ATTESTATION PAPER.

No. A-10,929

Folio. R. 6

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Ritchie — Rae George
2. In what Town, Township or Parish, and in what Country were you born? — Vancouver B.C.
3. What is the name of your next-of-kin? — George C. Ritchie (father)
4. What is the address of your next-of-kin? — P.O. Box 105 Kelowna B.C.
5. What is the date of your birth? — March 15. 1894
6. What is your Trade or Calling? — Student
7. Are you married? — no
8. Are you willing to be vaccinated or re-vaccinated? — yes
9. Do you now belong to the Active Militia? — Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. — McGill C.O.T.C
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

R. G. Ritchie (Signature of Man).

W. Edmonton (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, R. G. Ritchie, do solemnly declare that the above answers made by me to the above questions 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. G. Ritchie (Signature of Recruit)

Date Mar 11 1915 W. Edmonton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, R. G. Ritchie, 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. G. Ritchie (Signature of Recruit)

Date Mar 11 1915 W. Edmonton (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 Montreal this 11th day of March 1915

(Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Eugene Barclay (Approving Officer)

A Deliverance R.A.M.C.

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of R. G. Ritchie on Enlistment.

Apparent Age 21 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height	5 ft. 7·2 ins.
Chest measurement — Girth when fully expanded	36·2 ins.
Chest measurement — Range of expansion	3½ ins.
Complexion	Dark
Eyes	Dark Brown
Hair	Black
Religious denominations — Church of England	
Presbyterian	
Wesleyan	✓
Baptist or Congregationalist	
Other Protestants (Denomination to be stated.)	Methodist
Roman Catholic	
Jewish	

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date March 3 1915 .....

Place Montreal ..... F. V. Harvey .....
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.

..... R. G. Ritchie ..... 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.

..... Lyman Barclay ..... (Signature of Officer)

Date March 4th 1915 A. D. Keenan

16

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name, RITCHIE B.A.E. GEORGE

Regt, No, 410929 Rank, Pte

Corps, P.P.C.L.I.

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 1

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids..... 1

Medical History Sheet..... 3

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

Index Card.....

Casualty Card..... 1

Non-Effective Card.....

Part II Order Card..... 1

Change of Address Card.....

Honour & Award Card

13644

M.F.W. 62.
100m-2-17.
H.Q. 1772-39-935.

4

Canadian Convalescent Hospital, Woodcote Park, Epsom.

No. A/10929 Rank Pte. Name Ritchie P.G.

Corps P.P.C.L.I. Religion Presb. Age 22. Page, A. & D.

Disease or injury Measles.

When and where wounded

Admitted from Shetland Date 31.7.16. Discharged to C Coc PB Date 14.8.16

Hut No. Bed No.

Service 1/5/12. Service Field Force 17/12.

Transferred on to Results

EPITOME OF HOSPITAL TREATMENT.

2.8.16 Flat Feet

Rae, George

Name Ritchie, R, G. Rank Pte. Reg. No. A10929.

Unit P.P.C.L.I.

Next of Kin Canada.

Date 1916.	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
29-1.	No, 2 Field Ambulance.		Influenza.	a296		
9-5	No. 7. Gen'. Hosp'	St Omer	Measles	a352		
24-5	No. 14. Stny Hosp	Boulogne	do	a362		
2-7	Milty Hosp.	Chatham	do	B98.		
1-8-16.	Can. Con. Hosp.	Woodcote Pk Epsom	"	B117		
1st 8	Rejoined			B196.		

On staff of Disc' Dept.

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

(649-R-9393)

S.O.S. Disc 20/7/18.
D.D. 96 of 22/7/18.
D.W.

SURNAME. Ritchie,

CHRISTIAN NAMES Rae George

REGL. No. A10929 RANK Pte

UNIT 38th (1st R.V.) ~~B.C.R.~~ ~~C.D.~~ ~~C.M.R.~~ ~~D.~~ ~~I. Unit M.H.C.~~ Bn. #11DD.

FORMER CORPS Mc. Gill U.O.C.

NEXT OF KIN.

NAMES IN FULL Ritchie George E.

RELATIONSHIP TO SOLDIER - Father

ADDRESS P.O. Box 105 Kelowna, B.C.
Also Notify Capt. Barclay
Loc. 121.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Vancouver B.C. DATE

PLACE OF ATTESTATION Montreal, P.Q. DATE March 4th 1915.

O/S-29-5-15 93/3 R/C. 14/11/17.

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

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

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

No. A 10929 RANK Pte NAME Ritchie R. G.

T. O. S. 4/3/15 UNIT 38th Battalion

Mar payleist

M. D. 3

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Mar 4	Mar 31	✓		
April		✓		

H.S.B.

Number ~~2 2 5 2 3~~ 410929 Rank Pte

Surname RITCHIE

Christian Name Ray George

Units P.P.C.L.I. Theatre of War France

Date of Service 16-7-15-

Remarks

Latest Address Cawston B.C.

Roll No B Page 10669.

200m.-2-21.M.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks

DEBP. FEB 25 1922 REGN. No 46 2185 6

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

H. Q. FILE No. 649-

NAME Ritchie R. G.

REGT'L No. a 10929

RANK AND CORPS Pte P. P. C. L. I.

CABLE

NO. DATE

NATURE OF CASUALTY

NO. 837 X X

Sailed from Liverpool per S.S. "Olympic," Nov. 6th. /17. (M. D. # 11.)

38 MD-11

L. L. Job 87318—M. & D. 6106.

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
Q 296	No 2 Field amb.	29-1-16	Influenza
Q 352	No. 7 Gen. St. Omer	9-5-16	Measles.
Q 362	to No 14. Stat. Boulogne	24-5-16	Measles
B. 98	Hil: Chatham	2.7.16	"
	from No. 14 Stat: Boulogne.		"
B. 117	Can. Conv. Woodcote Pk. Epsom	1-8-16	"
B 195 (2)	" " " " "	14-8-16	" (disch)
289	MHCC Esquimalt	11-12-17	Temp Q.P. Esquimalt
276-3	R.H.C.C. Esquimalt	26-11 to 10-12-17.	Temp. Q.P.
290 -	" " " " "	18-12-17	Esquimalt to Qualicum

Name RITCHIE R.G. Rank Pte. Regt. No. 410929 Unit J/ 11

Battn. PPCLI Camp or O. S. O. File M. H. C. C. H. Q. File

Next of kin Mrs. G.E. Ritchie. Kelowna. B.C.

