TRIPLICATE

ATTESTATION PAPER.

No. 696357

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	McLean
1a. What are your Christian names?	Robert James
1b. What is your present address?	Chinook
2. In what Town, Township or Parish, and in what Country were you born?	Lucien Ont
3. What is the name of your next-of kin?	Mrs James McLean
4. What is the address of your next-of-kin?	Fishing Bank Alberta
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	May 24 - 1886
6. What is your Trade or Calling?	Farmer
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 James McLean, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

R. J. McLean (Signature of Recruit)

Date Feb 9. 1916 Capt C W Rideout (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert James McLean, 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.

R. J. McLean (Signature of Recruit)

Date Feb 9 1916 Capt C W Rideout (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 Chinook this 9th day of Feb 1916.

(Signature of Justice)

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

Description of Robert James McLean on Enlistment.

Apparent Age 29 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement.
- Girth when fully expanded 39 ins.
- Range of expansion 3½ ins.

Complexion Ruddy.

Eyes Brown.

Hair Brown.

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).

1 Vaccination marks left arm.

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 16th February 1916. J. S. MacLean

Place Medicine Hat J. Rivers

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 James McLean 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.

Nelson Spencer (Signature of Officer)

Date 16th February 1916.

Lt. Col.
Comdg. 175th, O.Bn. C.E.F.

REGIMENTAL DOCUMENTS

NAME Pte McLEAN ROBERT JAMES REGT. No. 696351 UNIT 48th Bn H. Q. FILE NO.

S

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	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)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Mental.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)				26568 4	
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)					
6	Misc:					6-10
1	A.F.B. 1237					20-10
1	A.F.B. 151					17-10
1	R.U.9					4
1	Receipt					
1	Envelope					
1	R132					
1	Receipt					

Deceased 22/5/18

H

W. 2589
400M 11-18
1772-39-1377

(649-M-30327)

SURNAME. McLean

CHRISTIAN NAMES Robert James.

REGL. No. 696351 RANK Pte

UNIT ~~175th~~ 13 D.A.

FORMER CORPS Nil

12-0 CARD No.

S.O.S. Demob
14-4-19 ROLL 100. 107
17-4-19.
13 D.A.
Bn

Do not notify NEXT OF KIN.

NAMES IN FULL McLean, Mrs James

RELATIONSHIP TO SOLDIER Mother

ADDRESS Ferrybank. Alta.

Notify Neil McLean Chinook Alta.
(Canrecords 15-3-18)

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Simcoe. Ont. DATE May 24th 1886.

PLACE OF ATTESTATION Chinook Alta. DATE Feb 9th 1916.

P/S 4-3-16

R/c 10/4/19 - 300 Cpl.
61

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

Sailed from Halifax S.S. "Saxonia" 3-10-16

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Farmer. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 29 YEARS 9 MONTHS

HEIGHT 5 FEET 8 INCHES

CHEST MEASUREMENT 39 INCHES EXPANSION 3½ INCHES

COMPLEXION Medium EYES Brown HAIR Brown

DISTINGUISHING MARKS 1 Vac., mark on left arm

MEDICAL EXAMINATION. PLACE Medicine Hat. Alta. DATE Feb 16th 1916

Present Address Chinook. Alta

No. 696351 RANK Pte NAME McLean K. J

T.O.S. 9-2-16
A.C. 200 of 17-2-16 UNIT 175th Battalion C. E. F.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb 9	1916 Feb 29	K		
Mar		K		
Apr		"		
May		"		
June		"		
July		"		
Aug		"		
Sept		"		
Oct		N.		

UNIT SAILED
OCT 3 1916

Number 696357 Rank Pte B

Surname McLEAN

Christian Name Robert James V

Units Can. M. G. Bde Theatre of War France

Date of Service 16-6-17

Remarks

Latest Address Medicine Hat

Alta

Roll No. "B" Page 695-5

Form R. 149. ROBERT JAMES

Name McLEAN Rank ~~Pte~~ A/Cpl Plte. Reg. No. 696351

Unit ~~10th MG Coy~~ 4th Bn CMGC

Next of Kin CANADA

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27	2	4 C.F.A.	SCABIES		A/156		14613
7	3	~~Discharged Duty~~	-do-		A/162		14950
28	9	22 Gr Camps	SW Mead		A336		45023-7
30	9	6 C.D. Staples	"		A337		45310-13
		Correct Rank to Read as above			A357		
25	10	7 C.G.H. Staples	Rtd		A357		51744
		Correct rank appn on A336 to read Plte					
~~24~~	~~10~~	~~Adm~~	5-10		A358		
1	11	~~Duty~~ 6 C.D. Staples	"		A366		53896
12	11	Dis 3 Emp 13 Dep	"		A375		56576

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

NAME Mc. Lean Robert James

REGT'L No 696351

H. Q. FILE No. 649-

RANK AND CORPS Pte. A.S.C. (H.T.) Can. Mach. Gun. Depot

FOLLOWS Agot

CABLE as per #G-353-3 Can. NATURE OF CASUALTY D.W. Sig. Co. Form 175 FOLLOWS

No.	DATE	
		Next of kin notify Mrs James Mc Lean (Mother) Derrybank Alta.
		But also notify: Wife Mrs Lean. L R.M.S. Chinook. Alta.
18-H		
60H	7-10-18	Adm. 2 2 Gen. H. Carriers, Sept. 28.
H.A. 336 (3)	5-10-18	1918. Lyse Head

