161st Huron Battalion, C.E.F.

TRIPLICATE

ATTESTATION PAPER.

No. 6 5 4 5 3 3

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Lymburner
1a. What are your Christian names? Otto Wray.
1b. What is your present address? Goderich ~~Ont~~ Ontario Canada
2. In what Town, Township or Parish, and in what Country were you born? Jordan Station Ontario ~~Ont~~ Canada
3. What is the name of your next-of kin? M. E. Lymburner.
4. What is the address of your next-of-kin? Goderich ~~Ont~~ Ontario Canada
4a. What is the relationship of your next-of-kin? Father.
5. What is the date of your birth? Feby 24th 1897
6. What is your Trade or Calling? Jeweller.
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? no.
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, Otto Wray Lymburner, 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.

O W Lymburner (Signature of Recruit)

Date Feby 7th 1916 Chas. H. Rance. Lieut. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Otto Wray Lymburner, 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.

O W Lymburner (Signature of Recruit)

Date Feb 7 1916. R. J. McLean Lieut. (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 Goderich Ontario, Canada this Seventh day of February 1916.

W. E. Reed J.P. (Signature of Justice)

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

Description [redacted] Otto Wray Lymburner on Enlistment.

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

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

Chest measurement.
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Light

Religious denominations.
- Church of England .....
- Presbyterian ..... Presby
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic .....
- Jewish .....
- Other denominations ..... (Denomination to be stated.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

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 February 20 1916 [signature]

Place Goderich Ontario Canada Captain 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.

Otto Wray Lymburner 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] Lt. Col. (Signature of Officer)

O.C. 161st Huron Battalion, C.E.F.

Date March 2nd 1916.

REGIMENTAL DOCUMENTS

PTE NAME LYNBURNER OTTO WRAY REGT. NO. 654533 UNIT 18th Bn. H. Q. FILE NO.

8. GR. 3/7/19

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)			
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)			
	TRAINING HISTORY SHEET (M.F.W. 113)			
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)			
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)			
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)			
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)			
2	DENTAL HISTORY SHEET (M.F.B. 465)			
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)			
2	MEDICAL EXAMINATION (M.F.W. 129)			
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)			
	PROCFEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)			
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)			
	LAST PAY CERTIFICATE (M.F.W. 44)			
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)			
	PARTICULARS OF CHARACTER (A.F.W. 3226)			
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)			
1	Misc A.F.I 1237-5			
VX	Cancelled			
	M.M.W.O.			
	1722			
1	Signed			

11

M. F. W. 2505 REFERENCE 35367

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category Demob.

DESERTION

28-27.
19-22.
5-27.
T

W. 2599
100M-11-18
1772-39-1377

BOX
5806

No. 654533 RANK Pte. NAME Lymburner, O W

T. O. S. 7-2-16 UNIT 161st Battalion.
D.O. 55 of 3-16.

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T
1916 Mar. 1	1916 Mar. 31	L
Apr		L
May		L
June		"
July		"
Aug		"
Sept		"
Oct-		"

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
OCT 30 1916

NAME Lymburne Otto Hpay

RANK AND CORPS Pte 18th Bn. (Farm. 161st Bn.)

REGT'L No. 654533.

H. Q. FILE No. 649.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
		M. E. Lymburne, (Father) Goderich, Ont.
17-9. H 288	1-9-18.	Adm. 36 Sen. Hosp. Etaples Aug 27th
H.L.9303	2-9-18	1918 Gsw. R. Leg.

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
			W. I. R.
B. 304 E+ 1.	Nell Lane Mil. Manchester.	4/9/18	Gsw ext leg.
B. 340 E+ 1.	10 Con+ Spec Buxton.	15-10-18	" " "
B. 346	10 Con. Spec. Buxton	22-10-18	" " "
B. 363 2	Disc.	5-11-18	" " "

Number 6.5.4.5.3.3 Rank Pte.

Surname LYMBURNER

Christian Name Otto Wray

Units 18th Bn. Can. Inf. Theatre of War France

Date of Service 28-3-18

Remarks

Latest Address ~~Goderich~~ Ont.

~~Woo~~ Wroxeter Ont.

Roll No. B. Page 5074

GN 4395 .A5 M

AUG 15 1921

Form R. 149.

Otto Wray

Name LYMBURNER Rank PTE Reg. No. 654533

Unit 18 BN

Next of Kin CANADA

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27.8	26 Bde Etaples	Etaples	Leg R	H303	H288	3633-2
4.9	Field Amb. Evac.	West-Dideboy		B304		
15.10	Manchester	Le				25746
22.10	Can Red X Sta H. Buston	do		B340		29104
22.10	Transf. Can Sta Buston			B346		29857
5.11	Discharged	do		B363		9306
6/11	Roll report ICCS Witley	- No furlough - R.T. Granted				
N.K.						
Lett. 29.11.18	6 Blenheim Terrace Sydenham Rd. Guildford					

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

C

NAME Lymburner Otto Wray. MD1K 208 Dis 19-6-19 Demob DD 17 of 20-6-19 # 1 DD

RANK & No. Pte 654533.

CORPS 161st Batt

ENLISTMENT, PLACE Goderich. Ont. DATE Feb 7th 1916.

