1st O/S Canadian Pioneer Details   original ORIGINAL

ATTESTATION PAPER.

No. 490533

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Currie
1a. What are your Christian names? — Robert George.
1b. What is your present address? — 435 Ash St New Westminster B C
2. In what Town, Township or Parish, and in what Country were you born? — New Westminster B C.
3. What is the name of your next-of-kin? — William Currie
4. What is the address of your next-of-kin? — 435 Ash St New Westminster B C.
4a. What is the relationship of your next-of-kin? — Father
5. What is the date of your birth? — Oct 19th 1890
6. What is your Trade or Calling? — Clerk
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes
9. Do you now belong to the Active Militia? — No
10. Have you ever served in any Military Force? If so, state particulars of former Service. — No
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert G. Currie, 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 George Currie (Signature of Recruit)

Date May 5th 1916. A Gregor (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert G. Currie, 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 George Currie (Signature of Recruit)

Date May 5th 1916. A Gregor (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 Vancouver B.C. this Fifth day of May 1916

B E Lauchner JP (Signature of Justice)

M. F. W. 23.
100M.—1-15.
H. Q. 1772-39-841.

4693

Description of Robert G. Currie **on Enlistment.**

Apparent Age ~~26~~ 25 yrs 7 months. (To be determined according to the instructions given in the Regulations for Army Medical Services.)	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).
Height 5 ft. 9 1/2 ins.	
Chest measurement: Girth when fully expanded 36 ins.	
Range of expansion 1 1/2 ins.	
Complexion fair	
Eyes grey	
Hair light brown	
Religious denominations: Church of England	
Presbyterian Presby	
Methodist	
Baptist or Congregationalist	
Roman Catholic	
Jewish	
Other denominations (Denomination to be stated.)	

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 5th 1916. F. C. Dunlop

Place Vancouver B.C. 615 Hast St. W

Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert G. Currie 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.

B. [illegible] (Signature of Officer)

JUN 7 1916

Date 191 .

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

Attestation Papers........................ 1.4 1

Declaration of change of name........................

Authority for special enlistments........................

Documents of re-enlisted men........................

Regimental Conduct Sheet........................ 1

Compulsory Stoppages........................

Casualty Forms........................ 1

Proceedings on discharge........................ 1

Corps History Sheet........................

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

Parchment Certificate........................

Medical Report for Invalids........................ 1

Medical History Sheet........................ 2 ~~sent to 13 P C 6 9/3/48 F.P.A.1~~

Proceedings of Regt. Court Martial........................

Copies of Convictions by Civil Power........................

Company Conduct Sheet........................ 1

Clothing Transfer Certificate........................

Inventory of Kit........................ 1

Last Pay Certificate........................

A.F.B. 179 - 1

M.F.W. 67 - 1

Pas Card - 1

M. F. W. 62.
25m.—12-15.
H. Q. 1772-39-935.

DISCHARGE DOCUMENTS

R. O. No........................

H. Q. No........................

Name Currie. Robert. George. 49731

Regt. No. 490533 Rank Private

Corps C.C.A.C. No 1 Pioneer - Medically Unfit.

Deceased 20-1-55

M

H

Proceedings of Med Board held at

Shorncliffe 11-9-16

Quebec 12-10-16

Sent to C. R. 30-10-16

BG

R—122

C.T.

Rank | Name CURRIE Robert George | Reg'l No. 490533

Unit 1st Pioneer Details | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Vancouver.B.C.5th May.1916 | Place of Birth New Westminster,B.C.

Name and Address, Next-of-Kin William Currie,

435 Ash St New Westminster,B.C. Canada. Relationship Father

Assigned Pay Monthly $ | Payable to ccac

Relationship

N/E. R.B. No. 5096
File R.L.
Category Can. MV.

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—7165-16.