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
95	King George Stamford St.		
96	" London S.E.	20-3-17	Influenza I.
98	Can. Conv. Bromley Kent	4-4-17	" "
103		7-4-17	
a 198	Rep. from Base	4th Amb. 11-7-17	" not stated
a 209	Rep. from Base	22-7-17	" " Rel. to Duty.
C 8.	Can Conv Bromley	3-4-17.	II (Influenza) (Influenza)
C 8.	" Discharged	7-4-17.	" as per List a 216
a 156-1	No 4 Can. Fld Amb.	27-2-18	Scabies
a 162-1	Discharged	7-3-18	" "
A 337-1	6 Conv. Depot Etaples	30-9-18.	Gun Head (Hy. G.)
A 357-2	7. Can. Gen. Etaples	25-10-18	P.U.O.
A 366-4	#6. Convs. Dep! "	[redacted]-11-18.	" " "
A 375-	3. Discharged	12-11-18.	" " "

FORM R. 149.
7106—250m—7/2/17.

Name Robert James McLean Rank Reg. No. 696351

Unit Can. Machine Gun Depot

Next of Kin Canada.

Date 1917.		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
20-	3	King G. Hosp. Stamford St. SE		Influenza	95			
3-	4	Can. Conv. Hosp. Bromley, Kent.						
		Hosp. Lett. 5/8.9.17		do.	C.F.			
7-	4	Discharged: —						
		Hosp. Letter 5/8.9.17		do.	C.F.			

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

FORM R. 149.
7106—250m—7/2/17.

Robert James.

Name McLean Rank Pte. Reg. No. 696351.

Unit Can. Machine Gun Depot.

Next of Kin Canada.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-4	Can. Conv. Hosp.	Bromley	Influenza	98		
7-4	Discharged	"	"	103		

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

FORM R. 149.
7106—250m—7/2/17.

Robert James

Name McLean Rank Pte. Reg. No. 696351

Unit 4th C. M. G. Corps. (10)

Next of Kin Canada

1917 Date	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
11-7	Rep. fm. Base to F. A.		Not Stated	A198			
22-7.	To Duty.		do.	A209.			
	Now reported to be ~~Trench~~ Influenza			A216			

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

BACTERIOLOGICAL DEPARTMENT.

Index No. 4951

Surname Pte MacLean Christian Name

Regt. or Corps Regl. No. Ward A4

Physician or Surgeon

Provisional Diagnosis

Nature of Specimen and Examination required Wassermann reaction.

Signed *Date*

REPORT :—

Wassermann reaction negative.

Signed *Date* 26/3/17.

A.&E.W.—75468.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
McLean	R.J.	696351.

Rank	Unit	Co.	Troop	Batty.
~~Pte~~ A/Cpl Pte	Can. M.G. Depot.	4 Bn MGC.		

Hospital — Date of Admission

King George Stamford St. — 20-3-17

Transferred To — Hosp.

Bromley Comal. — 4-4-17

4 C.F. Amb. — 27.2.18

22 Gen Canning — 28.9.18

6 C.D Staples — 30.9.18

Diagnosis: Influenza. I

N.S.

Later Diagnosis (if changed)

(1) Influenza II

(2) Scabies. Rw.

(3)

Additional Diagnosis: if more than one state present

P.S.W. Head. Rw

L.W.O. a.f.

DISPOSITION — Date

Dis 7-4-17

Dis. 4-3-18

REMARKS

29-3-17 95

98

C.L. 18-4-17

5.5.17. 103. Dis 7.4.17.

27-7-17 A198 R.T. B. to Fld. Amb. 11.7.17

11.8.17 A209. R.T. B. Ret. to Duty 22.7.17.

21-8-17 A216 Information of Diagnosis.

13-9-17 68

Disch:- 12-11-18

6.3.18 A156(1)

13-3-18 A162

5.10.18 A336 3

7-10-18 A337

P.S.

A.M.D. 2 DEPT.

Boh. of D.G.M.S. O.M.F.C. London.

Rw

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	J Can Gen Etaples.	25.10.18
	6 C.D. Etaples	1-11-18
2.		
3.		
4.		
5.		
6.		
7.		

Ch 25-10-18 A358-3. Rob Reference A337 Correct Rank should read A/cpl.

30.10.18 A 357 ②

31-18-18 A 358-3 Ref A 336 Correct rank is Pte.

9-11-18 A 366 ④

20-11-18 A/375-3.

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 175th. O. Batt. C.E.F.

Regimental No. 646351 Rank Pte Name McLean, Robert James

Enlisted (a) 9/2/16 Terms of Service (a) Duration of War C. E. F. Service reckons from (a) 9/2/16

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) Nil

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	4/10/16.	
		Disembarked England	Liverpool	13/10/16.	
		Transferred to Canadian Machine Gun. Depot 16/11/16 Pt II 25 of Authys. N. 2. 14th C. G. B. 14/11/16.			
		W. H. Williams Capt. & Adgt. 175th, O. Bn. C.E.F.			
17/11/16	B.C. 175 Batt	Taken on Strength, C. M. G. Depot.	Crowborough	17/11/16	Auth: Depot Order [redacted] No. 171 Lieut., A/Adjutant C.M.G. Depot

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

[P.T.O.

