242nd Battalion

242nd BATTALION C.E.F.

DUPLICATE

ATTESTATION PAPER.

No. 1049035

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	SCOTT
1a. What are your Christian names?	Robert Percy
1b. What is your present address?	Commercial Hotel, Vancouver, B.C.
2. In what Town, Township or Parish, and in what Country were you born?	London, England
3. What is the name of your next-of kin?	
4. What is the address of your next-of-kin?	Joseph Scott. Pluckley, Kent, England.
4a. What is the relationship of your next-of-kin?	Brother
5. What is the date of your birth?	22nd July 1874
6. What is your Trade or Calling?	Rancher
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.	Imperial Yeomanry. 6 yrs
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 Percy Scott, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Robert Percy Scott (Signature of Recruit)

Date 22nd Sept 191 6. Robert Richardson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Percy Scott, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Robert Percy Scott (Signature of Recruit)

Date 22nd Sept 191 6. Robert Richardson (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Vancouver this 22nd day of September 1916.

G. B. Harris (Signature of Justice)

J P for B C

M. F. W. 23
750M—8-16
H. Q. 1772-39-841

Description of Robert Percy Scott on Enlistment.

Apparent Age 44 years ... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ... 5 ft 11½ ins.

Chest measurement.
- Girth when fully expanded ... 39 ins.
- Range of expansion ... 2 ins.

Complexion Fair

Eyes Bluish Gray

Hair Light Brown

Religious denominations.
- Church of England ... Yes
- 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).

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 22nd September 1916. Otto Riggs

Place Vancouver, B.C. Capt.
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.

Robt Percy Scott 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.

B Donnelly Major for L.C. (Signature of Officer)
242nd. Can. Forestry Battalion, C. E. F.

Date 22 9 1916.

REGIMENTAL DOCUMENTS.

NAME Scott Robert Percy REGT. NO. 1049035 UNIT 242 Fd Bty H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
	TRAINING HISTORY SHEET (M.F.W. 113)				
2	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)				
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
	DENTAL HISTORY SHEET (M.F.B. 465)				
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
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)				
	LAST PAY CERTIFICATE (M.F.W. 44)				
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)				
	PARTICULARS OF CHARACTER (A.F.W. 3226)				
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				
4	Mis				
1	Cards				
1	Disc				
1	Mis 2167				
1	Pay Book				

Received 1-5-27

4 09437

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Demob.

DESERTION

1

25-27
22-27
5-27
1

W 2589
100M-11-18
4772-39 1377

Insp

Number 1049035 Rank Pte

Hosp

Surname SCOTT

Christian Name Robert Percy

Units C. F. C. Theatre of War France

Date of Service 2-1-17

Remarks

Latest Address ~~G.P.O. Vancouver B.C.~~ Field, B.C.

Roll No "B" Page 11043

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

DESP. MAR 6 1922 REGN. No. 1151

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

No. 1049035 RANK Pte NAME Scott R. P.

T. O. S. 22-9-16 UNIT 242nd Battalion C E F

A 59. 4-10-16

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Sept 22	Oct 31	C		
	Nov	C		

UNIT SAILED
NOV 23 1916

SURNAME. Scott.

CHRISTIAN NAMES Robert Percy.

REGL. No. 1047035. RANK Pte.

UNIT 24 2nd.

FORMER CORPS Imperial Yeo. 6 Yrs.

CARD NO. Dep Corps 3 11

SOS 22-5-19 Demob

FOLL. SO 1430 of 23-5-19 11BB

Bn.

NEXT OF KIN.

NAMES IN FULL Scott. Joseph.

RELATIONSHIP TO SOLDIER Brother.

ADDRESS Cluckley, Kent. Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England. London. DATE July 22nd 1874

PLACE OF ATTESTATION Vancouver, B.C. DATE Sept. 22nd 1916

R/C 15-5-19 322 Pte mob 11

40

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

From Halifax per S.S. "Mauretania" 23/11/16

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Rancher RELIGION Church of England

DESCRIPTION.

APPARENT AGE 44. YEARS MONTHS

HEIGHT 5. FEET 11 1/2. INCHES

CHEST MEASUREMENT 39. INCHES EXPANSION 2. INCHES

COMPLEXION Fair. EYES Bluish Grey HAIR Lt. Brown.

