ORIGINAL

No 4 Forestry Draft WINNIPEG

ATTESTATION PAPER.

No 2487339

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	CROW
1a. What are your Christian names?	ROBERT
1b. What is your present address?	Eugene Apts, Grosvenor St, Ft Rouge, Winnipeg.
2. In what Town, Township or Parish, and in what Country were you born?	Stonehouse, Scotland
3. What is the name of your next-of kin?	~~Father~~ Mrs. Margaret Crow,
4. What is the address of your next-of-kin?	Eugene Apts, Grosvenor St, Ft Rouge Winnipeg Man
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	7th January 1893
6. What is your Trade or Calling?	Carpenter
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Crow, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Robert Crow (Signature of Recruit)

Date May 21st 191 7. Wm Deveen (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Crow, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Robert Crow (Signature of Recruit)

Date May 21st 191 7. Wm Deveen (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Winnipeg, Man this 21st day of May 191 7.

Wm Deveen (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Robert Crow on Enlistment.

Apparent Age 24 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8¾ ins.

Chest measurement.
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 3 ins.

Complexion ..... Dark

Eyes ..... Brown

Hair ..... D. Brown

Religious denominations.
- Church of England .....
- Presbyterian ..... Yes
- 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).

Vision R. Eye 20/20

" L. Eye 20/20

Hearing R. Ear W

" L. Ear W

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 May 21st 1917.

Place Winnipeg, Man.

Medical Officer.

*Insert here "fit" or "unfit."

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

MOBILIZATION MAY 21 1917
MEDICAL BOARD
APPROVED FIT
PRESIDENT
MEMBER
MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert Crow having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer)

Capt

Date May 21 1917.

16-4-14
a.g.

REGIMENTAL DOCUMENTS

NAME CROW ROBERT PTE REGT. NO. 2487339 UNIT 22nd H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2/1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				46683	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	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)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	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)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	D M S 1375					
1	M. & W. 192					
1	Gen. F. 467					
1	Rec'd					

W 2589
100M-11-18
17/2-39-1377

No. 54 District, Canadian Forestry Corps, Southampton, Hants.

Changes re. Next-of-Kin. Slip for attaching to ORIGINAL Att:Paper.

No. 2487339. Rank. Private. Name... Crow, R. ..... Company. 124

Changed from:-	To:-
Relationship.... Mother	Relationship.... Mother
Name and Address:-. Mrs. Margaret Miller Crow	Name and Address:-. Mrs. Margaret Miller Crow
Suite 2. Eugene Appts. Grosvenor ave	192. Lyle Street, St. James!
Avenue. Fort Rouge. Winnipeg.	Winnipeg.

Signature of Officer or Other Rank concerned.... R. Crow.....

Countersigned by O.C., Company..... J.C. Eddy.....

Date. May 29/18.....

Lieut. & Adjt.

for O.C. No. 124 FORESTRY COMPANY

CANADIAN FORESTRY CORPS.

O.N. 6/6/18

Rev T 6/6/12

WAR VETERANS ALLOWANCE

Name: Crow, Robert No: 2487339

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I Canada, U.K. France

IF CANADA AND U.K. ONLY
) Date(s) disembarked in U.K.
) Date(s) S.O.S in U.K. for Canada
) Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments: 21 May 1917 Winnipeg, Man

3. Date of all discharges and reason: 3 April 1919 - Demob

4. Date and place of birth as per attestation paper: 7 January 1893 Stonehouse, Scotland

5. Marital status: If married, name in full of wife: single

Toronto 18/7/60

6. Any other military service: nil

7. Decorations, if any. nil

Clerk's Initials: FC

F.L. No.: _____

WORK SHEET

Number	Rank	Given names	Surname
2487339		Robert	Grove.

ENLISTMENT: Date _____

BIRTH: Date _____ Place _____

BRANCH OF SERVICE: _____ REGT. OR CORPS _____

THEATRES OF SERVICE: _____

DISCHARGE: Date _____ Age _____ Type _____

Reason _____

CONDUCT RECORD: _____

_____

_____

_____

PC 3264: Date of AWL _____

WILLS: Search made in Docs No Wills Loose papers No Wills

File No Wills Will returned _____

If one in our custody, name of beneficiary _____

Date 16 Apr 24 Clerk's initials CB

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE SEPT. 15, 1976

NAME
NOM CLOW, ROBERT

Service No.
Matricule No 248339 C.E.F.

CPC No.
CCP No —

WVA No.
AAC No 233700

Information Received from:
Information reçue de: TELE MEMO - STMO - TO DIST

Date of Death
Date du Décès AUG. 9, 1976

Place
Endroit SUNNYBROOK MED. CENTRE, TO.

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC

Pour le chef,
for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) HIL.

Form R 122.
2353—100M—9-12-16.