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

TAKEN ON STRENGTH OF NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 107 DATED 30-3-19 AND

DISCHARGED FROM H. M. SERVICE BY NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 107 DATED 14-7-19

AUTH. RO - 1420.

G. H. Ross Lt. Lieut.-Col.

Officer Commanding No. 13 District Depot

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

To replace Original

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

Nothing to be written in this margin.

W1889—P2 1150 1M 5/18 G.W.P.Co.(3490)

(1) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname McLean. Christian Names Robert James		696351
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

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

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

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

Initials and Rank of an Officer.

(Authority) (*date*)

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

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

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin Mrs James McLean. Berry Bank. Alberta

(18) Demobilizer (*f*) (Place)

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

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

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

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

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Arrived in England. S.S. Savonia	13-10-16		
16-11-16	D.C. 175th Bde.	Pt. II. O. # 254	S.O.S. on trans to M.G. Dep.			
		d/16-11-16	Crowborough.	Seaford.		
16-11-16	D.C. M.G.D.	Pt. II. O. # 141 d/17-11-16	J.O.S. fr. 175th Bde	Crowborough.		
20-3-17	"	C.L. 95 d/29-3-17	King George Hosp.	London		Influenza.
4-4-17	"	C.L. 98 d/8-4-17	To Kdie. Con. Hosp.	Bromley		"
7-4-17	"	Pt. II. O. 99 d/9-4-17	Disch. fr. Hosp	Crowborough.		
11-5-17	"	Pt. II. O. # 132 d/12-5-17	S.O.S. to M.G. Pool.	"		
		Pt. II. O. # 142 M.G. Pool d/27-5-17				
16-6-17	M.G. Pool	Pt. II. O. # 51 d/21-6-17 4th Div. M.G.C. do # 74 d/21-6-17	Posted to 10th M.G.C.	Camiers		
11-7-17	4th Div. M.G.C.	C.L.A. 198 d/27-7-17	Rep.td from Base to Mtd Amb	Field		
22-7-17	"	C.L.A. 209 d/11-8-17	Returned to duty	"		Influenza
9-2-18	"	Pt. II. O. # 23 d/26-2-18	Awarded 1 G.C. Badge	"		
1-3-18	"	Pt. II. O. # 27 d/15-3-18	Trans. M.G. Corps.	"		
			On Strength 4th Bde M.G.C. 19-3-18			
28-9-18	4th Bde C.M.G.C.	C.L.A. 336 d/5-10-18	Wounded.	"		
23-8-18	"	Pt. II. O. # 117 d/11-10-18	App.td A/Cpl. (Paid)	"		
27-9-18	"	Pt. II. O. # 118 d/12-10-18	Relieg. Act. rank of Cpl.	"		
	"	Pt. II. O. # 137 d/28-11-18	Pt. II. O. # 118 is hereby cancelled	"		
23-8-18	"	Pt. II. O. # 137 d/28-11-18	Confirmed in Rk. of Cpl.	"		
2-2-19	"	Pt. II. O. # 15 d/14-2-19	S.O.S. to C.M.G.C.D.	"		

Nothing to be written in this margin.

LIEUT.
FOR LT.-COL. I/C RECORDS, C.O.M.F.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

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

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

(1) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname — Mc Lean R. Jr		696351
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

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

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

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

Initials and Rank of an Officer.

(Authority) (*date*)

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

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

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place)

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

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

(Signature of Posting Officer

(22) Extended

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(24) Miscellaneous entries:—

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

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
3.3.19	6 m g D.	D 052	T.O.S. from 6 m g b d	Seaford	20.2.19	
27-3-19	C M G D		S. O.S. to M.D. No.13 Rhyl	Sea ford	16/3/19	D.O. Pt.11 No. 73

Lieut
A/Adjutant, Canadian Machine Gun Depot.

T.O.S. C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 40. S.O.S.
C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No. 44

Commanding 13 Wing,
Kinmel Park Camp.

A.C. MacKenna
.....LIEUT.
O. I/c RECORDS, M.D. 13.

Embarked S.S. Saturnia
Glasgow March 30'19

ORDERLY ROOM
MAR 30 1919
No. 13 P.C.S.

Nothing to be written in this margin.

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. 696351 Rank A/Sgt. Surname McLEAN
(Given name in full) ROBERT J.

Unit or Corps C.M.G.D. Birthplace SIMCOE ONT.

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

1. GENERAL DESCRIPTION:

Physique good Weight 170 lbs. Height 5 ft. 8 3/4 in. Colour of Eyes brown

Nutrition good

Pulse 76

Condition of arteries good

Vision Rt. 20-20 Left 20-20

Hearing (conversational voice) Rt. 20 ft.

Left. 20 ft.

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

scars 3. leg L
operation varicose vein

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. Yes

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.

Varicose vein left leg. operation 1916
good result
December 1916 and Nov. 1918 slight touch
of influenza.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Seaford (Overseas)

Date 21-3-19 Signed A. Stramuchy Capt. 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 R. J. McLean

(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 Medical Board.)