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.
30.6.16	P.D	T.O. Strength	Shorncliffe	29.6.16	Pt II Orders 111
12.9.15	"	S.O.S. to CCAC	"	11.9.16	" 185
11.9.16	CCAC.	Reptd & Taken on Strength	Folkestone	11.9.16.	Pt II 0390
16.9.16	" "	On Com to CDD Bath for Discharge		13.9.16	Pt II 0400
2.10.16.	CDD.	S.O.S. to Canada for disch. M.U.	Bath.	29.9.16	Pt. II 197. CCAC Pt II 0440.
		CHECKED. 5th Dec, 1916.			
	Dis. Depot	Finally Discharged	Quebec	3-11-16	Nom. Roll No. 69. 435 Oak St. New. Westminster

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.					

1st O/S Canadian Pioneer Details Original ORIGINAL

C.C.A.C.

M.C. Card, C.R. 482, 490533 31

MEDICAL HISTORY SHEET.

Surname Currie *Christian Name* Robert G

Examined on 5th day of May 1916 at Vancouver	Approved by F.G. Dunlop M.D. 615 Hast. St. W. Vancouver B.C.
Birthplace City or Town / County	Rank M.O.
Apparent age 26	
Trade or occupation	
Height 5 Feet 9 1/2 Inches.	
Weight 160 Lbs.	
Chest measurement Minimum 34 1/2 inches. Maximum expansion 36 inches.	
Physical development good	
Small-Pox Marks —	
Vaccination Marks Arm Right. Left. Number 1	
When Vaccinated last child	
(a) Marks indicating congenital peculiarities or previous disease	
(b) Slight defects but not sufficient to cause rejection	

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

Date.	Result.	Vaccinations.
30 JUN 1916		W. E. Ghest. M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
MAY 13 1916		J. W. Wordley M.O.
MAY 22 1916		G. B. Murphy M.O.
JUN 20 1916		J. McGinty M.O.

Enlisted on 5th *day of* May 1916 *at* Vancouver B.C.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	VANCOUVER PIONEER CO'Y	490533		5/5/16
Transferred to				

APPROVED [signature] CAPTAIN, A.M.C. FOR D. OF R. & O. FOR BRIGADIER GENERAL COMMANDING TRAINING DIVISION.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
CCAC	Sept 1st 1916 12 Sept 16 D of R&O	Cardiac Dilat. & Enlargement. Approved S.L. Walker FOR A.D.M.S. CANADIANS, SHORNCLIFFE.	Discharge M. Henry Capt. CAPT. PRESIDENT, STANDING MEDICAL BOARD.

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

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Surname Currie Christian Name Robert George

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
										DISCHARGED. under Para 392, Sec. 16, K. R. & O. 1912. Being no longer physically fit for war service. [signature] Commandant. Canadian Casualty Discharge Depôt, BATH.	

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 196 O/3 Canadian Pioneer Details

(2) Regimental Number 490533

(3) Full Name of Soldier R Currie

(4) Place of Birth New Westminster BC

(5) Are you married, or not ?

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

(b) Present Postal Address

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? William Currie

If so, state name and address 435 Ash St Westminster BC

(10) Is your Mother alive? Yes

If so, state name and address Annie Currie

Same address

(11) If your Mother is a widow

Are you her sole support, or not?

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

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

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

(15) Are you insured? Yes

If so, in what Company? Metropolitan Life Ins Co

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.

[signature] Captain.
Officer Commanding. COMMANDING.

Date JUN 11 1916

(649-C-4209)

SURNAME. Currie	CARD No.
CHRISTIAN NAMES Robert George	S.O.S. Dis 29/10/16 - 5 - FOLL.
REGL. No. 490533 RANK Pioneer	
UNIT 1st Pioneer Details	
FORMER CORPS nil	

NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Currie William	
RELATIONSHIP TO SOLDIER Father	
ADDRESS 435 Ash St. New Westminster B.C.	