Discharged to Class D. of D. 10% Conduct V.G.

Pension awarded Date of first payment

Address on discharge. Cawston. B.C.

Diagnosis Flat Feet. Date boarded 19-11-17.

DATE	CLASS	REMARKS	Part 2 Order
26-11-17	2	Temp.O.F. till 10-12-17	#276
11-12-17	2	Esquimalt	#289
13-12-17	2	Qualicum	#290
12-2-18	2	Esquimalt	#44
28-2-18	2	Fairmont	#60
18-4-18		D.D.11 Hosp. Sec.	1.
15-7-18		DISCHARGED. P.U.	111.

L. L. Job 24571 M.H.C. F. 29. 75-7-17.—50M.

DATE	CLASS	REMARKS	Part 2 Order

D.M.S. 1300.

Surname	Christian Name or Names		Reg. No.
Ritchie.	R.	G.	410929.

Rank	Unit	Co.	Troop	Batty.
Pte.	P.P.C.L.I.			

Hospital: No. 2 Can. Fld. Amb. — Date of Admission: 29-1-16.

Transferred No 7 Gen. Hosp. Hosp. 9.5.16

No 14 Stationary Boulogne Hosp. 24.5.16.

Chatham Mil. Hosp. 2.7.16.

Canadian Woodcote Park Hosp. 1-8-16

Diagnosis: Influenza.

(1) Later Diagnosis (if changed): Measles

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Dis 14.8.16

REMARKS

C.L. 19-2-16.	A.296.
" 17.5.16	A35r
" 30.5.16	A36r
" 7.7.16.	B98.
12.8.16	B117
1.12.16	B195

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

(1601)—Wt. W8208—1272.—800,000.—11-14.—K. & K. Forms B. 103/1.

Army Form B. 103.

0 Inf 20345

130

Casualty Form—Active Service.

Regiment or Corps P.P.C.L.I.

Regimental No. A10929 Rank Pte Name Ritchie, R.G.

Enlisted (a) 23-3-15 Terms of Service (a) 1 Year or Duration of war Service reckons from (a) 23-3-15.

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

Extended ____ Re-engaged ____ Qualification (b) ____

Report 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.
Emb: 23.10.15	to join Unit	PRINCESS PATRICIAS CANADIAN LIGHT INF. Rejoined Unit	Field	16.7.15 not Stated.	B.213
4-2-16.	O.C.Battn.	Admitted to HP. Sick.	Not Stated.	30-1-16.	B.213.
30-1-16.	No2 Fld Amb.	Influenza, Admitted to No2 F.Amb.		29-1-16.	A.36/d 15-2-16.
9-5-16.	7 Gen HP.	Measles. Admitted to No 7 Gen HP.		9-5-16.	W3034. No378.
20-5-16	0cBattn.	Evacuated Sick,	Not Stated,	15-5-16	B213.
24-5-16.	7 Gen HP.	Measles. Transf to No 14	Staly HP.	24-5-16.	W3034 No 392.
24-5-16	14 Staly HP.	Measles. Admitted to 14	Staly HP.	24-5-16.	W3034 No 418.
1-7-16.	H/S Jan Breydel.	Debility following Measles Adm to H/S Jan Breydel.		1-7-16.	W3083. Pt to bnds 29 d/ 7-16

O. C. Wright Lieutenant

for Lt Col. A.A.G.

(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 C.C.A.C. Pt. II D.O. No. 264 - 10 - 7. 16			
		ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO Bath Police 1.4.8.16 PART II D.O. No. 570.6 - 1 - 9. 16			
		for O.C. C.C.A.C.			
17/5/17	Easton Ont Reg depot.	Transferred to C.D.D. Buxton	Buxton	17/5/17	Hqrs Seaford R.O. this date.
16.4.17	O.C. E.O.R.D.	T.O.S. of Easton Ont. Regtl. Depot and "On Command" to C.D.D. Buxton, for employment.	Seaford	16.4.17	Pt. II D.O. 35.
21.5.17	O.C. E.O.R.D.	S.O.S. of E.O.R.D. on transfer to C.D.D. Buxton	Seaford	17.5.17	Pt. II D.O. 70.
5.6.17	O.C. E.O.R.D.	Retaken on strength of E.O.R.D.	Seaford	5.6.17	Pt. II D.O. 85
5.8.17	O.C. E.O.R.D.	"On command" from E.O.R.D. to O.T. Batt. Seaford	Seaford	5.8.17	Pt. II D.O. 146
26.9.17	O.C. E.O.R.D.	Ceases to be "on command" to O.T. Batt.	Seaford	26.9.17	Pt. II D.O. 198
20.10.17	O.C. E.O.R.D.	"On Command" from E.O.R.D. to Can. Disch. Depot, Buxton	Seaford	20.10.17	Pt. II D.O. 222
					H.C. Chamberlain Capt. & Adjt. Lieut. for O.C. E.O.R.D.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps P.P.C.L.I.

Regimental No. A10929 Rank Pte Name Ritchie R.G.