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

[OVER]

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

CANADIAN EXPEDITIONARY FORCE

MEDICINE HAT

WAR SERVICE BADGE

Class "A" No. 70711 APR 1 4 1919

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 696351. (Rank) Corporal

Name (in full) McLean Robert James enlisted in

the 175th Battalion

CANADIAN EXPEDITIONARY FORCE at Medicine Hat on the 9th

day of February 1916.

HE served in 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 32 yrs.

Height 5' 8"

Complexion Medium

Eyes Brown

Hair Brown

Marks or Scars

Robert James McLean
Signature of Soldier

W. Lawrence
Issuing Officer

Date of Discharge

APR 14 1919
Military District No. 13

Major
Rank

APR 14 1919

Date March 28th 1919

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

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

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

ORIGINAL

A4

MEDICAL HISTORY SHEET.

Surname McLean Christian Name Robert James

Examined { on 16th day of February 1916 / at Medicine Hat

Birthplace { City or Town Simcoe / County Ontario

Apparent age 29 years 9 months

Trade or occupation Farmer

Height 5 Feet 8 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 35 1/2 inches. / Maximum expansion 3 1/2 inches.

Physical development good.

Small-Pox Marks 9

Vaccination Marks { Arm Right. Left. 1 / Number 1

When Vaccinated last infancy.

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by

J Maellard

Rank Lieut and M.O.

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

Date.	Result.	Vaccinations.
1-11-16	Ok	E K Wade M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
7-11-16		J Maellard M.O.
20-10-16		E K Wade M.O.
28-10-16		E K Wade M.O.

Enlisted on 9th day of February 1916 at Chinook

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	175th O. Batt	646351		February 9th 1916
Transferred to	Can. Mach. Gun Depot, Crowborough			November 16th 1916.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname McLean Christian Name A. G.

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.
Hosp Bareacamp	21	9	16	26	9	16	Varicose Veins	6	Improved -		A. Gilbert
	19.	3.	17.	3	4	17	Influenza	16	Fever, pains & Cough. Improved. Now convalescent. To Bramley C. Hospl		W. Roberts Surgeon Major
CANADIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.	2	4	17	7	4	17	Do	5	Fit for General Service within Canada. Not for overseas Class ~~D~~ A 2		J. T. Hill Capt R.A.M.C.

THE KING GEORGE HOSPITAL
No.
Date
STAMFORD ST, LONDON, S.E.

DUPLICATE.

MEDICAL HISTORY SHEET.

Surname Mc Lean Christian Name Robert James

Examined { on 16th day of February 1916 / at Medicine Hat

Approved by J Smaller

Rank Lieutenant M.O.

Birthplace { City or Town Simcoe / County Ontario

Apparent age 29 years 9 months

Trade or occupation Farmer

Height 5 Feet 8 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 35½ inches. / Maximum expansion 3½ inches.

Physical development good.

Small-Pox Marks —

Vaccination Marks { Arm Right. Left. / Number 1 1

When Vaccinated last Infancy

(a) Marks indicating congenital peculiarities or previous disease —

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

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

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
4.H.16		J Smaller M.O.
		M.O.
		M.O.

Enlisted on 9th day of February 1916 at Chinook

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	175th Batt	646351		February 9th 1916.
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname [illegible] Christian Name [illegible]

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.
Larissa Camp	Hosp.	21	9	16	26	9	16	Varicose Veins	6	Surgeons -	[illegible]
R.F.B. to Fld. Amb.		11	7	17	22	7	17	N.S.		R.F.B.	A198-A209. ID.

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) MC LEAN R.J.

REGIMENT C.M.G.D. RANK SGT No. 696351

Date of Examination in England 20 FEB 1919 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
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? NO

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 YES

Signature of Dental Officer H B Beaton Capt

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

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 175th C. Batt.

(2) Regimental Number 696351

(3) Full Name of Soldier Robert James McLean

(4) Place of Birth Cold Water, Ontario

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

(6) If married, state,
(a) Full name of your wife No.

(b) Present Postal Address Chinook Alberta

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—5-16.
1713-39-964.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address James McLean, Derrybank, Alberta

(10) Is your Mother alive? Yes

If so, state name and address James McLean, Derrybank, Alberta

(11) If your Mother is a widow No

Are you her sole support, or not? No

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

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

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

(15) Are you insured? No

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

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

Nelson Spencer

Officer Commanding.

Date 10th October 1914

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs. Jas. McLean (Assignee)

Name of Soldier Mc Lean P Pte

PAYMENTS. 696351 — Pte — 175th Bn

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.		Remarks.
					16 00 Jan 1/17
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.		S 44348	32		
March		B5/1674	16		16-L.
April		X 3282	16		16-B.
May		W 12942 X 9664	16		16 R X 9664 Can 7/5/17 W&B
June		W 18463	16		
July		X 22755	16		
Aug.		K. 30469	16		
Sept.		376x8	16		
Oct.		P 43232	16		
Nov.		J 50306	16		
Dec.		Z 58846	16	192	
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.				

L-L. Job 5470 M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

To Whom Mrs. Jas. McLean (Mother)

Address Berrybank Alta

By Whom Assigned McLean R. J

Regtl. No. 696351

Rank Pte.

Corps 175th. Battn.

Rate 16.00 Jan. 1/17

2 m. 11 12/16 - $46 62/17

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 4 ACCOUNT

P. 559

MARRIED OR SINGLE S.

