ATTESTATION PAPER.

No. 2691728.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	TIFFIN
1a. What are your Christian names?	Robert Wesley
1b. What is your present address?	50 Craig St., London, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Perth County, Trowbridge.
3. What is the name of your next-of kin?	Rev. A. C. Tiffin
4. What is the address of your next-of-kin?	Watford, Ont.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	January 2, 1900
6. What is your Trade or Calling?	Clerk
7. Are you married?	No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No.
11. Do you understand the nature and terms of your engagement?	Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No.
14. If so, what was the nature of the disability?	----
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No.
16. If so, what was the reason?	-------

TELEGRAPHIC ADDRESS of next of kin Watford, Ont. Box 6 [illegible]

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert Wesley TIFFIN, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

R. W. Tiffin (Signature of Recruit)

Date 4-3-19 191 . [illegible] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert Wesley TIFFIN, 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. W. Tiffin (Signature of Recruit)

Date 4-3-19 191 . [illegible] (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 London, Ont. this 5th day of March 1919.

J. K. Mullin (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Robert Wesley TIFFIN on Enlistment.

Apparent Age 19 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height: 5 ft 4¼ ins.

Chest measurement:
- Girth when fully expanded: 34 ins.
- Range of expansion: 3 ins.

Complexion: Medium

Eyes: Grey

Hair: Brown

Religious denominations.
- Church of England:
- Presbyterian:
- Methodist: x
- 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).

Circular scar right thigh ½inch in diameter.

Vision Both eyes 20/20
Hearing Both ears 21'

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* Cat A1 for the Canadian Over-Seas Expeditionary Force.

Date 4/3/19 191 .

Place London Ont.

W. McFarlane 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.

Robert Wesley TIFFIN 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.

H L Milligan Lieut. C.O.
(Signature of Officer)

Date 5-3-19 191 .

H.G.J. 13-8-19

REGIMENTAL DOCUMENTS

NAME TIFFIN Robert REGT. NO. 2691428 UNIT 1st Bn C. I. R. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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)			12393		
4	W & W 2538					3
3	misc.					14-7
1	M & C. 565					14-7
						1 7

W. 2589
100M-11-18
1772-39-1377

LEDGER NO. 1/11676 2/788 3/1566 SERIAL NO. 611759 B104 66 #38176

REG. NO. 2621428 NAME Tiffin R W 21

RANK Pte CORPS C Gds. AGE 19 SERVICE C 2/6-2

HOSPITALS	DATE OF ADMISSION
1 2 Lon C H (Isolation) London	15.3.19
2 W O M H. "	7.4.19.
3	

DIAGNOSIS Influenza (2) ~~Influenza~~ (2) Susp. Small Pox (Cr YD)

TRANSFERRED TO

DISPOSITION Disch 29.3.19 5.5.19 CATEGORY

over

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

P.T.O.

REMARKS: Hospitals

	Date	
W. O. M. H. London	10-7-9	Bronchitis
unit	23-7-19	

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2691728 (Rank) Private.

Name (in full) Tiffin Robert. enlisted in

the 1st Detachment C?G?R

CANADIAN EXPEDITIONARY FORCE at London. Ontario on the 5th.

day of March 1919

HE served in Canada. Only.

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 19 Years 7. Ins.

Height 5. Feet 4½. Ins.

Complexion Medium.

Eyes Grey.

Hair Brown.

Marks or Scars

Tattoed horse-shoe and horses-
Head right fore-arm.

pte. R. H. Tiffin.
Signature of Soldier

W. Bartlett
Issuing Officer

Lt.
Rank

Date of Discharge

July 30th 1919.

1st Bn. Cdn. Garr. Regt.

Date July 30th 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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. [illegible] (Rank) [illegible] enlisted in the [illegible] CANADIAN EXPEDITIONARY FORCE at [illegible] on the [illegible] day of [illegible] 19[illegible]

HE served in [illegible]

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

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

Age	[illegible] Years.
Height	[illegible] Ins.
Complexion	[illegible]
Eyes	[illegible]
Hair	[illegible]

Marks or Scars

[illegible]

Signature of Soldier

Date of Discharge

[illegible]

Issuing Officer

Rank

Date [illegible] 19[illegible]

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.

[illegible]

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 No. 1. Dist. C. G. R.

Regimental No. 269728 Rank Private C. E. F. Name Robert Griffin

Enlisted (a) 4-3-19 Terms of Service (a) ..... Service reckons from (a) 4-3-19.