DISTINGUISHING MARKS Not stated

MEDICAL EXAMINATION. PLACE Vancouver, B.C. DATE Sept. 22nd/16

Present Address - Commercial Hotel,
Vancouver, B.C.

REGT'L. No. 1049035.

NAME Scott. R. P.

H. Q. FILE No. 649

RANK AND CORPS Pte. 19th Bn. (Can. Forestry Corps.)

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42--100M.--28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a. 182.	Rep. from Base. G.C.C. Injured	20-3-18.	Contusion Rt. Side, Chest.

Form R. 149.

Name Robert Percy SCOTT Rank Pte. Reg. No. 1049035

Unit 6 F.C. Next of Kin Nephew Joseph Scott. Gordon House Maidstone Kent Eng.

1918. Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
20-3.		Repid from Base Cont. Reside		Inj. acc. Chest. on Duty.	A.	15 V		A.F.W. 3428. 8/11.4.18.

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

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

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
SCOTT.	R.P.	1049035.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.		Forr. 19.		

HOSPITAL

DATE OF ADMISSION

1. ..... HOSP.

2. ..... HOSP.

3. ..... HOSP.

4. ..... HOSP.

DIAGNOSIS

1. Cont' R. Side, Chest.

2.

3.

DISPOSITION

DATE

C.L. ~~15-4-18~~. A182.R.F.B. REMARKS Accidentally Injured 20-3-18.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

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

WB.

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 242nd. BATTALION C. E. F. ~~Rob Reg.~~

Regimental No. 1049075 Rank Pte Name Scott Robert R. P.
C. E. F.

Enlisted (a) 22.9.16 Terms of Service (a) Duff Service reckons from (a) 22.9.16

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) Rancher

CERTIFIED CORRECT. 15 JAN 1917 CAN. RECORDS. LONDON.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		EMBARKED AT Halifax NS Mauritania			23-11-16
		DISEMBARKED AT Liverpool 30-11-16			
2.1.17	242nd	Proceeded for Service Fr.	Witley	1.1.17	Part II Order 1 Fred Morse Capt. Adjutant 242nd. Battalion C. E. F.
		Disembarked	Havre	2.1.17	L.R. 7/244
5.1.18	19 Boy	Granted 14 dys leave to	England	1.1.18	B213 Pt II 2.
26.1.18	do	Rejoined from leave		21.1.18	B213
30.3.18	do	Sick do Hosp	Fld	24.3.18	B213
30.3.18.	Adj.	Accidentally injured while in performance of military duty.		20.3.18	amw. 3428. KAd. 15/7855 Pt. 2 ord + 1/- 23/4/18
23.3.18	19 Boy	To Hospital	Fld	20.3.18	B213
6.4.18	do	Rejoined from Hospital.		5.4.18	B213

(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				
	A. I. D				Med Board
5.4.18	Edus	Myalgia & lass B1		5.4.18	AFB 456 11.20.20 15 5/18
22-9-18	19 Coy.	Awarded Bar G.C. Badge		23.9.18	B213 Part II 42.
22-12-18	"	Granted 14 days leave to U.K.		15-12-18	B.213 Pt. II D. 58.
4/1/19.	do	S.O.S on trains to 24 Co C.F.C.		5/1/19.	B213 Pt 2 No 3 d/19/1/19
"	"	T.O.S. 24 Coy. from 19 Coy.		6-1-19	B213 Pt. II D. 3 d/ 1919
	O.C.Cdn. S.O.S. for demobilisation to C.F.C.				N/R. K 4 - 1
26/1/19	Conc. Cmp. Le Havre	Depot		26/1/19	Pt. 2. 018. d/1919
					Lieut for Lt. Col A.A.G. Cdn G.H.Q.
3.2.19		from CFC. France. O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale		29.1.19	Pt. 11. D.O. 34
12.4.19	B.D.C.F.C.	Transfer 14 D 11 on posting to Can. Camp Rhyl. S.O.S. BASE DEPOT C.F.C. SUNNINGDALE		12.4.19	Pt. I 102 O.C. B.D.C.F.

Attached O.C.C. Kinmel Park for return to Canada. Part 11 Orders No ____ to be attached C.O. [illegible] Kinmel Park-ing [illegible] Order No. 104

Commanding 11 [illegible], Kinmel Park [illegible]

SAILING NO 52
SS ORDUNA FROM
LIVERPOOL 7. 5. 19.