Enlisted (a)____ Terms of Service (a)____ Service reckons from (a)____

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

Extended____ Re-engaged____ Qualification (b)____

Report: 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.
22 OCT 1917		TAKEN ON STRENGTH C.D.D, BUXTON	Pt. 11 ORDER No. 250 Commanding		R Ritchie A Lieut.-Col. Canadian Discharge Depot.
		EMBARKED FOR CANADA	FROM LIVERPOOL Commanding		R Ritchie A Lieut.-Col. Canadian Discharge Depot.
26-11-17	Overseas	T. O. S. J. Unit	Victoria, B. C.	27-11-17	D. O. Part II 276/2674 1917
18.4.18	J. Unit M.H.C.C.	T. O. S. District Depot XI.	Victoria, B. C.	18/4/18	D. O. Pt. II, Para. 2 1918
20.7.18		Discharged	Victoria B.C.	20.7.18	D.O. 96 Pt. II 577 of 22.7.18
		Being Physically Unfit for Further Service Under K. R. & O., Can. 1917. 377.10 Auth. Med. Board (App. A. D. M. S. of 15.7.18)			Captain for O.C. District Depot XI

(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				

22523

Rank | Name RITCHIE Rae George | Reg'l No. A410929

Unit P.P.C.L.I. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Montreal.P.Q. 4th March.1915. Place of Birth Vancouver.B.C.

Name and Address, Next-of-Kin George E.Ritchie, P.O.Box 105, Kilowna. B.C.

Relationship Father

Assigned Pay Monthly $ | Payable to

Relationship

N/E. R.B. No 5521
File R.L.
Category Can OR

Separation Allowance $ | Payable to

Relationship

RG33 B 152 x

RG33 B 338

133/4

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
9-6-15	11th Bn.	Taken on strength	Schiff	9-6-15	P.T.O. 650
14-7-15	"	SOS to PPCLI. Overseas	"	16-7-15	" 1009
31.7.15	P.C.P.P.C.L.I.	Taken on strength P.P.C.L.I.	France	17.7.15	P.T.O. 32
19-2-16	C.L.A.296 P.P.C.L.I.	2 Field Amb.	— " —	29-1-16	Influenza 17
17.5.16	"	Admn. No 7 Gen Hosp.	St Omer	9.5.16.	Measles C.L.A.35 & 35
30.5.16	"	Trans No 14 Stat.	Boulogne	24.5.16.	" " 36
7.7.16	P.P.C.L.I.	Trans to CCAC.	Folkestone	1.7.16.	P.T.O. 27
7.7.16	"	Military Hosp	Chatham	2.7.16.	C.L. B.98. measles.
15.8.16	R.C.R. + P.P.C.L.I.	Attached from C.C. 46 (P.B.D.)	Schiff	15.8.16	P.T.O. 93.
15-8-16	CCAC.	Reported "Overseas Casualty"	Folkestone	14-8-16	P.T.O. 334
13-8-16	P.P.C.L.I.	Ex Mil. Hospital Chatham to Can. Con. Hosp. Woodcote Pk.	Epsom	1-8-16	C.L. B.117 measles

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place	Date	REMARKS Taken from Official Documents.
Date	From whom received					
16-8-16	CCAC	On Command to RCR & PPCLI.	L. Cpl.	Shorncliffe	15-8-16	Pt II Do. 337 (ex) (for B.D)
28-8-16	RCR & PPCLI Depot	Ceases to be attached (Reported to) 6BAB	L. Cpl.	Shorncliffe	26-8-16	Pt II Do. 104 CCAC Pt II 0360
10.7.16	6BAB	Taken on strength.			2.7.16	" 264
1-9-16	CCAC.	On command to C.D.D.	Bach		29-8-16	Pt II 370 (P.B.D)
30.8.16	C.D.D.	Rept & Att to Perm Cadre (duty Orders)	Bath		29.8.16	" 169 al
1.12.16	PPCLI	Dschg to C. T.		Epsom	14.8.16	C.L.B 105
24-4-17	CCAC	SOS to CORD. & on Com. CDD. Buxton		Seaford	10-3-17	Pt II Do 164 & CDD Pt II 210d/5-9-17
16-4-17	COR Dep	T.O.S & is on Com. CDD Buxton		Seaford	~~10-4-17~~ 10-3-17	Pt II 35 amended & Pt II 183 d/11-9-17 (a recal 10-3-17)
		(for employment)				
21-5-17	"	Ceases on Com. CDD. & is SOS to CDD. Buxton		Seaford	17-5-17	" 70
4-6-17	C.D.D.	Cease to be attach on return to E. Ont Rgt Dep.		Buxton	4.6.17	Pte. P. II. 0.131.
5-6-17	COR Dep.	Retaken on strength from CDD.		Seaford	4-6-17	Pt II Do. 85
26-6-17	"	Permitted to wear 1 Good Conduct Badge		"	25-6-17	" 106
5-8-17	"	On Com. O.T.B. Seaford Pte. Pt II. 0 131/4 & is amended to read Struck off Strength	Pte	Seaford	4-8-17	" 146 & O.T.B Pt II . 28d/5-8-17
3.9.17.	C.D.D					Pte II. 0.208.
26-9-17	COR Dep.	Ceases on Com. O.T.B. Seaford	Pte	Seaford	25-9-17	& O.T.B. Pt II. " 198 . 78d/25-9-17
21-10-17	"	On Com. CDD Buxton pending discharge to Canada	Pte	"	20-10-17	" 223
20-11-17	"	Ceases on Com. & is SOS on proc. to Canada for disposal by A.G.	Pte	"	6-11-17	" 253
		Conv. Stone.		M.D.No. Victoria	14-11-17	N.R. 401

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

District Depot M.D. XI
JUL 20 1918
Discharge Section

This is to Certify that No. 410929 (Rank) Private

Name (in full) Rae George Ritchie enlisted in the P.P.C.L.I.

CANADIAN EXPEDITIONARY FORCE at Montreal on the 4th. day of March 1915

HE served in France with the P.P.C.L.I.

and is now discharged from the service by reason of Being Physically Unfit for further Service. K.R.& O. Can. 1917. 377. 10

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

Age 24

Height 5 Feet 8 Inches.

Complexion Medium

Eyes Blue

Hair Brown

Marks or Scars Vaccination Marks, 4 on left arm. Scar from burn on right arm, and scar on left foot.