FORMER CORPS Mil

COUNTRY OF BIRTH Canada. Jordan Station, Ont.

NEXT OF KIN Lymburner. M. E. (Father)

ADDRESS OF NEXT OF KIN Goderich Ont.

DISCHARGE, PLACE DATE

R/C 17-6-19 348 Pte 48

L. L. 85093—M. & D. 5952.

M. F. W. 22.—50m.—4-15. H. Q. 1772—39—839.

V

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Jeweller RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 19 YEARS MONTHS

HEIGHT 5 FEET 5 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 2. INCHES

COMPLEXION Fair EYES Blue HAIR Light-

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Goderich Ont. DATE Feb 10th 1916

REMARKS:

D M S. 1300 50M-21-1 17.

SURNAME | CHRISTIAN NAME OR NAMES | REG. No.

RANK: Pte. | UNIT: LYMBURNER. | O.W. | CO. | TROOP | BATTY. | 654533.

HOSPITAL: 26. G.H. Etaples. | W.O. 18.

DATE OF ADMISSION: 27-8-18.

1. Mill Lane Mel M'chester HOSP. 4.9.18
2. 6.R.6. Spr. Buxton. HOSP. 15.10.18
3. Granville Buxton HOSP. 22.10.18
4. HOSP.

DIAGNOSIS: G.S.W. R. Leg. R

1.
2.
3.

DISPOSITION: heise - 5.11.18. DATE

C.L. 31-8-18. A303.
6.9.18 B304-I
18.10.18 D340.
25.10.18 B346
14.11.18 B363-2

REMARKS

A.M.D. 2 Dept.
Boh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. FILE

Attention of

Dept. of Veterans Affairs
War Service Records
APR 16 1963
Ref. SERVICE NUMBER 654533 WW1
Charged to

Ottawa Ont

Date April 11/63

NAME LYMBURNER, Otto Wray.

C.P.C. No.
W.V.A. No. 210837

NAVY
ARMY x
R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. TEL MEMO. Sunnybrook Hospital April 9/63

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Jan 14/63
Cause of Death
Place of Death Sunnybrook Hospital Toronto Weston, Weston, Ont.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
PAY~~x~~
~~D.C.~~
H.O.

Destroy form if advice of death already received.

for
Chief, Central Registry

DVA 24

Duplicate

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.

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(1) Name of Overseas Unit which Soldier joins 161st. Os. Bn. C.E.F.

(2) Regimental Number 654533.

(3) Full Name of Soldier Lymburner, Otto Wray.

(4) Place of Birth Jordan Station, Ont. Canada.

(5) Are you married, or not ? No.

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

(b) Present Postal Address

(7) Are you a widower ? No.

(8) Have you any children ? No.

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes. — Mathias Elmore Lymburner

If so, state name and address Goderich. Ont. Canada.

(10) Is your Mother alive? Yes.

If so, state name and address Mary Emley Lymburner.
Goderich. Ont. Canada.

(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? No.

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

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

W B Conklee
Officer Commanding.

Date June 16. 1916

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D.1

NAME OF SOLDIER (Block Letters) LYMBURNER O.W.

REGIMENT 18th BTN. RANK PTE No. 654533

Date of Examination in England 16/12/18. Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

2597

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS Nil
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

CONTENTS COPIED C. A. D. C., M. D. No. 1.

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) In Canada
- (*b*) In England Yes
- (*c*) In France

Kennel Park. N. Wales.

Signature of Dental Officer H. Cresswell Capt-C.A.D.C.

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. 65 45 33 Rank Pte. Surname Lymburner
(Given name in full) Otto Wray
Unit or Corps 18 Batt. Birthplace London, Ontario

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

1. GENERAL DESCRIPTION:

Physique Good Weight 135 lbs. Height 5 ft. 4 in. Colour of Eyes Blue
Nutrition Good.
Pulse 74.
Condition of arteries Good.
Vision Rt. 20/20 Left 20/20
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Nil - except Mole formerly R. Shoulder.

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 Yes

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.

well Lam Military Hosp. 2.9.18; Lt. 10.18. G.S.W.R.Leg- Recovery Good
Can. Red Cross Sp. Hosp. 21.10.18
Granville Can. Sp. Hosp. 5.11.18 Recovery Good
Buxton
Fit Cat A

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Kemmel Park (Overseas)

Date 24.5.19. Signed J. Locke Capt Canada 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 [illegible]

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

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

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

Signature .....

(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.)

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Lymburner O.W. M.D.I.

REGIMENT 161st Bn. RANK Pte No. 654533.

Date of Examination in England 5/6/19. | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

PRESENT DENTAL REQUIREMENTS

1. FILLINGS S N D
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada
- (b) In England yes.
- (c) In France

KINMEL PARK, NORTH WALES

Signature of Dental Officer W. C. Hagger Capt

R—122
8,401—50,000—21-10-16.

A.G.R. Rank — Name LYMBURNER, Otto Wray — Reg'l No. 654533

Unit 161st Bn. — If in perm. Corps, What Unit? — Married or Single Single.

Place and Date of Enlistment Goderich, 7th Feb. 1916. — Place of Birth Jordan Station, Ontario, Canada.