W.W.

Rank Name CROW. Robert.- Reg'l No. 2487339.-

Unit No.4. Forestry Dft, Winnipeg. If perm. Corps, What Unit? To Base Depot. Married or Single Single.-

Place and Date of Enlistment Winnipeg. MAN. 21-5-17.- Place of Birth Stonehouse. SCOTLAND

Name and Address, Next-of-Kin Mrs. Margaret Crow, ~~Eugene Apts. Grosvenor St, Fort Rouge~~ 192 Lyle St. St James. Winnipeg. Relationship Mother.- ~~(Winnipeg. MAN.~~

Assigned Pay Monthly $ Payable to Auth. R.R. 29.-T. 4/6/18

Relationship

N/E. R.B. No. 8774
File R.L.
Category Can OR

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character MD 10

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 5-7-17. S/S JUSTICIA			
9.7.17.		C.F.C.I.D. T.O.S. SUN'DALE 17.7.17 Pt II. O 62			
17.8.17	"	S.O.S. to New Haven.	Sdale	16.8.17	Pt II T.O. 96.
1.9.17	"Dist.	T.O.S. from B. D.	Southampton	16.8.17	✓ ✓ 4.
19.6.18	BD CFC	SOS on posting from 54 Dist. 12th Coy	Sdale	14.6.18	146 (SOS 54 Dist CFC pII O 26.20.6.18)
27.6.18	—"—	S.O.S. to 12 Const Coy CFC. France	"	26/6/18	153 (TOS 12 Coy CFC pte pII O. 1. 20.7.18)
		SOS to BDCFC SDALE TOS from 12Coy CFC 12 I 19 12 I 19 12Coy CFC Pt.II.O.2 d:18-1-19 BDCFC Pt.II.O.17 d:17-1-19			
15-2-19	BDCFC	SOS to CFC Rhyl Dist 10	Pte Sdale	15-2-19	— 4

A.F.B. 10 CHECKED 2 JUL 1918

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
17-2-19	10MDCW	TOS from CTC S'dale	Tile Rhyl	15-2-19	TE-II AO 47
21-2-19	—	S.O.S. to C.R.T. Cam	~	22-2-19	— 5-4

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

(1) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended (23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

18-2-19 T.O.S. C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 41.

T.O.S.

C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No: 52

H. Rees Lt.

for Commanding 10 Wing, Kinmel Park Camp.

22 . 2 . 19

S1 IVPL FEB 23/19
H X MAR 2 20
M T ✠ BELGIC ✠

T. O. S. of No. 10 District Depot,

Part 2 Order No. 40 Para 2

Major

O. C. No. 10 District Depot.

23.2.19

Nothing to be written in this margin.

12

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. No. 4 Forestry Draft WINNIPEG

Regimental No. 2487339 Rank Private Name Crow, Robert

C. E. F.

Enlisted (a) ~~21-6-17~~ 21/5/17 Terms of Service (a) to J/W Service reckons from (a) ~~21-6-17~~ 21/5/17

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) Carpenter

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		EMBARKED HALIFAX 22.6.17 DISEMBARKED L-POOL, ~~4.7.17~~ 5/7/17			
9-7-17	BD, CFC.	T.C.S. Base Depot, CFC. R. Elliott	Sunningdale	4-7-17	Pt. II, D.O. No. 62. Lt. & A/Adjt, CFC.
1-9-17	O.C. Dist 4	T.O.S. Dist 4, From Dist 3	Southampton	16-8-17	Pt II D.O. no 4
20-6-18	Do	S.O.S. Dist 54 also 124 on posting to Base Depot CFC.	Do	14-6-18	Pt II D.O. 26. Dist 54.
19-6-18	O.C. C.F.C.	T.O.S. Base Depot, C.F.C. Sunningdale on posting from O 124. Dist 54.	14-6-18	Pt. II. D.O. 146	CAPTAIN NUMBER 4 DISTRICT, CANADIAN FORESTRY CORPS.
27.6.18	Do	S.O.S. BASE DEPOT C.F.C. SUNNINGDALE ..... Brigue	26.6.18	PT. II DO. NO. 152 ..... C.F.C.	

(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.