Adjt., No. 14, C.T.C.S.

R—122
8,401—50,000—21-10-16.

G.C. Rank | Name SCOTT. Robert Percy. | Reg'l No. 1049035.

Unit 242nd. Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Vancouver. 22nd. Sept. 1916. | Place of Birth London. England.

Name and Address, Next-of-Kin Joseph Scott.
GORDON HOUSE, MAIDSTONE, KENT, ENGLAND
~~Pluckley Kent England.~~ R.L. 29 dy 28.5.17. | Relationship Brother.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 14480
File R.L.
Category O.L. Can

A.F.B. 103 CHECKED
WB. 9 - JAN 1917

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.
					C.
		Arrived In England		30*11*16	S.S. Mauretania
1-1-17	242nd Bn	S.O.S. on proceed. to France	Witley	1-1-17	Pte II a o 1.
22.1.17.	19th Coy C.F.C.	Disembarked Havre	Field	2.1.17.	" " 1.
23-4-18	"	Acc Injured while pers. Mil duty	Pte "	20-3-18	" 16
3-10-18		Awarded. D C M	PTE	22.9.18	43
19.1.19		S.O.S. to 24 Coy C.F.C.	" "	5-1-19	3 J.O.S 24 Coy C.F.C. Pte II o 3 2.24-1-19.
2-2-19.	24 Coy C.F.C.	S.O.S. to B.D. & F.C. S'dale	" "	28-1-19	6 T.O.S. Pte II 0.344-82-19
14-4-19	B.D. & F.C.	S.O.S. to M.D. Dist 11	S'dale	12-4-19	10 T.O.S. Pte II 89-74-4-19 11 M.D.C.M.
			52-T	7-5-19	
12-5-19	11 M.D. C.M.	S.O.S. to Canada	Rfyl	7-5-19	113.

Report.		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.	
Date.	From whom received.					

ORIGINAL

MEDICAL HISTORY SHEET

ORIGINAL

Surname SCOTT Christian Name Robert Percy

Examined on 22 day of Sept 191
at Vancouver

Birthplace City or Town London
County England

Apparent age 44

Trade or occupation Rancher

Height 5 5 feet 11 4½ Inches

Weight 175 lbs.

Chest measurement Minimum 37 inches
Maximum expansion 2½ inches

Physical development Good

Small-pox Marks

Vaccination Marks Arm Right Left
Number 3 3

When Vaccinated last 1906

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection
Vision R 20/30 L 20/200 uncorr.

Approved by
Alex Ragg
Capt
Rank 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
4 4/16		D. J. Sweeney Capt CAMC M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc. TYPHOID PARATYPHOID VACCINE
17 6/16		D. J. Sweeney Capt CAMC M.O.
25 10/16		D. J. Sweeney Capt CAMC M.O.
1 11/16		D. J. Sweeney Capt CAMC M.O.

Enlisted on 22nd day of September 1916 at Vancouver.B.C.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	242nd Batt.	1049035		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
MONTREAL	2/10/16		fit.
Summerdale	28/3/19		[illegible] Capt., C. A. M. C. M.O. 242nd BTTN.

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Scott Christian Name Robt. Geo.

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
MONTREAL											

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

Class "A" Badge No. 175413 Issued

THIS IS TO CERTIFY that No. 1049035 (Rank) Private

Name (in full) Robt. Percy Scott enlisted in

the 242nd Battalion

CANADIAN EXPEDITIONARY FORCE at Vancouver on the 22nd

day of September 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 44 yrs. 9 mos.

Height 5 ft. 11 1/2 in.

Complexion Fair

Eyes Bluish Grey

Hair Light brown

Marks or Scars Scar at end of 4th digit (finger)

R. P. Scott.

Signature of Soldier

D. M. Grant

Issuing Officer

Capt.

Rank

Date of Discharge

22 May 19.

Date 22. 5. 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

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 242nd Forestry Batt. C.E.F.

(2) Regimental Number 1049035

(3) Full Name of Soldier Scott, Robert Percy

(4) Place of Birth London, Eng.

(5) Are you married, or not? No

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

(b) Present Postal Address

(7) Are you a widower? No

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No

If so, state name and address .....

(10) Is your Mother alive ? No

If so, state name and address .....

.....

(11) If your Mother is a widow .....

Are you her sole support, or not ? .....

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

.....

.....