COUNTRY OF BIRTH Canada New Westminster B.C. DATE Oct 19th. 1890

PLACE OF ATTESTATION Vancouver B.C. DATE May 5th. 1916

O/S. 18-6-16 457

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Clerk RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 25 YEARS 7 MONTHS

HEIGHT 5 FEET 9 1/2 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 1 1/2 INCHES

COMPLEXION Fair EYES Grey HAIR Light Brown

DISTINGUISHING MARKS not stated

MEDICAL EXAMINATION. PLACE Vancouver B.C DATE May 5th 1916

Present Address 435 Lish St New Westminster B.C

No. 490533 RANK Pte. NAME Currie R. G.

T. O. S. 5-5-16 UNIT 1st Canadian Pioneer Details
5-5-16

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 May 5	1916 May 31			

No. 490533. RANK Pte. NAME Currie R. G.

T. O. S. UNIT Discharge Depot. Quebec.

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Sept 21.	1916 Oct. 29	✓	1st Pion. Bn.	

A
RB

Number 490533 Rank Pte

Surname CURRIE

Christian Name Robert George

Units Can Pnr Bn Theatre of War England

Date of Service 29-6-16

Remarks

Latest Address 435 Ash St
New Westminster
BC

Roll No. A 8 page 4158

200m.-6-21.M.

TOTAL SERVICE WHERE ..... DATE AND PLACE OF OR
AND HOW LONG

DISEASE OR INJURY .....

OPERATIONS.....

RESULT OF OPERATIONS.....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION .....

(B) AS A TRANSFER (STATE WHERE FROM).....
NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT ..... IN CA

DATE OF DISCHARGE AS AN INVALID.....

DATE OF DEATH.....

DATE OF TRANSFER (STATE WHERE TO).....
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED.....

NEXT OF KIN..... ADDRESS.....

..... HOSPITAL.....

DESP. MAR 26 1923
REGN. NO. 30185

M. F. W. 142.

1772—39—1171.
50m.—2-19.

* CROSS O

H. Q. FILE No. 649-

NAME Currie Robert

REGT'L No. 490533

RANK AND CORPS Pte. Pioneers

CABLE		NATURE OF CASUALTY
NO.	DATE	
02272		Sailed for Canada per Troopship "Secret" Sept. 30/16. Valvular Disease

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

File No. D4108-R-19

WAR SERVICE GRATUITY.

Register No. C/224

Ew

Reg. No. 490533 — C.E.F.

Pte Name Currie, Robert George

Address 435 Ash St

New Westminster B.C.

Pay Soldier $ 210.00

Rm Thibeault

P. May

Clerk J McReilly

Dependent

Address

Pay Dependent $

Days 92 Rate 70 Due 210.00

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net 210.00

R.W. 102 12/11/19

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1 27/8/19	acc					1				
2	12671	502934	140	00	2 9/19	2				
3	18 9/19 29838	523841 30-9-19	70	00		3				
4						4				
5						5				
6						6				

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

GEN'L AUDITOR
Posting checked by EBB
Date 27-8-19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Currie, Robert George
Surname Christian Name

Regimental Number 490533 (49533) Rank Pte

Unit C. E. F.

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full) 435 Ash St
New Westminster B. C.

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks: Ledger Sheet made from (U.S.S.) Declaration

M. F. W. 127
300M-1-19
1772-39-1140

M. F. W. 41
100M-1-18.
1772-39-889.

C/747.

Pte Name Currie, Robert George

Regimental No. 490533.

Name and address of next-of-kin 435 Ash Street New Westminster, B.C.

Unit Dft. 1st Pioneers

Date of enlistment 5-5-16.

E S.A. Nil.

Place of " Vancouver. E

Married (yes or no) No.

Date and place discharged D. D. Quebec 29-10-16.

A.P. June 1916 chgd on Pay List - $64.00

Amount of pay assigned monthly $16.00 1/6/16 to 30/9/16.

