France

34. Are any of these children in the employ of you or your husband? no

35. If not receiving support from other children, state reason. Explain fully.
Others excepting boys overseas are married and the girl 12 years is at school

36. With whom are you residing at present? State relationship, if any. no one

37. How long have you resided with above person?

38. State amount of rent or board paid by you per month. $22.50 per month rent

39. Have you made a previous claim for Separation Allowance? Give particulars.
Yes. When this son enlisted as he was my support.

21

DEPARTMENT OF MILITIA AND DEFENCE.

DEMOBILIZATION PAY DIVISION DEC 17 1919 MILITARY DISTRICT No. 10

A. & A.P. DEC 23 1919

DIST. PAYMASTER No. 10 JUL 25 1919

b2510

WAR SERVICE GRATUITY.

Pb 26-12-19 F.F.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Orders-in-Council (P.C. 3165), dated 21st December, 1918, as amended by P.C. 285, dated 8th February 1919, and P.C. 1168, dated 23rd June 1919.

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

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

On completion this Declaration is to be returned to THE ASSISTANT DIRECTOR PAY SERVICES OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Reg. No. 20 43517 2. Rank Gnr 3. Original C.E.F. Unit 44th D.A.C.

4. Christian Names Roland Jas 5. Surname Caughey

6. Address, in full, to which future payments of gratuity are to be forwarded

540 Victor St.

Winnipeg Man

7. Give the following particulars of service with Pay and Allowances for each enlistment which you have had in the Naval or Land Forces of Canada or the British Empire on or since the 4th August, 1914. Answer in the following order in space allotted.

	Regt. No.	Rank on Enlistment.	Unit. (State whether Active Militia, Permanent Force, C.E.F. or Naval. If R.A.F. state Wing.)
		CANADIAN SERVICE.	
1st Enl.	20H3517	Gnr	C.E.F.
2nd Enl.			
3rd Enl.			
4th Enl.			
		IMPERIAL SERVICE.	
Imp. Enl.			

	Date of Enlistment.	Date of Discharge.	Rank on Discharge.	Unit from which discharged	Place of Discharge.	Reason for Discharge.
		CANADIAN SERVICE.				
(A) 1st Enl.	12-1-17	20-4-18	Gnr	~~44th D.A.C.~~ 10 D.D.	Winnipeg	Medically unfit
2nd Enl.						
3rd Enl.						
4th Enl.						
		IMPERIAL SERVICE.				
Imp. Enl.						

51

M. F. W. 2595 (b)
494-D.P.-100M-6-19.
1772-39-1389.

ACCOUNTS SECTION DEC 22 1919 PASSED TO F. R.

1

61-7-26
LM1

8. (a) Did you revert overseas to a rank lower than the temporary substantive rank held by you on your arrival in England? No (b) If so, give date and ranks and state if such reversion was in consequence of misconduct or inefficiency

Not applicable

9. Were you at any time on the strength for pay and allowances of a unit of the C.E.F, which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:

10th Can. Siege Battery
July 14th 1917 to Sept. 18 - 1918

10. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? Not applicable

11. Have you been issued with a War Service Badge? If so, give number and class B

12. Are you at present a member of and in receipt of pay and allowances from any Canadian Naval or Land Forces? If so, give unit Not applicable

13. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received, from where paid, and on what dates In august 20th Sept. 20 October 20th 1918 - $100 Dollars
Dependents $75 "

14. Are you entitled to receive, or have you received any payment in the nature of Post Discharge Gratuity from the Imperial Forces? If so, state amount received, or to which you are entitled

Not applicable

15. Were you at the time of enlistment a civil employee of the Dominion or a Provincial Government? If so, state what Government, what Department, and whether civil pay was issued on your account while you were on active service

Not applicable

16. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-Establishment?
(b) If so, are you in receipt of full pay and allowances from that Department? Not applicable

17. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs R. Caughey

18. Relationship of such dependent Mother

19. Present address, in full, of such dependent 540 Victor St Winnipeg Man

20. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? If so, give his regimental number, rank, unit and full name

Sarg. J. R. Caughey ~~#220603~~ 226301
50th Company Can. Forestry Corps

REMARKS

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

Signature of applicant: Roland Ira Caughey

Place of Residence: 540 Victor St Winnipeg Man

This 21st day of July 1919 Declared before me at: Alsask, Saskatchewan

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

Rees D Williams
A J.P. for Sask

NOTICE.—If the dependent has not forwarded a Statutory Declaration to Ottawa, in connection with Separation Allowance, it will be necessary to forward one with this application. These are for wife, M.F.W. 148, mother, M.F.W. 147, and guardian, M.F.W. 149, and may be obtained from the Assistant Directors Pay Service, or the Patriotic Fund. Guardian forms must be completed by the present guardian.

Space below this line to be used only by the Assistant Directors Pay Service.

POST DISCHARGE PAY.

