A117 319

REGIMENTAL DOCUMENTS

NAME CLAUSIUS ROBERT HERMAN REGT. NO. 3135446 UNIT 1st Dep Bn WOR H. Q. FILE NO.

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)				23730	Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 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)					Demobilization
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)					
					1
					2-12
					2-12
					7-12
					1

W. 2589
100M-11-18
1772-39-1377

ORIGINAL

M. D. ..... Depot Battalion 1st Depot Battalion, W.O.R. Regiment

Regtl. No. 3135446

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

W.E.N. (Class ONE.)

1. Surname: CLAUSIUS.
2. Christian name: Robert Herman.
3. Present address: Zurich, Ontario.
4. Military Service Act letter and number: 733054 AC.
5. Date of birth: March 26th. 1896.
6. Place of birth (town, township or county and country): Hills Green, Huron Co., Ont.
7. Married, widower or single: Single.
8. Religion: Lutheran.
9. Trade or calling: Farmer.
10. Name of next-of-kin: Mr. George Clausius.
11. Relationship of next-of-kin: Father.
12. Address of next-of-kin: Zurich, Ont.
13. Whether at present a member of the Active Militia: No.
14. Particulars of previous military or naval service, if any: None.
15. Medical Examination under Military Service Act:—

(a) Place: London, Ont. (b) Date: May 15th.1918. (c) Category: AA

DECLARATION OF RECRUIT

I, Robert Herman. CLAUSIUS, do solemnly declare that the above particulars refer to me, and are true.

May 15th. 1918. Robert Herman Clausius (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 22 yrs. 2 mths.

Height: 5 ft. 6½ ins.

Chest measurement: fully expanded: 34 ins.; range of expansion: 31½ ins.

Complexion: Medium.

Eyes: Blue

Hair: D.Brown.

Distinctive marks, and marks indicating congential peculiarities or previous disease.

Linear scar 1"a at temple.

RIGHT EYE D 30 LEFT EYE D 80

HEARING R Normal L 3 felt

John R Young Lieut. Colonel

1st Depot Battalion, W.O.R.

O. C. Depot Btln.

Regt.

Place: LONDON, ONT. Date: MAY 16 1918

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

Original

M.D. 1

M.F.W. 44.
1133 (D.P.) 250M.-12-18.
1772-89-903.

CANADIAN EXPEDITIONARY FORCE.

Jan. P/L. 16-19.

LAST PAY CERTIFICATE

No. 12

Regimental No. 3135446 Rank Pte. Name Clausius Robert H.
(Surname first)

1ST DEPOT BATTALION
W. O. REGIMENT

Unit ..... who was* discharged

On 16-1-19 191....., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 to 16-1-19 191... the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month			18	00
Regimental Pay 16 days at $ 1 c			16	00
Field Allowance 16 days at $ c 10			1	60
Separation Allowance				
Clothing Allowance			35	00
Post Discharge Pay				
*Other Credits				
Advances				
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges LWP 1-1-19 to 16-1-19	17	60		
Balance on transfer or on discharge, cheque No. 15389	53	00		
Total	70	60	70	60

Kit Clear *Give particulars.

A monthly stoppage of $ NIL (†) has ..... (‡) been paid on account of

Assigned Pay for the month of ..... 191.....
and Separation Allce. for month of ..... 191..... } (to) Assignee .....

(Address) .....

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment 15-5-18. married or single Single

(2) Separation Allowance, entitled or not NO (3) Reason for discharge Dem. C.E.F.

(4) Authority for discharge or transfer W O R DO. #16.

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

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

Date Feb. 4, 1919.

Place London, Ont.

Captain
Paymaster 1st. Depot Bn. W. O. R. M. D. No. 1
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

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

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

CANADIAN ARMY DENTAL CORPS

District 1

Name of Soldier Clausius Robert H

Regiment W O R Rank Pte

No. 3135446

M.F.B. 465
200M-1-17
1772-39 950

Original

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	MAY 15 1918	—				Nil				—										J M Deane	1	Cav. 19.

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname C L A U S I U S. Christian name Robert Herman.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 733054 AC.

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) Zurich, Huron Co., Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 15th. day of May 1918. ~~1917~~, by the undersigned medical board sitting at London, Ont.