Reason for discharge Class I. Medical Unfit

To whom payable Wm Currie as above

Character on discharge

Olympic 5-10-16. Class I. H.Q. 649-C-4209.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	20/9/16							10.56								Eng. L.P.C.
21/9/16	29/10/16	39	1.00	39.00	39	10¢	3.90							2.43		A.R. 3585.
		Subsistence						9.00	62.46					4.84		" 4281.
														1.10		24 hrs Detention Pt. II 784
														4.84		On Boat.
														49.19		D. D. Quebec
															62.46	
S. L.P.C.	Bal pay from Canada.							3.60	3.60	977	6/12/18	3.60 ✓			3.60	chk fwd. to M.D. 11 for transmission
								M.D. 12 ack receipt of chk						27/12/18		

A.P. charged on Eng. L.P.C. 3 mos to 30/9/16 = $48.00

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

J. L. Job 310—M. & D. 6574.

Ew

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

509

To Whom William Currie

Address 435 Nash St.
New Westminster, B.C.

JUN 1 1916

Rate $16—

By Whom Assigned Currie R. G.

Regtl. No. ~~49533~~, 490.533.

Rank

Corps 1st Pion. Coy.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				Returned, Troopship, 2810/6-10-16
March				F.X. 27-10-16 A.D.
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

COPIED FOR 2 CASUALTIES.

Stop

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. William Currie

L. L. Job 310.—Req. 6574.

Name of Soldier. Currie R. G. 510

#49533. 1st Bion. Coy.

Month.	Year.	Cheque No.	Amt.	Remarks.
				#16.— JUN 1 1916
April	1916			
May				$64.—
June				
July		J7139	32	"Discharged to Canada"
Aug.		J11802	16	
Sept.		C16072	16	Stop Oct. 1st. 16
Oct.				3 M. Sept. 19/16
Nov.				8 D.
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

Report No. 534 "J"

Class I

Curry, Rob. G.
435 Ash St.,
New Westminster, B.C.

No. of M. H. C. File	No. of Local File	No. of H. Q. File

No. 490533 Rank Pte. Original Unit 1st C. Pion. Present Unit C.P.T.D.

Age 25-11 Height 5 ft. 9½ ins. Complexion Fair Eyes Grey Hair Brown Character Good

Date of enlistment 5-5-16. Where enlisted Vancouver Where seen service England

Ship returned by Olympic Date of arrival Oct. 5th, 16. Port of arrival Halifxx

Birthplace Canada Religion Pres.

Name and address next of kin Mother - same address.

MIL. DEFENCE NOV 10 1920 CANADA

649-6-4209

Cause of disability

Aortic regurgitation, not due to service.

Condition which prevents the soldier from earning a full livelihood

Complains of shortness of breath and weakness. Had rheumatism in 1909. In 1911 jas to stop football on account of pain over heart and shortness of breath. Cannot do any hard work.
Aortic diastolic murmer, hypertropht and poor compensation.

CLASS 3.—Men having a permanent disability which would not be benefited by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with view to pension.

CLASS 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

Degree of incapacity (Please state in fractions) Eng. Board Nil Canadian Board ¼

Probable duration of incapacity Permanent

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued New Westminster

Members of Board W.M. CARRICK MAJOR R.A. ROBERTSON CAPT. R.T. RUTHERFORD CAPT. W.M. CARRICK MAJOR

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Clerk

Regular trade or profession do

Average earnings previous to enlistment 65.00 a mo. Any other income

Name and address of last employer Dom. Express Co., New Westminster B.C.

Rent per month If purchasing property amount due and annual payment, $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium 24.10

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what? N. A.

Whether given Vocational Training while in Hospital in England. If so, what subjects? "

References Last employer

Witness P. P. Lesser I declare that the above statement is correct.

Date Oct. [illegible], 1916. Signature R.G.Currie.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class........ Amount per year, $.................. Period granted for.................. Dating from..................

First payment date..................................

Form No. 5c.

Report No.	Class	No. of M. R. C. File	No. of Local File	No. of R. C. File

No. Rank Original Unit Present Unit

Age Height ft. in. Complexion Eyes Hair Character

Date of enlistment Where enlisted Where seen service

Ship returned by Date of arrival Port of arrival

Birthplace Religion

Name and address next of kin

Cause of disability

Condition which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Eng. Board Canadian Board

Probable duration of incapacity

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board

Destination to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment Any other income

Name and address of last employer

Rent per month If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness I declare that the above statement is correct.

