B. C. Co.
106 O/S Battn. Western Universities

Original

No. 911980

Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

CENTRAL RECORDING DEPOT
3/6/16
OVERSEAS INSTALLATION
WESTERN UNIVERSITIES B. C. COMPANY
ABBERLY ROOM
Canadian Expeditionary Force

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	MANZER
1a. What are your Christian names?	Robert Howard
1b. What is your present address?	Box 787, Nanaimo, BC
2. In what Town, Township or Parish, and in what Country were you born?	Doe Lake, Ontario, Canada
3. What is the name of your next-of kin?	J. O. Manzer,
4. What is the address of your next-of-kin?	Silverdale BC Canada
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	July 5th 1886
6. What is your Trade or Calling?	School Teacher
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Howard Manzer, 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 H. Manzer (Signature of Recruit)

Date June 3rd 1916. Arthur W. Higgs (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Howard Manzer, 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 H. Manzer (Signature of Recruit)

Date June 3rd 1916. C G Henshaw (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Vancouver B this third day of June 1916.

C G Henshaw JP (Signature of Justice)

M. F. W. 28.
600M.—2-16.
H. Q. 1772-39-841.

Description of Manzer, Robert Howard on Enlistment.

Apparent Age 29 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 6 ft. 1 ins.

Chest measurement: Girth when fully expanded 39 ins.; Range of expansion 3 ½ ins.

Complexion Fair

Eyes Blue

Hair Dark

Religious denominations:
- Church of England
- Presbyterian ✓
- 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).

V. L. I

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 June 3rd 1916 W. F. Mackay

Place Vancouver Lieut.

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 Howard Manzer 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.

O C Lekey (Signature of Officer)

Date VANCOUVER JUN 2 1 1916 191

Lieut. Major D. C. B. C. Company,
196th O. S. Batt., C.E.F.
Western Universities

9-11-18.
C.P.

DISCHARGE DOCUMENTS

R. O. No. H

H. Q. No.

Name MANZER, ROBERT HOWARD

Regt. No. 911980 Rank PTE

Corps 196TH BN

MED: UNFIT

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate..... 39A — 1

Medical Report for Invalids..... 2

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

AFB 122 — 1

D W S 1394 — 1

C A D C. 5009 — 1

M F B 465 — 1

R & U 6045 — 1

M F W 67 — 1

Deceased 26-3-61

1 meet

1 pay card

M

H

I

C5340

407841

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

2. CARD NO. 1

SURNAME. Manger.

CHRISTIAN NAMES Robert Howard.

REGL. No. 91980. RANK Pte.

UNIT 196th #2 DD.

FORMER CORPS Nil

S.O.S. Disc 1-11-18-2
Do 193 of FOLL. 29-10-18
M.L. #2DD

Dis.

NEXT OF KIN.

NAMES IN FULL Manger. J. J.

RELATIONSHIP TO SOLDIER Father

ADDRESS Silverdale. Bc.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Dol Lake Ont. DATE July. 5th 1886.

PLACE OF ATTESTATION Vancouver. B.C. DATE Jan. 3rd 1916.

Sailed from Halifax P.M. S.S. Southland.

L. L. 94504. M. & D. 6512. 31-10-16.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-333.

R/C 7-10-18 - 208/23

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING School Teacher RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 29 YEARS — MONTHS

HEIGHT 6 FEET 1 INCHES

CHEST MEASUREMENT 39 INCHES EXPANSION 4 1/2 INCHES

COMPLEXION Fair EYES Blue HAIR Dark.

DISTINGUISHING MARKS Not Stated.

MEDICAL EXAMINATION. PLACE Vancouver. B.C. DATE June. 3rd 1916.

Present Address. Box 187, Nanaimo, B.C.

Number. 91080 Rank. Pte B

Surname. MANZER

Christian Name. Robert Howard

Units. 196th Bn Can Sup. Theatre of War. Eng

Date of Service. 16.11.16

Remarks.

Latest Address. Nanaimo B.C.

Roll No. A Page 891

*Name L. Manzer, R.H. Rank Pte. Regtl. No. 911980

Fyle Depot

Original unit CFCD Present unit 196th M. or S. S Age 30 Religion Pres. Ref. H.Q.

Port, ship and date of arrival Montreal, Llandstephan Castle, 8-10-18

Next of kin J.O. Manzer, Silverdale B.C. (Father)

Address on leave Same

Address on discharge Nanaimo, British Columbia, Can.

Transportation issued ~~No~~ Yes Date 1/11/18 B.C. Character on discharge Very Good

Previous occupation School teacher Date and place of enlistment Vancouver 21-6-16

Diagnosis Weakness both legs Date of Medical Boards 25-10-18

Date.	Remarks.	Pt. 2 Order No.
T.O.S. 22-9-18	Posted to Cas. Co. 8-10-18 Leave from 8-10-18 to 24-10-18	
	Subs. " " " As Manzer.	176
1-11-18	S.O.S. DISCHARGED "HAVING BEEN FOUND MEDICALLY UNFIT FOR SERVICE"(91 days P.D.P. & cloth'g all'c)	195

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

(over)

Date	Remarks	Pt. 2 O[redacted] No.

M. F. W. 192
150m.—5-18
1772-39-1243

No. 911980 Rank Pte. Name Manger. R. H

T. O. S. 21-6-16 Unit 196th Battalion
D. O. 870 of 21-6-16

M. D. 11

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1916	1916			
June 21	June 30	V		
July		V		
Aug.		V		
Sept.		V		
Oct.		V		
Nov.		V		

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 196th OVERSEAS BATTALION C.E.F.