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				
		29-7-19, Discharged in consequence of ' On Demobilization ' Authority H. Q. letter 868-8-1, d/12-7-19. File No. 1. D. 30-T-1058, d/29-7-19, D. O. No. 210, para (B). Part 2- d/29-7-19, with effect 30-7-19.			

CERTIFIED CORRECT ALL ENTRIES MADE

W. Bartlett Lt.
1st Bn. Cdn. Garr. Regt.

(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				

INVENTORY OF THE KIT of No. 269728 Pte. Tiffin R

who Discharged on 30th day of July 1919

N.B. To accompany units store accounts in the case of a non effective soldier, when the former are forwarded for audit.

ARTICLES	Number	REMARKS
NECESSARIES		
Badges. Cap		Def
Badges. Puggaree		
Badges. Collar, pairs		1.65
Badges. Shoulder, pairs		
Bags, Kit		
Blacking, tins of		
Bootlaces, pairs		
Braces, pairs		
Brushes. Blacking		
Brushes. Brass	1	
Brushes. Cloth		
Brushes. Hair		
Brushes. Polishing		
Brushes. Shaving		
Brasses, button		
Combs		
Drawers, winter, pairs		
Footstraps, pairs		
Forks, table		
Grease, tins of		
Holdalls		
Knives. Clasp		
Knives. " Lanyard		
Knives. Table		
Puggarees		
Razor and Case		
Shirts... Flannel		
Shirts... Winter		
Socks, Worsted, pairs		
Sponge, Pipeclay		
Spoon		
Towels		
CLOTHING, &c.		
Boots.... Ankle, pairs		
Boots.... Knee, pairs		
Boots.... Wellington, pairs		
Caps..... Forage		
Caps..... Covers, white		
Caps..... Drab		
Caps..... Winter, with bag		
Cape		
Cloak		
Gauntlets, leather		
Gloves .. Summer, pairs		
Gloves .. Winter, pairs		
Gloves .. Leather, white, pairs		
Greatcoats		
Jackets . Serge		
Jackets . Drab		
Mitts, winter, pairs		
Moccasins, pairs		
Mufflers		
Overshoes, pairs		
Pantaloons.. Bedford Cord, pairs		
Pantaloons.. Cloth, pairs		
Pantaloons.. Service, pairs		
Puttees.. Blue, pairs		
Puttees.. Drab, pairs		
Rubbers, pairs		
Shirts, service		
Stockings, long, black, pairs		
Trousers Cloth, pairs		
Trousers Serge, pairs		
Trousers Service, pairs		
Trousers Drab, pairs		
Tuques		
Tunic, cloth		
Waistcoat, Cardigan		

ARTICLES	Number	REMARKS
ARMS AND ACCOUTREMENTS		
Bandoliers		
Bayonet and Scabbard		
Belts, waist		
Bottles, water		
Bugle and String		
Carriers, waterbottle		
Covers, mess tin		
Helmets .. Metal		
Helmets .. Brass		
Helmets .. Bags		
Helmets .. Chains		
Helmets .. Plates		
Helmets .. Plumes		
Helmets .. Wolseley Pattern		
Helmets .. Bags		
Helmets .. Bodies		
Helmets .. Covers		
Helmets .. Straps chin		
Helmets .. Tops, khaki		
Helmets .. do white		
Knots, sword		
Mess Tins		
Pouch (Ex-O.E.)		
Rifle, complete		
Scabbard, Sword		
Sword (S. Sgt.) (Cav.)		
Sling, rifle		
Spurs, Jack, complete ...prs.		
do swan-neck		
Straps, great coat ...prs.		
do mess tin, M.S		
do do D.S		
do waterbottle		
Trumpet and string		
Equipment Dismounted Services Pattern 1916. Belts waist (with 2 sliding loops each with 2 brass squares)		
Equipment Dismounted Services Pattern 1916. Braces, shoulder		
Equipment Dismounted Services Pattern 1916. Carriers, waterbottle		
Equipment Dismounted Services Pattern 1916. do do strap attachment		
Equipment Dismounted Services Pattern 1916. Haversacks		
Equipment Dismounted Services Pattern 1916. Packs		
Equipment Dismounted Services Pattern 1916. Pouches Ammunition 75 rounds		

Articles given into Store since the Inventory was taken.

DATE	ARTICLES	Remarks, and by whom Deposited

Articles withdrawn from Store, and for what purpose.