5. Age as stated 22 Years 2 Months. 6. Apparent age 22 Years 2 Months

7. Height 5 Feet 6½ Inches. 8. Weight 122 Pounds.

9. Chest measurement { Minimum 31½ Ins. / Maximum 34 Ins. } 10. Complexion Medium { Eyes Blue / Hair D. brown }

11. Physical development Fair { Good / Fair / Poor } 12. Smallpox marks Nil.

13. Number of vaccination marks { Right arm ✓ / Left arm ✓ } 14. When vaccinated last Nil.

15. Distinctive marks and marks indicating congenital peculiarities or previous disease linear scar 1" st temple

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A

RIGHT EYE D 30/20 LEFT EYE D 80/20

HEARING R 21+ L 3 feet

J. S. Ross Capt. President

Member. R. G. Dunn Member.

Signature of Man Robert Herman Clausius

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
5/6/18		M.O.	5/6/18		M.O.
		M.O.	11/6/18		M.O.
		M.O.	28/6/18		M.O.

Joined ..... *day of* MAY 15 1918 *191* ..... *at* LONDON, ONT.

	Corps	Reg'tl Number	Habits	Date
1st Depot Battn., Joined on enlistment	W. O. R.	3135446		MAY 15 1918
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
London Ont	July 18-17	R G Brown Lieut -	O Cardiac Lieut

P-156 T-100° D.A.H. D III Observation

N. B.—This sheet is 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.

Surname Clausius Christian Name Robert Herman

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital Day	Month	Year	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.
		18	7	18	29	7	18	DAH	10	Hospital for observation – He tires easily and gets short of breath He has a square chest, depression over sternum with pulsation over praecordium – There is a systolic murmur heard at the base and at mitral area – Recom. Cat. E.	[illegible]

CLINICAL CHART.

Corps W. O. R. Hospital Station LONDON, ONT.

No. 313546 Rank and Name Pte Clausius R Age 22 Service C 2/12

Disease Obs. S. A. H Date of Admission 18-7-18 Date of Discharge 29/7/18 Result Improved Serial No. A. & D. Book

Dates of Observation																															
Days of Disease	1st			A.M. July 28.																											
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°																															
106°				10 A.M. 10 A.M.																											
105°																															
104°																															
103°																															
102°				27																											
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per Minute	86 92	124	96	108 86																											
Respirations per Minute	17 21	23	21 22	22 20																											
Motions																															

July 26 -

C42553 C

M. F. B. 288.

50M—4-18.
H. Q. 1772-39-513.

Signature G. Macaulay Capt. Camp. In charge of case.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battn., W. O. R.

Regimental No. 3135446 Rank Pte C. E. F. Name Clausius Robt Herman

Enlisted (a) MSA Terms of Service (a) Service reckons from (a) 15-5-18

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) Farmer

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				
		London, Ont.-Discharged-Demoblization of C.E.F.-R.O. 1257 W/E. JAN 16/19..Authority..... Last entry made			

N. W. Zinn Major
for O.C. 1st Depot Battalion W. O. R.

(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				

H. Q.

M. D. No. 1

Surname Clausius

T. O. S. May 15 1918

Christian names Robert Herman

D. O. Pt. II 23 of

Regtl. No. 313546 Rank Pte.

S. O. S. 16-1- 1919

Unit West Ont. Regt. 1st Dep. Bn.

Reason Demob.

Auth. D.O. 167 16-1-19 1 Bn WOR

Next of kin Clausius, George

Relationship Father

Address Zurich, Ont.

Also notify:

BORN—Place Canada (Hillsgreen), Ont. Date Mar. 26, 1896.

ATTESTED—Place London, Ont. Date May 16, 1918.

O/S

R/C

W. 22—100M-7-18. 1772-39-839.

M. F. W. 71.—500M.—5-16.
1772—39—961.

CLAUSIUS

NAME Rott. Herman. NCO B H.L.