PLACE OF BIRTH Simcoe, Ont.

NAME AND ADDRESS OF NEXT OF KIN Mrs James Mc Lean
Ferry Bank. Alberta.

RELATIONSHIP OF NEXT OF KIN Mother.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 696351 RANK Pte NAME Mc Lean Robert Jas.

IF IN PERMT. CORPS } WHAT UNIT UNIT 175th Bn. TRANSFERRED TO 6 Mr. G Depot DATE 1/1/17 AUTHORITY B0254. 16/1/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 10th Bde DATE 11-8-17 AUTHORITY A Roll.

PLACE OF ATTESTATION Chinook, Alberta 4K TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 9/2/16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 16.00 DATE EFFECTIVE 1-1-17. A.2. M. form. Jan 2. 17.

PAYABLE TO Mrs Jas Mc Lean. Ferrybank Alta. 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)

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	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
			57	10											57 10															57 10				Bal from Can.
Oct 1/31	31	1.00	31	-	31	10	3	10							34 10	3	29/10						38 93						38 93	52 27				
Nov	30	.	30	.	30	.	3	.							33 .														. .	85 27				
Dec 1917	31	-	31	9 20	31		3	10							34 10	42	7/11						29 20					2 26	31 46	87 91		45 50		2 26 Issue on Repayment Q4005-22/11 Trans 6 Mr G Depot. E 1/1/17. B0254. 16/1/16
Jan.	31	1.00/10	34	10											34 10												16 -		16 -	106 01				
Feby	28		30	80											30 80	125	45 1/4	49	1322	31 1/4	7		48 67	7 30			16		71 97	64 84	Advt	45.00 21/3/17		
Mch	31		34	10											34 10												16	1 49	17 49	81 45				Q4005/968 13 3/4 $1.49
apr	30		33												33 .												16		16 .	98 45				
May	31		34	10											34 10	44	15/11	141	39/11				9 7/11	7 30			16		33 04	99 51				
June	30		33	.											33 .	336	15/5						9 73				16	32	26 05	106 46				Q4005/1035 28 7/11.
July	31		34	10											34 10												16		16 28	124 28		45.		Issued to 10th Bde 11-8-17
Aug	1-10		11	00											391 50								136 27	14 60		28	112	4 07	267 22	16 00	119 28				
"	11/31		23	10											23 10	96	4/7						2 68				16		2 68	139 70				10th M. G. R. from C.M.G.S. 11.8.17
Sept	30		33	00											33 00	132	1-8						268											
																125	15-7						535				16		22 03	148 67				

696351 Pte McLean Robert Jas. Casualty 1600 6/11/17 To Mrs Jas McLean Stettybank Alta. Can.

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT $	NO. OF DAYS	RATE	AMOUNT $	NO. OF DAYS	RATE	AMOUNT $				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			
MONTH	PARTICULARS			CR.1	CR.2	PARTICULARS				DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED	SEP. ALLCE. ENS.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS		DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED	SEP. ALLCE. PAY. ENS.			
Jly				~~44 67~~										148 67																		
Oct.														16																		
"	9 Pay			34 10		159 3/9/17 10th m G Co					5 35																						
						1521 15/6/17 1 Can Hosp					1 78																						
				34 10							7 13			16	159 64																	
Nov.	A Pay			33 00		Can Ass - Pay								16																		
Dec	A Pay			34 10		1087 Can Hosp Etpo 25/7/17					4 46																						
						191 10th m E Co 1/9/17					4 46																						
						210 10th m Co 15/9/17					3 57																						
						AR 1360 1 Can Hosp 7/6/17					5 36																						
						174 10th m Co 15/9/17					2 67																						
						228 10th m Co 5/11/17					4 46																						
						Can Ass - Pay. Dec.								16	169 76																		
19 Jan	A P.			67 10							24 98			32																		
				34 10		Can Ass P.								16																		
						348 10th m G Co 25/1/17					12 49																						
						266 10th m G Co 4/12/17					4 46																						
						35 4th C Dm E.B. 15/12/17					3 57																						
				34 10							20 52			16	167 34																	
Feby.	P P			30 80		Can Ass P								16																		
						76 4 Dm E.A. 1/1/18					4 46																						
						134 do 20/1/18					3 57																						
						196 do 24/1/18					3 57																						
						RCD 2520 do 24/1/18					73 00																						
				30 80							84 60			16	97 54																	
Mar	PP			34 10		& A P								16																		
						AR 395, 4th E/B				13/3/18	3 57																						
						" 340 "				15/3/18	4 46																						
				34 10							8 03			16	107 61																	

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/1/17	EFFECTIVE DATE:-
AMOUNT:- 16 ~~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. Jas McLean (Mother)
Ferrybank, Alta

Stopped Eff 1/3/19.

3539

NAME:- McLEAN Robert Jas. K

NUMBER:- 696351

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte
4 Div Sig Bn, DO 117, 11/4/18	23-8-18	a/Cpl
" " 118 12/4/18	27-9-18	Pte Cancelled DO 137, 25/11
" " 137, 25/11	23-8-18	Cpl
D.O.7, C.4.B.D. 25/2/19	17-12-18	UNIT AND TRANSFERS a/Sgt. (paid)

ORIGINAL UNIT:- 175th Bn.