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

Josepha Scott
Pluckley, Kent Eng.

(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.

J. McCaig Major
Officer Commanding,
242nd. BATTALION C. E. F.

Date 22nd September.1916

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-0.

Casualty Form—Active Service.

Unit, Regiment or Corps 262nd Bn.

Regimental No. 1049035 Rank Pte Name Scott Robert

C. E. F.

Enlisted (a) 22.9.16 Terms of Service (a) D of W. Service reckons from (a) 22.9.16.

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

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

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

T.O.S, No 11 D, D, 7MAY 19
S, O, S. C, E, F May 22-19 T Area
No 11 dd DO 143 May. 23-19

W. Andrews Lt.
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				

P. 559.
MARRIED OR SINGLE S

PLACE OF BIRTH London, Eng

NAME AND ADDRESS OF NEXT OF KIN Joe Scott
Buckley Kirk, Scot.

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 1049035 RANK Private NAME Scott, Robert Percy (602)

IF IN PERMT. CORPS } WHAT UNIT } UNIT 242 2nd Bn. TRANSFERRED TO to F.b. France DATE 21.6.16 AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Vancouver BC. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 22 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 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 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
															33 00																33 00				C.1.
Dec/16																																		Left for Montanada
1. 31	31	1.00	31	00	31	10	3	10							34 10	41	15/12/16	56	31/12/16					29	20	4	87			34 07	33 03				
1916																																		
1914 Jan	31			10											34 10															64 13				
Febry	28		30	80											30 80	58	18/1	107	5/2					2	61	2	61			5	22	92	71		
																		258	19/3							3	49							
Mch.	31		34	10											34 10	141	19/2	173	5/3					3	49	3	48			10	46	116	35		
April	30		33.												33		25	1/4						3	49					3	49	145	86		
															199 60		180	3-5						3	57					583					
May	31		34	10											34 10		97	19-4						3	48					7	05	172	91		
June 1.	20		22												22																194	91.		
" 21																															205	91		
" 30	10		11												11																240	91		
July	21		34	10											34 10	496	18/6							357										
																781	18/5							356										
Aug.	31		34	10											34 10	241	4/4							357						14	27	289	84		
																588	4/6							357								297	84		
Sept.	30		33	00											33 00																				

1049035 Pte Scott R P

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
PARTICULARS				CR. 1	CR. 2	PARTICULARS								DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.																
				~~29 84~~														292 84																	
Oct		A Pay		34 10		AR 1142	25-8-17	19 by 676	Tr					3 57																					
						" 1281	8-9-17	" " "						3 57																					
						" 753	13-7-17	" " "						3 56																					
						" 999	9-8-17	" " "						3 57																					
						" 882	25-7-17	" " "						3 57				309 10																	
				34 10										17 84																					
Nov		P P		33		AR 1418	24-9-17	19 leo						3 54																					
						AR 19	11-10-17	19 leo						3 54																					
Dec		P P		34 10		AR 92	24-10-17	19 leo						3 54																					
						AR 143	9-11-17	19 leo						3 54				361 92	195																	
				64 10										14 28																					
1918																																		
Jan		P Pay		34 10		AR 2161	25/11/17	19 60	✓					12 49																					
						AR 342	14/12/17	✓	✓					3 57																					
						AR 398	28/12/17	✓	✓					3 57				376 89	210																	
				34 10										19 63																					
Feb		P Pay		30 80		AR 300	31/1/18	✓	✓					87 60																					
						AR 300	31/1/18	✓	✓					9 73																					
						AR 599	28/1/18	✓	✓					3 57																					
						Halifax Relief Fund		✓						5 00				301 29	225																	
				30 80										105 90																					
Mch		P Pay		34 10		AR 877	11-2-18	19 by	✗					3 57																					
						~~1115~~ 670	25/2/18	~	✗					3 57																					
						AR 1392	11.3/18	✓	✓					3 57																					
						AR 1604	23.3/18	"						3 57																					
				34 10										14 28				321 11	240															

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. 268 * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	AMOUNT:–

NAME:– SCOTT, Robert Percy.
NUMBER:– 1049035.

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.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:– 242nd Bn.