Name and Address, Next-of-Kin M.E. Lymburner, Goderich, Ontario, Canada. — Relationship Father.

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

N/E. H. File R.L. 3993 Cate Book

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.
6		Arrived in England. S.S Lapland		11-11-16	
7.2.18	161st Bn	awd Good Conduct Badge Witley	Pte	7.2.18	Pte 26
8.3.18	"	S.O.S. to 4th Res. Bn.	Witley	8.3.18	— 41. 4 Res 58 d/9 3/18
29.3.18	4th Res	Posted TO 18th. BN. O/S BSHOTT 28.3.18. PTE 75 18th BN			27 d/5 4/18
31.8.18	WOR(18)	WOUNDED	field	27.8.18	CLA 303
9.9.18	WORD	TOS from 18 Bn	Witley	4.9.18	Pte 0212
17.9.18	18 Bn	SOS to WORD	field	3.9.18	" 88 0.6
6-11-18	W.O.R.D	On Comm. to 1st C.C. to	Witley	5.11.18	" 264 + ICCD 309 8/11
20.11.18	✓	Off Cmd CCD 808 to 4 R Bn	✓	14.11.18	— 27 + ICCD 316 d 15 11/18 4 R Bn 280 d 26.11.18

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.
19.3.19	P. Padre MDCW	9-08 from WOR.	Rhyl Rte	13.12.18	Rtd 20 6.7
20.3.19	WORO	508 from WORO	Wilby	19.3.19	67th Res 76 D/31/3/19
9-6-19	1 Wing	SOS to C.E.F. Canada Sailing 82 S.L. 82-K-53 D/7.6.19.	Pte Rhyl.	7-6-19	Do 127.

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 161st O.S.Battalion C.E.F.

Regimental No. 654533 Rank Pte. Name Lymburner, Otto Wray

Enlisted (a) Feb. 7/16 Terms of Service (a) War & 6 mos after Service reckons from (a) ~~Mch. 1st~~ Feby 7th, 1916.

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

War Service Badge (Civil) No.

Extended Re-engaged Qualification (b) Jeweller

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked - Canada.	Halifax.	1-11-16	
		Arrived - England	Liverpool	11-11-16	
8.2.18.	161st Bn.	Awarded Good Conduct Badge.	Witley.	7.2.18.	Part II Orders # 26.
8.3.18.	161st Bn.	Absorbed into 4th Cdn. Res. Bn, Bramshott, and S.O.S. 161st Cdn. Inf. Bn	Witley.	8.3.18.	Pt II No 41. Lieut. a/Asst-Adjutant, for O.C. 161st Canadian Infantry Battalion.
9-3-18	O.C.4th. Res.Bn.	T.O.S. 4th.Can.Res.Bn.	Bramshott	8-3-18	Part II Order No. 58

OVER

(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 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.
29-3-18	O.C. 4th Res. Bn.	Having proceeded overseas to 18th Battn. is S.O.S. 4th Res.Battn. ✓	Bramshott	28-3-18	Part 2 Order No. 75.

E. Barber Lieut.
A/Adjt. 4th Canadian Res.Battalion.

CERTIFIED CORRECT
24 APR 1918
CAN. RECORDS LONDON.

29-3-18	2 Can I.B. Depot	Arr from 4 Can Res Bn Eng & T.O.S. of 18 Can Bn	2 Can IBD ETAPLES	29.3.18	Nom Roll Pt II Ord 27 d-5.4.18
3-4-18	C.C.R.C.	Arr at Can.Corps Reinf. Camp		3.4.18	Nom Roll
10-8-18	18 Bn	Joined 18th Can Bn	In the Fld	8.8.18	AF.B.213
31-8-18	18th Bn	WOUNDED	In the Fld	27.8.18	AF.B.213
27-8-18	26 Gen.	GSW. leg R. Adm.	26 Gen.	27-8-18	W. 30 3/4 (Ext. H.23 3/4)
3-9-18	A.T. Stad Antwerpen	Invalided to England, wounded. Posted to Western Ontario Regtl Depot WITLEY		3-9-18	AF.W.3083 (Can. Sect. No. 5910) Pt II Ord 88 - 17-9-18

Major for Lt.-Col., A.A.G.
Canadian Section. G.H.Q. 3rd Echelon B.E.F.

9-9-18	W.O.H.D.	T.O.S. from 18th Bn	Witley	4-9-18	Pt II 0212

for LIEUT:
FOR LT: COL: I/C RECORDS, C.D.M.F.

Army Form B. 103. Regimental Number 1054533

Casualty Form—Active Service.

Regiment or Corps.....

Rank Re Surname Lymburner Christian Name Otto Wray

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

Enlisted (a) 7-2-16 Terms of Service (a) Dom Service reckons from (a) 7-2-16

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

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

or Corps Trade and Rate.....