DATE	ARTICLES	Remarks and by whom Withdrawn

Date kit was received into Q.M. Stores ..... 19....

A E Burwell Lt
Quartermaster.

Inventory taken by .....

Personal clothing and necessaries sold, amount realized, $.....

Where credit for the above amount will be found.....

Date of Court of Inquiry.....

.....
Commanding.

Date .....

M. F. C. 565.

1,500 pads of 100-7-16.
H. Q. 1772-39-118.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 1

NAME OF SOLDIER Tiffin Robert H.

RANK Pte

REGIMENT C.E.R.

No. 2691728

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
													U	L	P			Gold	Porcelain				
Condition on first Examination	Mar 5 1919.		5 14 19 30 31																		Capt. H. McDeans	I	Complete 5/3/19.

M.F.D.—105.
1500M.—1-18.
177-39-860.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 1

NAME OF SOLDIER Jeffries R W

REGIMENT C.A.D.C. RANK Pte

No. 2691728

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	31/7/18	M.18. 1930 31																		T.D. Campbell Capt		Complete
																						on Discharge

M. F. B. 465.
150M.—1-18.
1772-59-860.

DENTAL HISTORY SHEET

London, Ont., M.D. No. 1.

Number 1691728

Name Pte R.W. Griffin

Unit C.A.S.C.

Date 10/7/19 16/7/19

Age

Symptoms Cough Expectoration Fires easily Says he has been spitting blood

Temp. Record'd

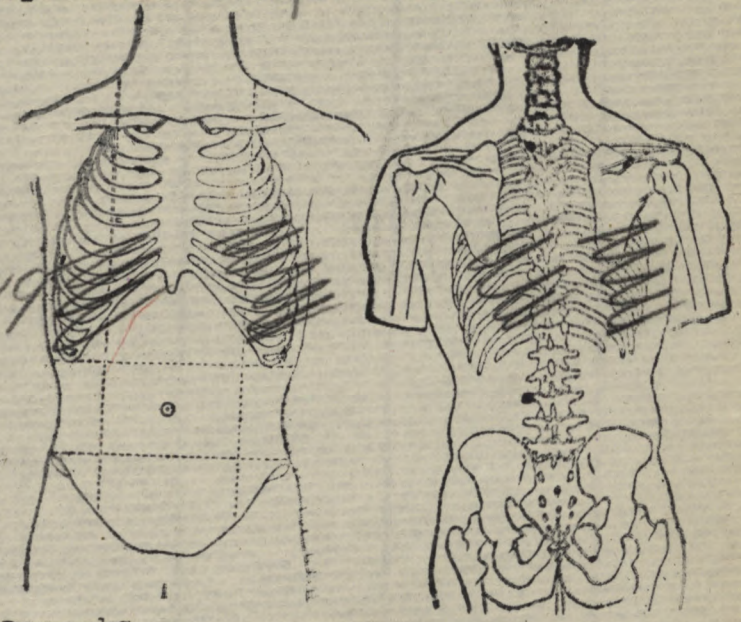
Pulse

Resp.

Weight

Sputum Nil.

History Influenza in Dec 1918. Influenza again and Pneumonia in April 1919



Exposure Nil

Examination Muscular Some dullness upper Chest both sides. Coarse crepts & bronchial respirations both sides t. lower lobes. H.B. at apices

Remarks X ray plate Sputum analyses

Diagnosis Bronchitis

Clear

Capt. C. A. M. C.

269728

MEDICAL HISTORY SHEET

Surname Tiffin Christian Name Robert

Examined { on 4 day of March 1919 / at London, Ont.

Approved by G. E. Clements

Rank Capt. C.A.M.C. M.O.

Birthplace { City or Town London / County Middlesex

Apparent age 19

Trade or occupation General Mch Dlvy Gds store.

Height 5 feet 4 1/4 Inches

Weight 123 lbs.

Chest measurement { Minimum 31 inches / Maximum expansion 34 inches

Physical development Good.

Small-pox Marks None

Vaccination Marks { Arm 0 Right 0 Left 0 / Number 0

When Vaccinated last Never Vaccinated

(a) Marks indicating congential peculiarities or previous disease Circular scar 1" thigh 1/2" in diameter.

(b) Slight defects but not sufficient to cause rejection

Eyes { R. 20/20 Ears { R. 21 ft. / L. 20/20 L. 21 ft.

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

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

Date	Result	Anti-Typhoid Inoculations, Etc.	
			M.O.
			M.O.
			M.O.