C.G. Ritchie
Signature of Soldier

H. B. Andrews
Issuing Officer

Captain
Rank

for O.C. District Depot XI
Appointment

Date of Discharge 20/7/18

Signed at Victoria B.C. this 20th. day of July 1918

in Military District No. XI

File Reference No. D.D.R. 847

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. 410929 (Rank) Private Name Rae George Ritchie

Unit P.P.C.L.I.

Address on Discharge Crawston B.C.

Character and Conduct Very good.

Former Occupation Student

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks Europeaw War, France, 1 year

Signed at Victoria B.C. this 20th. day of July 1918

H. S. Andrews.
Name of Officer

Captain
Rank

for O.C. District Depot XI
Appointment

R & C 5045

D.D.R. 847

Dais.

OFFICE OF THE STANDING MEDICAL BOARD SHORNCLIFFE

EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNCLIFFE.

Aug 10 1916

No. 410929 Unit PPCLI Rank Pte

Name Ritchie R.G. Age 22

Examination held at Epsom

DISABILITY.
Overseas—Local.
(scratch one out)

Flat Feet.

Present Condition

He was 12 months in France. His left foot is quite flat & he will never be fit for full duty. Is a B.A. of McGill, a law student. Draughtsman & good clerk.

Board recommends:—

1. Fit for Duty.
2. Fit for duty after.. .....weeks physical training.
3. Fit for light duty.....weeks.
4. Fit for permanent base duty. Yes
5. Discharge.

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

Signatures:—

Members

.....President.

.....Capt.

.....

APPROVED

Shorncliffe.....14/8.....1916.

.....Captain.
for A/D. A.D.M.S.,
Canadian Training Division.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 11

No. 1 District Depot

LAST PAY CERTIFICATE

C. E. F.

No 19

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

Regimental No. 440129 Rank Pte Name Ritchie R G

Corps P P C L I who was* discharged

On 20-7- 191 8, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-7- 191 8, to 20-7- 191 8, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 20 days at $ 1 00 c	20	00
No.			Field Allow. 20 days at $ c. 10	2	00
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Clothing &c.	35	00	Other Allowances* Clothing	35	00
Payment on transfer or discharge No. 1359	22	00	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	57	00	Total	57	00

*Give particulars.

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

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

(Address)

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

CHECKED

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment 4-3-15

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

(3) cause of discharge Unfit for further Service authority G O 96

(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 July 23 - 18

Place Victoria BC

Paymaster, District Depot M.D. XI

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.

300M.—2-18.
H. Q. 1772-39-903.

C.A.D.C. 5009
10[redacted]378-1-8-17.

2418929

At Ritchie RG

DENTAL CERTIFICATE.

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

E&RC

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.
23.10.17.	1 filling & extraction required	no	no	1 filling & 1 extraction recommended at Public Expense R Jamieson Capt CADC

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Ritchie Christian Name Rae George

Examined on 2nd day of June 1915
at Montreal

Approved by
J. W. Stanway
Rank Lieut Asst M.O.

JUL 8 1916

Birthplace City or Town Vancouver
County B. C.

Apparent age 21

Trade or occupation Student

Height 5 Feet 7.2 Inches.

Weight Lbs.

Chest measurement Minimum 32.7 inches.
Maximum expansion 36.2 inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left.
Number

When Vaccinated last

(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.
		M.O.

Date	Result	Vaccinations.
May 25 1916		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
14/4/16	500 million.	J. W. Stanway M.O.
24/4/15	1000 "	J. W. Stanway M.O.
7/5/15	500 "	Geo. Ackerson M.O.

Enlisted on 4th day of March 1915 at Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	38th Batt. C.E.F.	10929		4/3/15
Transferred to	C. D. D. Buxton.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

Lieut.-Col.
In Charge of Records,
Canadian Contingent.

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.

50M—9-14.
H. Q. 1772-39-439.

27 AUG 1915

Surname Rideout Christian Name Rae George

A 10929

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.
Fort Pitt Chatham		1	7	16.	5	7	16	German Measles	5	Disease took ordinary course but debilitated. Sent to Kingsley Hospital	J. Rivers Capt R.A.M.C.
THE RED CROSS HOSPITAL, SITTINGBOURNE.		3	July	16	31	July	16	con. "		quite recovered	Ch. Lud.
(CANADIAN DIVISION) CONVALESCENT HOSPITAL WOODCOTE PARK. EPSOM		31	7	16	14	8	16	do.	15	Discharged to Camp	[illegible] Capt R.A.M.C.

REGISTRAR, (CANADIAN DIVISION), CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM.

P. 697. 410929 Pte Ritchie R. G.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
15.6.17	19		1	10	7	30	Seaford	J C Brown	N N 17
30.6.17	55		2		9	73	"	"	N N 17
15.7.17	82		1	10	7	30	"	"	N N 17
28.7.17	93		2		9	73	"	"	
15.8.17	143		1	10	7	30	"	E Chaney	
30.8.17	80		2		9	74	"	N L Roberts	N N 17
12.9.17	917		1	10	7	30	"	"	
26.9.17	206		1	10	7	30	"	J C Brown	
9.10.17	242		2		9	73	"	"	N N 17
					75	43			

3664—2M. PADS. 10/12/15

SUPPLIES.
INDENT FOR RATIONS.

UNIT..... STATION..... DATE

OFFICERS AND MEN.

TOTAL STRENGTH .....

ATTACHED FOR RATIONS.....

* TOTAL .....

LESS ON COMMAND.....

" IN HOSPITAL.....

" ON LEAVE.....

" ABSENT WITHOUT LEAVE.....

" OFFICERS NOT DRAWING RATIONS.....

" O.R. NOT DRAWING RATIONS.....

* TOTAL NOT DRAWING RATIONS .....

* TOTAL RATIONS AUTHORISED .....

HEAVY DRAFT HORSES.

* TOTAL STRENGTH.....

LESS ON COMMAND.....

" IN HOSPITAL.....

TOTAL NOT DRAWING RATIONS .....