DATE ACCOUNT FIRST OPENED:- 1-10-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			4 Div Sig Bn

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
14/3/19	4411	Kinmel Park	~~28 93~~				
17/3/19		London	~~4 87~~				
20/3/19	7743	CNR G.D	~~9 73~~				
			53 53				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 ~~10~~ 10	10		
	1 35	15		
				L S Bal Cr 25-54

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred To Canada 29/7/19 - NR 3539 - Seaford 24/7/19 - m/d 13.2.PC " 4Dr 27-99

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Fwd								104 61		
Apr	P.P.	33 -		6 A P				16			
				AR 18, 4 Div Sig Bn 9/4/18	4 46						
				" 145 " 25/4/18	3 57				116 58		
May	"	33			8 03			16			
		34 10		C A P.				16 -	150 68		
				" 210 " 10/5/18	4 46				28 49		
				" 269 " 14/5/18	3 57						
				368 " 30/5/18	4 46				122 19		
		34 10			12 49			16			
June	"	33		C A Pay				16			
				469 " 18/6	3 57				135 62		
		33			3 57			16			
July	"	34 10		C A Pay				16	169 72		
				565 " 3/7	4 46				41 87		
				681 " 16/7	3 57				127 86		
				731 " 29/7	8 92						
				752 "	8 92				127 85		
		34 10			25 87			16	161 95		
Aug	P Pay	34 10		C A P.				16	19 57		
				535 CCHQ 9/8/18	3 57						
		34 10			3 57			16	142 38		
Sep	P Pay	33		C A P.				16	7 538		
				926 4 CMWC 9/9/18	3 57				23 17		
				1090 — 15/9/18.	3 57						
		33			7 14			16	15 22 4		
	P Pay	34 10		C A P				16			
	Offrs Pay 23/8/18 - 17/9/18 = 35 dys @ 10d	350		Dm/AR 18169. OSB 5/10/18	1 87				171 97		
		37 60		" 18960 " 12/10/18	1 87				170 10		
					3 74			16			

COMPILED BY A Greenman

CHECKED BY

NUMBER 696351 RANK NAME McLEAN R. J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									170 10		
Nov	P T	33 -		C & P				16			
	Cpl's Pay 28/9/18 - 30/11/18 = 64 dys @ 10/-	6 4 0		2990 G B D 10/11/18	7 4 6						
				3496 " 17/11/18	13 9 9						
				3496 " 17/11/18	5 6 0						
				Dn/AR 19644, O.S.B 19/10/18	1 8 7						
				5007, G B D 30/11/18	4 6 6						
Dec	C P	37 2 0		C & P				16			
				6037 Inf Base Depot 14/12	4 6 6						
Jan	"	37 2 0		C & P				16	197 6 6	Agreed	
		113 8 0			38 2 4			48			
Feb	"	33 6 0		AR 9374 C & G B D 24/12	5 6 0						
	Diff in Pay Cpl. to Sgt: 17/2/18 - 28/2/19 =			AR 131 " 3/1/19	5 6 0						
	74 dys @ 30/-	22 2 0		" 1708 " 10/1/19	7 4 0						
	(carried) H.Q.T, C & B.D 28/2/19			" 2107 " 20/1/19	9 7 3						
				C & 4708 London 12/1/19	6 8 3						
				4286 G B D 28/1	5 6 0						
				C & P	189 12			16	25 5 2		
				D 249 Kinmel 11/2	38 9 3						
				C P 36340 London 17/2	4 8 7						
				7743 C & G D 24/2	9 7 3				5 7 9		
		55 8 0			243 2 5			16			
				3662 Kinmel 29/3 Endd	4 8 4						
					487				1066.		

S.O.S Canada 28/3/19 Sf 35 Cmgs.

Saturnia St John 10/4/19 Required 9

AUDITOR | PAYMASTER

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

M. OR S. S | REGT. No. 696337 | RANK Cpl | NAME (IN FULL) McLEAN R J (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID Mrs | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

Certified opening entries on this Ledger Sheet have been audited by [illegible]
Date 13.5.19

ORIGINAL UNIT C.E.F. 175 | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 16.00 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 1.6.00 | DATE EFFECTIVE 1.5.19.

PAYABLE TO Mrs Jas McLean | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Herrybank, Alta

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Medicine Hat | DATE 14/4/19 | REASON Demob | AUTHORITY PO 109 | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					Bal Brought Fwd
28/2/19		1.20																											33	86					
1/3/19 to 14/4/19	30	1.20	60	00	35	00			165	00							4	87	5	00	90	27			33	00					165	00					1 Mar to 14 Apr 19. Clothing Allowance Field District 10 Sig
			60	00	105	00			165	00							4	87	5	00	90	27			33	00			33	86	165	-				
					16 p.g.						Certified opening entries are correct 13-5-19.																WAR SERVICE GRATUITY										
																											16 p.g.						Debit		Soldier	
			420	✓					420	✓																	Balance								344	✓	Pay 21 Jan 20 to 28 Feb 20 A. 13/4/19 to 13/4/19
																											70 00	✓									
																											6 00	✓									
																																	76	-		
																											64	✓	✓				64	-	280	✓	610062 ✓ MAY 1 4 1919
																											70	✓					70	-	210	✓	873694 ✓ JUN 12 1919
																											70	✓	✓				70	-	140	✓	859444 ✓ JUL 14 1919
																											70	✓					70	-	70	✓	973694 < AUG 14 1919
																											70	✓					70	-		✓	#1102926 < Sept 14/19
			420	-					420	-																	344	-			76	00			420	-	All Payments Due on This Account have been completed.
																																					Arkell Lt Paymaster War Service Gratuity M.D. No 16
			32	70					32	70																	32	70							32	70			16 32.70 Diff — notes Authy AF 2124/18
																											32	70					32	70	-		1418 70 119 < 2.1.20
			32	70					32	70																	32	70					32	70	0		641

