ATTESTATION PAPER.

No. 28768

Folio ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Fitzgerald
1a. What are your Christian names? Robert
1b. What is your present address? Little River Har. Yar. Co.
2. In what Town, Township or Parish, and in what Country were you born? Little River Har. Yar. Co.
3. What is the name of your next-of kin? William Fitzgerald
4. What is the address of your next-of-kin? Little River Har. Yar. Co
4a. What is the relationship of your next-of-kin? Father
5. What is the date of your birth? March 13th 1898
6. What is your Trade or Calling? Fisherman
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 24 H Battery C.F.A.
10. Have you ever served in any Military Force? No Recruit
If so, state particulars of former Service.
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 Fitzgerald, 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 Fitzgerald (Signature of Recruit)

Date 2nd March 1916. H. W. Heming (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Fitzgerald, 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 Fitzgerald (Signature of Recruit)

Date 3rd March 1916. D. L. Chipman (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 Yarmouth N.S. this 13th day of March 1916.

T. M. Seeley J.P. (Signature of Justice)

A Justice of the Peace in and for the County of Yarmouth.

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of Fitzgerald, Robert on Enlistment.

Apparent Age 17 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5' ft. 4 ins.

Chest measurement.
- Girth when fully expanded ..... 33 ins.
- Range of expansion ..... 3 ins.

Complexion Dark

Eyes Dark Brown

Hair Dark

Religious denominations.
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic Yes
- 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).

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 March 2nd 1916

Place Yarmouth N.S.

S. W. Williamson M.D.
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 Fitzgerald 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] Lieut. Colonel (Signature of Officer)
Comd'g. 219th. "Overseas" Highland B'n. C.E.F.

Date March 13th 1916

Service to count from June 18th 1917.

ATTESTATION PAPER.

No. 8176

(R. C. G. A. ~~Duration of war~~)

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

ORIGINAL

1.	What is your surname?	Fitzgearld.
1a.	What are your Christian names?	Robert.
1b.	What is your present address?	Little River Harbour, Yarmouth, County. N.S.
2.	In what Town, Township or Parish, and in what Country were you born?	Little River Harbour, Yarmouth, County. N.S.
3.	What is the name of your next-of kin?	William. Fitzgearld.
4.	What is the address of your next-of-kin?	Little River Harbour. Yarmouth. County. N.
4a.	What is the relationship of your next-of-kin?	Father.
5.	What is the date of your birth?	February, 18th, 1899.
6.	What is your Trade or Calling?	Fisherman.
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.	219th, Batt. 7 Months.)
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?	R. C. G. A. Duration of war. yes.

R. C. 1932-1-3 dt/ 9-9-15.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert. Fitzgerald., 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.

R. C. G. D of W.

Robert Fitzgerald (Signature of Recruit)

Date June, 21st, 191 7. E.L. Dodwell Lt. R.C.A. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert. Fitzgerald., 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 Fitzgerald (Signature of Recruit)

Date June 21st, 191 7. E.L. Dodwell Lt. R.C.A. (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 Halifax. N.S. this 21st day of June. 191 7.

J.B. Almon (Signature of Justice)

Lieut. Col. R. C. A.

C. R. C. A. Halifax.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of Robert. Fitzgerald. on Enlistment.

Apparent Age.....years.....months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 ins.

Chest measurement.
- Girth when fully expanded..... 31 ins.
- Range of expansion..... 3 ins.

Complexion Dark

Eyes Brown

Hair Black

Religious denominations.
- Church of England.....
- Presbyterian.....
- Methodist.....
- Baptist or Congregationalist.....
- Roman Catholic Yes.
- 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).

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. R.C.G.A. Duration of war.

Date.....191 . [signature]

Place Halifax N.S. Capt. Amd.

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 Fitzgerald 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.

September 29th Ed. W. B. Almon (Signature of Officer)

Lieut.-Col., R.C.A.

C.R.C.A., Halifax, N.S.

Date ~~June 26th~~ 1917

Service to count from June 18th 1917

1274219

ATTESTATION PAPER.

No. ~~8176~~

(R. C. G. A. Duration of war)

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

DUPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Fitzgearld.
1a. What are your Christian names? Robert.
1b. What is your present address? Little River Harbour, Yarmouth, County. N.S.
2. In what Town, Township or Parish, and in what Country were you born? Little River Harbour, Yarmouth, County. N.S.
3. What is the name of your next-of kin? William. Fitzgearld.
4. What is the address of your next-of-kin? Little River Harbour. Yarmouth. County. N.S
4a. What is the relationship of your next-of-kin? Father.
5. What is the date of your birth? February, 18th, 1899.
6. What is your Trade or Calling? Fisherman.
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. 219th, Batt. 7 Months.)
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? R. C. G. A. Duration of war. yes

R. Q. 1982-1-3 dt/ 9-9-15.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert. Fitzgerald., 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.

R.C.G.
D of W.

Robert Fitzgearld (Signature of Recruit)

Date June, 21st, 1917. E.H. Dodwell Lt. RCA (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert. Fitzgerald., 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 Fitzgearld (Signature of Recruit)

Date June 21st, 1917. E.H. Dodwell Lt. R.C.A. (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 Halifax. N.S. this 21st day of June. 1917.

W. B. Almon (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Lieut. Col. R. C. A.
C. R. C. A. Halifax.

Description of Robert. Fitzgerald. on Enlistment.

Apparent Age 18 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement.
- Girth when fully expanded 31 ins.
- Range of expansion 3 ins.

Complexion Dark
Eyes Brown
Hair Black

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic Yes.
- 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).

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 R.C.G.A. Duration of war. for the Canadian Over-Seas Expeditionary Force.

Date ..... 191 .

Place Halifax N.S.

Capt. A.M.C.
Medical Officer.

*Insert here 'fit' or 'unfit.'

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert Fitzgerald. 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.

W. B. Almon. (Signature of Officer)

Date Sept. 29th June 26 1917.

Lieut. Col. R. C. A.
C. R. C. A. Halifax.

Services to count from June 18th 1917.

ATTESTATION PAPER.

No. 8176

(R. C. G. A. Duration of war)

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

TRIPLICATE

1. What is your surname?	Fitzgearld
1a. What are your Christian names?	Robert.
1b. What is your present address?	Little River Harbour, Yarmouth, County. N.S.
2. In what Town, Township or Parish, and in what Country were you born?	Little River Harbour, Yarmouth, County. N.S.
3. What is the name of your next-of kin?	William. Fitzgearld.
4. What is the address of your next-of-kin?	Little River Harbour, Yarmouth. County. N.S.
4a. What is the relationship of your next-of-kin?	Father.
5. What is the date of your birth?	February, 18th, 1899.
6. What is your Trade or Calling?	Fisherman.
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.	219th, Batt. 7 Months.)
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?	R. C. G. A. Duration of war. yes.

H. Q. 1982-1-3 dt/ 9-9-15.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert. Fitzgerald., 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.

R. C. G. A. D of W.

Robert Fitzgearld (Signature of Recruit)

Date June. 21st. 191 7. E H Dodwell Lt R.C.A. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert. Fitzgerald., 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 Fitzgearld (Signature of Recruit)

Date June 21st, 191 7. E H Dodwell Lt R.C.A. (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 Halifax. N.S. this 21st day of June. 191 7.