Regimental No. 911980 Rank Private Name Manzer, Robert Howard
C. E. F.

Enlisted (a) June 3/16 Terms of Service (a) 6 mths after war Service reckons from (a) June 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) School-Teacher

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Halifax	Canada	1/11/16	
		Arrived at Liverpool	England	11/11/16	
31/12/16	196th Bn	Absorbed by 19th Res Bn	Seaford	31/12/16	Part 2 D.O. # 184
1/1/17	19th Res Bn	Taken on Strength	Seaford	1/1/17	Part II Orders
13/2/17	19th Res. Bn.	Trans to Can. Forestry Corps	Seaford	13/2/17	Part II D.O. #44
					W. Duncan Major & Adjutant
19-2-17	D of T.O.	T.O.S. Can: For: Corps.	London	13-2-17	D.O. Pt II No. 43. Lieut & Asst-Adjt. C.F.C.
23.11.17	Dist. 53	S.O.S. at co. 116 to H.Q. C.F.C. London	Egham	17/11/17	P.T.I.D.O. no. 139
21-11-17	D.G.L.T.O.	T.O.S. H.Q. S.S. on posting from ~~Base~~ ~~Depot~~ Co 116	London	17/11/17	D.O. pt II no 132
17.11.17	"	To Advance 2nd Canadian Garrison	"	17.11.17	D.O. 145
17-11-17	"	" " 1st " "	"	17.11.17	D.O. 145

(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				
20-7-18	D.G.TO.	S.O.S. H.Q.S.S. C.F.C. on posting to Base Depot	London	22-7-18	Pt. 11 D.O. No.76
20-7-18	do.	Ceases to draw first class clerk's pay	do.	22-7-18	do. do.

Captain,
Hqs, Commandant,
Canadian Forestry Corps.

23.7.18 O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale 22.7.18 Pt.11 D.O. 174

from #255.

27-7-18 – TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 176

EMBARKED FOR CANADA FROM LIVERPOOL

for Lieut.-Col.
Commanding Canadian Discharge Depôt

22.9.18-Sailed from England for Canada

Major.
Adjt. Conducting Staff.

22-9-18 D.O.S. No.2 District Depot, Part II, D.O. No. 176

Dis. #2 D.D. Nov. 1, 1918 Pt. 11#~~194~~ 195

For O.C. No. 2 District Depot

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 911980 (Rank) Pte.

Name (in full) HALLER, Robert Howard enlisted in

the 196th. Bn.

CANADIAN EXPEDITIONARY FORCE at Vancouver on the 3rd.

day of June 1916

HE served in England

and is now discharged from the service by reason of Having been found Medically unfit for service.

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

Age 32

Height 6' 1"

Complexion Fresh

Eyes Blue

Hair Brown

Marks or Scars

Vacc scars left arm

Robert Howard Haller
Signature of Soldier

F.R. Robson Lieut
Issuing Officer Captain,
For Lieut.-Colonel,
Rank
O.C. No. 2 District Depot.
Appointment

Date of Discharge Nov. 1st. 1918

Signed at Toronto, Ont., this 1st. day of Nov. 1918

in Military District No. 2

File Reference No.

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. 911980 (Rank) Pte. Name MANNER, Robert Howard

Unit 196th. Bn.

Address on Discharge Nanaimo, British Columbia, Canada

Character and Conduct Very good

Former Occupation Superintendant of Schools.

Special Qualifications of Value in Civil Life

Medals and Decorations Nil

Remarks Nil

Signed at Toronto, Ont., this 1st. day of Nov. 19 18

H R Robson Lieut
Name of Officer Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.
Rank

Appointment

LL

911980 Manger

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 196th (Western Universities) Battalion

(2) Regimental Number 911980

(3) Full Name of Soldier Manger, Robt. Howard.

(4) Place of Birth Dog Lake, Ontario.

(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. John Oscar Manzer.

If so, state name and address Silverdale, B.C.

(10) Is your Mother alive? Yes.

If so, state name and address Eva Manzer

Silverdale, B.C.

(11) If your Mother is a widow No

Are you her sole support, or not? No.

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

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

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

(15) Are you insured? Yes.

If so, in what Company? Mutual Life

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

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

M C Rousseau
Officer Commanding.

Date OCT 10 1916

MAJOR & ADJUTANT
[illegible] BATTALION C E F

M.D.2

No. 56

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 911980 Rank Pte. Name MANZER, [redacted], R.H.

Corps No. 2 D.D. who was* Discharged,

On 1-11-18. 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-9-18. 191...,

to 1-11-18. 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month L.P.C.	55	31	Balance Cr. from prev. month		
Advances by Cheques No.			Regt'l. Pay 62 days at $ 1 c.	62	00
Cheques No. 40742	35	00	Field Allow. 62 days at $ c. 10	6	20
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges 40583	25	39	Other Allowances* Clothing.	35	00
Payment on transfer or discharge No. 40743	1	10	Other Credits* Subsce.	13	60
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	116	80	Total	116	80

*Give particulars.

A monthly stoppage of $ 20.00 (†) has been charged (‡) been paid on account of Assigned Pay for the month of Oct. 1918. 191... and Sep'n Allce. for month of 191... (to) Assignee Mrs Eva Manzer

(Address) Nanaimo, B.C.,

(†) 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

(2) if married and if a Separation Allowance Card has been submitted No.