Occupation..... .....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
14-11-18		Ceases to be attached on proceeding 4th Can.	D.O.No. 815		5/14-11-18
			Adjutant, 1st Canadian Command Depôt.		
22-11-18	4th Res. Bn.	T.O.L. on posting from W.O.R.D.	Witley	14-11-18	D.O. N° 271.
13-12-18	-do-	"On Command" Kinmel Park Camp, pending return to Canada.	-do-	13-12-18	Pte 2 D.O. 295.
			LIEUT. & ASST. ADJT. FOR O. C. 4TH CANADIAN RESERVE BATTALION		

(a) In the case of a man who has re-engaged for, or enlisted in Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
13/12/18	~~#2 Res Bn~~	~~T.O.S. No D#1 Consl. Camp. Embarked for Canada~~	~~Rhyl~~	~~13/12/18~~	~~Part II #2. Sanders Lieut. for O/C No D#1 Sqdrng~~
13/12/18	OCMD1	T.O.S. C.C.C. Kinmel Park for return to Canada. Part II Orders No 67. T.O.S. C.C.C. Kinmel Park on embarking for Canada, Part II, Order No. 126 for Major Commanding M.D.1 Wing, Kinmel Park Camp. SAILING NO. 82 S.S. 'ROYAL GEORGE' Emb. L'pool 7.6.19	19/3/19	7/6/19	
		T.O.S. No 1 Dist. Depot Displ. Stn. K. 7-6-19 T.O.S. Dispersed 19.6.19 D.O. No. 171 For O.C. Dispersal Area Stn. K.	Smart Capt. Adjt. No. 14, C.T.C.S.		

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

Pte

THIS IS TO CERTIFY that No. 654533 (Rank) A/Cpl

Name (in full) LYMBURNER Otto Wray enlisted in

the 161st Can Bn.

CANADIAN EXPEDITIONARY FORCE at Goderich on the 4th

day of February 1916

HE served in 18th Can Bn France

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

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

Age	22 yrs.	Marks or Scars	
Height	5 ft 5 in		
Complexion	Fair		Nil
Eyes	Blue		
Hair	Light		

O Lymburner
Signature of Soldier

J Christie Lt
Issuing Officer

Date of Discharge

DISCHARGE SECTION
JUN 19 1919
No. 1 District Depot

for O. C. Dispersal Area Sta. "K."
Rank

Date 19

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

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-89-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

P. 559.

MARRIED OR SINGLE Single.

PLACE OF BIRTH Jordon Station, Ontario

NAME AND ADDRESS OF NEXT OF KIN M. E. Lymburner
Goderich Ontario 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	AUTHORI

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 DATE	2 No.	2 DATE	3 No.	3 DATE
1916														17/6	17/6						
Nov. 1-30	30	1.00	30	00	30	.10	3	00							33 00		15	16-11-16			
Dec 1-31	31	100	31	00	31	.10	3	10							34 10		4/6	8-12-16			
1917 Jan 1-31	31	1.00/10	34	10											34 10		12	28/12/16			
Feb. 1-28	28	1.00/10	30	80											30 80		112	31/1/17	94	15/1/17	
MAR. 1-31	31	1.00/10	34	10											34 10		288	17/3.	133	13/3.	
																	243	26/3.			
1-30	30	"	33	-											33 -						
May	31		34	10											34 10		24	16/4			
																	38	28/4			
June	30		33												33		114	31/5			
																	83	15/5			
July	31		34	10											34 10						
Aug	31.		34	10											34 10.		189	26/6			
																	153	13/6.			
Sept	30		33	-											33 -		363	26/8.			
																	324	13/8.	155	16/7.	

654533

OMOTIONS, &c.

Effective Date	Authority

HOSPITAL, &c.

NAME OF HOSPITAL

REG'L. No. 654533 RANK Pte. NAME Lymburner, Otta Wray

IF IN PERMT. CORPS WHAT UNIT } UNIT 161 Bn TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Goderich Ont Can TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 7-2-16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $20.00 DATE EFFECTIVE 1-11-16.

PAYABLE TO Mrs. Mary E. Lymburner, Goderich Ont Can RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACQUITTANCE ROLLS 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
							Balance from Canada						1746				
15	16-11-16						1460			20 00		3460	1586				
46	8-12-16						487			2000	416	2903	2093				Clothing charge 24005 #145.
						487				20 00		2487	3016				
794	15-12-16					243	486			20 00	59	2788	3308				24005, #51 dated 1/1/17.
133	13/2					487	430			20 00	14	4605	2113				24005, #26, 3/3/17.
										20 -		20 -	3413				
						730				20		3217	3606				
						487											
						730				20	112	3329	3577				24005 - 487 / 86a = 18
										20	101	2101	4886				" 1475 - 1415 -
						486											
						730				20		3216	5080				
						487											
155	16/2					730	1217			20	196	4630	3150				24005 737 - 20. 15/6/17.