W B Almon (Signature of Justice)

Lieut. Col. R. C. A.

C. R. C. A. Halifax.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of Robert. Fitzgerald. on Enlistment.

Apparent Age.....years.....months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height..... ft. 5 ins. 6

Chest measurement.
- Girth when fully expanded..... 31 ins.
- Range of expansion.... 3 ins.

Complexion Dark

Eyes Brown

Hair Black

Religious denominations.
- Church of England.....
- Presbyterian.....
- Methodist.....
- Baptist or Congregationalist.....
- Roman Catholic Yes.
- 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).

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. R.C.G.A. Duration of war.

Date.....191 . [signature]

Place Halifax N.S. Capt Am C. Medical Officer.

*Insert here "fit" or "unfit."

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

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert Fitzgerald 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.

September 29th E.H.W. [signature] (Signature of Officer)

Lieut.-Col., R. C. A.

Date ~~June 26th~~ 1917. C. R. C. A., Halifax, N. S.

Active Militiaman on duty became C.E.F. on 22nd June 1918.
Vide R.O. 795/1918.

TRIPLICATE

ATTESTATION PAPER.

No. 1274219.

Folio.

CANADIAN EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname ? ... FITZGEARLD.
2. What are your Christian names ? ... Robert.
3. What is your present address ? ... Little River Harbor, Yarmouth, N.S. Can.
4. In what Town, Township or Parish, and in what Country were you born ? ... Little River Harbor, Yarmouth, N.S. Can.
5. What is the name of your next-of-kin ? ... Mr. William M. Fitzgearld.
6. What is the address of your next-of-kin ? ... Little River Harbor, Yarmouth, N.S. Can.
7. What is the relationship of your next-of-kin ? ... Father.
8. What is the date of your birth ? ... 13th February 1901.
9. What is your trade or calling ? ... Farmer.
10. Are you married ? ... No.
11. Are you willing to be vaccinated or re-vaccinated and inoculated ? ... Yes.
12. Do you now belong to the Active Militia ? ... Yes. R.C.G.A. (P.F)
13. Have you ever served in any Military Force ? (If so, state particulars of former Service.) ... 219 Batt Highland Bde. C.E.F. 7 months. 1 yr 4 mths R.C.G.A. (P.F)
14. Do you understand the nature and terms of your engagement ? ... Yes.
15. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force ? ... Yes.
16. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit ? ... No.
17. If so, what was the nature of the disability ? ... —
18. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected ? ... No.
19. If so, what was the reason ? ... —

RF

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I DO SOLEMNLY DECLARE that the above are answers made by me to the above questions and that they are true and I HEREBY ENGAGE AND AGREE to serve in the CANADIAN EXPEDITIONARY FORCE in any arm of the service for the duration of the war now existing between Great Britain and the Central European Powers, and for the period of demobilization thereafter, and in any event for one year, provided always His Majesty shall so long require my services.

Robert Fitzgearld (Signature of Recruit.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert FITZGEARLD do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Robert Fitzgearld (Signature of Recruit.)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

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

The above questions and answers 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 Halifax N.S. this 11th day of December 191 8.

C. R. [illegible] Major R.C.A. — Signature of Magistrate, Justice or Attesting Officer.

Justice of the Peace in and for the County of Halifax, N.S. — Office or Rank and Unit or appointment.

M. F. W. 23.
50 M.—5-18.
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.

D.O. Part 11 No. 154 d/22-11-18.

Description of Robert FITZGERALD on Enlistment.

AND CERTIFICATE OF MEDICAL EXAMINATION.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the ..... day of ..... 19....., by the undersigned medical board sitting at Halifax, N.S.

1. Age as stated 19 Years 10 Months. 2. Apparent age 19 Years 10 Months

3. Height 5 Feet 8 Inches. 4. Weight 140 Pounds.

5. Chest measurement { Minimum 32 Ins. / Maximum 34 Ins. } 6. Complexion Fresh { Eyes Blue / Hair Brown. }

7. Physical development Fair { Good / Fair / Poor } 8. Smallpox marks Nil

9. Number of vaccination marks { Right arm ..... / Left arm ..... } 10. When vaccinated last .....

11. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil
(Should the Medical Officers 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).

12. Slight defects but not sufficient to cause rejection Nil

13. The man denies having had { Rheumatism, Tuberculosis, Nervous or Mental disorder. / Epilepsy, Syphilis, Asthma. } 14. We find no evidence of past { Rheumatism, Tuberculosis, Nervous or Mental disorder. / Epilepsy Syphilis Asthma }

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C.E.F. Regulations for medical examinations, and he is placed in Category C/1

15.
(a) Vision. R. 20 L. 20
(b) Hearing R. L.

..... *President.*

..... *Member.* ..... *Member.*

(Any special remarks of Medical Officers may be added below.)

Otitis Media (R) (Mastoid Operation) 22.7.18.

RELIGIOUS DENOMINATIONS.

The Recruit states he belongs to the Denomination noted below.

Church of England ..... Methodist ..... Jewish .....

Roman Catholic Yes Baptist or Congregationalist ..... Other denominations .....

Presbyterian .....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Gunner Robert FITZGERALD 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)

Date ..... 191 .

Active Militiaman on duty became C.E.F. on 22nd June 1918.
Vide R.O. 795/1918.

QUADRUPLICATE

ATTESTATION PAPER.

No. 1274219.
Folio.

CANADIAN EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname ?	FITZGEARLD.
2. What are your Christian names ?	Robert,
3. What is your present address ?	Little River Harbor, Yarmouth, N.S. Can.
4. In what Town, Township or Parish, and in what Country were you born ?	Little River Harbor, Yarmouth, N.S. Can.
5. What is the name of your next-of-kin ?	Mr. William M. Fitzgearld,
6. What is the address of your next-of-kin ?	Little River Harbor, Yarmouth, N.S. Can.
7. What is the relationship of your next-of-kin ?	Father.
8. What is the date of your birth ?	13th February 1901.
9. What is your trade or calling ?	Farmer.
10. Are you married ?	No.
11. Are you willing to be vaccinated or re-vaccinated and inoculated ?	Yes.
12. Do you now belong to the Active Militia ?	Yes. R.C.G.A. (P.F)
13. Have you ever served in any naval or Military Force ? If so, state particulars of former Service.	219 Batt Highland Bde. C.E.F. 7 months. 1 yr 4 mths R.C.G.A. (P.F)
14. Do you understand the nature and terms of your engagement ?	Yes.
15. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE ?	Yes.
16. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit ?	No.
17. If so, what was the nature of the disability ?	—
18. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected ?	No.
19. If so, what was the reason ?	—

R F

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I DO SOLEMNLY DECLARE that the above are answers made by me to the above questions and that they are true and I HEREBY ENGAGE AND AGREE to serve in the CANADIAN EXPEDITIONARY FORCE in any arm of the service for the duration of the war now existing between Great Britain and the Central European Powers, and for the period of demobilization thereafter, and in any event for one year, provided always His Majesty shall so long require my services.