(3) cause of discharge authority D.O. 195.

(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 30-10-18.

Place Toronto, Ontario.

Capt.,
Paymaster, No. 2 District Depot.
Paymaster.

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

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate 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 in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

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

C.A.D.C.5009.
20M-19-2-18.

911980
Pte. Manzer R.H.
C.F.C.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
July 27/18	Fit			2

[illegible]
Capt. C.A.D.C

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

Name Pte Manzer M. F.
Nanaimo, B.C.

Regimental No. ~~[illegible]~~ 911980

Unit 196th Bn.

Date of enlistment Manzer

Place of " R. H.

Married (yes or no) No.

Amount of pay assigned monthly $20.00

To whom payable Mrs Eva Manzer
Silverdale B.C.

Name and address of next-of-kin

PAYMASTER M. D. No. 2
NOTIFIED Ottawa 30.10.18
TO STOP PAYMENTS OF
S.A. AND A. PAY
Malcolm J. Coulburn CAPT.

SEPARATION ALLOWANCE AND
ASSIGNED PAY OF $ 20.00
CHARGED TO Oct. 31-18
BEING CONTINUED BY
DIRECTOR OF S.A.A.P. OTTAWA

Date and place discharged

Reason for discharge Chg. A. P. 1-11-18.

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Sept	~~Oct 31~~ Nov. 1	67	1.00	67	67	.10	6.70	13.60	~~80.70~~	40583		25.39		55.31	~~80.70~~	T.O.S. & posted to Cas. Co. 8.10.18 D.O. 176
								35 -	116.80	40742		35				Oct 8.10.18-24.10.18. D.O. 176
										40743		1.10			116.80	L.P.C. chgs. 55.31
																Dis. 1/11/18 91 days PDP & clo. allce D.O. 195

M. F. W. 41
100m-1-18.
1773-30-899.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. M 183

Name Manzer, Robert H.

Regt'l No. 911980 (81/980) Rank Pte. File Numbers Pm 25 - 18

Former Units C.F.C. Original Unit 196th Bn.

Date of arrival in Canada 6-10-18 Boat Llanstephan Castle Port of Disembarkation Montreal

Rates of Pay:—Regt'l. $1.00 Field 10d Date of arrival in M.D 2

Separation Allowance. Date paid to Nil Rate Nil If continued by Chief Paymaster, England No

Assigned Pay. Date paid to 31-10-18 Rate $20.00 If continued by Chief Paymaster, England No

Name and address of Beneficiary { Mrs. Eva Manzer (mother) Silverdale, B.C.

Pay claimed on English L.P.C. to 31-8-18 to be paid by new Unit from 1-9-18

Name of new Unit #2 District Depot Date L.P.C. forwarded to new Unit 28/10/18

A.P. charged on Eng. L.P.C. to 31-8-18

A.P. acct continued in Ottawa

L.L. 34682—M. & D. 8645.

U.C. 21-10-18
CKM. 25-10-18

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out: On Boat	~~At Cl. Depot~~ A P	OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT: Credit	Debit	REMARKS
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	
58 75		58 75							
					9 73				AR 7339; 16.8.18
					9 73				AR 9064; 30.8.18
					9 73				AR 11206; 16.9.18
			4 87						AR 11; 26.9.18
			35 00						6.10.18, Quebec
			5 00						AR 111; 6.10.18
			40 00						Sept. Oct. '18
Debit Balance		55 31				114 06			
		114 06						55 31	

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No...

Name...

Regt'l No.................................Rank..File Numbers { ....
....

Former Units..Original Unit..

Date of arrival in Canada.............................Boat..Port of Disembarkation...

Rates of Pay:—Regt'l.............................Field...............................Date of arrival in M.D..................... ....

Separation Allowance. Date paid to...............................Rate..................................... If continued by Chief Paymaster, England
....

Assigned Pay. Date paid to...............................Rate..................................... If continued by Chief Paymaster, England
....

Name and address of Beneficiary { ....
....

Pay claimed on English L.P.C. to...to be paid by new Unit from...

Name of new Unit..Date L.P.C. forwarded to new Unit...

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out — On Boat		At Cl. Depot &c.		OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT — Credit		Debit		REMARKS
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

File No. 11808-R-4

WAR SERVICE GRATUITY.

Register No. M632

Reg. No. 811980 Pte

Name R H Manzer

Address Nanaimo

(Box 941) B C

Pay Soldier $ 249 90

W A Moreland
S atkins

Clerk

Dependent V

Address

Pay Dependent $ Nil

Days 153 Rate 70 Due 350 00

Less P.D.P. credited 100 10

Less further Dr. Bal. or overpayment.

Net 249 90

R. W. 134 17-10-19.

	Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1	8/1/19	5414	496564	140 00	Mailed 28/1/19				
2									
3	21/9/19	18603	502662	70 00					
4	18/9/19	26759	520512	39 90					
5									
6									

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

GEN'L AUDITOR
Posting checked by
J O'Brien
Date. 1-8-19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

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

Remarks:

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

POST DISCHARGE PAY OFFICE

8850/175

Three months pay and allowances after discharge.

Name Manzer, R.H.
Surname Christian Name

Regimental Number 911980 Rank Pte. Address (in full) Nanaimo, B.C.