Enlisted on 4 day of March 191 9 at London, Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No. 1. Dist. C. G.R.			4-3-19.
Transferred to		A II		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Lohdon Ont.	4/3/19	Nil.	Cat. AII Pres.
London Ont.	29.5.19.	Bronchitis	Wm McFarlane Capt. Fit for home service A T Laird Capt.
London, Ont.	17-7-19	Bronchitis.	General Service. Major, C.A.M.C.

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

M. F. B. 313.
300M.—1-17.
H. Q. 1772-39-439.

Surname Griffin Christian Name Robert

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				
London		18	3	19	29	3	19	Influenza	12.	Admitted with Temp 100° Pulse 88. Enlarged & heated tonsils - Coated tongue - Harsh breathing over bilam of lungs - General malaise Ext Pill	D.H. Stevens
London		7	4	19	7	4	19	Susp. Small Pox	7/9	Received from mild attack of either chicken or small pox W	R.S. Hare Capt
Wom H London		10	7	19	23	7	19	Bronchitis	14	Rp albuter sight. No deposit Chest symptoms & crepitus when first admitted when rales heard over roots and lower lobes Boarded 227 and discharged as fit for general service	J.H. Riggs Lt Col RAMC

CASE HISTORY SHEET.

L.M.C.A. Hospital. London Dist Station.

No. 26 21728 Rank Pte Name Tipper, R.W. Age 19

Unit ~~6.S.R.~~ T.D. Completed years of service Where and how long } C 5-2

Date of admission 18-3-19 Date of discharge 29-3-19

Diagnosis N.Y. Influenza Place of origin London

CONDITION ON ADMISSION AND PROGRESS OF CASE. Admitted with Temp. 100° pulse 88.
Complaints - Cough - severe
Fielding - Tongue coated white centrally
- Tonsils enlarged -
- Pharynx - Reddened
- Harsh breathing over chest

21-2-19 - Muscle improved - ablate to be up
24-2-19 - Eating well D'Arbley
Discontinued for week.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Nyn.

TREATMENT (Especially any specific or special form.) - Calomel gr ½ Pulv Jalap 3 i
- Glycer Soloids 9 3h
- Cough Mixture 3 i 8 4h

CONDITION ON DISCHARGE (and disposal made of case.) Convalescent with Discharge C.A.R.

Cat A²

Date 29-3-19 D'Arbley Capt
Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

6 11759.

Military Hospital, M. D.
Wolseley Barracks
LONDON, ONT.

CASE HISTORY SHEET.

No. 269728 Rank Pte. Name Giffin, R. Age 19

Unit ~~1st C.D.~~ C.G.R. Completed years of service Where and how long } C. 1 2/12

Date of admission 7-4-19 Susp. Date of discharge 5/5/19

Diagnosis ~~La Grippe~~ Smd Pox Place of origin Canada

CONDITION ON ADMISSION AND PROGRESS OF CASE

temp - Headache - chill fever

P.D. Began ap 6 - with nausea - headache chills & fever

ap 7 - T 104+ P 100 - vomites - bowels open - headache dess & throat neg

10 - Papular rash - few vesicles on forhead - chest & wrists - TP normal

15 Vesicular rash - pustule - TP normal throat & chest neg

19 - TP normal lesion healing - feels well bowels op

25 - TP normal lesion practically healed - feels well

May 2 TP normal feels well lesion disappeared

TREATMENT (Especially any specific or special form.)

R Tinct opii 3 i
Liquor potassii 3 iii
Liq. ammon acetat 3 iij
Aq 3 i q 3 hr

Discontinued

R S Brankin

CONDITION ON DISCHARGE (and disposal made of case.)

Returned - Discharged to duty

Date May 5 - 19 Cata

R S Brankin
Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

B10466

CASE HISTORY SHEET.

W. O. M. Hospital. London Station.

No. 26917 28 Rank Pte Name Tiffin R. W. Age 19

Unit C. G. R. Completed years of service (Where and how long) C 3/12

Date of admission 10/7/19 Date of discharge 23-7-19

Diagnosis Bronchitis Place of origin Canada

CONDITION ON ADMISSION AND PROGRESS OF CASE. History Constant cough with expectoration since December 1918. He has had pains in chest but not at present time. Influenza 3 attacks. 1916 Nov, Dec and in March 1919 Small pox April 1919.

Objective. The man is well developed and well nourished. Chest of normal dimensions. Chest signs are negative except for a few fine rales lower left lobe

Subjective. Complains of general malaise. Constant cough with marked expectoration. Of late weeks he complains of pain in chest.