CERTIFIED CORRECT. CAN. RECORDS, LONDON.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
17/6/17 11 JUL 1918	3 F C B D	S O S to Disl 4.	Sundale.	16/6/17	R.O. 96. [illegible]
					FOR LT. COL. I/C RECORDS, C.O.M.F.
T,O,S	12th Coy CFC	27 6 18 Disembarked	Harve	28 6 1918	LR, No [illegible] 20/7/18
11.1.19.	6 G B D	Transfd to Eng Hosted & 6 T.C. Dep. ~~Sunningdale~~ Seaford		12.1.19.	AR. do. No 2/19
					Chas. A. Chafwell. Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17-1-19		O.C. C F.C. T.O S. Base Depot, C.F.C. Sunningdale 15-1-19 Pt. 11. D.O. 17 from 12 Coy France			Lt. & A/Adjt. Forestry Corps.
15.2.19	B.D.C.F.C.	S.O.S. BASE DEPOT C.F.C. on posting to Trans MD10 6 C Rly.	SUNNINGDALE	15-2-19	Pt. II D.O. 46 Lt. for O.C. B.D.C.F.C.
					*Discharged 3-4-19, * C, O, 76/917 D. O, 90
					Major Officer Commanding No. 10 District Depot

CANADIAN EXPEDITIONARY FORCE

No. 10 DISTRICT DEPOT
DISCHARGE
SECTION

DISCHARGE CERTIFICATE

2 Blue

THIS IS TO CERTIFY that No. 2487339 (Rank) Pte.

Name (in full) Robert King Crow. enlisted in

the No 4 C.F.C.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the twenty first

day of May 1917

HE served in France C.F.C. 9 Months.

and is now discharged from the service by reason of Demobilization. Demobilization R.O. 14
Medical Unfitness.

☆ C.O. 76 - 917 D.O. 90 ☆

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

Age 26

Height 5ft 8½ ins

Complexion Dark

Eyes Brown.

Hair & Brown.

Marks or Scars

Nil.

Robert K Crow
Signature of Soldier

E. W. Cooke Major
Issuing Officer
Officer Commanding No. 10 District Depot

Rank

Date of Discharge
3-4-19

Date 19

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

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

44 C 1838

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. (Rank)

Name (in full) enlisted in the

CANADIAN EXPEDITIONARY FORCE on the

day of

He served in

and is now discharged from the service by reason of Demobilization / Medical Unfitness.

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

Age Marks or Scars

Height

Complexion

Eyes

Hair

Signature of Soldier

Date of Discharge

Date

On demobilization the person to whom this certificate is granted is required to forward it to the Department of Militia and Defence, Ottawa, for cancellation, before any claim for gratuity can be considered.

WAR SERVICE BADGE

CLASS "A" NO. 116891 ISSUED

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.

I certify that the dates of service shown hereon are correct according to official records in our possession.

For Officer Commanding

NO. 10 DISTRICT DEPOT
APR 1919
DISCHARGE SECTION
M.D. 10, WINNIPEG

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian Names Robert King. 2. Surname Brown.
3. Rank Pte. 4. Original Unit 4th b. 7 b. D. 5. Reg. No. 248339.
6. Address, in full, to which future payments of gratuity are to be forwarded 192 Lyle St. St. James Winnipeg
7. Date of enlistment in the C.E.F. 21-5-17
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs. Robert King Brown
9. Relationship of such dependent Father.
10. Present address, in full, of such dependent 192 Lyle St. St. James Winnipeg
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No.
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:— No.
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service No.
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 4th b. 7 b. D. 21-5-17 12th b. 7 b. 26-6-18. M.D. 10. 23-2-19. 15 Discharge 3-4-19
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... No .....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ... No .....

20. Have you been issued with a War Service Badge? If so, what class? ... No .....

21. Have you, during the present war, served in the Imperial Forces? ... No .....

22. Are you entitled to received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... No .....

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ..... No .....

(b) If so, was such reversion in consequence of misconduct or inefficiency? not appl.

24. Are you now serving in the C.E.F. ..... No ..... If not, give:—(a) Date of discharge ..... 3-4-19. ..... (b) Reason for discharge Demobilization P. O. 1420 (c)

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ..... same as Para 15 .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No.

(b) If so, are you in receipt of full pay and allowances from that Department? ..... No .....

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

Signature of Applicant: Robert K Crow

Place of Residence: 92 Lyle St. St. James. Winnipeg

Declared before me at: Winnipeg

This 3rd day of April 19 19 E Tisdale A Com. in B.R.

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

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
				400 00

Certified Correct.

District Paymaster.

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

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 4th Forestry Draft. WINNIPEG

(2) Regimental Number 2487339

(3) Full Name of Soldier Crow. Robert.

(4) Place of Birth Stonehouse, Lanarkshire, Scotland.

(5) Are you married, or not ? Single

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

(b) Present Postal Address Eugene Apts. Suite 1. Lila c and Grosvener. Fort Rouge, Winnipeg.

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address ...Robert Crow. Eugene Apts. Grosvenor Ave. Fort Rouge, Winnipeg.

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

If so, state name and address..Marharet Miller Crow. Eugene Apts. Grosvarer Ave.

.....Fort Rouge. Winnipeg.....

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

Are you her sole support, or not ?..No.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....

.....

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

.....

.....

.....

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

.....