* TOTAL DRAWING RATIONS .....

LIGHT

LESS ON COMMAND

" IN HOSPITAL

TOTAL NOT DRAWIN

* TOTAL DRAWIN

* These totals must agree with the Daily Parade State accompanying this indent.

NUMBER OF DAYS RATIONS INDENTED FOR { MEN..... HORSES.....

OFFICERS AND MEN.

	BREAD	MEAT	BACON	SUGAR	TEA	SALT			FOR BRE	
									FLOUR	YEAST
TOTAL RATIONS AUTHORISED AS ABOVE ...										
DEDUCT:—NUMBER OF RATIONS ON HAND ...										

Rank

Name RITCHIE Rae George

Reg'l No. A 10929

Unit P.P.C.L.I.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Montreal.P.Q. 4th March.1915. Place of Birth Vancouver.B.C.

Name and Address, Next-of-Kin George E.Ritchie, P.O.Box 105, Kilowna. B.C.

Relationship Father

Entered on N.E. Card Index
Checked, by H. Gillotam

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place Canada

Reason

Character

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	Balance	Remarks, Casualties, etc.
July 1	31	31	1.00	31 .	31	.10	3 10 x	10 . 85	44 95			15 .			15 .	29 95	x Clothing.
			Diff in Exchange					.40				15					
Aug 1	31	31	1.00	31 .	31	.10	3 10		34 50	803 - 140 F.R. 861 - 760 - 946 - 905 - 1017 - 1078 - 207 F.R. 1034 - 1195 - 1255 - 1315 - 230 F.R. 1370 - 1596 - 1427 - 1536 - 1481 -		3 65 18 25 2 74 1 82 2 68 2 68 2 68 2 62 43 60 2 62 2 62 2 68 2 68 19 47 2 68 2 62 3 56 3 49 3 49			26 46	37 99	
Sept 1	30	30	1.00	30 .	30	.10	3 .		33 .						8 04	62 95	
Oct 1	31	31	1.00	31 .	31	.10	3 10		34 10						48 84	48 21	
Nov 1	30	30	1.00	30 .	30	.10	3 .		33 .						7 98	73 23	
Dec 1	31	31	1.00	31 .	31	.10	3 10		34 10	1659 - 1724 - 1763 - 1860 Cash 1/2/16		2 61 2 61 8 72 2 62 73 -			35 31	72 02	
1916 Jany 1	31	31	1.00	31 .	31	.10	3 10		34 10	1926 -		2 62			2 62	79 94	
Feb 1	29	29	1.00	29 .	29	.10	2 90		31 90						84 34	48 46	
March 1	31	31	1.00	31 .	31	.10	3 10		34 10								
				275			27 50	11 25	313 75			233 81			233 81		
				275 .			27 50	11 25	313 75			233 81			233 81		

BALANCE TRANSFERRED TO NEW LEDGER.

Checked.

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

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Pte. Ritchie, Rae George

Forg Fair

C.F. 2193

Regimental No. H10929

Unit P.P.C.L.I.

Date of enlistment

Place of "

Married (yes or no) No.

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

I for P. 1-12-17.

Date and place discharged

Reason for discharge disch 18/1/1896

Character on discharge

Form 5351—M. & D. 6880.

	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.
													33 64				
									282 40	35 85			185 31			35 85	
	1/12	31/1	62	1 00	62	62	10	6 20	8 25				139 90				
Feb	1	28	28		28	28		2 80		30 80			30 80			30 80	
Mar	1	31	31		31			3 10		34 10			34 10			34 10	
Apl	1	30	30		30			3 00		33 00			33 00			33 00	
May	1	31	31		31	31		3 10		34 10			34 10			34 10	
June	1	30	30		30	30		3 00		33 00			33 00			33 00	
July	1	20	20		20	20		2 00	35 00	57 00			57 00			57 00	

M. F. W 41
1 0M—7.16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

7469/148 3rd B

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Ritchie R. G.
Surname Christian Name

Regimental Number 410929 Rank Pte

Unit P.P.C.L.I.

Original Unit

District where paid M.D. #11

Date of Discharge

P. D. P. Filing Number 2-288-11

Address (in full) Cawston R.D. Bc.

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

L. L. 46038—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	3719	20 7/18	33 00	3576	20 6/18	33 00	2960	21 9/18	34 10		100 10
1st	G 3755	12 7/19	7000								
710 2nd	G16825	25-2-19	70 00								

Remarks:

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

Dec'n No 7469/148 W. S. G. File No 15418-P-21

Award ..... days at $ 70.00 per ~~day~~ mo $ 420.00

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

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

$ 100.10

Less further debit balance $ .....

Net due paid as below 319.90

TO SOLDIER / DEPENDENT

O	Ag. No.	Ch No.	Amount	No.	Ch No.	Amount
1	296	37755	70 00			
2	71A	16825	70 00			
3	6323	416643	70 00			
4	461C	450815	70 00			
5		489408	39 90			
6						
	Total					

1/2/2/19
25/2/19
9/4/19
6.5.19

GEN'L AUDITOR
Posting or Make by
Webster
Date 4.10.19

1625 Nelson St
Vancouver BC.

M. F. W. 41
1 0M—7-16
1772-39 889.

L. P. C. No. R 1607

Pte Name Ritchie Rea George

Eng & M

Regimental No. 410979

Unit PPCLI

Date of enlistment 4-4-15.

Place of " Winnipeg

Married (yes or no) No.

Amount of pay assigned monthly $ nil

To whom payable Olympic 14/11/17.

Name and address ~~of next-of-kin~~ Kelowna B.C.

Mrd. 19-11-17 Conn Hmtk

Date and place discharged

Reason for discharge

Character on discharge Cert D. H.Q. 649-R-9393

D.S.C. Job 5351—M. & D. 6880.

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.
	30/9/17							32503								Cr Pte
1/10/17	30/11/17	61	100	61 00	61	10	610							973		Boot
									39213					10000		Cr Acc
															10973	L Pte Rmd 18/11/17
															28240	Shrinkage to 30/11/17
									39213						39213	Pd to Unit

Cr Bal.