DATE ACCOUNT FIRST OPENED:– 1/12/16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.D.C. France

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
1/4/19.	37.	68 CBH £8-0-0	38 93				
				P855 Issued	14/11/18	Eff: 30/9/18	

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:– Disch/Canada 30/4/19 Pte 5893 Sdale MD 11.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Balance Forward								321 11	240	
April	P. Pay	33		AR 147 – 13.4.18 – 19 Co.	2 68						
				AR 447 – 29.4.18 – "	2 68						
		33			5 36				348 75	255	
May	P. Pay	34 10		AR 757 – 12.5.18 – 19 Co.	2 68						
				AR 984 – 26.5.18 – 19 Co.	2 68						
		34 10			5 36				377 49	270	
June	P. Pay	33		AR. 1279. 9/6/18. 19 Boy.	3 57						
				AR. 1532. 22/6/18 "	12 49				394 43	285	
		33			16 06						
July	P. Pay	34 10		AR. 2065. 13/7/18 "	3 57						
				AR 2403 27/7/18 –	3 57				421 39	300	
		34 10			7 14						
Aug	P. Pay	34 10		AR. 2598. 10/8/18 "	3 57						
				AR 2940. 26/8/18 "	3 57				448 35	315	
		34 10			7 14						
Sept	P. Pay	33		AR. 3244. 10/9/18 "	3 57						
				AR 3601. 23/9/18 "	3 57				474 21	330	
		33			7 14						
Oct	do	34 10		AR. 3930. 9/10/18. No 2 Dist:	3 73						
				AR. 4275. 24/10/18 19 Boy	3 73				500 85	345	
		34 10			7 46						
Nov	do	33		AR. 4665. 15/11/18. "	3 73						
Dec:	do	34 10		AR. 4928. 26/11/18 "	13 06						
Jan:	do	34 10		CP. 84561. 16/12/18 London.	68 13						
				LC 35. 14/12/18 2 Dist:	97 33						
				AR 5106. 12/12/18 19 Boy.	3 73				416 07		
		101 20			185 98						

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									416 07	340	
Feby	Pt. Pay	30 80		AB 3436. 15/1/19. G G B O.	4 66						
Mar:	"	34 10		AB 8158. 13/1/19 B.O.	17 03						
				AB 9823. 13/3/19 "	17 03						
					38 12				447 25		
		64 90			38 72						
Apl		33 -		AB 37. 1/4/19 Base Depot.	38 93						
	Deferred Pay Interest 30/4/19.	27 18		AB. 781. 17/4/19 (Rhyl Endid)	9 73						
				AB 1865 1/5/19 (" ")	9 73				444 04		
										435	
		60 18			58 39						
				SOS to Canada 7/5/19 S.L. 52.							

463 50
End 19. 46.
Bal 443. 04

A.B.M. FORM REN°S ... EFFEC...
DISCHARGED ... DATE...
PAY BOOK VERIFIED ...
... R.A.F. ... R.A.M.C. REN°...
AUTH: A.P.R. 589 3 14 Stdale mA 11

Canada 30/4/19
3/4/19
Cr 463 50 3/4/19

COMPILED BY Gwstockley
CHECKED BY ...

7-8
31
39
89.90
6.90
97.90

1/12/16 1
12
12
4
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27.18

C.A.D.C. 5009A

8

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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

NAME OF SOLDIER (Block Letters) SCOTT. R.P.

REGIMENT C. F.C. RANK Pte No. 1049035

Date of Examination in England 28-3-19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS none
2. EXTRACTIONS 17. 18. 28.
3. CROWNS none Yes
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower 17. 18 14 21 24 28 - 30 31 32

For A. D. D. S., M. D. No. 11

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
- (c) In France — yes

Signature of Dental Officer R Jamieson
Capt

EVIDENCE OF 1048209 PTE PICTOU J.L.
CONCERNING
ACCIDENT TO 1049035 PTE SCOTT R.F.

I was top-loading on the truck from which the logs fell which caused the accident to Pte Scott.

Two logs falling off, struck a skid on the ground which flew up and hit him on the side; he was rendered unconscious and had to be put on a waggon and sent back to camp.

This happened at 8.00 a.M.

SIGNED:-

J L Pictou

No. 2 APR 1918

EVIDENCE OF 1048162 A/L/CPL
O'SULLIVAN M.J.
CONCERNING
ACCIDENT TO PTE SCOTT R.P. NO 1049035.
AT NO 19 COY CG CFC.

I was working with pte Scott loading trucks when the accident happened.