15) Are you insured ?..No.....

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

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

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

Date June 12th 1917

.....
Officer Commanding.
Capt

No 4 Forestry Draft WINNIPEG DUPLICATE

MEDICAL HISTORY SHEET 2487339

Surname Crow Christian Name Robert

Examined on 21 day of May 1917 at Winnipeg, Man.,

Birthplace City or Town Stonehouse, County Lanark, Scotland.

Apparent age Twenty Four

Trade or occupation Carpenter

Height 5 feet Inches

Weight 135 lbs.

Chest measurement Minimum 32 inches, Maximum expansion 35 inches

Physical development Med.

Small-pox Marks None

Vaccination Marks Arm Right Left 1, Number 1

When Vaccinated last Childhood

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vision R. Eye 20/20

" L. Eye 20/20

Hearing R. Ear A

" L. Ear A

Approved by R W Taylor

Rank Capt AMC M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
14/8/0		[illegible] MAY 21 1917	M.O.
		MOBILIZATION MEDICAL BOARD APPROVED FIT	M.O.
		[illegible] PRESIDENT	M.O.
		[illegible] MEMBER	M.O.
		[illegible] MEMBER	M.O.

Date	Result	Vaccinations	
13/6/17		R W Taylor Lt	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
11/6/17		R W Taylor Lt	M.O.
18-6-17		W O Henry	M.O.
25-6-17 T&A 18/6/18		W O Henry Jabavaccine	M.O.

Enlisted on 21 day of May 1917 at Winnipeg, Man.,

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No 4 Forestry Draft.	2487339		21-5-17
Transferred to	12 Const Co			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Summerdale	21-1-19	— A —	Frank H Smith Capt.

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

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

Surname Lennox Christian Name Robert.

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

B 2

D.M.S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☞ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Pte Name Robert Surname Crow

Unit or Corps C.F.C. (If a soldier) Regtl. No. 2487339

Born at Stonehouse Lanarkshire on, date 7th Jan 1890

Signature (for identification) Robert Crow

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight
132 lbs.
Height
5 ft. 4 ins.

2. **NUTRITION AND DIATHESIS?**

Nil

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?**

Nil

4. **RESPIRATORY SYSTEM.**

Few coarse rales - disappear after a few breaths.

5. **HEART?**

Abnormal Sounds? nil

Abnormal Size? nil

Pulse Rate? 80 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening?

nil.

7. **DIGESTIVE SYSTEM?**

Nil

8. **GENITO-URINARY SYSTEM?**

Nil

Urinalysis—s.g.? 1.018 Reaction? acid Albumen? nil Sugar? nil

9. **SKIN, MIDDLE EAR, EYE** or any other part?

Nil

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

No

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Summerdale

Date 21-1-19

Signed E C Peacocke M.O.

Signed Frank R Smith Capt M.O

☞ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

S.S. Belgic.

192. Lyle st
St James
Winnipeg
man

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2487339 Rank Pte. Surname CROW.
(Give name in full)
ROBERT KING.

Unit or Corps. C.F.C. 10. D.D. Birthplace stonehouse Lanarkshire scott.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight. 150 lbs. Height. 5 ft. 8½ in. Color of Eyes. Brown.

Nutrition Good

Pulse 70

Condition of arteries. Normal

Vision Rt. 20/30 Left. 20/40

Hearing (conversational voice) Rt. 20 ft.

Left. 20 ft.

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

Nil

Opinion as to general health and physical condition Good Good

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

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

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

Disturbance of mentality. No. Muscular System. No. Digestive System. No.

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

DISTRICT NO. 10 RECEIVED MAR 7 1919

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

D.V. as above - This condition pre-existed enlistment and has not been aggravated by service.

Chronic laryngolitis - No Hospital treatment necessary, can treat himself.

Specialists' report attached.

Filed at A

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Canada)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signautre .....

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

THIS SECTION FOR USE IN CANADA—

Examined at. Winnipeg. (Canada)

Date ....19/3/19..... Signed J. W. Stapleton M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature Robt. H. Crow

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

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

J. C. Canton

[OVER]

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2 Margaret Miller Crow
(Assignee)

L. L. Job 19227—M. & D. 7814.

Name of Soldier Crow. Robert
2487339. Pte. 4. Forestry. Dpt

20.00

JUL 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July		F28095	20 —	
Aug.		B 31525	20	Lu 834 Grosvenor Ave. St. Boyd. Winnipeg 9/8/17
Sept.		X 36448	20	
Oct.		A 26105	20	
Nov.		a B7364	20	
Dec.		K 55975	20	120.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 26-5-19

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.				