Paid 17.12.17

Nil

M. F. W 41
1 0M—7-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

MARRIED OR SINGLE S

PLACE OF BIRTH Vancouver B.C

NAME AND ADDRESS OF NEXT OF KIN George Ritchie
P.O. Box 105 Kelowna B.C.
Father

RELATIONSHIP OF NEXT OF KIN

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. H10929 RANK Pte NAME Ritchie Rae George

IF IN PERMT. CORPS WHAT UNIT UNIT PPCLI

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Montreal

DATE OF ATTESTATION March 4/15

ASSIGNED PAY MONTHLY $ Nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE Canada 29.9.17 REASON AND AUTHORITY Dms 1375-21. 5-10-17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO C.C.A.C. DATE 26.6.16. AUTHORITY W.O. 27.7.16

TRANSFERRED TO Ldrs Lts Dep Burton DATE 31/5/17. AUTHORITY

TRANSFERRED TO Pay 2 L Dis Ld Can DATE 1.10.17 AUTHORITY Dms 1375-21 5/10/17

TRANSFERRED TO NEB DATE 30/9 AUTHORITY

Entered on N.E. Card Index 005

Checked by H. Hildebon

FEB 22 1918 CANADIAN PORTRAITS

Checked 1680.95

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
			275				27	50						11 25	313	75										233	81		233	81	79	94		45		
1/30-4/16	30	1	30		30	.10	3								33		1996	14/4	2060	23/4				3 49	3 49				6	98	105	96			
1/5-31/5/16	31	1.00	31	00	31	.10	3	10							34	10														140	06			
1/6-25/6/16	25	1.00	25	00	25	.10	2	50							27	50														167	56			
June 26-30	5	1	5		5	10		50							5	50														143	06			
July 1-31	31	1	31		31	10	3	10							34	10														207	16			
Aug 1-31	31	1	31		31	10	3	10							34	10														241	26			
Sept 1-30	30		30		30		3								33												5840		6083	213	43			
Oct 1-31	31	1.00	31		31	10	3	10							34	10								1947				243		1947	228	06			
Nov 1-30	30	2	30		30		3								33									1974 1703 973						3650	2245	56	165		
Dec 1-31	31	1.	31		31	10	3	10							34	10									2443 4738 1974 1460					14356	115	10			
Jan 1-31	31		34	10											34	10								973						973	139	47	195		
Feb 1-28	28		30	80											30	80															140	27	210		
			669	90										11 25	681	15								69 19	147 05	60	83	233	81	510	88	170	27		

KERR 2514 15/8
&p 2156 2/8

Teark 4381 27/8 2237 28/10 Burkett 1010 2415 30/8 CDO

CDO 8715 30/12

Brach Ledger Sheet

SL No 49. 6.11.17 Cr Bal $325.03

H 10929 Pte Ritchie R. G. A. O. —

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
1917			66	90										11 25	681 15			Auxton					69 19	147 05	60 83	233 81			510 88	170 27				
Mar 1-31	31	1 10	34	10											34 10			12344	30/3					4 87					4 87	199 50				
April	30	"	33	-											33 -															232 50				
May	30		33												33															265 50				Trans to D.D. Buxton Eff 31.5.17 ABs.
"	1		1	10.											1 10	29	144						1 43						4 86	261 74				
																48.	30.4						2 43.										
																93	1/5						486										
																63	1/5						243										
June	30		33												33 -														729	287 45				
July	31		34	10											34 10															321 55				
Aug	31		34	10											34 10													06	06	355 59				Q1005. 2077. 23/7/17
Sept	30		33												33								81 34	151 92	60 83	233 81		06	527 96	388 59				Defdp 1/24 22 DMS 1375-21-5/10/17
			205	30										11 25	916 55																		11 87 Extra on Def Pay 31.8.17
														11 87	11 87														400 46				

H.Q.M. FORM REN'D EFFD.
DISCHARGED TO Can DATE 29.9.17
PAYBOOK VERIFIED 12.10.17
Cr BAL 325 03 T.P.C. REN'D 12.10.17
AUTHY. Dmd 1375-21-5-17

Checked H. W. Williams
2 P.B.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
									400 46		
Oct/17				Dfd AR 93/17 E.O.R.D.	9 73						
					9 73				390 73		
NOV 1917				1 55 30/9/17 Lab D.	9 73						
				1 19 15/9/17 "	7 30						
				" 5 15/9/17 "	7 30						
				1 867 30/9/17 Seaford	9 74						
				1 212 9/9/17 E.O.R.D.	9 73						
					43 80				34 693		
Jan				Adm AR 9/17 Del. Seaford	12/9/17	7 30					
				11 743 do	15/8/17	7 30					
				11 206 E.O.R.D.	30/9/17	7 30			375 03		
						21 90					
	Balance transferred to N. E. Branch.								Nil		

CONFIDENTIAL INFORMATION

RJB

Report. No. 680 J.

Category D or E

Ritchie, Mac C.
~~Kelowna~~ Kelowna
B.C.

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

E. 1. Discharge, no pensionable disability.
E. 2. Waiting Reclassification.
E. 3. Discharge with claim for pension.

No. 410929 Rank Pte. Original Unit P.P.C.L.I. Present Unit P.P.C.L.I.

Age 23 Height ft. ins. Complexion Dark Eyes Blue Hair Brown Character V.G.

Date of enlistment 4-4-15 Where enlisted Montreal. Where seen service France.

Ship returned by Date of arrival 14-11-17 Port of arrival Halifax.

Birthplace Bota 10 Canada. Religion Methodist.

Name and address next of kin Mother. Mrs. C.M.Ritchie. same address.

Notification of return to be sent to do

Cause of disability Flat foot left.