Robert Fitzgearld (Signature of Recruit.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert FITZGEARLD do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Robert Fitzgearld (Signature of Recruit.)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

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

The above questions and answers 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 Halifax N.S. this 11th day of December 1918.

C R Ducard Major R.C.A. } Signature of Magistrate, Justice or Attesting Officer.

Justice of the Peace in and for the County of Halifax, N.S. } Office or Rank and Unit or appointment.

M. F. W. 23.
50 M.—5-18.
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.

D.O. Part 11 No. 154 d/22-11-18.

Description of Robert FITZGERALD on Enlistment.

AND CERTIFICATE OF MEDICAL EXAMINATION.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the ..... day of ..... 19....., by the undersigned medical board sitting at Halifax, N.S.

1. Age as stated 19 Years 10 Months. 2. Apparent age 19 Years 10 Months

3. Height 5 Feet 8 Inches. 4. Weight 140 Pounds.

5. Chest measurement { Minimum 32 Ins. / Maximum 34 Ins. } 6. Complexion Fresh { Eyes Blue / Hair Brown.

7. Physical development Fair { Good / Fair / Poor } 8. Smallpox marks Nil

9. Number of vaccination marks { Right arm ..... / Left arm ..... } 10. When vaccinated last .....

11. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil
(Should the Medical Officers 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).

12. Slight defects but not sufficient to cause rejection Nil

13. The man denies having had { Rheumatism, / Tuberculosis, / Nervous or Mental disorder. } { Epilepsy, / Syphilis, / Asthma. }

14. We find no evidence of past { Rhumatism, / Tuberculosis, / Nervous or Mental disorder. } { Epilepsy / Syphilis / Asthma }

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C.E.F. Regulations for medical examinations, and he is placed in Category C/1

15.
(a) Vision. R. 20 L. 20
(b) Hearing R. ..... L. .....

J. J. Byrne Capt. ..... President.

..... Member. ..... Member.

(Any special remarks of Medical Officers may be added below.)

Otitis Media (R) (Mastoid Operation) 22.7.18.

RELIGIOUS DENOMINATIONS.

The Recruit states he belongs to the Denomination noted below.

Church of England ..... Methodist ..... Jewish .....

Roman Catholic Yes Baptist or Congregationalist ..... Other denominations .....

Presbyterian .....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Gunner Robert FITZGERALD 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)

Date ..... 191 .

Active Militiaman on duty became C.E.F. on 22nd June 1918.
Vide R.O. 795/1918.

DUPLICATE

ATTESTATION PAPER.

No. 1274219.
Folio.

CANADIAN EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname ?..... FITZGERALD.
2. What are your Christian names ?..... Robert.
3. What is your present address ?..... Little River Harbor, Yarmouth, N.S. Can.
4. In what Town, Township or Parish, and in what Country were you born ?..... Little River Harbor, Yarmouth, N.S. Can.
5. What is the name of your next-of-kin ?..... Mr. William H. Fitzgerald.
6. What is the address of your next-of-kin ?..... Little River Harbor, Yarmouth, N.S. Can.
7. What is the relationship of your next-of-kin ?.. Father.
8. What is the date of your birth ?..... 13th February 1901.
9. What is your trade or calling ?..... Farmer.
10. Are you married ?..... No.
11. Are you willing to be vaccinated or re-vaccinated and inoculated ?..... Yes.
12. Do you now belong to the Active Militia ?..... Yes. R.C.G.A. (P.F.)
13. Have you ever served in any naval or Military Force ? (If so, state particulars of former service.) ..... 219 Batt Highland Bde. C.E.F. 7 months. 1 yr 4 mths R.C.G.A. (P.F.)
14. Do you understand the nature and terms of your engagement ?..... Yes.
15. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force ? ..... Yes.
16. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit ?.... No.
17. If so, what was the nature of the disability ?.... —
18. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected ?.... No.
19. If so, what was the reason ? —

R4

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I DO SOLEMNLY DECLARE that the above are answers made by me to the above questions and that they are true and I HEREBY ENGAGE AND AGREE to serve in the CANADIAN EXPEDITIONARY FORCE in any arm of the service for the duration of the war now existing between Great Britain and the Central European Powers, and for the period of demobilization thereafter, and in any event for one year, provided always His Majesty shall so long require my services.

Robert Fitzgerald (Signature of Recruit.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert FITZGERALD ..... do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Robert Fitzgerald (Signature of Recruit.)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

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

The above questions and answers 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 Halifax N.S. this 11th day of December 191 8.

..... } Signature of Magistrate, Justice or Attesting Officer.
Major R.C.A.

Justice of the Peace in and for the County of Halifax, N.S. } Office or Rank and Unit or appointment.

M. F. W. 23.
50 M.—5-18.
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.

D.O. Part 11 No. 154 d/22-11-18.

Description of Robert FITZGERALD on Enlistment.

AND CERTIFICATE OF MEDICAL EXAMINATION.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the ..... day of ..... 19....., by the undersigned medical board sitting at Halifax, N.S.

1. Age as stated 19 Years 10 Months. 2. Apparent age 19 Years 10 Months

3. Height 5 Feet 8 Inches. 4. Weight 140 Pounds.

5. Chest measurement { Minimum 32 Ins. / Maximum 34 Ins. } 6. Complexion Fresh { Eyes Blue / Hair Brown.

7. Physical development Fair { Good / Fair / Poor } 8. Smallpox marks Nil

9. Number of vaccination marks { Right arm ..... / Left arm ..... } 10. When vaccinated last .....

11. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil
(Should the Medical Officers 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).

12. Slight defects but not sufficient to cause rejection Nil

13. The man denies having had { Rheumatism, / Tuberculosis, / Nervous or Mental disorder. / Epilepsy, / Syphilis, / Asthma. } 14. We find no evidence of past { Rheumatism, / Tuberculosis, / Nervous or Mental disorder. / Epilepsy / Syphilis / Asthma }

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C.E.F. Regulations for medical examinations, and he is placed in Category C/1

15.
(a) Vision. R. 20 L. 20
(b) Hearing R. L.

W. J. Byrne Capt. President.

..... Member. ..... Member.

(Any special remarks of Medical Officers may be added below.)

Otitis Media (R) (Mastoid Operation) 22.7.18.

RELIGIOUS DENOMINATIONS.

The Recruit states he belongs to the Denomination noted below.

Church of England ..... Methodist ..... Jewish .....

Roman Catholic Yes Baptist or Congregationalist ..... Other denominations .....

Presbyterian .....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Gunner Robert FITZGERALD 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)

Date ..... 191 .

1274 219

ATTESTATION PAPER

No.

Folio

"70 8176" R 6 Ga of

QUESTIONS TO BE PUT BEFORE ATTESTATION.

1. What is your name? Robert Fitzgerald
2. In what Township or parish, and in or near what Town and in what County or Country were you born? — In or near the Town of ..... in the County of ..... in .....
3. *What is the name of your next of kin? .....
4. *What is the address of your next of kin? .....
5. What is the date of your birth? .....
6. What is your trade or calling? .....
7. Are you an apprentice? .....
8. Are you married? .....
9. Are you willing to be vaccinated or re-vaccinated? .....
10. Do you now belong to the Active Militia? .....
11. Have you ever served in His Majesty's Regular Army, Royal Marines, Royal Navy, Royal Naval Reserve, Indian or Auxiliary Forces, Territorial Force, Canadian Permanent Force, Canadian Naval Service, or in any Corps of the Active Militia of Canada, or the Royal North-West Mounted Police? †† .....