65H533. Pte Lymburner O.W.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
			AMOUNT				AMOUNT				AMOUNT					1		2		3		4					
	NO. OF DAYS	RATE	$	C.	NO. OF DAYS	RATE	$	C.	NO. OF DAYS	RATE	$	C.				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	1	2	3	4

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Sept 30	Bal Ford.	~~37 50~~								37 50		
Oct.	31 days Pte @ 1/-	34 10		Can Af.					20			
				AR 486 - 61 Bn	9/9/17.	1 30				HH. 30		
		34 10				7 30			20			
Nov	30 " P.P.	33							20			
Dec	31 " "	34 10		" 475 " "	15/10/17.	9 73						
				" 533 " "	29/10/17.	H 87						
				" 451 " "	24/9/17	H 87						
				" 575 " "	12/11/17	1 30						
				Q Hoos 3540 - Q	H-8	57						
		67 10				27 34			40			
1918												
Jan. 31.	P.P.	34 10		Can.					20	38 16		
				Ottoos - 4599 B.	9/12/17.	32.						
				AR 624 161 Bn.	26/11/17.	H 87.						
				" 101 " "	17/12/17.	1 30						
				" 658 " "	5/2/17.	1 30				38 34		
		34 10				19 79.			20			
Feb. 28	PP	30 80		Can.					20			
				AR 154 " "	11/1/18	1 30						
				" 196 " "	28/1/18	H 87.						
				" 837 " "	12/2/18.	1 30			20	29 10.		
		30 80.				19 47.			20.			
Mar.	PP	34 10		Can.					20			
				AR 871 " "	26/2/18	1 30						
				Ottoos. B 471.	31/1/18.	1 16						
				AR 202. 4 Res	20/3/18.	9 73.				25 61.		
		34 10				18 19			20			

PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	3	4				CREDIT	DEBIT			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-11-16		EFFECTIVE DATE:-	
AMOUNT:- 20[00]		AMOUNT:-	

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

Mrs Mary E. Leyneburner
Goderich Ontario Can (Mother)
Stopped Effec 1/1/19

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
31/1/18	3181.	Witley	14 00				
✓	3181.	✓	34 07				
9/12/18	3401	✓	9 73				
11/12/18	2554	✓	7 30				
27/11/18	10 days	S.F. D.O. 281 4 Res	7 30				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred to Canada. Effec 1/

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
31/3/18	Brought Forward.			
April	Pte. Pay	33 -		Can. A.R. 94. 9/4/18 2nd C.C.R.
				A.R. 209. 22/4/18 " "
				A 4005. 217 25/3/18 4th R
May	Pte. Pay	33 / 34 10		Can. A.R.
				A.R. 330. 9/5/18 2nd 66
June	Pte. Pay	34 10 / 33 -		Can. A.R.
				A.R. 619. 6/6/18 "
				A.R. 6823 22/5/18 1st A.
				A.R. 831. 19/6/18 2nd 6
July	Pte. Pay	33 / 34 10		Can. A.R.
				A.R. 1053 - 4/7/18 ✓
				A.R. 1289. 26/7/18 ✓
Aug.	Pte. Pay	34 10 / 34 10		Can. A.R.
				A.R. 1541 3-8-18 ✓
				✓ 605 - 19-8-18 ✓
				A.F.W. 3069. # 562. 3-8-18 2nd
Dep't	P.P.	34 10 / 33.		C.A.F.
				Hosp Rem 33618 17.9.18
Oct	✓	33 / 34 10		CAF
				H.R. 38796 8/10/18
				A.R. 2796 16/10/18 Bu
		34 10		
Nov	30 P.P.	33 -		9182 5/11/18 ✓
Dec	31 ✓	34 10		3060 16.11.18 4
	S.F. 27.11.18 to 7.12.18 = 10 days	7 30		Leg Ba
	D.O. 281 27.11.18 4 Res.			
		744 0		

Checked 13/1/19

~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
-16	EFFECTIVE DATE:-	
	AMOUNT:-	

NAME:- LYMBURNER. Otto Wray

NUMBER:- 654533.

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

Lymburner
tario Can (Mother)
Effec 11/1/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 16 st Battn

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
27	29/3.	25/4/18	18 Bn.
	1/1/19		Canada Lee.

ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
Witley	14 60				
/	34 07				
/	9 73				
/	7 30				
T.F. Bd 381 4 Res	7 30	6/1.	R.P.C.		

DAILY RATES OF PAY AND ALLOWANCES

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

RENDERING NON-EFFECTIVE:- Transferred to Canada. Effec 1/1/19 and Witley 11 R 006 2 R C Bd 9225

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
ght Forward								25 61		
	33 -		Cap.				20			
			A.R. 94. 9/4/18 2nd C.C.R.C.	4 46						
			A.R. 209. 22/4/18 " "	3 57						
			C 4005. 217 25/3/18 4th Res. Bn.	57				30 01		
	33 - 34 10		Can. A.P.	8 60			20 - 20 -			
			AR. 330. 4/5/18 2nd C&R.C.	4 46				34 65		
	34 10 33 -		Can. A.P.	4 46			20 20			
			AR. 619. 6/6/18 "	3 57						
			AR. 6823 22/5/18 1st a. m. c.	3 57						
			AR. 831. 19/6/18 2nd C&R.C.	4 46				41 05		
	33 34 10		Can. A.P.	11 60			20 20			
			AR. 1053 - 4/7/18 ✓	4 46						
			AR. 1289. 16/7/18 ✓	3 57				47 12		
	34 10 34 10		Can. A.P.	8 03			20 20			
			AR. 1541 3-8-18 ✓	3 57						
			✓ 605 - 19-8-18 18th Bn.	3 57						
			A.F.W. 3069. # 562. 3-8-18 2nd C.C.R.C.	24				53 84		
	34 10 33.		C.A.P.	7 38			20 20			
			Hosp Rem 33618 17.9.18	9 73				57 11		
	33 34 10		Cap.	9 73			20 20	71 27		
			HR. 38796 8/10/18	4 87						
			AR. 2796 16/10/18 Buxton	2 43				63 91		Arrs Agreed 31.10.18
	34 10			7 30			20			
	33 -		9182 5/11/18 ✓	4 87						
	34 10		3060 16.11.18 4 Res.	4 87						
18 to 7.12.18 = 10 days	7 30		Cap				20 -			
27.11.18 4 Res.			Can. A.P.	9 74			20 -	81 27		
	74 40			9 74			40			