19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom Margaret Miller. Crow — By Whom Assigned Crow. Robert

Address ~~Suite 1. Eugene Apts~~ ~~cor. Grosvenor & Lilac~~ 834 Grosvenor Ave. Fort. Rouge. Winnipeg — Regtl. No. 2487339

Rank Pte

Corps 4 Forestry. Draft

Rate 20.00

JUL 1 1917

PAYMENTS

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

CONSOLIDATED ACCOUNT II

*Name Crow, Rob, Rank Pte. Regtl. No. 2487339

Original unit C.F.C. Present unit / M. or S. Age 25 Religion Pres. Fyle Depot / Ref. H.Q.

Port, ship, and date of arrival 2-3-19 S.S. Belgic, Halifax.

Next of kin (Mother) Mrs. Margaret Crow, Eugene Apts. Grosvenor St. Wpg.Man.

Address on leave

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Carpenter Date and place of enlistment May 21st 1917 Winnipeg, Man.

Diagnosis Date of Medical Boards MAR 2 1919 MAR 2 1919 Ok

Date.	Remarks	Pt. 2 Order No.
23-2-19	T.O.S. #10 D.D. and Posted to Cas. Coy D.O.	70-2
	14 days L/L.	

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

SURNAME. Crow

CARD NO. 10

CHRISTIAN NAMES Robert

SOS-Dis 28-3-19
FOLL. 200900 Klemob 31-3-19
#1010.20

REGL. No. 2487339 RANK Pte.

UNIT Forestry Coy. No 4 (M. D. 10)

FORMER CORPS Inf.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Crow. Mrs. Margaret

RELATIONSHIP TO SOLDIER Mother

ADDRESS ~~Eng Inc Apts. Grosvenor Ave Fort Rouge~~
192 Lyle St. St. James Winnipeg. Man.
Auth SOAS. 10/5/18. rc.

COUNTRY OF BIRTH Scotland Stonehouse

DATE Jan. 4th 1893

PLACE OF ATTESTATION Winnipeg. Man.

DATE May 21st 1914

B/S. 25-6-17. 896/2

R/C 1-3-19 276 Pte

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

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

Sailed from Halifax Per SS "Justicia" 25-6-17

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Carpenter RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE	24	YEARS		MONTHS	
HEIGHT	5-	FEET	8 ½	INCHES	
CHEST MEASUREMENT	35-	INCHES	EXPANSION	3	INCHES
COMPLEXION Dark		EYES Brown	HAIR Dk. Brown		
DISTINGUISHING MARKS	Nil.				

MEDICAL EXAMINATION. PLACE Winnipeg. Man. DATE May 21st 1917

Present address Eugene Apts. Grosvenor Ave. Fort Rouge, Winnipeg. Man.

No. 2487339 RANK Pte NAME Crow R

T. O. S. 21-5-17
T. O. 190 of 21-5-17 UNIT No 4 Forestry Draft

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 May 21	1917 May 31	W		

Number 2487339 Rank Bte

Surname CROW

Christian Name Robert

Units C.F.C. Theatre of War France

Date of Service 26/6/18

Remarks

Latest Address ~~192 Lyle St~~ ~~St James~~ 217 Adam St St James Winnipeg
Struggan Creek. Man.

Roll No.

200m.-6-21.M. B Page 21426.

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

OSPITAL AS AN ADMISSION

WHERE FROM)

IT ..... IN CATEGORY

INVALID

WHERE TO)

ITIONS DIAGNOSED

ADDRESS

HOSPITAL ..... STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

FORM P. 559
8248-150M.-7/3/17

MARRIED OR SINGLE Single.

PLACE OF BIRTH Stonehouse Scotland

NAME OF NEXT OF KIN Margaret M. Crow. RELATIONSHIP

ADDRESS Suite 1. Eugene Apts.,
Winnipeg. Canada.

NAME OF NEXT OF KIN RELATIONSHIP

ADDRESS

APPOINTMENTS.
PROMOTIONS AND REVERSIONS.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &c. NAME OF HOSPITAL.

SEPARATION ALLOWANCE.

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE) STOPPED EFFECTIVE (DATE)

PAYABLE TO REASON

RELATIONSHIP AUTHORITY

AUTHORITY FOR ISSUE REMARKS

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE DATE STOPPED EFFECTIVE (DATE)

PAYABLE TO REASON

RELATIONSHIP AUTHORITY

AUTHORITY FOR ISSUE REMARKS

NEW PAYBOOK ISSUED NEW PAYBOOK ISSUED

REG'L. No. 2487339 RANK Private NAME Crow. Robert. 561

PLACE OF ATTESTATION Winnipeg, Canada DATE OF ATTESTATION 21.5.17. ORIGINAL UNIT Winnipeg Forestry Draft.

PRESENT UNIT C.F.C.

ASSIGNED PAY

(1)
PER MONTH $ 20 00/100 DATE EFFECTIVE 1.7.17. AUTHY.