Unit

Original Unit

District where paid M.D.2

Date of Discharge

P. D. P. Filing Number 18-812-2

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

L. L. 15038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	13180	1-11-18	33 00	12144	1-12-18	33 00				34 10	66 00

Remarks:

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Dec'n No..... W. S. G. File No .....

Award.....days at $ .... per day $

S. A.....months at $ ..... per mo. $..... $

Less P, D. P. Credited $ .....

$

Less further debit balance $.....

Net due paid as below

TO SOLDIER TO DEPENDENT

	Ag. No	Ch No	Amount	Ag No	Ch No	Amount
0						
4						
5						
6						
—	Total			Total		

L. [illegible] Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-319.

Mrs.

To Whom Eva Manger.

Address Silverdale, B. C.

By Whom Assigned Manger, R. H.

Regtl. No. 911980

Rank Pte.

Corps 196th Batta.

Rate 20.00

NOV 1 1916

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 3 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2.

Mrs. Eva Manzer

Name of Soldier Manzer, R. B.

911980 pte. 196th Bn.

L. L. Job 4503.—Req. 6832.

NOV 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		E30425	20	
Dec.		T36004	20	
Jan.	1917	Z40898	20	
Feb.		Z46241	20	
March		R49977	20	20-Cl
April		M3503	20	20 Cu
May		S9654	20	20 Cu
June		M18844	20	B.
July	T26941	~~N23802~~	~~20~~ 20	Cu 23802. Cancd. 13/7/17. DC. EC.
Aug.		Z32734	20	Cu
Sept.		Y37829	20	Cu
Oct.		K43593	20	
Nov.		L50171	20	
Dec.		P58093	20	280 00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

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.	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 Eva Manzer.
Sivers dale. B.C.
Wife
Stopped 9/1/18
Effect 1/9/18
Jas E

NAME:- MANZER Robert. Howard.

NUMBER:- 911980.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D.O. 145. 18/12/17.	1-11-17.	Clerk. Class II.
D.O. 145. C.F.C.H'Qrs.	1-12-17.	Pte Clerk Class I. Adams Italic Pay
D.O. 174. 23/7/18 GBCBd	22/7/18.	Taken on Strength from Hd Q GBC.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 19th Battn.

DATE ACCOUNT FIRST OPENED - 1-11-16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.F.C. Eng.
	31/8/18	20/9/18	N.E. "H"

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~20/7/18~~	~~853~~ 1853	~~C.F.C. London~~	~~£4-~~ 19 47				
~~25/7/18~~ 25/7/18	~~B1910~~ B1910	~~C.F.C.~~ B.D.	~~£1-00~~ 4 86				
			24-33				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
~~D.O. 145. C.F.C.H'Qrs. 17/12/17.~~	~~1 00~~	~~50~~		
Taken on Strength C.F.C. CBd from Hd Q GBC. 22/7/18 Pte 174 23/7/18	1 00	— 60		

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharged to Canada 31/8/18. Authy Nomroll 26/7/18 For Disposal

MONTH 1918.	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									3 4 9 6		
April.	To draw Adems Pay. Eff. 17/12/17. Cr 105 days @ 60¢ Under paid.	63 00	✓	Can A.P.				20			
	Adms Pay.	51 00	✓	A.R L71. 13/4/18. London	31 63						
	D.O. 145 18/12/17. To draw clerks pay class II effective 17-11-17. Cr 30 days @ 40¢	12 00	✓						39 41		
		126			31 63			20			
May.	Clks. Pay	52 70	✓	Can A.P.				20			
				A.R. L334. 14/5/18. H'Qrs London.	31 63				40 48		
		52 70			31 63			20			
June.	Clerks Pay.	51 —	✓	Can A.P.				20			
				L527 13.6.18.	29 20				42 28		
		51			29 20			20			
July	Clerks. Pay 1 - 21. 21 days.	35 70		Can A.P.				20 —			
	Pte Pay 22 - 31. 10 days	11 00		A.R. L853 London 20-7-18 B1910 26.7.18. B.D.	19 47 487				68 18 44 04		
		46 70			24 34			20			
Aug.	Pte Pay.	34 10		Can AP.				20 —	~~83 00~~	~~24 33~~	~~58 75~~
				7339 16.8.18. Burton	9 73						
				9064. 30.8.18	9 73			0K 0K	39 28	✓	
		34 10			19 46			20			

A.3 M. FORM RE... EFFEC. 1/9/18
DISCHARGED TO Canada DATE 31/8/18
PAY BOOK VERIFIED 1/8/18
Cr BAL. $58.75 L.P.C. REN'D. 1/8/18
AUTHY. Nom Roll. 26/7/18. 686

Checked at Wilton Disposal
A.R. 7339 16.8.18 Endorsed on L.P.C. correct balance and $ 58.75 $ 49.02
" 9064 30.8.18 .. .. .. $ 39.29

NUMBER 911980 RANK Pte NAME MANZER R H

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Aug	Bal fwd								39 28		
Sept				AK 11206 16/7/18 Demob Ex Th	9 73				29 55		
					9 73						
Nov				Dr. Balt Can 1921.	29 55				8		
					29 55						

P. 559.

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Dal Lake, ont

NAME AND ADDRESS OF NEXT OF KIN: J. B. Manzer, Silverdale, B.C.

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c

PARTICULARS	EFFECTIVE DATE	AUTHORITY
To draw administration Pay. $1.10.	17-2-17.	D.O. 145. Effective 1st.