Condition in detail which prevents the soldier from earning a full livelihood

France twelve months. Evacuated July 1916 with measles and flat feet
States foot slightly flat always but worse now
Left foot markedly flat. Patient states that after two mile walk
foot is very painful and causes him to limp.
Rt. foot very slightly flattened.
Requires dental treatment.
Respy. system. & Circy system. Normal.
Recommended for orthopaedic examination and fitting with arch.
Then fit for C.1.

Degree of incapacity (Please state in fractions) Eng. Board 10%. Canadian Board 2/5 due to service.

Probable duration of incapacity None decreasing.

Does it render him permanently unfit for Military Service? 3 mos.

Would operation, Special treatment, or use of appliances etc., lessen incapacity? No

Destination to which transportation issued Conv. Home.

Members of Board Vancouver.

M.C. AIKINS. CAPT. A. MAIR. CAPT. S.J. COUGHLIN. LIEUT. H.M. CANNOCK. M.C.

C. Service in Canada.
D. Treatment.

INFORMATION TO BE FURNISHED BY SOLDIER

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

Occupation prior to enlistment Student. (Art & Law)

Regular trade or profession do

Average earnings previous to enlistment Any other income?

Name and address of last employer

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

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

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

If unable to follow previous occupation, name preference

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

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

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

References M.A.

Witness J.MacDonnell

I declare that the above statement is correct.

Date Quebec 19-11-17 Signature Rec C.M.Ritchie.

A. General Service.
B. Service abroad, not general.

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

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

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

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

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

First payment date.....

Form No. 5a.

CONFIDENTIAL INFORMATION

Report No. | Category D or E | M. H. C. File | No. of Local File | No. of H. D. File

No. Rank
Age Height lbs. Complexion Type Hair Character
Date of enlistment Where enlisted Where seen service
Ship returned by Date of arrival Port of arrival
Birthplace Religion
Name and address next of kin
Notification of return to be sent to
Cause of disability
Condition in detail which prevents the soldier from earning a full livelihood

Original Unit Present Unit

E 1. Deafness, no pronounced disability.
E 2. Waiting Reclassification.
E 3. Discharge with claim for pension.

Degree of incapacity (Please state in fractions) Ent. Board Canadian Board
Probable duration of incapacity
Does it render him permanently unfit for Military Service?
Would operation, Special treatment, or use of appliances etc., lessen incapacity?
Destination to which transportation issued
Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

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

C. Service in Canada.
D. Treatment.

Occupation prior to enlistment
Regular trade or profession
Average earnings previous to enlistment Any other income?
Name and address of last employer
Rent per month If purchasing property amount due and annual payment, $ $
Taxes If Homestead, when is patent due?
If carrying life or accident insurance, annual premium
If in receipt of sick benefits or other insurance—name of society Amt. per mo. $
If unable to follow previous occupation, name preference
At what age soldier left school? What grade, standard, &c., was he in?
Has he taken any Technical or Continuation Classes, if so what?
Whether given Vocational Training while in Hospital in England. If so, what subjects?
References
Witness I declare that the above statement is correct.
Date Signature

F. General Service.
G. Service abroad, non General.

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

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot R.O., $ D. C. Leaving Depot $
Amount forwarded to D. O. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date
Pens'n'd—Class Amount per mon. $ Period granted for Dating from
Last payment date

20 Jan

NDR-847

Cow 11-5-39

This space to be left blank for the Chelsea Number.

BETA 10

Army Form B. 268.

NOV 14 1917

649-R-9393

90

Proceedings on Discharge.

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

No. 410929 Army Rank Pte.

Name Ritchie. T.G.

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

DEPT. OF MILITIA & DEFENCE AUG -7 1918 HQ CANADA

Corps C. O. R. D.

Battalion, Battery, Company, Depôt, &c. P.P.C.L.I. PPCLI

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

Date of discharge 20/7/18

Place of discharge Victoria B.C.

1. *Description at the time of discharge.*

Age 23 years — months

Height 5 feet 8 inches

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

Complexion Medium

Eyes Blue

Hair Brown

Trade Student.

Intended place of residence (To be given as fully as practicable) { Cawston B.C. / Kelowna. B. C.

Descriptive marks.

Scar on R. arm.
L. Foot.
4 Vaccination Marks Left Arm.

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

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

Being Physically Unfit for Further Service
Under K. R. & O., Can. 1917. 377. 10
Auth. Med. Board
(App. A. D. M. S. of 15. 7. 18)

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

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Fy
Very good.

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

Captain
Initials of Commanding Officer.

Army Form B. 2088 has been issued to* for O.C. District Depot XI

* Strike out if not applicable.

NOK 3/4/20 HH

D. D. & L., London, E.C. A4502 W. W17176 M291 500,000 2/16 Sch. 39 Forms B. 268 40

[OVER.

W.S.G., comp 30-1-19-213

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

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

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

6. Campaigns, Medals and Decorations — France 12. Months.

Certificate of education .....

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

District Depot M.D. XI JUL 20 1918 Discharge Section

(Place) _____

(Date) _____

H.S. Andrewes. Captain for O.C. District Depot XI

Commanding _____ *Battn.* _____ *Regiment.*

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

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

District Depot M.D. XI JUL 20 1918 Discharge Section

(*Place*) _____

(*Date*) _____

C.G. Ritchie (*Signature of Soldier.*)

J Davey (*Signature of Witness.*)

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

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

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

_____ (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to 20/1/18 (the date to which the record of service is completed) 3 years 139 days.

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

Total ... 3 „ 139 „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for _____ (date)

District Depot M. D. XI JUL 20 1918 Discharge Section

(Place) _____

(Date) _____

Signature H.S. Andrewes.

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

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

None

C. G. Ritchie

461 7-~ 1-8

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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 Fairmont, Vancouver, B.C. DATE July 12, 1918

1. 1 (a) Unit P.P.C.L.I. (b) Regimental No. 410929 (c) Rank Pte.

(d) Surname Ritchie (e) Christian name R.G.