NUMBER 654533 RANK NAME LYMBURNER Otto Wray

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BA
		74 40			9 74			40	
				3181 26.11.18 4RD ✓ ✓ ✓	14 60				
					34 07				
				3454 11.12.18 ✓	7 30				
				3401 10.12.18 ✓	9 73				2
		74 40			75 44			40	2
Deb		—		N.1696 9.1.19. K.P. End	9 73				
				N155 22/12/18 ✓ End	9 73				
				876 27/1 ✓ ✓	9 73				
				29.19	29 19				

NAME LYMBURNER. Otto Wray

Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
74 40			9 74			40			
		3181 29.11.18 4R.D	14 60						
		✓ ✓ ✓	34 07						
		3454 11.12.18 ✓	7 30						
		3401 10.12.18 ✓	9 73				22 87		
74 40			75 44			40	22 87		
—		N.1696 9.1.19. K.P. End	9 73						
		N155 22/12/18 ✓ End	9 73						
		876 m/1 ✓ ✓	9 73				6 32		
		29.19	29.19						

63.91
74.40
138 31
115.44
22 87

War Service Badge
Class A No. 763268 Issued

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

SAILING NO. 82.
S. "ROYAL GEORGE"
[illegible]OL, 7.6.19

M.D.1
M

1. No. 654533
2 Rank. ~~A/Cpl~~ Pte
3. Name. LYMBURNER, Otto Wray
4. Unit. 161st Bn. Reserve 4th Res.
5 Date of Discharge JUN 19 1919 Place LONDON, ONT.
6 Reason for Discharge DEMOBILIZATION
Category C 3
Next of Kin Father
War Service Badge
Class "A" No.
Group. Group 23
7. Authority. R. O. 1894
8. Proposed Residence after Discharge Destination Goderich Ont
R.R. 4
Casualty nil
Decorations None
Service in France & etc.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.?

O W Lymburner
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date JUN 19 1919

Signature J. Little, Lt
for
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-118.

LIST OF DISCHARGE DOCUMENTS.

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

Group ..... 4 D

Checked by No. ..... Dis

.....

Date 6/6/19

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 18th Canadians — Military Hospital 26 General B.E.F.

No. 654533 — Rank and Name Lymburner Pte — Age ____ — Service ____

Disease S.W. leg. — Date of admission 27-8-18. — Date of discharge ____ — Result ____

Dates of Observation	Aug						Sept				
Days of Disease	27	28	29	30	31	1	2	3	4	5	6

Temperature Fahrenheit — Time A.M. P.M. (each day)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Admitted 8 p.m.

Pulse per Minute — 62

Respirations per Minute

Motions per 24 hours

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature ____ In charge of case.

161st Huron Battalion, C.E.F. ORIGINAL

654533

L 175

MEDICAL HISTORY SHEET.

Surname Lyndenmeier Christian Name Edward Ray

Examined { on 10th day of Oct 1916 / at Exeter, Ontario, Canada

Approved by [illegible] 6 SEP 1918

Rank Capt A.M.C.

Birthplace { City or Town Jordan / County Lincoln

Apparent age 19

Trade or occupation Jeweller

Height 5 Feet 5½ Inches.

Weight 135 Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks —

Vaccination Marks { Arm Right. Left. / Number

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease No

(b) Slight defects but not sufficient to cause rejection No.

Date	Fit or Unfit	Examined for Re-engagement,	
25/11/18	F	C Bunkhope	M.O
			M.O.
			M.O
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations.	
July 21	S.R.	[illegible]	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
April 29	S.R.	[illegible]	M.O.
Oct 19	S.R.	[illegible]	M.O.
Oct 25	S.R.	[illegible]	
Nov	S.R.	[illegible]	M.O.

Enlisted on 10th day of February 1916 at Goderich Ontario Canada

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	161st Batt'n	654533		Feb. 10, 1916
Transferred to..	4th CAN. RES. BATTALION. 18th Bn			

CANADA

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Kinmel Park	24.5.19.	nil.	"A" J Lockhart Capt A.M.C.

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.
100M.—5-15.
H. Q. 1772-39-439

Surname Symmers Christian Name Otto W. Reg. No.

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
Hill Lane Military Hospital, West Didsbury, Manchester		3	9	18	14	10	18	G.S.W. R. leg.	42	Wound partially sutured ant aspect R. thigh. SB removed Sutre not healed. Fit for Transp Canadian Convalescent Hosp Buxton.	H Reeves Captain R.A.M.C.
Canadian Red Cross Special Hospital BUXTON. DERBY.		14	10	16	21	10	18	-do-	7	Transferred to Granville C.S.H.S. Buxton	F.W. Boyd Major C.A.M.C.
Granville Can Spec. Hosp Buxton Derbyshire		21	10	18	3	11	18	G.S.W. Rt. leg.	16	Wound healed. No disability. Evacuation Home to Canada	H.K. Stockwell Capt. Can.