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 911980 RANK Private NAME Manzer, Robt. Howard

IF IN PERMT. CORPS } WHAT UNIT } UNIT 196th Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Vancouver. B.C

DATE OF ATTESTATION 21/6/16

TRANSFERRED TO 19th Res Bn DATE 1-2-18 AUTHORITY D.H.Q. 22-1-17

TRANSFERRED TO Can Forestry Corps DATE 21-3-17 AUTHORITY D.H.Q. 22-1-17

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1/11/16

PAYABLE TO Mrs Eva Manzer, Silverdale. B.C RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-9-18 REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada. 31-8-18. REASON AND AUTHORITY Nom Roll. 26-7-18 686. For Disposal.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	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	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
			10											10	10															10				Bal. from Canada
Nov 1-30	30	1	30		30	10	3								33			40	17/11/16					14 60			20		34 60	8 40				
Dec 1-31	31	1.	31		31	10	3 10								34 10			94	8/12/16					9 74			20		29 74	12 76				
1917			6 10																															
Jan 1-15	15	1/10	16 50												16 50												20		20	9 26				
16-31	16	1/10	17 60												17 60															26 86				Trans to 19th Res Bn 1-2-17 auth. D.H.Q. #71. 22-1-17
Feb 1-28	28	1/10	30 80												30 80			149	25/1/17				4 87				20	84 30 24 87	32 79				
Mar 1-20	20	1/10	22 00												22 00			124	13-2				4 87				20	24 87	29 92				Trans to C.D.C. 21-3-17
21-31	11	.	12 10												12 10			1063	19/2	1119	20/3		9 73	9 73			20	19 46	22 56				
Apr.	30		33												33												20	20 17 3 54	35 56				
May	31	1 00/10	34 10												69 66			358	29/4				9 43				20	29 43	29 99				
June	30		33												33												20	20	53 99				
July	31		34 10												34 10			38	29/6				12 17				20	20	67 03				
Aug	31		34 10												34 10			3588	23/8				9 74				20	41 91	89 22				
			324 40											10	344 40									41 38	43 80		200	285 18					
			336 40											10	344 40									41 38	43 80		200	285 18					

911980 Manzer Rt Howard

A.P. 20 00 C

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.	Acquittance Rolls 1: Date	Acquittance Rolls 2: No.	Acquittance Rolls 2: Date	Acquittance Rolls 3: No.	Acquittance Rolls 3: Date	Acquittance Rolls 4: No.	Acquittance Rolls 4: Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
For. d 1917							334	40						10	344 40									41 38	43 80			200		285 18	5922				
Sept	30	1 10	33												33	3864 31/7								12 17				20		32 17	6005 ✓				
			33				334	40						10	377 40									53 55	43 80			220		317 35					

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
		~~60 05~~							60 05 ✓		
Oct	P Pay	34 10		Can A.P.				20			
				#4093 31 8/17	12 17						
				AR. 4307 (2 10/17) C.F.C. Groombridge	~~12 17~~ 24 34			20 00	49 81		
Nov & Dec	P-Pay	34 10 / 67 10		A.P. Canada				20			
				A.R 170 23 10/17 C.F.C. Groombridge	12 17						
				A.P. Can. Dec				20	64 74		
		67 10			12 17			40			
Jan/18	P-Pay	34 10		A.P. Can Jan				20			
				A.R L310 19 11/17 London	14 60				64 24		
		34 10			14 60			20			
		34 10			14 60			20	64 24		
				A.P. Can				20			
Feby	P-Pay	30 80		A.R 793 14 1/18 London	14 60						
				" " " "	19 47				40 97		
		30 80			34 07			20			
Mar	P-Pay	34 10		A.P. Can				20			
				A.R L1143 15 2/18 H'Qrs London	34 07						
				" L1559 14 3/18 " "	31 63						
				" L517 13 12/17 " "	24 33				34 96		
		34 10			90 03			20			

5-1-33

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.)

L.L.

No 911980

Rank Pte.

Name MANZER, Robert Howard

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

Corps (Squadron, Battery or Company) 196th. Bn. (#2 D.D.)

Date of Discharge NOV 1 1918

Place of Discharge TORONTO. ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 32 years months.
Height 6 feet 1 inches.
Complexion Fresh
Eyes Blue
Hair Brown
Trade Superintendant of schools.
Intended place of residence (To be given as fully as practicable.) Nanaimo, British Columbia, Canada

Descriptive Marks

Vacc scars left arm

H

M

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

Deceased 26-3-61

Having been found Medically unfit for service

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.

Very good

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

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

Superintendant of schools.

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113

WSG Comp 1/2/19

(OVER)

KCSO 29/1/20 HK

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

Nil

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

6. Medals and Decorations ..... Nil

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) TORONTO, ONT. .....

(Date) NOV 1 1918 ..... *Commanding* H G Beemer Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.

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.

(Place) TORONTO, ONT. Robert Howard Manzer *(Signature of Soldier.)*

(Date) NOV 1 1918 [illegible] *(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)...3 years. 151 days.

Total 3 years. 151 days.

11. **Confirmation of Discharge.**

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

TORONTO, ONT.

(Place).....

(Signature) H G Beemer Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.

(Date) NOV 1 1918 .....

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
Robert Howard Manzer

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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.

R—122
8,401—50,000—21-10-16.