Two logs fell from the top of the load and then struck a skid on the ground which flew up and hit him in the side, knocking him senseless.

I helped to put him on a waggon and he was immediately sent back to camp.

The accident occurred about 2.00 a.m.

SIGNED:-

M J O'Sullivan

O.H.Q. 3RD ECHELON
No. 18285
2 APR 1918
INVESTIGATION

O.C.No 19 Coy CFC

O.C.No 2 District.
CG CFC.

March 25th 1918.

DHF 42-2

To:- A.A.G. Canadian Section,
3rd Echelon.

1049035 Pte.Scott,R.P.
No.19 Coy. C.F.C.

Attached herewith A.F. W3428
pertaining to marginally noted man.
For your necessary action,please.

Conches.
30-3-18.

Lieut.& A/Adjutant.
for O.C. No.2 District.
Canadian Forestry Corps.

C.F.C. 3RD ECHELON
No. 18785
2-APR 1918

ORDUNA. 16-5-19.

AUDITOR | PAYMASTER

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

M. OR S. S. REGT. No. 1049035 RANK Pte NAME (IN FULL) SCOTT R.P. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
English S.P.Cadg.	30-4-19.	

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

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ No. — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

c/ Bank of Montreal, Vancouver B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE MDX1 — DATE 22-5-19 — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
30-4-19		1.10					463	50	463	50																									463	50	after Credit 3.00 clothing allowance
27-5-19	27	1.10	29	70	35	00			64	70	Bond & Provincial cheques						4	87	5	00	56887										578	74	50	54			" charges 5.50 adj. 5 dys. Pay overpaid
											Rhyl						9	73	9	73											19	46	70	00			
																													5	50	5	50	75	50			

Certified that all payments have been made on this account for which covering authority has been received to date.

Lieut., Paymaster, Demobilization Pay M.D. No. 11

War Service Gratuity

Service 2 years ..... months

Haul	153 days		35		350	00																					75	50			75	50	274	50			
											June		808969		64	50															64	50	210	00			
											July		825676		70	3rd															70	140					
											Aug		1147813		70	4															70	70					
											Sept		1568636		70	7															70						
					350																											350						

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2596 received.

Capt., Officer i/c War Service Gratuity M.D. No. 11

200M-3-19.—L. L. 58786-11. & D. 9985.
M. F. W. 2596.
1772-39-1390.

DISPERSAL STATION T

SHORT FORM.

PROCEEDINGS ON DISCHARGE. War Service Badge
Class "A" No. 175413

(Demobilization.)

1. No. 1049035
2. Rank. Pte
3. Name. Robert Percy Scott
4. Unit. 6th C. 6th C.D 242nd Bn
5. Date of Discharge 22/5/19 Place Vancouver
6. Reason for Discharge Demob
A Farmer at Brothers Ltd E. Vancouver
7. Authority. No 1 dd DO 143 May. 23-19
8. Proposed Residence after Discharge
G.P.O. Vancouver
B.F.C. 22/9/16

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.P. Scott.
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature A.M. Grant Capt.
(O. C. Discharging Unit.)

Dispersal Station Vancouver B.C. MAY 22 1919 Military District No. 11

M.F.B. 218a—300M.-11-18—1772-39-113.

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. 59a).
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.....12

.....

Date.....2-5-19

I HEREBY CERTIFY that the condition of the within-named man has not changed since Overseas Board Dated 28/3/19.

C.A.M.C. 22/5/19 Capt.

...for reasons other than medical unfitness are to be reported ...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. 1048035 Rank PTE Surname SCOTT.

(Given name in full) ROBERT. P.

Unit or Corps C.F.C. Birthplace LONDON - ENG.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 135 lbs. Height 5 ft. 11½ in. Colour of Eyes blue

Nutrition Good

Pulse 68

Condition of arteries Good

Vision Rt. ON Left ON

Hearing (conversational voice) Rt. ON ft.

Left ON ft.

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

Scar at end 5th digit accidental 7 years ago.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No ... Genito Urinary System No ... Cardio-Vascular System No

Special Senses No ... Integumentary System No ... Respiratory System No

Disturbance of mentality No ... Muscular System No ... Digestive System No

Osseous and Joint System No ... Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Nil.

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

[OVER]

AL EXAMINA
RS AND OTH

Other Ranks leaving t
Where there is evid
be used, but the case will be refe

No. 1048035 Rank P

Unit or Corps C. F. C

(Examination of Officer o

1. GENERAL DESCRIPTION:

Physique Good ..... Weig

Nutrition Good .....