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

8 L 12 Mc 7

5K

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

8727

Date of Assignment

Jan 1/17.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

16.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 696351

Rank Pte. Promoted Reverted Discharge

Soldier's Name R. J. McLean

Battalion 175th. Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

(Mother)

Name Mrs. Jas. McLean

Address Edrybank Alta.

Change of Address

1

2

3

4

L 12478-R-66.

Date 1914	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31	—		192	192	
Jan 18	G 61733		16	16	F
Feb	A 71254		16	16	
Mar	M. 92979		16	16	
Apr	F. 1541		16	16	
May	B. 13779		16	16	
June	J. 26066		16	16	
July	L. 32828		16	16	
Aug	N. 36154		16	16	
Sept	Q 48613		16	16	
Oct	J 55892		16	16	✓
Nov	P. 61369		16	16	✓
Dec	Y 60525 ✓		16	16	✓
Jan.	V 70206		16.	16.	✓
Feb.	2. 81875.		16.	16.	✓
mar.	K. 84397.		16.	16.	✓
apr.	N. 880.		16.	16.	✓
			448.	448	

A/c Closed 20-4-19.

M.O. # 13 Ret'd per Saturnia

Date 10-4-19. F.X. 16-4-19.

Clerk Christian

M.R.O. Dest 87909. - 16-4-19.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7393.

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. 7993.

R—122
8,401—50,000—21-10-16.

CHS Rank Name MC LEAN Robert James / Reg'l No. 696351 /

Unit 175th. Bn. If in perm. Corps, What Unit? Married or Single Single /

Place and Date of Enlistment Chinook. Feb.9th.1916./ Place of Birth Simcoe. Ont./

Name and Address, Next-of-Kin Mrs. James. Mc Lean /

Ferry Bank. Alberta./ Relationship M other/

Assigned Pay Monthly $ Payable to Also notify :- Mr. Neil. McLean. Relationship Chinook. Alberta. Can. MD 13

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 6292 File R.L. Category OR. CAN

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 "S.S. SAXONIA 13-10-16			
16.11.16	O.C. 175th Bn.	S.of S. on Transfer to M.G. Depot Crowborough.	Seaford.	16.11.16.	A.F.B. 103 CHECKED 18 JUN 1917
17-11-16	2/c Cmd'g	T.O.S. from 175 Bn	Edburgh	16-11-16	
29.3.17	"	King Geo Hospital	London	20.3.17	Influenza.
18.4.17	"	To Can Conv Hosp	Bromley	4.4.17	
9.4.17	"	Discd from Hosp.	Cliboro	7.4.17	
12.5.17	"	SOS to M G Depot	"	11.5.17	
21.6.17	M.G. Depot	Posted to 10th Bde	Camiers	16.6.17	
27.7.17	4th Div M.G. Coy.	Rejd from Base to Field Amby	Field	11.7.17	Influenza
11.8.17	"	Returned to Duty	"	22.7.17	

Report. Date.	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.
	4th Div.				
26-2-18.	M.G.Corps(10)	Awarded 1 Good Conduct Badge.	Pte. Field.	9-2-18.	P.R.II D.O.#23.
15-3-18	do	Trfd to M.G. Corps On Strength 4th Bn. C M G Corps 19-3-1918	✓ ✓	1-3-18	to 27.
5-10-18	4th Bn M.G.Corps.	Wounded	" Field	29-5-18	to L.A 336.
11-10-18	4th Bn. CMGC.	appt'd. A/Cpl. (paid)	Pte Field	23-8-18	C.R.D.O.#117.
12-10-18	4th Bn. CMGC	Relinq. Act. Rank of Cpl.	A/Cpl Field	27-9-18	P.R.D.O.#118.
28-11-18	4th Bn M.G.Coy	pto 118 is hereby cancelled	A/Cpl Field		pto 137
28-11-18	4th Bn M.G.Coy	Confirmed in rank of Cpl	A/Cpl Field	23-8-18	pto 137
14-2-19	4th Bn. CMGC.	S.O.S. to CMGCD. v O.C. to Khyl	Cpl. Field.	2-2-19	P.R. D.O.#15. v C.M.G.C.D. 60 d/1-3-19 a/Sgt
1-3-19	M.G.C.D.	Ceases O/C v S.O.S. to C.M.G.D.	A/Sgt Seaford	19-2-19	" 60 v C.M.G.D. #52 d/3-3-19
4-3-19	4 M.G. Bn	Pt II No. 15 d/14-2-19 is cancelled	— —	—	-21
4-3-19	4 M.G. Bn	S.O.S. to C.G.B.D.	A/Sgt Field	16-12-18	v 21 of C.G.D. P.R.D.O.#7 of 28-2-19.
05-2-19	G.B.D.	appointed a/sgt ~~S.L.35-d-60 of 15~~ 30.3.19	Cpl Field	17-12-18	D.O.4.
19.3.19	G.B.D.	S.O.S. on being struck off Nominal Roll for demob and posted to C.M.G.C. Depot, Seaford	A/Sgt Field	2.2.19	D.O.8.
27-3-19	13 M.G. Co.	S.O.S. to C.M.G.C.	Cpl. K. Park.	26-3-19	-73 v C.M.G.D. 73 d/27-3-19
31-3-19	✓	SOS, to Canada	✓ ✓	29-3-19	-76
1-4-19	C.M.G.D	Pt II O.#60 amended to read	Cpl. Seaford		-91
1-4-19	C.M.G.D	Pt II O #52	✓ ✓		-77