Forms
I. 1237
12

PA. 134/5-61A

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T3453	654533	Pte.	Lymburner	O W

Station and Date.	Unit.	Age.	Service.
Year	18th Canadian Batt	21	31/12 7/12

CANADIAN SPECIAL HOSPITAL
REGISTRAR'S
21 OCT 1918
OFFICE
BRANTFORD

Disease G Lw R Ft Leg

Occupation: Jeweller
Enlisted - 12 Feb 1916
England - 12 Nov 1916
France - 31 March 1918
Wounded - 26th August 1918
Rtd to Eng.
C.C.S Obrgny 26th August 1918
#26 General Etaples 2 September 1918
Mill Lane military Hospital
Manchester 3 September 1918
Granville C.S.H 21st September 1918

Attached 4th Reserve unit.

H.P.D.

Shrapnel wound front of Right thigh anteriorly at arras France on August 26th 1918. was operated and foreign body removed at 26th General Hospital Etaples. August 27th 1918 wound slightly infected but at present is fully healed.

Present Condition:- Healthy scar 5" long middle 3rd right thigh anteriorly - no apparent deformity resulting no limitation to muscular movement.

says he feels in good health and ready to carry on.
no disability resulting.

Edwin L. Kenneth Capt

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	
	Sor calayan brand Oct 28/18. D: C.H. Robson Mgr
	D: C.H. Robson Mgr

Army Form W. 3172.
(In pads of 50.)

26 Sen. Hospital.

Ward X No. of Bed 22 Date 27-8-18.

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
654532	Lymburner	18th Can.	leg (R.)

Please dont omit no. Ward. Cmr.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

Signature of M.O. W Hamilton Capt RAMC

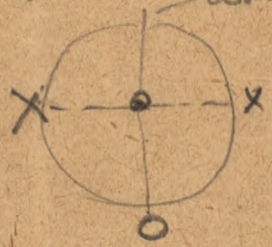
Date

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 9285

Shell fragment ant to femur. wound

marked 2 planes



Signature of Radiographer Cmr

Date

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

D.M.S. 1375.

Medical Examination upon leaving the Service

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

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

Rank Pte Name Otto Wray Surname Lymburner

Unit or Corps 161st Bty, 4th Res't (If a soldier) Regtl. No. 654533

Born at Jordan, Ont. on, date Feb. 24, 1898

Signature (for identification) Otto Lymburner

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. None.

Weight 135 lbs.

Height 5 ft. 4 ins.

2. **NUTRITION AND DIATHESIS?** Good.

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

3. **NERVOUS SYSTEM?** No.

4. **RESPIRATORY SYSTEM.** No.

5. **HEART?** No.

Abnormal Sounds? None.

Abnormal Size? No.

Pulse Rate? 72. Intermittence or irregularity? No.

6. **ARTERIES.**—Any hardening? No.

7. **DIGESTIVE SYSTEM?** No.

8. **GENITO-URINARY SYSTEM?** No.

Urinalysis—s.g.? 1022. Reaction? Acid. Albumen? 0. Sugar? 0.

9. **SKIN, MIDDLE EAR, EYE** or any other part? No.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. None.

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

Examined at Kinmel Park Signed J. A. Locke Capt M.O.

Date 17.12.18. Signed [illegible] M.O.

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

Medical Examination upon Leaving the Service

Is the soldier fit for general service? Is the soldier fit for duty?

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1e-T 2286	654533	Pte	LYNBURNER	Otto W
Year 1918	Unit. 18th Canadian Batt.		Age. 21	Service. 31/12.

Station and Date.

Disease G.S.W. rt Leg.

ENLISTED.

ARRIVED ENGLAND.

FRANCE

COMPLAINT.

HIST ON PRESENT ILLNESS.

PAST ILLNESSES.

FAMILY HISTORY.

HISTORY PRESENT ILLNESS.

CONDITION ON DMISSION.

18.10.18 Transfer Granville Spl Hosp Buxton

R. H. Johnson
Capt
Cana

CANADIAN RED CROSS SOCIETY
RETIRED
MAY
HOSPITAL

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	TREATMENT.
	CONDITION ON DISCHARGE.

From France

G.3.

Forms I. 1237 /12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname.	Christian Name.
T.F.C. 263	654533.	Pte.	Lyndenmeier.	Otto Wray
Year 1918.	Unit 18th Canadians		Age 21.	Service.

Station and Date.

ADMITTED Date 9.9.18 NELL LANE MILITARY HOSPITAL WEST DIDSBURY, MANCHESTER.

Disease G.S.W. R. Leg

Wound probably sutured and septic. R. thigh F.B. removed. Centre not healed yet.

22.9.18. R. Inject. Alle. 3 ii.

℞ Ung. Hydrarg. Ammon.
Ung. Zinc. Ox.
āā 3/p.
Sig the Oint. to be applied on gauze and bandage.