†† If so, state particulars of former Service, and produce Certificate of Discharge, or transfer to Army Reserve.

12. Do you understand that enlistment into the Permanent Force does not involve your discharge from the Army Reserve, but that if required for duty as an Army Reservist you will be discharged from the Permanent Force? .....
13. Have you ever been rejected as unfit for His Majesty's Regular Army, Royal Marines, Royal Navy, Royal Naval Reserve, Indian or Auxiliary Forces, Territorial Force, Canadian Permanent Force, Canadian Naval Service, or in any Corps of the Active Militia of Canada, or the Royal North-West Mounted Police? .....
14. Do you understand the nature and terms of your engagement? .....
15. Are you willing to be attested to serve in the ..... or for General Service for the term of ....

(Signature of Man) .....

(Witness) .....

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ..., do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers to the foregoing questions made and signed by me are true; and that I am willing to be attested for the term of ....., provided His Majesty should so long require my services, or until legally discharged.

..... { Signature of Man. } ..... { Signature of Witness. }

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ..., do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to his Majesty.

Witness my hand.

(Signature of Man) .....

(Witness Present) .....

The above questions were asked of the said ..... and answered by him in my presence, as herein recorded; and the said ..... made the above Declaration and Oath before me at ..... this ..... day of ..... One Thousand Nine Hundred ..... at ..... o'clock ..... M.

† Signature of Commanding Officer of Squadron, Battery or Company, or Justice of the Peace. } .....

* To be verified in the month of January in *each year*

† But only at the Headquarters of the Corps for Permanent Units, and in cases where the Commanding Officer has taken the same oath before a Justice of the Peace. (*See* K. R. & O. for the C. M., and the Militia Act.)

M. F. B. 235.

35M.—8-16.
H. Q. 1772-39-87.

[OVER]

Description of.....on Enlistment.

Apparent Age.....years .....months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ....ft.....ins.

Weight..... .....lbs.

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

Complexion .....

Eyes .....

Hair .....

Religious denomination.
- Church of England.....
- Presbyterian.....
- Methodist..... .....
- Baptist and Congregationalist .....
- Roman Catholic.....
- Jewish.....
- Other Protestants..... (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).

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*.....for the Permanent Force,

Date.....191 . .....

Place..... ....

Medical Officer.

*Insert here "fit" or "unfit."

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

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING OR ADMINISTERING THE CORPS

.....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)

Date.....191 .

Statement of the Services of No. 8176 Name Robert Fitzgerald

Corps	Squadron, Battery or Company, etc.	PROMOTIONS, DEDUCTIONS CASUALTIES, &c.	RANK	DATE	Service towards Deferred Pay Years	Service towards Deferred Pay Days	Service towards completion of engagement Years	Service towards completion of engagement Days	Signature of Officers certifying correctness of Entries.
		Services towards engagement reckons from...	Gr	18 6/17					E.L. Dodwell LIEUT R. C. A. For O. i/c R. C. G. A. [C. D.] RECORDS.
R.C.G.A.	Depot	Joined at Exeter	Gr	21 6/17					E.L. Dodwell LIEUT R. C. A. For O. i/c R. C. G. A. [C. D.] RECORDS.
"	Motor Corp	Transferred	"	24 8/17					E.L. Dodwell LIEUT R. C. A. For O. i/c R. C. G. A. [C. D.] RECORDS.
"	"	awarded 12 days detention	"	5 1/18					R. H. Wiggins LIEUT R. C. A. For O. i/c R. C. G. A. [C. D.] RECORDS.
		Demobilized	"	23 12/18					
		Authy:- R.O. 1328 of 18.11.18					1	189	
		Total Services as above...					1	189	

(OVER)

MILITARY HISTORY SHEET.

1. Service at Home ane Abroad (including former service of re-enlisted men, when allowed to reckon towards Deferred Pay or Pension).

COUNTRY	FROM	TO	YEARS	DAYS	N. B.—The country only to be shown—it is not necessary to show separately the services in the different stations of the same country.
Canada	18.6.17	23.12.18	1	189	

	Initials of Officers.
2. Passed classes of Instruction	
3. Campaigns.....	
4. Wounded	
5. Effects of wounds	
6. Special instances of gallant conduct.....	
7. Medals, Decorations and Annuities	

9. Particulars as to Marriage.....

(a) Christian and surname of woman to whom married and whether spinster or widow; (b) Place and date of marriage; (c) Name of officiating Minister or Registrar, and (d) Name of two Witnesses.				Date of being placed on Married Roll	Initials of Officers.
(a)	(b)	(c)	(d)		

10. Particulars as to Children .....

Christian Name	Date and Place of Birth	Date and Place of Baptism, and Name of Officiating Minister

NOTE.—These entries are to be made from time to time as they occur, and initialled by the officer making the entry.

WB 10.1.19

Proceedings of Court of Inquiry or on men reported Missing on Active Service	2nd El. 1st El.
Attestation Papers 2	4
Declaration of change of name	
Authority for special enlistments	
Documents of re-enlisted men	
Regimental Conduct Sheet	1
Compulsory Stoppages	
Casualty Forms 1	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	
Medical History Sheet 1	2
Proceedings of Regt. Court Martial	
Copies of Convictions by Civil Power	
Company Conduct Sheet	
Clothing Transfer Certificate	
Inventory of Kit 1	
Last Pay Certificate 1	
M.F.B. 465 – 1	1 Pay Cert.
A.F.B. 122 – 1	1 Misc.
M.F.W. 39a 1	
M.F.W. 129 – 1	
M.F.W. 71 – 1	

M. F. W. 62.
100m.–6-17.
H. Q. 1772–39–935.

DISCHARGE DOCUMENTS

R. O. No.
H. Q. No.

08537

Name FITZGERALD ROBERT.
① 282668 D.19 Bn
Regt. No. 1274219 Rank Gnr.
Corps R.C.G.A. #6. Arty. Dep.
② Gen. Demobilization.
1) Unfit.

C

H

405048

1 1
16 – 22
16 – 22
3 – 22
1

REGIMENTAL CONDUCT-SHEET.

Number of sheets (in words) } One

Signature of C. O. or Adjutant } D.R. Agnew Lieut. R. C. A. A/Adjutant R. C. G. A.

Regimental Number and Name } 8176 Gr. Fitzgerald. R. Attested June 1st 1917.

Royal Canadian Garrison Artillery

Joined Halifax N S June 1st 1917. Royal Can: Garr: Arty Regiment.