REGIMENTAL No. 3135446 RANK PTE

ENLISTED AT PROMOTIONS, &c. AND DATE

DATE 15-5-18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II, D. O.		REMARKS IF IN HOSPITAL, NOTE NAME &c.
	No	DATE	
Trans to B Co	136	16-5-18	on 15.5.18
Leave without pay	139	19-5-18	from 16-5-18 to 30-5-18
Hospital	200	19-7-18	on 18-7-18.
Dis from Hosp	211	30-7-18	on 29-7-18
L. W. P.	224	8-8-18	from 8-8-18 to 19-9-18
"	261	18-9-18	" 19-9-18 to 31-10-18
L. W. P.	309	5-10-18	from 1-11-18 to 20-11-18
L. W. P.	315	11-11-18	from 20-11-18 to 4-12-18
✓ ✓ ✓	343	9-12-18	from 4-12-18 until further orders
Trans to H.L. Coy	343	9-12-18	on 9-12-18

CLAUSIUS

M. F. W. 71—500M.—5 18.
1772—39—961.

NAME Robt Herman

A Co. B. Th

REGIMENTAL NO. 3135446

RANK Pte

ENLISTED AT

PROMOTIONS, &c. AND DATE

DATE 15-5-18

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN

RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
Discharged R.O. 1357 Demobilization	16	16-1-19	On 16-1-19

H
C

Military District No. 1
36-C-1292
FEB 19 1919
I. M. D.

(1)

Procedure on discharging from the C.E.F., Soldiers called up under the Military Service Act, 1917, who, on Demobilization, were on unexpired Leave of Absence without pay.

P.C. 2865 of Nov. 20, 1918.

THIS FORM MUST BE RETURNED INTACT AND NO PART DESTROYED.

1st Depot Battalion W. O. R.
LONDON, ONT. JAN 2 1919 19

TO:—

Regimental No. 3135446

Pte. Robert Herman Clausius,

Zurich, Ont.

Regimental No. 3135446

Serial No. 733054 a.c.

1. You are directed to report on or before JAN 18 1919 for the purpose of being discharged from the Canadian Expeditionary Force.

2. This will be carried out by your reporting in person to your Depot at LONDON, ONT. Transportation to the Depot is enclosed herewith, and return transportation will be furnished to you after your discharge.

3. OR, as an alternative, you may execute, before a Notary Public, Commissioner of Oaths or Justice of the Peace, the release hereunder and forward same, on or before the said date, in the envelope enclosed for that purpose, together with the unused Transportation Certificate. A receipt for the release will be returned to you and will be equivalent to a Certificate of Discharge.

4. Should you fail to report in person or forward the release mentioned, within the time aforesaid, you will be declared a deserter and be subject to Military Law.

[signature] Major
For O.C. 1st Depot Battalion W. O. R. Rank

for the O.C. .....Depot Bn. .....Regt.

RELEASE.

Know all men by these presents that I, the undersigned, having sustained no disability from injuries received or illness contracted on Active Service or Duty, do hereby release, discharge and forever acquit His Majesty the King, in the right of his Government of Canada, of and from all rights of compensation, claims and demands which I have or may have for or in respect of any disability arising from injuries received or illness contracted on Active Service or on duty in or connected with the Military Forces of Canada.

WITNESS my hand and seal this 13th day of Jan 1919

Signed, sealed and delivered in the presence of

Andrew F. Hess
Notary Public, Commissioner for Oaths or Justice of the Peace.

Robert Herman Clausius SEAL

Regt. No. .....
1st Depot Battalion W. O. R.
Unit .....

M.F.B. 218B (Demob.)
1077-D.P.-40M-11-18.
1772-39-178.

H17-5-19.

NOT TO BE FILLED IN BY THE SOLDIER.

Receipt for M.F.B. 218B (Demob.)

Having received release, pursuant to Notice of Order to report for discharge, Number 3135446

Name Pte. Robert Herman Clausius of the first Depot

Battalion WOR Regiment is hereby struck off the strength of the Canadian Expeditionary Force.

Major
For O.C. 1st Depot Battalion W. O. R.
Rank

Authority Part II. Order
No. 16, 16-1-19 For the O.C. ..... Depot Bn. ..... Regt.

M.F.B. 218B (Demob.) DATED AT London, Ont. this sixteenth day of Jan. 191 9.

LIST OF DISCHARGE DOCUMENTS.

Particulars of Recruit	M.F.W. 133
Field Conduct Sheet	M.F.W. 178 or A.F.B. 122
Casualty Form	M.F.W. 54 or A.F.B. 103
Last Pay Certificate	M.F.W. 44
Certificate that Missing Documents are Unobtainable.	
Medical History Sheet	M.F.B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227
Dental History Sheet	M.F.B. 465
Medical Report	M.F.W. 129
Regimental Conduct Sheet	M.F.B. 263
Company Conduct Sheet	M.F.B. 263a