A.C. Rank Name MANZER, Robert Howard. Reg'l No. 911980

Unit 196th. Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Vancouver, B.C. June.3rd.1916 Place of Birth Doe Lake, Ontario, Canada.

Name and Address, Next-of-Kin J.O. Manzer, Silverdale, B.C. Canada. Relationship Father.

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

N/E. R.B. No 2,764
File R.L.
Category Can. O.R.

Discharge, Date and Place Reason Character

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England.		11-11-16	Per S.S. "Southland"
31-12-16	196th Bn.	S.O.S, To 19th Res. Bn.	Seaford	31-12-16	Pt. 2 D.O. 184
1-1-17	19 Res	T.O.S. FROM 196Bn.	Seaford	1-1-17	Pt. 2 D.O. 1
2-3-17	"	S.O.S. to C.C.A.C. & attchd to 19th Res for B.D. P.R.Q. D&C.	~	13-1-17	D.O. #61.
14-2-17 14-2-17.	C.C.A.C.	T.O.S. & on Com., 19th Res. Bn. (B3)	Hastings	13-1-17.	Pt II. D.O. #76.
2-3-17.	19th Res	Ceases to be attchd on proceeding to Canadian Forestry corps.	Seaford.	13-2-17.	D.O. #61.
26-2.17	CCAC	Ceases to be att. to 19th Res. S.O.S. to C.F.C.	Hastings	13.2.17	" 97. / C.F.C. Pt. II O. 43 d/14-2-17.
7 5 17	Dist. 3 C.F.C.	On Strength 18 Coy London 15 17 Pt 2 6			
21-11-17	Hq SS. C.F.C.	T.O.S. fm 53 Dist C.F.C.	Pte Sundale	17-11-17	PN II 132. / 53 Dist C.F.C. PN II 139, 23-11-17

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.
23-7-18	BDCFC	To S from HQCFC	Pte S/dale	22-7-18	Pte O 174. (SOS Do 76 W 24-7-18 HQCFC)
26-7-18	" "	On Comm to CDD Burton To Can. Disp by A.G.	" "	26-7-18	" " 177.
5-10-18	" "	SOS to C E F Canada + Ceases on Command as Suitable Surp. in Eng	" "	22-9-18	" 238.

50

M.O.K. Brotzer Mr. A.M. Manzer, Silverdale, B.C.
Mans address 120 Beatrice St., Toronto

Examined by
Lt. Macka
Vancouver,
June 3, 1916.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Park School Bks. DATE Oct 25th, 1918.

1. 1 (a) Unit #2 District Depot (b) Regimental No 911980 (c) Rank Pte.

(d) Surname MANZER (e) Christian name Robert Howard

2. Age last birthday ..... Date of birth .....

3. Enlisted at 32 on July 5th, 1886

4. Personal description:—

(a) Height 6 ft. 1 in. (b) Weight 155 (stripped) (c) Complexion fresh

(d) Colour of hair brown (e) Colour of eyes blue (f) Identification marks 2 vaccination marks on left arm.

5. Address after discharge (for the use of the Board of Pension Commissioners)

Nanaimo, British Co umbia, Canada

6. Former trade or occupation Superintendant of Schools.

7. (a) Service	Years	Days
	2	174

	Periods From	Periods To
196 th Western universities n.	June 3, 1916	Feb. 13, 1917.
C.F.C.	Feb. 13, 1917	Oct 24, 1918.
#2D.D.	Oct 24, 1918	to date

(b) Has he been overseas? yes England 8. Original disease or disability (I) Varicble right (2) Varicole veins

10

(a) Date of origin (I) 1908 (2) 1910 (b) Place of origin (I) Canada (2) Canada

(c) Cause* (I) 1. unknown (2) Unknown.

(d) Present disease or disability Pain in side of scrotun, (2) Weakness in both legs

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

(I) Subjective symptoms- Complains of pain in right of scrotum, worse if takes a mist step or strikes toe. in radiates up right groin always worse when on feet for any length of time.

P.T.O. M.J.

M. F. B. 227.

300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

Objective Symptoms- Scrotum very lax large mass of veins extending down cord and lying around right testicle. Testicle and veins very tender, wears suspensory continually ~~////~~ scar on left scrotum for varicocele operation in July 1914.

Subjective-Weakness of both legs and pain on walking, large diffuse veins extended from ankles of both feet to both groins, veins very prominent and nodular. In capacity due to partial loss of function (1) Vensus system (2) Vensus system.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous yes Digestive yes Respiratory yes Cardiac yes

Genito-Urinary see sec. 9A Skin, Middle Ear, Eye or any other parts Yes

Urine- Specific Gravity 1025-reaction acid no albumen, no sugar.

Pulse 74 other systems apparently normal

10. History: (*a*) of Condition referred to in "a" section 9.

Condition prior to enlistment in 1916 operated on for lft varicocele in 1914- no treatment since, enlistment.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Two vaccination left arm, Bunion left first toe- no disability.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

(1) Yes (2) Yes

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

No

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one?

(1) If operation 6 weeks. (2) Permanent.

14. Treatment (Case reports, general or special, should be secured and attached where possible).

none

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?
(If the answer is "yes" state nature of treatment required and probable duration.)

(1) NO (2) No

16. Can the former trade or occupation be resumed ? yes
(If not, briefly state why.)

17. Recommendations For discharge.

G R Caldwell Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned Robert H. Manzer have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.) I complain in addition of W. F. M.