Date Signature

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment to.....

Form No. 5c.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps Vancouver Coy. Pioneer Reinforcements

Regimental No. 490533 Rank Pioneer Name Currie, Robert George

Religion. Presbyterian. C.E.F. Age on enlistment. 25 years. 7 months.

Enlisted (a) 5.5.16 Terms of Service (a) D of W. Service reckons from (a) 5.5.16.

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

Extended Re-engaged Qualification (b) Clerk.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked.	Halifax.	18/6/16.	
		Disembarked.	Liverpool.	29/6/16.	
		Taken on strength. C.P.T.D.	Shorncliffe.	30/6/16.	P.2.orders. 111.
11-9-16		Taken on strength C.C.A.C. Pt. II D.O. No. 390			
12-9-16		ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO C.D.D. Bath PART II D.O. NO.			
		DISCHARGED. under Para 392, Sec. 16, K.R. & O. 1912. Being no longer physically fit for war service. R.M. Hamilton Lieut. for Commandant. Canadian Casualty Discharge Depôt, BATH.			G. E. Edridge Lt. Adjt. C.C.A.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.

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				

NOB-IR 95- MP 04108-R-19
118

(22)

AUG 12 1919

PC16-8-19 EH

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

6224

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. 490533 2. Rank Private 3. Original C.E.F. Unit
4. Christian Names Robert George 5. Surname ~~Currie~~ Currie
6. Address, in full, to which future payments of gratuity are to be forwarded 435 Ash st New Westminster BC.
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.	490533	Private	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.			
1st Enl.	May 5/16	Oct 29/16	Private	1st Pioneers	Quebec	Medically unfit
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? not applicable (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: Draft 1st Pioneers June 28 to Sept 30. 1916 In England

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 application was never made

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 ~~not applicable~~ None applied for

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? not applicable
(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 not applicable

18. Relationship of such dependent not applicable

19. Present address, in full, of such dependent not applicable

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 not applicable

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: Robert George Currie

Place of Residence: 435 Ash st New Westminster BC

Declared before me at: New Westminster BC

This 18th day of July 1919

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

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.
no P.D.P MD 11		

REMARKS

Certified correct. H.D. Atkinson Jr

for Assistant Director Pay Services, Mil. Dist. No. 11

Date JUL 31 1919

St. C.P., Kingsway, W.C.
30,000—17/4/16—10533.

OFFICE OF THE STANDING MEDICAL BOARD SHORNCLIFFE

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Shorncliffe

Date August 13th. 1916.

1. Unit 1st. Canadian Pioneers
2. Regimental No. 490533
3. Rank Private
4. Name Currie George- Robert George
5. Age last birthday 25
6. Enlisted on May 5th. 1916 at Vancouver.B.C.
Former Trade or Occupation Clerk in Ry.Office

8. Disability.

Heart Disease Valvular causing Symptoms
Aortic Regurgitation

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 1911 or possibly 1909

10. Place of origin of disability. Westminster.B.C.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Had Acute rheumatic fever 1909 4 months in bed. Scarlet fever in 1913 no complications In 1911 had to stop playing football and running because this caused pain over his heart and shortness of breath. Also noticed for 5 years ~~for 5 years~~ that in going upstairs quickly he head shortness of breath.

He now is unable to do any strenuous exercise without shortness of breath and ~~ap~~- pain over heart. Condition not caused by military service Never been to Front.

12. (*a*) Give your opinion as to the causation of the disability.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3.*)

Endocarditis in 1909 or 1911

Disease present before enlistment.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Well nourished man of 25 years.
Examination shows Valvular disease of Heart with lack of Compensation on exertion Is unfit and unable to carry on even Base Duty.
Becomes short of breath and has pain over heart on exertion.