24.9.18 Exemption of skin clearing up.

10.9.18. Transfer to Epsom.

C.S. Waldron Capt

Next of Kin "Goderich" Ontario Canada. Father J. Trudel Hubordeau Quebec. Can.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

1.D 30-2-1221

AUDITOR | PAYMASTER

52

M. OR S. S.

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

REGT. No. 654533 RANK Pte. NAME (IN FULL) LYMBURNER Otto W (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: Mrs. Mary Lymburner, RELATIONSHIP: Mother
ADDRESS: Goderich, Ontario

IS SEPARATION ALLOWANCE PAID? Paid and Closed by Ottawa DATE EFFECTIVE
TO WHOM PAID: nil RELATIONSHIP
ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F.: 161 St Battn.
IF IN P.F. WHAT UNIT? Bank of Commerce, Goderich
PLACE OF ATTESTATION: TRANSFERRED TO 2.D.S.S.F.1 DATE 7.6.19. AUTHORITY D.O. 171
DATE OF ATTESTATION: 7-1-16 TRANSFERRED TO DATE AUTHORITY
ASSIGNED PAY $ 20.00 DATE EFFECTIVE Paid and Closed by Ottawa 30.6.19

PAYABLE TO: Mrs. Mary Lymburner RELATIONSHIP: Mother
ADDRESS: Goderich, Ontario
ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE: London DATE: 19.6.19. REASON: Dem. AUTHORITY: D.O. 171 IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	BALANCE CREDIT $	C.
31.12.18							22	84	22	84																										
1st 22	143	1/10	190	30	35 - 20 -				295	30							14	84	5	00	93	40	120	00			94	90			318	17				
183 days			420	00					420	00													70	-							350	00				
																							66	70			3	30			346	70				
																							70	00							280	00				
																							70	00							210	00				
																							70	00							140	00				
																							70	00							70	00				
																							70	00												
			420	-					420	-													416	70			3	30			420	-				

— WAR SERVICE GRATUITY —

PARTICULARS OR REMARKS

Arr Fer S.S. Royal George 4.6.19
BAL. ENG. L.F.C. 31.12.18
PAY TO ESTIMATED DATE OF DISCHARGE 22.6.19 C.O. ALLOT. 1ST PAYMENT OF W.S.G.
BOAT MONEY, TRAIN MONEY
advances: Kinmel - 23/19 - 9/19 - 24/19
2/19 - 7/19 - 13/19 - 28/19 - 14/19
28/19 - 12/19 - 26/19
A.H. Masterman Major
1st Pay W.S.G. as above
Chgd. to adjust to date of discn. 3 days @ 1/10 per day
17/7/19 199326
17/8/19 119046
13/9/19 116829
13/10/19 117780
NOV 17 1919 118477
Capt.

Soldiers Dependents

100M-1-19.—L. L. 53962—M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch L 8216

OVERSEAS CONTINGENTS

Date of Assignment Nov 1, 1916

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 654533.

Rank Pte Promoted Reverted Discharge

Soldier's Name Otto Wray Lymburner.

Battalion 161 O.S. Battn. C.E.F.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Mary Lymburner

Address Goderich, Ont.

Change of Address

1

2

3

4

REMARKS 114680-1.

Date	Cheque No.	Amount S/A	Amount A/P	Total	
1917 Dec 31			280	280	
1918 Jan	O 68718		20	20	✓
Feb	K 73961		20	20	
Mar.	I 90562		20	20	✓
April	D 3247		20	20	✓
May	N 12870		20	20	✓
June	H 25327		20	20	✓
July	N 30786		20	20	✓
Aug.	L 34799		20	20	✓
Sept.	M 46124		20	20	
Oct	L 52359		20	20	✓
Nov	A 57711		20	20	✓
Dec	S 63241		20	20	✓
1919 Jan	P 76301		20	20	✓
Feb.	N 79930		20	20	✓
Mar	J 87080		20	20	✓
Apr	J 1		20	20	✓
May	K 9802		20	20	
June	V 10469		20	20	
			640	640	30-6-19

A/c Closed 30-6-19

Ret'd per 26-6-19 Rec'd 2-6-19

Date

Closed

AUDITED.

Corporal George Coward Mid. 1 MRO 9128 R

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22320—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-47—177-39-1141
L. L. 22320—M. & D. 7993.

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs. Mary Emily Lymburner.

Address Goderich
Ontario

Rate $20.00

NOV 1 1916

By Whom Assigned Lymburner Otto Wray

Regtl. No. 654533

Rank Pte.

Corps 161 O. S. Bn. C. E. F.

PAYMENTS

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

CONSOLIDATED 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs. Mary Emily Lymburner. PAYMENTS. Name of Soldier Lymburner Otto Wray

L. L. Job 4503. –Req. 6832. 654533 Pte. 161 Bn.

Month.	Year.	Cheque No.	Amt.	$20.00	Remarks. NOV 1 1916
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.		C 31508	20		
Dec.		M 36808	20		
Jan.	1917	M 39414	20		
Feb.		M 45289	20		
March		E 51408	20	20 L	
April		W 2862	20	20	
May		W 9529	20		
June		C 15428	20	20	
July		D 73774	20	6	
Aug.		O 30470	20	20	
Sept.		J 37794	20	20	
Oct.		P 42497	20		
Nov.		X 49079	20		
Dec.		R 59085	20		
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

240

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.				