Robert H. Manzer
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report ? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

We do not concur (1) Permanent operation not advisable.

We concur.

19. Is the soldier fit for

(a) General service,	(Category A) (Yes or No).	no
(b) Service abroad, not general service,	(" B) (Yes or No).	no
(c) Home service, (Canada only),	(" C) (Yes or No).	no
(d) Temporarily unfit,	(" D) (Yes or No).	no
(e) Unfit for service in Categories A, B and C,	(" E) (Yes or No).	yes

20. It is certified that the soldier
(a) ~~Does require treatment~~. (Give the nature of the condition and of the treatment required and its probable duration).

(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control.~~
(Strike out condition not applicable).

OPINION OF THE MEDICAL BOARD—(*Continued*).

21. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

That he be placed in category "E" and be discharged as medically unfit for further Military service.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

W. T. McLea Major *President.*

W. J. Clark Capt. } Members.

PLACE Park School Bks. Toronto.

DATE Oct 25th, 1918.

APPROVED BY

[signature]
Assistant Director of Medical Services.

DATE 28-10-18.

APPROVED BY

Director-General of Medical Services.

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, ... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE ..... } Members.

DATE .....

M.J.

B. C. Co.
196 O/S Batt. Western Universities

OVERSEAS BATTALION
WESTERN UNIVERSITIES
B. C. COMPANY
Canadian Expeditionary Force

MEDICAL HISTORY SHEET.

Surname MANZER Christian Name Robert Howard

Examined on 3rd day of June 1916
at Vancouver B.C.

Approved by W. F. Mackay
Rank Lieut M.O.

Birthplace: City or Town Doe Lake
County Ontario, Canada

Apparent age 29yrs

Trade or occupation School principal

Height 6 Feet 1 Inches.

Weight 155 Lbs.

Chest measurement: Minimum 35½ inches.
Maximum expansion 3½ inches.

Physical development good

Small-Pox Marks

Vaccination Marks: Arm Right. Left. 1
Number

When Vaccinated last 15 yrs ago

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection
Few varicose veins

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

Date. 1916	Result.	Vaccinations.
Sep 22	nil	H.S. Walker M.O.
Oct 12	Good	H.S. Walker M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
July 2	Good	H.S. Walker M.O.
" 9		H.S. Walker M.O.
" 16		H.S. Walker M.O.

Enlisted on 21st day of June 1916 at Vancouver BC

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	196th O.B.C.E.F.	911980		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Park School Bks. Toronto, Oct 25th, 1918.		"E" W. Mackay	Major
Venous system. Sanford Law + H Walker	Jan 13/19.	Varicose veins Varicocele	Pres. Standing Medical Bd. B'III Wiltshire Capt
23 Swallow St. London	27/5/18	Varicocele	B'III R.A. Medical Board
Summerdale	17/6/18	Varicocele	B'III C.A. Medical Board
Summerdale	July 8/1918	Varicocele	B Three [illegible] Capt

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

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

Surname..... Christian Name.....

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.

PART I. A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 911980 Rank Pte. Surname MANZER Christian Name ROBT. HOWARD

Unit or Corps—(a) Overseas from United Kingdom 196 Bn. (b) In United Kingdom C. F. C.

Born at—Town Doe Lake County or Province Ontario Country Canada

Date of Birth—Day 5 Month July Year 1887 Age 30 yrs. 11 months.

Joined at Vancouver B.C. Date June 21/16

Former Trade or Occupation School principal

Permanent marks or peculiarities that will serve for future identification:—

Height—feet 6 inches 1 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) Robert H Manzer

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*). WEAKNESS BOTH LEGS

Disabilities Group (*b*). PAINFUL RIGHT TESTICLE

Disabilities Group (*c*). not applicable

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	VARICOSE VEINS	Canada	1900
(*ii.*) As to Group (*b*) above.	VARICOCELE	Canada	1912
(*iii.*) As to Group (*c*) above.	not applicable		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? yes If yes, has Active Service aggravated it? yes

(*ii.*) As to Group (*b*) above? yes If yes, has Active Service aggravated it? yes

(*iii.*) As to Group (*c*) above? not applicable If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? no

(*ii.*) As to Group (*b*) above? no

(*iii.*) As to Group (*c*) above? not applicable

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? } not applicable (*ii.*) While off duty?

(*iii.*) Was a Court of Inquiry held? (*iv.*) Where? (*v.*) When?

(*vi.*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Enlisted July 21/16 Previous to enlistment he had varicose veins - he had an operation for left sided Varicocele previous to enlistment also. was in infantry but he was discharged and transfered to C.E. The disabilities have in meantime grown progressively worse. Both feet and legs are sore especially on walking - swelling of legs also.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

General condition fairly good. Varicosities on both legs and feet are noticeable - the varicosities extending up the thighs - the right testicle shows var. He has worn a suspensory for last three years. Pain in groin (right) and dragging painful sensation on the least is negative - the lungs are negative - There is marked neurotic element in relation to varicocele. Old operation wound has left an impediment to respiration

8. OPERATION. (*i.*) Was one performed?

(*ii.*) If so, state what. yes Varicocele previous to enlistment

(*iii.*) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service?

(ii.) If so, describe. no

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? B III not likely to be raised in category within six months

(*b*) Fit for base duty?

(*c*) Invalid to Canada?

(*d*) Discharge from the Service as permanently unfit?

Date of Report June 25 1918 Signed L.H. Roberts Capt. C.A.M.C.