PLACE	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	PUNISHMENT AWARDED	Date of award, or of order dispensing with trial	BY WHOM	Date of Commencement	Date of Expiration	REMARKS
Halifax N.S.	1917 Nov 8th. 13th	Gr.		(1) absent from 8 00 A.M. until 11-55 p.m. 10-11-17. absent 3. Days. (2) absent from 7 00 A.M. Manning Parade	Pte. Tenbow Cpl. Pike " Hutchinson	3. Days C.B.	13/11.	Major Grant R.C.A.	13/11.	15/11	Forfeits 3 days Pay. P.N.W. Lieut. R. C. A/Adjutant R. C. G. A.
Halifax N.S.	Dec. 24th	Gr.		Absent from 11. 00 A.M. until 9-15. A.M. 4-1-18 (absent 12. Days)	Pte Sullivan " Penny.	12. Days Detention	5/1.	Lt. Col Almon C.R.C.A.	5/1	16/1	Forfeits 12 Days Pay. P.N.W. Lieut. R. C. A/Adjutant R. C. G. A.

Discharged at Halifax, N.S. on 23/12/18, in consequence of demobilization vide R.O. 1328 of 1918.

L. H. Fielding Lieut. 1st C.G.A. for Adjutant No. 6 Artillery Depot.

To be carried over.

M. F. B. 263.

400 M.—6-16.
H. Q. 64—59-1.
L. L. Job. 3514. Req. 6771.

8176. Gr. Fitzgerald. R.

PLACE	Date of Offence	RANK	Cases of Drunkenness	OFFENCE	Names of Witnesses	PUNISHMENT AWARDED	Date of Award, or of order dispensing with trial	BY WHOM	Date of Commencement	Date of Expiration	REMARKS

Squadron, Battery and Company Conduct Sheet.

No. of Sheet I

Regiment of R. C. G. Artillery Signature of O. C. {Squadron / Battery / Company} C R Quant Major, R. C. A. O. C. No. I Coy. R. C. G. A.

Regimental Number and Name.	Enlistment.	Trade	Former Service.	Good Conduct Badges.
8176. No. Fitzgerald Name. Robert Joined, Date 21st June. 1917 Service to Count from June. 18th 1917 Re-engaged, Date Re-engaged, Date Re-engaged, Date Left, Date	Age 18 years 4 months. Period of War and 6 months after if required	Fisherman Religion Roman Catholic	219th Batt 7 Months	

Place	Date of Offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Sheet destroyed 18-12-17. date of last entry 20-11-17 No of Cases of drunkenness. Nil									
Fort McNab Halifax NS	1917 Dec 24th	Gr.		absent from 11 A.M. until 9.15 A.M. 4-1-18 (absent 12. Days)	Wm Sullivan "Penny	12. Days Detention	5/1/18	Lt Col. Almon C.R.C.A.	Forfeits 12. Days Pay under Pe & Pay 1914.

R. H. Wiggins. Lieut. R. C. A. A/Adjutant R. C. G. A.

Discharged at Halifax, N.S. on 23/12/18, in consequence of demobilization vide R.O. 1328 of 1918.

R. H. Fielding ----Lieut.
1st C.G.A.
for Adjutant No. 6 Artillery Depot.

To be carried over.

M. F. B. 263a.
400 m.—2-16.
H. Q. 74—53-1.
L. L. Job 931 4. Req. 6448.

8176. Fitzgerald R.

Brought forward

1274219

Regtl. No. ~~8176~~ Rank Gnr. Name FITZGERALD, R. No.1.Coy,R.C.G.A.(D of W) Battalion, Battery or Regiment Date of Enlistment 18/6/17.

DATE	Issue Sheet Number M. F. C. 512 Page	Boots, ankle	Bags, kit	Bootlaces	Braces	Brushes, Cloth	" Hair	" Shaving	" Tooth	Caps, Forage, D.S.	" Winter	" Sleeping	Combs	Drawers, Winter	Dubbing, 2 oz.	Forks	Cloaks, drab Greatcoats, drab	Gloves, woollen	Holdalls	Housewives	Jackets, S.D., S.S.	Knives, table	" clasp with lanyard	Mitts, Winter	Rubbers Overshoes	Puttees, D.S.	Razors	Shirts, service	" Winter	" F., grey	Socks	Spoons	Shoes, canvas	~~Pantaloons~~, service Trousers	~~Breeches~~, drab, cloth Trousers, S.D.	Towels	Waistcoats, Cardigan	BADGES: Cap	Collar	Muffler.	Numeral	Shoulder, RCGA.	Discs, identity and cords	Field Dressing.	SIGNATURE
		2	1	2	1	1	1	1	1	1	1	1	1	2	1	1	1	-	1	1	1	1	1	1	1	1	1	1	1	2	2	4	1	1	1	1	2	1	1	2	1	2	2	-	1	R. FitzGerald
Sizes																																													

Certified

Height.....

Breast.....

Waist.....

.....MAJOR R. C. A.

B. C. FORT McNAB .....O. C. { Co'y / Squad'n

NOTE—
Issues to soldier in Black Ink.
Condemned by Board in Red Ink.

P. T. O.

TRANSFER STATEMENT OF CLOTHING AND NECESSARIES.

INSTRUCTIONS.—This Statement will be made out by the Officer Commanding Depot or Unit or for each soldier of the C. E. F. on enlistment or re-enlistment and will be sent to the Commanding Officer of the Unit receiving the transfer who will retain it.

The Statement will also be forwarded in the case of men in Canada passing from Hospitals to Depots or Units proceeding overseas with draft.

STATEMENT showing the Articles in possession of (Regimental No.,

Rank and Name).....

proceeding from the.....

to the.....

Date of enlistment..... Date of transfer.....191....

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

1) Station..... .....
Commanding Squadron, Battery, Administrative Centre, &c.

Date..... .....
Name of Unit Man is leaving.

(2) Station..... .....
Commanding Squadron, Battery or Company

Date..... .....
Name of Unit Man is joining.

M. F. W. 97.
200M.—2-18.
1772—39—1047.

Active Militiaman on duty became C.E.F. on 22nd June 1918.
Vide R.O. 795/1918.

MEDICAL HISTORY SHEET.

1274219

Surname FITZGEARLD *Christian Name* Robert

Examined on day of June 1917
at Halifax N.S.

Approved by
(Sgd) A.McD.Morton
Rank Capt.A.M.C. M.O.

Birthplace City or Town Little River Harbour
County Yarmouth. N.S.

Apparent age 18 yrs. 4 months.

Trade or occupation Fisherman.

Height 5 Feet 6 Inches.

Weight 135 Lbs.

Chest measurement Minimum 31 inches.
Maximum expansion 4 inches.

Physical development Average.

Small-Pox Marks Nil.

Vaccination Marks Arm Right. Left.
Number 0 0

When Vaccinated last Nil

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

(*b*) Slight defects but not sufficient to cause rejection
Flat chest.

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.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 21st *day of* June *1917 at* Halifax N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	R.C.G.A.	8176		21-6-17.
Transferred to..	R.C.G.A., C.E.F.	1274219		22-6-18.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Camp Hill, Halifax N.S.	July 22nd 1918.	Otitis Media (R) Mastoid operation.	Category C.1.(Lowered) (Sgd)L.W.MacNutt.Major.

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.
150M.—8-15.
H. Q. 1772-39-439.