PAYABLE TO Margaret M. Crow.
Suite 1. Eugene Apts.
Winnipeg. Manitoba RELATIONSHIP Mother

(2)
PER MONTH $ DATE EFFECTIVE AUTHY.

PAYABLE TO

RELATIONSHIP

(3)
PER MONTH $ DATE EFFECTIVE AUTHY.

PAYABLE TO

RELATIONSHIP

(4)
PER MONTH $ DATE EFFECTIVE AUTHY.

PAYABLE TO

RELATIONSHIP

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

(1)
STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

(2)
STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

(3)
STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

(4)
STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PARTICULARS OF TRANSFERS

TO UNIT	EFFECTIVE DATE	AUTHORITY

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. OF DAYS	PAY AND FIELD ALLOWANCE RATE	PAY AND FIELD ALLOWANCE $ c.	WORKING PAY No. OF DAYS	WORKING PAY RATE	WORKING PAY $ c.	SEPARATION ALLOWANCE $ c.	ASSIGNED PAY CREDITS $ c.	ANY OTHER CREDITS $ c.	TOTAL CREDITS $ c.	SEPARATION ALLOWANCE $ c.	CASH PAYMENTS DURING THE MONTH 1 $ c.	2 $ c.	3 $ c.	4 $ c.	ASSIGNED PAY $ c.	OTHER CHARGES $ c.	TOTAL DEBITS $ c.	BALANCE CARRIED FORWARD CREDIT $ c.	BALANCE CARRIED FORWARD DEBIT $ c.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
July 1, 1917 - Balance from Canada -																				13 -					C
July 1	31	31	1.10	34 10							34 10						20		20	24 10					
Aug 1	31	31		34 10							34 10						20		20	41 20					
Sept 1.	30	30		33 00							33 00		2.14		14.60	20			37 04	37 16 ✓		2971 15/7/1			Lower Cash 16/7/1
			101 20								101. 20		2.14.		14-60	60 -			77 04						

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 26/7/17

2487339. Pte Crow. Robert. A.P #20. Mtl. Can.

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. of Days	PAY AND FIELD ALLOWANCE Rate	PAY AND FIELD ALLOWANCE $ c.	WORKING PAY No. of Days	WORKING PAY Rate	WORKING PAY $ c.	SEPARATION ALLOWANCE $ c.	ASSIGNED PAY CREDITS $ c.	ANY OTHER CREDITS $ c.	TOTAL CREDITS $ c.	SEPARATION ALLOWANCE $ c.	CASH PAYMENTS DURING THE MONTH 1 $ c.	2 $ c.	3 $ c.	4 $ c.	ASSIGNED PAY $ c.	OTHER CHARGES $ c.	TOTAL DEBITS $ c.	BALANCE CARRIED FORWARD Credit $ c.	BALANCE CARRIED FORWARD Debit $ c.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
MONTH		PARTICULARS			CR. 1	CR. 2	PARTICULARS				DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEPEND. PAY	SER. ALLCE. ENG.								
Sept 30th					~~37 16~~										37 16										
Oct							A. P. Canada.						20												
"							3062 7/8/17 C.F.C. Summingdale Berks.				4. 87.														
"							3286 9/8/17 B. D.				14. 60.														
Oct.		P. P.			34 10		A.R. 11 24-9-17 124 Bay				4 87				26 92										
					34 10						24 34		20												
Nov. 30		P. Pay			33. -		A. P. Canada.						20												
Dec. 31.		P. Pay			34. 10.		A.R. 8 60. 23/12/17 Ro 124 Co.				12. 17.														
							DN 29/2 29/12/17 C. F. C.				4 87.														
							A. P. Canada. Dec.						20												
							Q4005-3857-15/8/17 6th Eng				.06		40												
1915					67 10						14 10		~~20~~		36 92										
Jan		P. Pay			34 10		Catay						20												
							A/c A 266 15-12-14 124 Bay				9 73														
							A/c A 266 29-11-14 124 Bay				12 17														
					34 10						21 90		20		29 12										
Feb.		PP			30 80		AP Can						20												
							S547. 26/1/18. 124 Co				12 17				27 75.										
					30 80						12 17		20												
March																									
		PP			34 10		C. A. P.						20												
							S644. 22/1/18. 124 Co				9 73.														
							S516. 15/1/18 124 Co				12 17				19 95										
					34 10						21 90		20												

29 12
30 80
5992
3217
2775

24 75
34 10
61 85
41 90
19 95

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

C.S with Tivo 8814

ASSIGNED PAY.	* ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND or CANADA.
EFFECTIVE DATE:- 1-7-17		EFFECTIVE DATE:-	
AMOUNT:- 20 00		AMOUNT:-	

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

Margaret M. Crow. (mother)
Selkirk Eugene Apts
Winnipeg Man.