14. If the disability is an injury, was it caused

not applicable

(a) In the presence of the enemy? no

(b) On active service? no

(c) On duty? no

(d) Off duty? no

15. Was a Court of Inquiry held on the injury?

not applicable

If so—(a) When? no

(b) Where? no

(c) Opinion? no

16. Was an operation performed? If so, what?

not applicable

17. If not, was an operation advised and declined?

not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

not applicable

19. Do you recommend

(a) Fit for duty? no

(b) Fit for base duty? no

(c) Invalided to Canada? no

(d) Discharge as permanently unfit? yes

W. E. Guest Capt
M.O. C.P. T.D.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, ~~except†~~

Station Caesars Camp.

Jas Hanson Capt.

Officer in charge of Hospital.

Date Sept 4 - 16

Amo S.A.C.T.B.

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. a1 No a2 No

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it? Not applicable

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No

(*b*) Misconduct? No

22. Is the disability permanent? Yes

23. If not permanent, what is its probable minimum duration? Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

None compared with capacity on enlistment

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

26. Do the Board recommend

(*a*) Fit for duty? No

(*b*) Fit for base duty? No

(*c*) Invalided to Canada? No

(*d*) Discharge as permanently unfit? Yes

27. Remarks.

APPROVED
CAPTAIN, C.A.M.C. FOR D. OF R. & O. FOR BRIGADIER GENERAL COMMANDING ... DIVISION

His heart is greatly enlarged and he has some valvular trouble Cannot compensate on exertion

Signatures:—

[signature] Capt President.

[signature] Capt Members.

Station SHORNCLIFFE— (19 Westbourne Gardens, Folkestone.)

Date 11 SEP 1916

Approved.

Station Shorncliffe

[signature: S.L. Walker]
Administrative Medical Officer.

Date 12 SEP 1916

FOR A.D.M.S. CANADIANS, SHORNCLIFFE

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

Signed at Prior Park, Bath, this day

of , 191 .

President.

R. & O. J

CERTIFICATE RE DISCHARGE DOCUMENTS

Reg'tl No. 490533

M

(B)

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 490533 Army Rank Private

Name Curry. Robert George.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C. C. a. C.

Battalion, Battery, Company, Depôt, &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge OCT 29 1916

Place of discharge Canada Quebec, (Discharge Depot.)

1. *Description at the time of discharge.*

Age 25 years 11 months

Height 5 feet 9 1/2 inches

Chest measurement { girth when fully expanded ____ ins. / range of expansion ____ ins.

Complexion Fair

Eyes Grey

Hair Brown

Trade Clerk

Intended place of residence (To be given as fully as practicable)

Descriptive marks.

1 Vc. mk. l. arm.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

Deceased 20-1-55

2. The above-named man is discharged in consequence of Para. 392, Sec. 16, K. R. & O. 1912.

Being no longer physically fit for war service.

Commandant,

Canadian Discharge Depot, BATH.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— GOOD

Character awarded in accordance with King's Regulations :—

CANADIAN DISCHARGE DEPÔT,

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Lieut.-Col.,

A. D. of M. S. O.

Initials of Commanding Officer.

Officer Commanding,

C-27-1-55

Army Form B. 2088 has been issued to*

A1933 Wt. W. 13141/283 70,000 3/15 D. D. & L. Sch. 39 Forms B. 268 / 39

* Strike out if not applicable.

[OVER.

W.S.G. Conf 14819 al

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations

Local Casualty

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

CANADIAN DISCHARGE DEPOT BATH SEP 16 1916 FILE

CANADIAN DISCHARGE DEPOT

(Place) _____

(Date) _____

Lieut.-Col., A. D. of R. & O., Officer Commanding.

Commanding _____ Battn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

DISCHARGE DEPOT OCT 14 1916 QUEBEC

(*Place*) _____ R. G. Currie (*Signature of Soldier.*)

(*Date*) _____ J. Cuthbert (*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 at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for OCT 29 1916 (date)

DISCHARGE DEPOT OCT 14 1916 QUEBEC

(Place) _____

(Date) _____

Signature _____ CAPT. & ADJT. for O. C. Discharge Depot Quebec.