Surname FITZGEARLD Christian Name Robert

1274219

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.
Halifax N.S.	21-6-17.										
" "		20	11	17	30	11	17	Ottorrhoea (R)	11	Recovered-Discharge stopped, hearing & voice test about normal.	(Sgd) Capt.A.M.C.
" "	26-3-18	16	3	18	14	5	18	Acute Mastoidig	60	Admitted with an acute Otitis Media 16-3-18. Condition improved. Had a slight "sore throat" followed by intense mastoid symptons. April 2nd. Heath's modification of the radical operation performed 4.4.18. Developed facial erysipelas. By 21.4.18 he was on the road to recovery. Posterior wound healed- slight discharge. Granulations to be seen in aural canal. Transferred to Camp Hill 14.5.18.	
Camp Hill, Halifax.		25	5	18	2	8	18	P.O.Mastoid (Heath).		Hearing each ear 20 ft. Lower limit 64 ft. Good condition.	(Sd) H.W.Schwartz, Capt. A.M.C.

MEDICAL HISTORY SHEET

Surname Fitzgerald. *Christian Name* Robert.

Examined { on day of June. 1917
at Halifax N.S.

Birthplace { City or Town Little River Harbour.
County Yarmouth County.

Apparent age 18 - 4 Months

Trade or occupation Fisherman.

Height 5 feet 6 Inches

Weight 136 lbs.

Chest measurement { Minimum 31 inches
Maximum expansion 34 inches

Physical development Average

Small-pox Marks

Vaccination Marks { Arm Right Left
Number Nil Nil

When Vaccinated last Nil

(*a*) Marks indicating congential peculiarities or previous disease Nil

(*b*) Slight defects but not sufficient to cause rejection Flat Chest -

Approved by W B Wallace

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

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	
			M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
			M.O.
			M.O.
			M.O.

Enlisted on 21st *day of* June. 191 7 *at* Halifax. N. S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	R.C.G.A	8176		21 - 6 - 17
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313.
300M.—1-17.
H. Q. 1772-39-439.

8176

Christian Name

Suriname

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				

"Active Militiaman on duty, became C.E.F. 22nd June 1918. Vide R.O. 795/1918"

This space to be for numbers.

Proceedings on Discharge.

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

No. 1274219

Rank Gunner

Surname FITZGERALD.

Christian name Robert.

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

Corps (Squadron, Battery or Company) R.C.G.A., C.E.F. No. 6. Artillery Depot.

Date of discharge 23rd December 1918.

Place of discharge Halifax, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	19 years 10 months.	
Height	5 feet 8 inches.	
Complexion	Fresh	
Eyes	Blue	
Hair	Brown	
Trade	Farmer.	
Intended place of residence (To be given as fully as practicable.)	Little River Harbor. Yarmouth Co. N.S.	

2. The above-named man is discharged in consequence of :-

General Demobilization, under R.O. 1327 & 1328/1918.

Authority for discharge 6D. 43-1-20 & C.H. 33-1-1.

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

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

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

Fair

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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

-

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

6. Medals and Decorations ..... -

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

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

(Place) Halifax, N.S. C. J. MacNaughton Major

(Date) 23rd December 1918. Lieut. Colonel Commanding C.R.C.A. Halifax

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

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

(Place) Halifax, N.S. R. Fitzgerald *(Signature of Soldier.)*

(Date) December 1918. J. H. Madigan *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

Service toward Engagement to.... (the date to which the Record of Service is completed) 1 years 185 days.

Duty as active militiaman 1 yr.
Duty on C.E.S. 185 days.

Total 1 years 185 days.

11. **Confirmation of Discharge.**

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

(Place) Halifax, N.S. C. J. MacNaughton Major

(Date) 23rd December 1918. *(Signature)* Lieut. Colonel C.R.C.A. Halifax

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.)

Nil.

Sgd. R. Fitzgerald

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet 1	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet, 2	Militia form	B. 313
Casualty Form 1	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet 1	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will 1	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

MFW. 97. 1.

Attestation Paper 5	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge 2	"	B. 218

MFW. 129. 1.

SER. F. 27 1.

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

Active Militiaman on duty became C.E.F. on 22nd June 1918.
Vide R.O.795/1918.

MEDICAL HISTORY SHEET

Surname Fitzgerald. *Christian Name* Robert.

Examined on ...... day of June. 1917
at Halifax N.S.

Birthplace: City or Town Little River Harbour.
County Yarmouth, County.

Apparent age 18 - 4 Months

Trade or occupation Fisherman.

Height 5 feet 6 Inches

Weight 135 lbs.

Chest measurement: Minimum 31 inches; Maximum expansion 34 inches

Physical development Average

Small-pox Marks Nil

Vaccination Marks: Arm Right / Left; Number Nil Nil

When Vaccinated last Nil

(*a*) Marks indicating congential peculiarities or previous disease Nil

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

Flat Chest

Approved by [signature]

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

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
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 21st *day of* June, 1917 *at* Halifax. N. S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	R.C.G.A.	~~8176~~.		21-6-17
Transferred to	C.E.F.	1274219.		22-6-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Camp Hill - Halifax	July 22-18	Otitis media (R.) (Mastoid operation)	Category C I [signature] Major

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.
300M.—1-17.
H. Q. 1772-39-439.

Surname Fitzgerald Christian Name Robert 8176

~~8176~~ 1274219.

STATION	Date of Arrival at the Station	Dates of Admission into Hospital: Day	Month	Year	Discharge from Hospital: Day	Month	Year	DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
Halifax, N.S.	21.6.17.										
Halifax, N.S.		20	11	17	30	11	17.	Otorrhoea, Right	11	Recovered - Discharge stopped: hearing to voice test about normal.	Mamey Captain, AMC
		No admission to 22-One-18.									
McG. Hosp. Hfx N.S.		16	3	18	14	5	18	Acute Mastoidis	60	Admitted with an acute otitis media 16.3.18 condition improved. Had a slight sore throat followed by intense mastoid symptoms of 2nd Heath's modification of the radical operation performed 4.4.18. Developed facial erysipelas 10.4.18. By 21.4.18 he was on the road to recovery. Posterior wound healed - slight discharge - granulations to be seen in aural canal - transferred to Camp. Hill 14/6/18	[illegible] Schwartz Capt AMC.
Campstiel Halifax		25	5	18	2	8	18	P.O. Mastoid (Heath)		— Hearing each ear 20 ft. — 64 do. Good condition	lower limit [illegible] Schwartz

Active Militiaman on duty became C.E.F. on 22nd June 1918. Vide R.O.795/1918.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

NAME OF SOLDIER FITZGERALD, Robert

DISTRICT 6

REGIMENT R.C.G.A., C.E.F. RANK Gunner No. 1274219

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

INSTRUCTIONS

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

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

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

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
																							Cavities 2.3.18.19.31.
Condition on first Examination	13-11-18											4 16 30									Capt Woodbury	6	

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

Name (Surname) FITZGERALD, Robert

Rank Gunner

R.C.A., C.E.F.

Active Militiaman on duty became C.E.F. on 22nd June 1918
Vide R.O. 795/1918.

M. F. W. 71—500M—6 18.
1772—39—J.L.

NAME FITZGERALD, Robert

REGIMENTAL NO. 1274219 RANK Gunner

ENLISTED AT Halifax N.S. PROMOTIONS, &c. AND DATE

DATE 11-12-18.