Dates paid.	Amounts paid soldier.	Amount paid dependent.
20-8-18	58-00 (Pdby No. 10 D.D)	
17-9-18	21-05	50-00
17-10-18	21-05	25-00
	100.10	75-00

REMARKS

Certified correct. W Gilchrist

Assistant Director Pay Services, Mil. Dist. No. 10

Date DEC 17 1919

50

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1-4-17.	EFFECTIVE DATE:-	
AMOUNT:-	2.00	AMOUNT:-	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs. Emily Caughey.
540 Victor St
Winnipeg. Man.
Cancelled Sept 25th 1918

NAME:- CAUGHEY Roland Ira.
NUMBER:- 2043517.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pvt.
		25 SEP 1918

UNIT AND TRANSFERS

ORIGINAL UNIT:- 4th Can Dac

DATE ACCOUNT FIRST OPENED:- 31-5-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			CRD
G.R. 17 3/18	11 3/18	25 3/18	Y Soldiers Bn

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.	SUBS'CE ALL'CE
	1 00	10.		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis to Canada 31/5/18 Authy A.G. 3A.2. L.C. 1293. 4/6/18

MONTH 1918	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar	Bal fwd								5 57		
Apl	P/P	33						20			
				AR 62 13.4.18 Y St M.	2 43						
				" 166 . 26.4.18 "	2 43				13 71		
May	P/P	33 50 34 10			4 86			20 20			
				AR. 230 14/5/18 YSB.	7 30						
				AR. 2795 22/5/18 CRD.	9 73				10 78		
		34 40			17 03			20	~~10~~ 78		
				Em LPC. AR. 2123. 4/6/18. C.R.D.	4 87						
June				Em LPC AR 3684 15/6/18 "	9 73				3 82	✓	
Aug	Bal Bal		26 8		14 60				N/L		
			3 87								

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

P. 550
MARRIED OR SINGLE Single

PLACE OF BIRTH Winnipeg. Man

NAME AND ADDRESS OF NEXT OF KIN Mr Roland Caughey
540 Victor St. Winnipeg. Man

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO 2043517 RANK Gnr NAME Caughey, Roland Ira

IF IN PERMT. CORPS } WHAT UNIT — UNIT 4 Sec D.A.C. Wpg

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Winnipeg

DATE OF ATTESTATION January 12 1917

ASSIGNED PAY MONTHLY $20.00 DATE EFFECTIVE 1/4/17

PAYABLE TO Mrs Emily Caughey. 540 Victor St. Winnipg. Man. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stoppaw EFFECTIVE 1-6-18 REASON

DISCHARGE DATE AND PLACE Canada 24/5/18 REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO	DATE	AUTHORITY

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
														11 50	11 50
Apl 16															50 60
May 26	1	10	50	60											
June 30	33	..													33 ..
July 31	34	10													34 10
Aug 31	34	80												11 50	34 10
	151	80												163 30	
Sep 30	33	..													33 ..
	184	80												11 50	196 30

ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE
		662	17/5				
		993	30/5				
		1200	15/6				
		1354	30/6			1529	10/7

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS
9 73						
2 44				20	32 17	22 93
				20	20	37 03
4 99						
CRm 27/8 2 30	7 30		487	20	44 46	26 64
24 46				120	126 63	
				20	20	39 67
24 46	7 30		487	120	156 63	

BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
				A/c
Dal from Canada. 11 50				A.P.C.
50 60				
22 10				
22 93				
37 03				
26 64				
39 67		— —	39 67	

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR3	DR4	BALANCE
Oct	Bal fd	~~39 67~~							39 67
	ff	34 10		Canad.					
				21228. bsa 2. 28/7/17	7 30				
				DR. aR. 33. csa 2. 13/8/17.	7 30				39 17 mil
		34 10			14 60				20

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR3	DR4	BALANCE	DEFER. SEP. RED. ALLCE. PAY ENG.
	Bf								39 17	
Nov	ff	33		aR					20	
				aR 3293 CRa 2/11/17	4 87					
				" 28. 10 CSB. 27/9/17	9 73					
				" 37 10 CSB 7/10/17	4 87					
				DR CRa 29314 cf. " 25/9/17	9 78					
				aR 3507 CRa 17/10	4 87					
Dec.	ff	34 10		" 16 10 CSB 14/9	2 43				20 29 77 mil	
		67 10			36 50				40	

20H3517. Gnr Caughey. R.J. A.P. 70th Can

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
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Carried forward to Large Ledger sheet

515-3 -9-18

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers

H

PT PT MILITIA RECEIVED SEP -2 1918 CANADA

Proceedings on Discharge.

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

No. 204517 ~~163517~~

Rank Gunner

Surname Caughey

Christian Name Roland Ira

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

Corps (Squadron, Battery or Company) No.4 Sec. Div. Amm. Column

Date of Discharge AUG 20 1918

Place of Discharge Winnipeg

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 18 years 4 months.	Descriptive Marks
Height 6 feet ¾ inches.	
Complexion Ruddy	
Eyes Grey	Nil
Hair Black	
Trade Bakers Helper	
Intended place of residence (To be given as fully as practicable.) 540 Victor St, Winnipeg, Man.	

2. The above-named man is discharged in consequence of Being medically unfit for further war service. (underage)

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

3. Conduct and character while in the service have been, according to the records, etc.

Good D.A.G.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Bakers helper D.A.G.

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

Nil

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

6. Medals and Decorations..... Nil

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

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

(Place) Winnipeg Thos Cook Lieut.

(Date) AUG 20 1918 *Commanding* Dis. Sec. District Depot M D 10

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place) Winnipeg R D Caughey *(Signature of Soldier.)*

(Date) AUG 20 1918 Thos Cook *(Signature of Witness.)*

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

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

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

.....*(Signature of Soldier.)*

10. **Statement of Service.**

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

20/8/18 Total.....1.....years.....221.....days.

11. **Confirmation of Discharge.**

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

(Place) Winnipeg R Gillespie Lt-Col.

(Date) AUG 20 1918 *(Signature)*

O.C.No 10 District Depot M D 10

Reservations referred to at Para. 8.

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

none

R D Caughey

(OVER)