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

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. G. Currie

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge (Army Form B. 268)
2. Proceedings on transfer to reserve (if any) (Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name (if any)
6. Re-engagement paper (if any) (Army Form B. 136)
7. Authority for continuance, or extension, of service (if any) (Army Form B. 221)
8. Court of Inquiry on an injury (if any) (Army Form A. 2)
9. Regimental conduct sheet (Army Form B. 120)
10. Company conduct sheet (Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet (Army Form B. 178)
13. Medical report on invalid (if any) (Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depôt for discharge)
18. Descriptive return (Army Form D. 400), where required
    See section 11 on second page
19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority)
2. Medical history sheet (if any) (Army Form B. 178)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

Married or Single: S.

Place of Birth: New Westminster B.C.

Name and Address of Next of Kin: William Currie, 435 Ash Street, New Westminster B.C. Canada

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
[illegible]			

Reg'l. No. 490533 — Rank: Pte — Name: CURRIE Robert George

If in Permt. Corps What Unit — Unit: Draft 1st Pioneers

Transferred to C.C.A.C. — Date 11-9-16 — Authority C.C.1 Z229

Transferred to N.E. — Date 21-9-16 — Authority [illegible]

Permanent Force Allowances

Place of Attestation: Vancouver B.C.

Date of Attestation: 5th May 1916

Assigned Pay Monthly $ 16.00 — Date Effective July 1st 1916

Payable to William Currie, 435 Ash Street, New Westminster B.C. — Relationship

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) 19/9/16 — Effective 1/10/16 — Reason: Discharged

Discharge Date and Place: 20/9/16 to Canada — Reason and Authority: C.C.1 Z229 14/9/16

Account transferred to Non-Effective Branch (Date) 21-9-16

Account transferred to Officers' Pay Branch (Date)

Pay Office Branch Canadian Contingents [stamp]

Date	Pay No. of Days	Pay Rate	Pay Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1916 Balance from Canada												10 .																10 .				L.O.C. Balance
July 1-31	31	1 00	31 .	31	.10	3 10						34 10			378	15/7/16						9 74			16 .		25 74	18 36				
Aug 1-31	31	-	31 .	31	-	3 10						34 10	456	31/7/16	578	15/8/16					7 30	7 30			16 .		30 60	21 86				C.C.1 Z229 13/9/16 to C.C.A.C. 11/9/16
Sep 1-10	10	1 -	10	10	.10	1 -						11	603	31/8							7 30				16		23 30	9 56				10.00 Clothing charge not having served six months
11-20	10		10	10		1						11														10	10	10 56				
Sept															Batts 3585 4281.	29.9.						2 43. 4 87					7 30	3 26				Discharged to Canada 20/9/16 Auth. C.C.1 Z229 14/9/16
																										1 10 x	1 10	2 16				Stop. ass rendered 19/9/16 Effective 1/10/16
Bal. on Tsft to N.E. Bch.																												2 16				Pay Book verified
N.E. Jan: 1917												2. 16														2. 16	2. 16	Nil				x Fines Batts Part II Orders No. 187.

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Defd. Pay	Sep. Allce	Eng.
June 1918				Bal. Trans to Pay & O.					Nil			
June	Bal. Gd. from Canada Vr 16 draft 1st Pion. Details "O" on c/note # 7207 d/6/7/18 25/10	3 60 (3 60)							3 60			
June	Cr note 12/7/18											
July/18				Trans'd to "Canada Disc'ge a/c" 12/7/18 – RD 1/6 2/14	3 60 (3 60)				Nil			

O.C. P.C.C. Bd. 576 12/7/18 w/o

Trans'd to "Canada Disc'ge a/c" [stamp]

Checked [illegible]

Checked [illegible]

490533. Pvr. Currie. R. G.

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			