Stopped 1-3-19.

a/c agreed. 31.10.18. 46 85

NAME:- CROW Robert

NUMBER:- 2487339.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- Wpg 7 Dft.

DATE ACCOUNT FIRST OPENED:- 1-7-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C7 C Eng
	1/8/18		C.F.C. France

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
20.1.19.	6839.	Rbtb.	~~9 73~~	Chgd Feb/19			
23.1.19.	~~Q 4005 & 406.~~		~~4 25~~				
25.1.19.	6917	Rbtb.	29 20	✓	✓		
7.2.19.	7654.	✓	~~9 73~~	✓	✓		
			52 91				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

Ledger Bal. 63 41

PARTICULARS OF RENDERING NON-EFFECTIVE:- 1 Pte to Can 11/3/19. NR 2788 - L date - L date - 11/2/19 - twd 10 LPC - Bal 10 50

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal fwd								19 95	✓	
April	PP.	33		Cap				20			
				$121, 24/4/18, 124 Co	12 17				20 78	✓	
		33			12 17			20			
May	PP	34 10		Cap				20			
				$265, 27/5/18, 124 Co	12 17				22 71	✓	
		34 10			12 17			20			
June	PP.	33		Cap				20			
				D1345, 25/6/18, BD.	9 73				25 98		
		33			9 73			20			
July	PP.	34 10		Cap				20			
				Q4005, $124, 16/1/18	14				39 94		
				Qu 626, 12/7/18, 676 Yr 6 Dist.	3 57						
				778, 30/7/18, 6 Dist Yr	5 35				31 02		
		34 10			9 06			20			
Aug	P Pay	34 10		C.a.P				20			
				M.R. 1012 No 6 Dist. C.F.C. Fr	16-8-18	3 57			41 55	Fr	
		34 10				3 57		20			
Sept.		33		Cap				20			
				M. 1113. 3/9/18. C2C No 6 Dist.		5 35					
				M. 1297. 14/9/18. ✓		3 57					
				Qu M.S #205. 15/6/18. ✓		84					
				M. 8 36/9/18. 11th ✓		5 35			39 44		
		33				15 11		20			
Oct	✓	34 10		C.a.P				20			
				Q4005/723. C.F.C.	24.7.18	1 49					
				Q4005 5496. 124 Co	13.6.18	1 54					
				ark 98 11th Dist.	15.10.18	4 66			46 85		
		34 10				6 69		20			

COMPILED BY [illegible]
CHECKED BY [illegible]

CANADIAN ASSIGNED PAY AUDITEL
AUDIT CLERK
DATE 26 3 19

NUMBER 2487339 RANK PTE NAME CROW. R.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				Bal. Ford.					46 85		
Nov'r Dec'r	Pte's Pay	64 10		C.a.P.				20			
1919				aR 252. 11 Dist. 20.11.18	11 19						
Jan	✓	31 10		✓ 3. 12 6d 15.12.18	11 19						
				C.a.P. Dec'r				20			
				C.a.P. Jan.				20	65 67		
		101 20			22 38			60			
				55. 12 6d 21.12.18	9 33						
Feb	✓	30 80		C.a.P.				20			
				8th. 12 6d 6-1-19	3 73				63 41		
				6539. B D. 20.1.19	9 73						
				B6757. B D. 25.1.19.	29 20						
				B7654. B.D. 7.2.19	9 73				14 75		
		30 80			61 72			20			
Mar				Dbt Ct 23/1/19. Q40035.	4 25				10 60		

S. o S. to Canada. C/L 23. 22/2/19.

WAR SERVICE BADGE
CLASS "A" NO. 1[illegible] ISSUED

MD 10 Cw

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Group 1

1. No. 2487339

2 Rank. Pte

3. Name. Crow Rob

4. Unit. CFC

5 Date of Discharge 3-4-19 Place Winnipeg

6 Reason for Discharge Demobilisation R.O. 1420 (c)

Mother

A

SLT LVPL FEB 23/19
HFX MAR 2 20
H M T BELGIC

7. Authority.

8. Proposed Residence after Discharge 192 Lyle St. St James Winnipeg

W. S. B. Class A. No

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.? ☆ C.O. 76 - 917 D.O. 90 ☆

Robert K. Crow

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Winnipeg

Date 3-4-19

Signature E. W. Cooke Major.
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

Date of Enlistment

1-3-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C 13018

Date of Assignment

July 1/17.

RATE OF SEPARATION ALLOWANCE

25.00	30		

1.9.18
PC 2753
Mo. 44811

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 2487339

Rank Pte Promoted Reverted Discharge

Soldier's Name Robert Crow

Battalion # 4 Forestry Draft.