Forms
I. 1237
11

CAN. CON. HOSPITAL
BROMLEY. KENT.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Can H 219	696351.	Pte.	Mc Lean.	R. C.
Year 1917	Unit. Canadian Machine Guns.		Age. 30	Service.

Station and Date.

25/3/1917
K.G.H.

Disease Influenza.

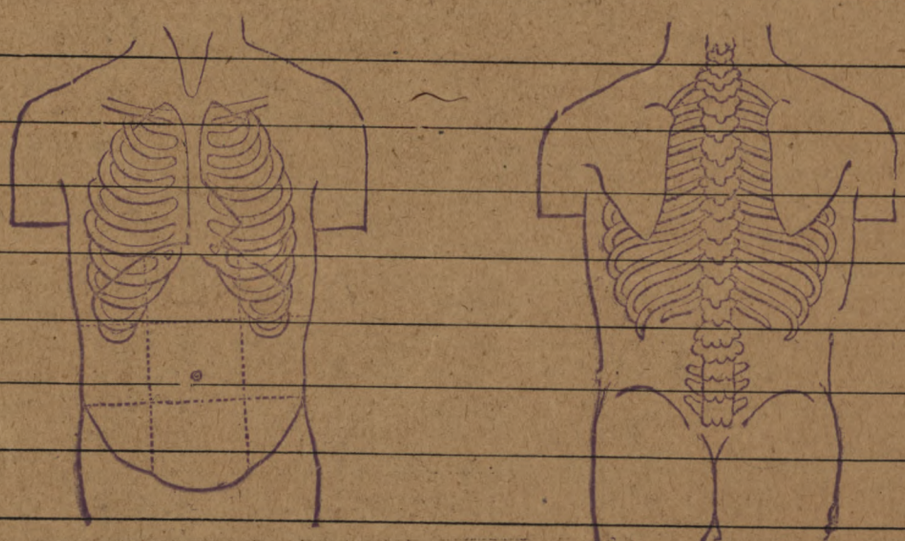
History

In training at Cowborough, Sussex.
Reported sick 19 march 1917 whilst on
furlough in London.
"Pains all over." No cough.
Felt generally seedy & unable to carry on.
Headache severe.

C.O.T.

Pyrexia.
Headache.
General pains "all over"
Heart - sounds & position normal.
Lungs - no adventitious sounds.
Urine. No Albumen. No Sugar.

Hubert Wilson.



See Over.

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

(23205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	
22/3/1917	Septic furuncle on front of abdomen. Atypical erythematous spots here there on chest and abdomen. ? "watch for measles." Mist Aspirin 3 fs. 4 hourly.
24/3/1917	Temp has gradually fallen every day since admission and today is normal. Heaon feels very much better. The rash on chest & abdomen has entirely disappeared.
28/3/1917	Convalescent. Good health. Recommended for furlough and discharge.
3.4.17	To Bromley Comal Hospital.

Lieut. Col. I. M. S.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181

Corps Can: Machine Gun. Military Hospital H. G. H.

No. 696351. Rank and Name Pte. McLean. Age 30. Service

Disease Date of admission March. 19th/17. Date of discharge Result

Dates of Observation: March

Days of Disease: 19 20 21 22 23 24 25 26 27 28 29 30 31

Temperature Fahrenheit

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

On Admission.

Pulse per Minute: 96 96 66 72 96 76 64 76 80 60 72 56 64 64

Respirations per Minute: 24 24 24 24 24 24

Motions per 24 hours: 1 1

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

Signature In charge of case.

War Service Badge
Class "A" No. 7877

30-5-31

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 696351

2 Rank. CPL

3. Name. McLEAN. ROBERT JAMES.

4. Unit. CMGD. 4th BN. 175th

5 Date of Discharge | Place

6 Reason for Discharge Demobilization

7. Authority. A.O. 1420 A.O.C. #107

8. Proposed Residence after Discharge Medicine Hat.

Inspected & Returned Saskatoon March 30/19

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.? 39.

R. J. McLean Sgt 696351
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place MEDICINE HAT

Date APR 14 1919

Signature W. Pearce Major
(O. C. Discharging Unit.)

Discharged 22/4/19

M.F.B. 218a—300M.-11-18—1772-39-113.

LL 1-12-13

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

1. Triplicate Attestation Paper (M F.W. 23), or Particulars of Recruit (M,F.W. 133).
2. Casualty Form (A,F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C,A,D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A,B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A
Checked by No. 28
BHS.
Date 29.3.19.