IF SERVED PREVIOUSLY STATE UNIT &c. R.C.G.A. since 21-6-17.

MARRIED, WIDOWER, OR SINGLE Single.

NEXT OF KIN William M. Fitzgerald RELATIONSHIP Father.

ADDRESS OF Little River Harbour, Yarmouth Co. N.S.

ASSIGNMENT OF PAY $ ——— C. ——— TO ———

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT No

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	No.	DATE	

H. Q.

M. D. No. 6

Surname Fitzgerald

T. O. S. Nov 22 1918

Christian names Robert

D. O. Pt. II 154 of 22-11-18

Regtl. No. 1274219 Rank Gr

S. O. S. 23-12 1918

Unit 6th Art. Dpo

Reason Demob.

Auth D.O. No 186 of 24/12/18 #6 Art. Dpo.

Next of kin Mr. Wm. M. Fitzgearld Relationship Father

Address Little River Harbour

Yarmouth N.S. Canada

Also notify:

BORN—Place Little River Harbour N.S. Date Feb. 13th 1901

ATTESTED—Place Halifax Date Dec. 11th 1918

O/S

R/C

W. 22—100M 7-18. 1772-39-839.

No. 282668 RANK Pte. NAME Fitzgerald, Robert.

T. O. S. 29-2-16 D.O. 229 UNIT 219th Battalion, C. E. F.
1-27-3-16.

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Feb. 29	Mar. 31	✓		
apl		✓	Forfeits 1 days pay	D.O. 37 of 20-4-16
may		✓		
June		✓		
July 1	July 3	✓	Discharged 28-6-16 med unfit settled up to & including 3-7-16.	D.O. 98 of 1-7-16. D.O. 100 of 4-7-16

a/c closed by payment S.

No. 8176. RANK Gnr. NAME Fitzgerald R.

T. O. S. UNIT Royal Can Garrison Artillery

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1917	1917.			
Aug 24	Aug 31	✓		
Sept		✓	2 days mulct pay	D.O 221 21-9-17
Oct		✓		
Nov		✓	4 days mulct pay.	D.O. 273 23-11-17
Dec		✓	abs from 24-12-17.	D.O. 307 26-12-17
1918	1918			
Jan		O.S.	Forfeits 24 days pay.	Jan paylist.
Feb		O.S.		
Mar		O.S.		
April		O.S.		
May		O.S.		
June		✓		

Active Militiaman on duty, became C.E.F. 22/6/18.
Vide R.O.795, 1918.

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. 1274219 Rank Gunner Surname FITZGERALD
(Given name in full) Robert

Unit or Corps R.C.G.A., C.E.F. Birthplace Yarmouth, N.S.

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

1. GENERAL DESCRIPTION:

Physique good Weight 149 lbs. Height 5 ft. 6 in. Colour of Eyes Brown

Nutrition good

Pulse 80

Condition of arteries good

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 10 ft.

Left 8 ft.

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

Wt

Opinion as to general health and physical condition 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 No 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

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.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ....(Overseas)

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.

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Fort McNab (Canada)

Date 18-12-18 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.

Signature P. Fitzgerald

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

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

[OVER]

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

Original not available

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

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 219th Battalion

Regimental No. 282668 Rank Pte Name Fitzgerald, Robert.

Enlisted (a) 2-3-16. Terms of Service (a) C. E. F. Dofwar Service reckons from (a) 2-3-16.

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) .....

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				
4-7-16.	219th Bn.	S.O.S as being Med unfit.	Aldershot Camp	3-7-16.	Pt II D.O. # 100.

O. C. Pangman
Lieut
for D of R.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

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 R.C.G.A. C.E.F.

Regimental No. 1274219 Rank Gunner C. E. F. Name Robert FITZGEARLD.

Enlisted (a) ~~11-12-18~~ 22.6.18 Terms of Service (a) War & six months Service reckons from (a) 22-6-18.

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

Extended ..... Re-engaged ..... Qualification (b) (Farmer)

Report: 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
	X	Active Militiaman on duty became C.E.F. on 22nd June 1918. Vide R.O.795/1918.	Halifax N.S.	X	
		Discharged on General Demobilization under R.O. 1327 & 1328/1918.	Halifax N.S.	23-12-18.	

R. M. Fielding ~~Capt.~~ Lieut. 1st C.G.A.
Adj. No. 6 Artillery Depot.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

Mr Robert P. Fitzgerald, 2/Lieut.
11 Pleasant Street,
Stoneham, Mass. U.S.A

Department of Veterans Affairs

STATEMENT OF SERVICE

IN THE

CANADIAN ARMED FORCES

PUBLIC ARCHIVES RECORDS CENTRE
JUL 12 1965
OTTAWA, ONT., CANADA

Service Rank and/or Number 1274219 Name FITZGERALD, Robert

1. Branch of Service: Army - R.C.G.A. - CEF.
2. Date and Place of Birth: 13 February 1901 - Little River Harbor, N.S.
3. Date and Place of Appointment, Enlistment or Enrolment: 22 June 1918 - Halifax, N.S.
4. Theatres of Service: Canada
5. Date and Place of Retirement or Discharge: 23 December 1918 - Halifax, N.S.
6. Type of Retirement or Discharge: Honourable
7. Rank on Retirement or Discharge: Gunner
8. Medals and Decorations: Nil
9. Remarks: Previously served in 219 Bn, regt'l # 282668 from 2 March 1916 until 3 July 1916. S.O.S. Medically unfit. Rank - Private. Also served in R.C.G.A. (N.P.A.M.) from 24 August 1917 until 22 June 1918. Date of birth given as 13 March 1898

Date: .....

.....
Head, Reference Section

DVA 812 Rev. (6-63)

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1274219 (Rank) Gunner

Name (in full) Fitzgerald, Robert enlisted in

the R.C.G.A.

CANADIAN EXPEDITIONARY FORCE at Halifax on the 19th

day of June 19)

HE served in Canada

and is now discharged from the service by reason of

Demobilization.

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

Age 19 yrs. 10 mos.

Height 5 ft. 8 ins.

Complexion Fresh

Eyes Blue

Hair Brown

Marks or Scars

Mole

R. Fitzgerald
Signature of Soldier

[signature]
Issuing Officer

Lieut. Colonel
Rank

C.R.C.A. Halifax.
Appointment

Date of Discharge 23-12-18.

Signed at Halifax. this Twenty Third day of December 19 18.

in Military District No. Six

File Reference No. 18-F-26

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 1274219 (Rank) Gunner Name Fitzgerald, Robert

Unit R.C.G.A.C.E.S.

Address on Discharge Little River Harbor, Yarmouth Co. N.S.

Character and Conduct Fair

Former Occupation Farmer and Fisherman

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at Halifax this Twenty Third day of December 1918.

O. M. [illegible]
Name of Officer

Lieutenant Colonel
Rank

C.R.C.A. Halifax
Appointment

"Active Militiaman on duty, became C.E.F. 22nd June 1918. Vide R.O. 795/1918"

This space to be for numbers.

ROYAL CANADIAN ARTILLERY HALIFAX N.S. DEC 19 Rec'd

Proceedings on Discharge.