Beneficiary

Relationship Mother — M Dw 255-4

Address — 1-8-18

Rec 19/9/18 Dc

PARTICULARS OF ASSIGNMENT

Name Margaret Miller Crow

Address ~~824 Grosvenor Ave Fort Rouge~~

Change of Address Winnipeg Man.

1 192 Lyle St St James

2

3

4

4018-K-12

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917 Dec 31			120 -	120 -		
1918. Jan	C 70049		20 -	20 -	mc	
Feby	E 90482		20	20		
Mar	A 119638		20	20	jgl	
Apl	B 2150		20	20		
May	M 35355	50 ~~25~~	20	20		
June	D 21914	25	20	45		
July	S 33158	25	20	45		
Aug	J 35650	25	20	45		
Sept	L 45066	25	20	45		
Oct	A 53005	25	20	45		
Nov	D 61061	25	20	45		
Dec	D 66779	~~45~~ 25	20	45		
"	B 4008	25	11449	25		
Jan 19	M 79346	30	20	50		
Feb	P 78684	20	20	50		
		~~330~~	~~400~~	~~730~~		
Mar	H 90880	~~20~~	~~20~~	~~50~~		
		360 330	400 31-3-19	730		

SA to be paid to Mother for 6 months from 1/3/18 send form Med Certf to be completed in 6 month and sent showing condition of Husband.

to add March & April SA 7/18 Health Ruling SB 3/5/18

~~MRO 15/5/18~~

SA to Continue to Mother as at Present Ruling Pa RB 16/5/18 cf

CANADIAN ASSIGNED PAY AUDITED AUDIT CLERK DATE 26-5-19

H 4008 Mtd 7/12/18 to and incl for month of March 1918

H 90880 Cancelled assigned deceased

amended mfw 187 Rend 9-7-19 Deb

3

Dec'd per Belgic

1-3-19 8/3/19

Corp Lowrie

ATTDITED

Mr D.10 Mr R 0.76905

CONSOLIDATED ACCOUNT

M. F. W. 128.
400M—6-17—1772 39-1141
L. L. 22320—M. & D. 7998.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 126.
400m.-'-17—1772 39-1141
L. L. 22330—M. & D. 7993.

Belgian

AUDITOR | PAYMASTER

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

M. or S. | REGT. No. 248339 | RANK Pte | NAME (IN FULL) Crow. Rob. 28 (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes | DATE EFFECTIVE 7/6/19

TO WHOM PAID ~~Mrs Robt King~~ Crow | RELATIONSHIP -

ADDRESS 192 Lyle St St James Winnipeg

192 Lyle St St James

PARTICULARS | EFFECTIVE DATE | AUTHORITY

3

ORIGINAL UNIT C.E.F. 4.2.Bty | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 20.00. | DATE EFFECTIVE 4/4/19

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 197 Lyle St St James Man -

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE M.D.10 | DATE 3/4/19 | REASON D. | AUTHORITY D.O. 90 | IF ENTITLED TO POST DISCHARGE PAY yes

122 Days W.S.9-

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							10	50	10	50																								10	50	
28/4/19		1/10					10	50	10	50							4 87																			
																	50 -																			
																	5 -																			
																											20 -			79 87		69 37			
1/5/19 31/3	31	1/10	34	10	11	20			45	30																	69 37/46		70 33		25 03			
1/4 3/4	3		330		3/35 -				4	30	1 1/4/19		1 1/4/19				35 -		3 -		2 -						25 03		65 03		23 73			
19.			37	40	49	20	21	00	10	76	6 x Xe		5987				35 -		3 -		2 -						115 36		215 23		118 13		10	50
Apl 2	1/3	1/10	380								131513		70														33 73				186 27			
		3/20					130		400		514						30																	
6.5.19											561966		70																					
29.5.19					55 -				55	-																								
2.6.19											756340		70																					
5/6/19.											762824		55 -																					
10/7/19											788801						60																	
											1204171		70																					
											1204172						30																	
									455								311 27		120								23 23		458					

a/c closed.

Balance 10 50 to 28/4/19

Pay 2 Pcs 5 38 7/19

Brought down

Pay 96 Cash 15 5079 R.O. 70

1.6.1 C.C. 2 days 1.10

Pay 5 Cash 14 days 1.10

60 35 00 6 8 20 0 73

23 12 to be recovered W.S.9.

23 73 Unpaid -

70 1st Payment W.S.9

30 2nd pay W.S.9

55 Sa. 1/3/19 to 31/3/19 33 days 1.6 36/19

10 3 "

Pay 56 1.5 to be deposited

Pay 5 1.5 to be made in

ALLOTTED

Pay 60 - 2 - 3 pay Sa W.S.9

100M-1-19.—L. L. 53962-M & D. 9723.
M. F. W. 2596.
1773-39-1590.