Pulse 68 .....

Condition of arteries .....

Vision Rt. 0K ..... Left

Hearing (conversational voice)

Left 0K ft.

Opinion as to general health and

2. Has Officer or Other Rank eve
(Answer "Yes" or "No"). (S

Nervous System No .....

Special Senses No .....

Disturbance of mentality No .....

Osseous and Joint System No .....

3. If the answer to any part of S
of origin; and also a descript

Nil.

(If space

B 8

AL EXAMINATION UPON LEAVING THE SERVICE OF
ERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Other Ranks leaving the service for reasons other than medical unfitness are to be reported
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. 1049035 Rank PTE Surname SCOTT.
(Given name in full)
ROBERT. P.

Unit or Corps C.F.C. Birthplace LONDON - ENG.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 135 lbs. Height 5 ft. 11½ in. Colour of Eyes blue

Nutrition Good

Pulse 68 Good

Condition of arteries

Vision Rt. O.K. Left O.K.

Hearing (conversational voice) Rt. O.K. ft.

Left O.K. ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Scar at end 5th digit accidental 7 years ago.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Nil.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Sunnydale (Overseas)

Date 28/3/19 Signed C.H. Harman 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.P. Scott

(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.

A.F. W.3428.

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

To be rendered in accordance with Instructions on the back of this Form.

		Date of Casualty.
1. Number, Rank, Name and Unit of injured man.	1042035 Pte Scott R.P. No 19 Coy Can Forestry Corps.	20/3/18.

2. Nature, Location, and Severity of injury. (*N.B.* Field Ambulance to be notified at once if wound is believed to be self-inflicted).

Contusion right side of chest in lower axillary region, should cause no permanent disability. Not self-inflicted.

H G Parkhurst Capt CAMC

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this Form).

The accident occurred while working at night in the forest loading logs on to light railway trucks. Two heavy logs slipping, struck the skidway which fell on Pte Scott knocking him to the griund and injuring his right side.

Statements of two witnesses are appended.

4. Commanding Officer's opinion as to whether the man was:—

(*a*) In the performance of military duty. Yes

(*b*) To blame. No

(*c*) Whether any other person was to blame. No.

Date 26-3-18

Douglas H Nelles Capt.
Commanding 19 Company C.F.C.

5. (*a*) Opinion of G.O.C. Brigade.

(*b*) Disciplinary action taken or proposed, whether against injured man or another.

Date 29-3-18

K McDougall Major
Commanding No 2 District C.F.C.

6. To ..... Army "A."

Forwarded with reference to my Casualty Wire No. ..... Dated .....

Date .....

.....
..... Division.

7. To D.A.G., G.H.Q., 3rd Echelon.

Extract Copy sent 7/15/4/18.

G.H.Q. 3rd ECHELON
No. 18/7855
2-APR 1918
CANADIAN SECTION

Forwarded for Record. This casualty should be reported as Injured (Accidentally).

Date 6/4/18

Lt.-Col., A.A.G.,
for Major-General.
DEPUTY ADJUTANT GENERAL.
~~Army.~~

ARMY PRINTING AND STATIONERY SERVICES. B. 336. 30000. 8/17.

One 6/4/18 Ret

INSTRUCTIONS.

1. These Forms are to be completed in all cases of accidental or self-inflicted injuries, involving a soldier's absence from duty, whether due to the man's own act, or that of a comrade, or to other extraneous circumstances.

2. Where several casualties occur as the result of one accident, one Form is to be completed for each Officer or other rank injured, but only one set of statements from the witnesses of the accident need be attached.

3. Full statements are to be taken by an Officer from the witnesses of the accident. These statements will be signed by the witnesses making them, and by the Officer who takes them, and will be forwarded with this Form. Where it is intended to take disciplinary action, copies of these statements should be retained by the Unit for use in lieu of a summary of evidence.

4. Where it is possible to obtain it, a statement from the injured man will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

Special Instructions as to Evidence in Cases of Self-inflicted Wounds.

5. In these cases the statements mentioned in paragraphs 2 and 3 above should bring out all material points, *e.g.*, statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

6. A soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive, this charge should not be used. The charge will therefore usually be laid under Sec. 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under Section 18 for wilful maiming.