No. 18776

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

No.	1274219 Regd/8176
Rank	Gunner
Surname	FITZGEARLD. FITZGERALD.
Christian name	Robert.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	R.C.G.A., C.E.F. No. 6. Artillery Depot.
Date of discharge	23rd December 1918.
Place of discharge	Halifax, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	19 years 10 months.	
Height	5 feet 8 inches.	
Complexion	Fresh	
Eyes	Blue	
Hair	Brown	
Trade	Farmer.	
Intended place of residence (To be given as fully as practicable.)	Little River Harbor. Yarmouth Co, N.S.	

2. The above-named man is discharged in consequence of :-

General Demobilization, under R.O. 1327 &1328/1918.

Authority for discharge 6D.43-1-20 & C.H. 33-1-1.

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

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

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

Fair ✓

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations

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

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

(Place) Halifax, N.S.

(Date) 23rd December 1918.

C. J. Moore Major
Lieut. Colonel
~~Commanding~~ C.R.C.A. Halifax

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

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

(Place) Halifax, N.S. P. Fitzgerald *(Signature of Soldier.)*

(Date) December 1918. J. N. Madigan *(Signature of Witness.)*

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

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

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

(Signature of Soldier.)

10. **Statement of Service.**

Service toward Engagement to (the date to which the Record of Service is completed) 1 years 189 days.

Duty as active militiaman 1 yr.
Duty on C. E. F. 185 days.

Total 1 years 189 days.

11. **Confirmation of Discharge.**

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

(Place) Halifax, N.S.

(Date) 23rd December 1918.

(Signature) C. J. Moore Major
Lieut. Colonel
C.R.C.A. Halifax, N.S.

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.)

Mil.

Sgd. P. C. Fitzgerald

List of Discharge Documents.

Reg. Conduct Sheet,	1	Militia form B. 263	
Squadron / Battery / Company } Conduct Sheet,	1	"	B. 263a
or			
Field Conduct Sheet	1	"	W. 178
Copies of Convictions, by C. P.			in MS.
Med. Hist. Sheet,	2	Militia form B. 313	
Casualty Form	1	"	W. 54
Medical Report for Invalid§		"	B. 227
Dental History Sheet	1	"	B. 465
Last Pay Certificate		"	W. 44
Duplicate Discharge Certificate		"	W. 39A
‡Form of Will	1	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

MFW. 97.2.

Attestation Paper	5	Militia Form W. 23
or		
Particulars of Recruit		" W. 133
Proceedings on Discharge	2	" B. 218

MFW. 129. 1
—a— 7. 1
SCR. F.127 1.

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

Med. board held at Yarmouth

22-5-16 sent C.R. 5-8-16

F.E

Attestation Paper removed and sent to Sergeant MacIntosh.

Date.....5/10/19.....

Enrolment Form

Full Name of Soldier Surname First: Fitzgerald Robert

P. O. Address: Little River Harbor Yarmouth

Place of Birth: Little River Harbor Yarmouth

Nationality: Canadian

Age: 18 years.

Married or Single: Single

If Single do you desire permission to marry? No.

Trade or Calling: Fisherman

Religion: Roman Catholic

Corps Intended for: Royal Canadian Garrison Artillery

Height: 5'. 7½

Chest Measurement: 34

Fit or Unfit: Fit

Is Dental attention necessary? No

Is recruit willing to be vaccinated and inoculated? Yes.

Date of Medical Examination: JUN 18 1917

Date of Enlistment: June 18th 1917

Signature of Medical Officer: E. W. Farrish

Signature of Recruiting Officer: Harold O'Connell

This form will be sent with the N. C. O. or man in charge of detachment of recruits to the place of mobilization and handed by him to the Medical Officer.

Forms of men found "unfit" at preliminary Medical Examination will be sent to H. Q. 6th Division by examining M. O.—those of men found "fit" by O. C. unit which men join—after the question of pay has been adjusted by the Regimental Paymaster.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 1274219 Rank Gunner Name Fitzgerald, R.

Corps No. 6 Arty. Depot who was* discharged

On 23-12-18 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-18 191..., to 23-12-18 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	10.	00
Advances by Cheques No. Cash	15.	00	Regt'l. Pay 23 days at $ 1.00 c.	23.	00
No.			Field Allow. 23 days at $ .10 c.	2.	30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Kit Def.	.10		Other Allowances* Clothing	35.	00
Payment on transfer or discharge No. 10875	71.	70	Other Credits* P D	16.	50
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	86.	80	Total	86.	80

*Give particulars.

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

Pay for the month of ..... 191...
and Sep'n Allce. for month of ..... 191... (to) Assignee .....

(Address) .....

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

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment 26-6-17

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge demob authority .....

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit

Date 23-12-18

Place Halifax

[signature] Paymaster No. 6 Artillery Depot, C. E. F.
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new u duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for reten as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; dup to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out ruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discha and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

649-71-2066

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a *Medical Board

assembled at Yarmouth, N. S.

on the 22nd day of May, 1916,

by order of A. D. of M. S. M. D. 6.

for the purpose of inquiring into the Medical Fitness

for service of Pte. Robert Fitzgerald, #282668,

219th Battalion, C. E. F.

MILITARY DISTRICT NO. 6
HALIFAX, N. S.
JUN 20 1916
59-71-91
M. D. No. 6

DEPT. MILITIA & DEFENCE
AUG - 9 1916
H.Q. CANADA

PRESIDENT.

L. P. Churchill, Captain,

M. O. 219th Bn., C. E. F.,

MEMBERS.

Dr. S. W. Williamson,

M. O. Yarmouth Detachment.

ASSISTANT DIRECTOR OF MEDICAL SERVICES
JUN 19 1916

219th. OVERSEAS HIGHLAND BATTALION
ORDERLY ROOM
JUN 23 1916
No.
C. E. F.

The Board having assembled pursuant to order, proceed to examine Pte. Robert Fitzgerald #282668 and find this man poorly developed and not up to the minimum requirements also mentally deficient and decide that he will never become an efficient soldier and therefore recommend that he be discharged from the service.

cancel
5-8-16
C. C. B.

L. P. Churchill
CAPT.
M. O. 219th. "Overseas" Highland B'n. C. E. F.

S. W. Williamson
M. O. Yarmouth Detachment 219th

M. F. B. 303.
75 m.—9-15.
H. Q. 1772—39—133.

S-16

A.A.G.

M.D. No.6.

Discharge recommended.

J. Wallace Capt. for
Lieut-Colonel,
A.D.M.S. M.D. 6.

HFX.N.S.
1916.16.

APPROVED
JUN 20 1916
For G.O.C.M.D. No. 6

APPROVED
AUG 11 1916
D.G.M.S.
D'Arcy Adams Capt

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 1274219 RANK Gm. NAME (IN FULL) FitzGERALD Robert (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

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

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS

Little River Harbor
Yarmouth
N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE | #370

DISCHARGED | PLACE Halifax N.S. | DATE 13 12/18 | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

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
											War Gratuity																										
	31	days	70	00					70	00									15/5/19						16	50									53	50	PD Pay & Atty Dep.
																							53	50			Completed								Nil		Chq. # 586174 15/5/19
			70	–					70	–													53	50	16	50					70	–					

All payments made
H A Allum Lt

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.