2. Age last birthday 24 yrs. Date of birth March 15, 1894

3. Enlisted at Montreal, Que. on March 4, 1915

4. Personal description:—

(a) Height 5' 8" (b) Weight 152 lbs. (stripped) (c) Complexion Medium

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks Vacc marks 4 on left arm. Scar from burn on R. arm and scar on left foot.

5. Address after discharge (for the use of the Board of Pension Commissioners) Crawston, B.C.

6. Former trade or occupation Student.

7. (a) Service

		Years	Days
		3	126

		Periods	
		From	To
Canada	4-3-15 to 27-5-15		
England	7-6-15 to 15-7-15		
France	15-7-15 to 1-7-16		
England	1-7-16 to 6-11-17		
Canada	12-11-17 to Present.		

(b) Has he been overseas? Yes France 8. Original disease or disability Flat feet.

(a) Date of origin March 1916 (b) Place of origin Ypres.

(c) Cause* Strain and Exposure.

(d) Present disease or disability Flat feet

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.]

General condition very good. Left foot arch completely dropped, longitudinally and transversely. Foot everted from tarso metatarso articulations. A case of extreme flat foot. Complains of pains behind metatarcal phalangeal joints in sole of foot and internal border of foot below internal malleolus. States walking causes pain up leg on inner side of well.

M. F. B. 227.
300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

RIGHT FOOT - still slight arching remains - ~~xxxxxxx~~ non rigid. Discomfort no pain in this foot. Callus on dorsum of left foot Can raise on toes with great difficulty. Walks with left foot splayed outwards Gait awkward.
WORK - Walks a mile without discomfort, Warss boots with heel extended forwards to sole and raised on inside. This has improved. Condition can do any work where walking or lifting are nor essential.

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

Nervous Yes Digestive Yes Respiratory Yes Cardiac Yes

Genito-Urinary Yes Skin, Middle Ear, Eye or any other part as noted.

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

Condition first noticed after a long march near Ypres. Had to fall out. Has had trouble ever since.

(*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.

Four vaccination marks left arm. Scar irregular on external surface right elbow. Scar on left foot.
Small brown wart on right forearm above wrist.

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

N.A.

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 ? Permanent.

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

Massage. Special boots.

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.)

No.

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

17. Recommendations

Category "E" for discharge.

By the Medical Board.
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.....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

A.R.T.

R.G. Ritchie.
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.

Concurs.

19. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).
(b) Service abroad, not general service,	(" B)	(Yes or No).
(c) Home service, (Canada only),	(" C)	(Yes or No).
(d) Temporarily unfit,	(" D)	(Yes or 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).

No.

(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).

(1) Yes.

(2) Category "E" for discharge.

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.

A.R.Thomson, Capt. *President.*

PLACE Vancouver, B.C. J.W.Wordley, Capt. } Members.

DATE July 12, 1918 .....

APPROVED BY

J.A.Urquhart, Capt, A.M.C.
Assistant Director of Medical Services.

DATE.....

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.....

J-R-2193

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Qualicum B.C. DATE Feb 3rd 1918

1. (a) Unit P.P.C.L.I. (b) Regimental No. 410929 (c) Rank Pte.

(d) Surname Ritchie (e) Christian name George Rae

2. Age last birthday 23 years Date of birth March 15th 1894

3. Enlisted at Montreal on April 8th 1915

4. Personal description :—

(a) Height 5 ft 8" (b) Weight 153 lbs (stripped) (c) Complexion Fresh

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks

2" square scar R.forearm from burn in childhood.

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

Kelowna B.C. N/K (Mother) Mrs George E.Ritchie, Kelowna.

6. Former trade or occupation Student.

7. (a) Service

	Years	Days	Periods From	Periods To
Canada			April 1915	June 1915
England			June 1915	July 1915
France			July 1915	July 1916
Hospital			July 1916	Present.

(b) Has he been Overseas? France, 12 months.

8. Present disease or disability (use authorized nomenclature if possible). Non Rigid double Pes Planus.

(a) Date of origin March 31st 1916 (b) Place of origin Ypres.

(c) Cause* Flat feet due to excessive marching.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Locomotor system - pain in both feet, more especially left and in left calf after walking two miles, sometimes keeping him awake at night. Both feet are flat, left most marked. Had to discard special boots after two weeks trial in England. Deep pressure on sole causes no pain. Other systems normal.

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

M. F. B. 227.

150M.-6-17.
1772-39-117.

3

10. History ;

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

Patient states definitely that he noticed no flatness and had no trouble with feet before enlistment. First had pain after an all night march over cobble stones and shelled country, March 31st 1916. Measles, May 7th 1916

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

40% pain and need of rest.

12. Did the disability arise on or off duty ? On duty.

13. Was a Court of Inquiry held ? N.A.

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

Yes..... No.....

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? No

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one ? Permanent without special treatment.

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

No.7 Gen.St Omar for measles.
Special boots at Epsom for two weeks.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?

No.

19. Can the former trade or occupation be resumed ? Yes.

20. Recommendations Arches might be of benefit, these failing, Plaster Casts.
Class D.III. Requires dental treatment.

Cumberland Dunbar M.D

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.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

R.G. Ritchie

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Section (18) - Yes.

Otherwise concurs.

22. 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)~~.	Yes.
(e) Unfit for service in Categories A, B and C,	(" E)	~~(Yes or No)~~.	No.

23. It is certified that the soldier

(a) Does require treatment.
(b) ~~Does not require treatment.~~ No.
(c) ~~Should pass under his own control.~~ No.
(d) Should not pass under his own control. Yes.

(Strike out condition not applicable).

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

No. D. 3. for two months further treatment.

W. Blank Capt. C.A.M.C. — *President.*

D. M. Jones. — *Members.*

R. L. Ivens

STATION Esquimalt B.C.

DATE Feb. 13th 1918.

APPROVED BY

DATE FEB 19 1918

R. L. Mullen Capt. A.M.C. — For *Assistant Director of Medical Services.*

M. D. 11

APPROVED BY

DATE

Director-General of Medical Services.

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.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
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. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.