Officer in medical charge of case.

Station London

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

L.H. Roberts Capt. for { Officer i/c ~~Hospital~~, S.M.O. Brigade } Strike out one of these.

Dated at London Station, on June 26 1918

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)?
If not, indicate it.

YES

12. Is the cause of the disability, fully indicated in Part I. (2)?
If not, indicate it.

YES

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier { Caused? / Aggravated? } NO (b) Misconduct of the Soldier { Caused? / Aggravated? } NO

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

Not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

18. Remarks. Man has varicose veins, marked below knee and extending up to groin in both legs. Has been operated on for varicocele (left). Now has moderate rt. sided varicocele.

19. Recommendation:—(*a*) Fit for duty? B (three) not likely to be raised in category within six months.
(*b*) Fit for base duty?
(*c*) Invalid to Canada?
(*d*) Discharge from service as permanently unfit?

Classification for the Military Hospitals Commission.

7

Date of Board July 8, 1918

Signatures of the Board: [signature] Capt. Chair [signature] Capt. [signature]

President.

Station Sunningdale

A.D.M.S. CANADIANS, LONDON AREA. LONDON.

Approved [signature]

A.D.M.S.

Dated at ..... Major, C.A.M.C. for A.D.M.S., Canadians, London Area.

Station 11 JUL 1918

PART III.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

2
Operation
27/2/8

R. & O. [illegible]5 (*Revised*).

138457

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Seaford Camp Jan 13th 1916.

No. 911980 Rank Pte Name MANZER ROBERT HOWARD

Local Unit 19th Reserve Bt (196th) Overseas Unit ..... Age 30 yrs

Examination held at Seaford Sussex

DISABILITY.
Overseas—Local.
(scratch one out)

Varicose veins
varicocele.

PRESENT CONDITION.

Both conditions trouble him and even standing causes him discomfort.

BOARD RECOMMENDS:— B. iii

1. Fit for Duty .....
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members
H. H. Alger Maj ..... President.
W. A. Harvie Capt .....
.....

6

APPROVED

Dated at Seaford Jan 13 1916. A C Ford Major
A D A D M S

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at.....1916.

No.....Rank.....Name.....

Local Unit.....Overseas Unit.....Age.....

Examination held at.....

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

.....President.

.....Members

.....

APPROVED

Dated at.....1916.

.....

For A.D.M.S.

Form D.M.S. 1394
10M

PROCEEDINGS OF A MEDICAL BOARD

Dated at London 27:5:18 191 .

No. 911980 Rank Pte Name MANZER. R.H.

Local Unit C.F.C. Overseas Unit Age 31

Examination held at 23 Swallow St W.1.

DISABILITY.
Overseas - Local
(scratch one out)

Varicocele

PRESENT CONDITION.

Veins in both legs, enlarged, tortuous and knotted, from ankles to thighs. Complains of pain in legs on walking more than three miles. Slight varicocele rt. side. Left side operated on, good results. Other systems normal. Fit only for B III for 6 months.

BOARD RECOMMENDS:-

1. Fit for Duty
2. Fit for duty after B III weeks' physical traing.
3. Fit for Temporary Base Duty weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

President.

Members

APPROVED

Dated 191 For A.D.M.S.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER Manger, Robert Howard

RANK

REGIMENT

No. 911980

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 District	REMARKS
Condition on first Examination																							
DISCHARGE EXAM.																							
CASUALTY CO. No 2 D. D.																							
DATE OCT 25 1918																							
CERTIFICATE ISSUED FOR Dentally Fit																							

L.F.B. 465.
10m.—6-18.
1772-39-950.

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 911980 RANK Pte NAME (IN FULL) Manzer, Robert Howard (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 196th Bn. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 3/6/16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 20.00 | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Nanaimo, B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE #2 D.D. | DATE 1/11/18 | REASON Med. Unfit | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

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 cheque No. $	C.	COL. NO. 3 $	C.	ASSIGNED PAY W.S.G. $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	W.S.G. S.A. $	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT Car Fwd P.L. 812 line 18									100	10																	66	00									Dr received P.L. 812 - 1st & 2nd P.D.P.
																	Jan 2		Chas. 61				34	10							100	10					CK mailed 4/1/19
									100	10													34	10			66				100	10	[illegible]				P.D.P. Paid

W.S.G. PAID IN FULL

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M 13002

Date of Assignment Nov 1-16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 911980

Rank Pte Promoted Reverted Discharge

Soldier's Name R. H. Manzer,

Battalion 196th Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Eva Manzer

Address Silverdale, B.C.

Change of Address

1

2

3

4

19 Date 17		Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31		—		280	280	
Jan 1918	L	65215		20	20	✓
Feb	P	76575		20	20	
Mar	O	91000		20	20	
April	L	9301		20	20	✓
May	P	17832		20	20	✓
June	L	22149		20	20	✓
July	J	30383		20	20	✓
Aug	N	40277		20	20	✓
Sept	S	43861		20	20	✓
Oct	V	54643		20	20	✓
				480	480	

11808 R4

REMARKS

A/c ~~Closed~~ open closed 31 10/18 discharged 1 11/18.

Ret'd per Sland Stephen Castle

Date 10/10/18 F. X. 12/10/18

Clerk

PM 25 Ma 590

Mo 2

Vol. H

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

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.—6-17—1772-39-1141
L. L. 22320—M. & D. 1493.