Chest Specialist's report reads in part: Some flatness of upper chest both sides. Coarse coarse, sibilant rales over both roots and lower lobes. Heard breathing at apices

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Neg

TREATMENT (Especially any specific or special form) Bott. Mist

17-7-19. Condition improved. Disability slight. Unable to elicit "coarse coarse, sibilant rales mentioned in chest specialist's report

CONDITION ON DISCHARGE, (and disposal made of case.) 23-7-19. Boarded 227 and discharged as fit for general service. The members of board were unable to find any evidence of bronchitis upon their examination

Date 23-7-19 Cata

O. C. Evans Capt
Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

738176

Name Kur. Tuffer. R.W.

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

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	Bal Fwd	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1919 JAN	Dec													21-21-			

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

Name.....

Regimental No.

Unit

Date of enlistment

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Married (yes or no)

Amount of pay assigned monthly $

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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					

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 2691728

Rank Private

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

Corps (Squadron, Battery or Company) 1st Bn. Cdn. Garr. Regt.

Date of Discharge 30-7-19

Place of Discharge London. Ontario

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 19 years 7 months.
Height 5 feet 4 4/4 inches.
Complexion Medium
Eyes Grey
Hair Brown
Trade Clerk
Intended place of residence (To be given as fully as practicable.) 25 Bruce St London Ont

Descriptive Marks
Tattooed horse-shoe and Horses-Head right-fore-arm

2. The above-named man is discharged in consequence of On Demobilization authority H. Q Letter 868-8-1 D/12-7-19 1-D-30-T-1058 D/29-7-19 D.O. No (210) para B) part 2 D/29-7-19 with effect 30-7-19

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

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

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

M. F. B. 218.

190m.—6-16.
H. Q. 1772-39-113

(OVER)

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

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

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

.....

Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) London Ontario, R. St. Tiffin ..... *(Signature of Soldier.)*

(Date) 30-7-19 Ale. Lodwick Sgt ..... *(Signature of Witness.)*

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

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

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

..... *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) London Ontario

(Date) 30-7-19

(Signature) W. Bartlett Lt.

1st Bn. Cdn. Garr. Regt.

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.)

I have received all just demands due me

K. M. Tiffin.

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.
Copies of Convictions, by C. P.	in MS.
Med. Hist. Sheet,	Militia Form B. 313
Medical Report for Invalid*	" B. 227.
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.

*Only if discharged "Medically unfit."

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

London, Ont., July 12th. 1919.

Capt. Craig.

Pte. Tiffin, # 2691728
X-Ray report No. 1054. Chest.

The bony contour heart and aorta are normal. The right apex is decidedly less transradiant than the left. The right root is heavier than the left and the right ascending bronchial tree and 1st. interspace trunks show a great deal of thickening and matting. Elsewhere the lung tissue is clear and the diaphragm shadows are regular.

H. Swanson
Captain,
Officer i/c X-Ray.

Craig

Military Hospital, M. D. No. 1
Wolseley Barracks
LONDON, ONT.

THIS FORM WILL BE USED FOR ALL RANKS

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 invalid 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 invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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 London, Ontario. DATE 16-7-19

1. 1 (a) Unit C. G. R. (b) Regimental No. 291728 (c) Rank Pte.

(d) Surname TIFFIN (e) Christian name Robert Wesley.

(f) Home address Watford, Ontario.

(g) Next of Kin Albert C. TIFFIN (h) Relationship Father.

(i) Address of Next of Kin Watford, Ontario.

2. Age last birthday 19 Date of birth 2-1-1900

3. Enlistment, or Appointment (if an Officer) (a) Place London, Ontario. (b) Date 4-3-19

4. Personal description:

(a) Height 5' 4½" (b) Weight 131 lbs. (stripped) (c) Complexion Medium.

(d) Colour of hair Brown (e) Colour of eyes Gray (f) Identification marks, Scars, etc. Tattooed horse shoe and horse's head, right forearm. Tattooed clapsed hands and Heart, left forearm. Circular scar 1/2" in diameter, right thigh.

5. Former trade or occupation Dry Goods Clerk.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
		134

	Periods	
	From	To
Canada	4-3-19	16-7-19
England		
France or other theatres of War		

7. Original disease, or injury Bronchitis (Slight)

(a) Date of origin Since enlistment. (b) Place of origin Canada.

(c) Cause Following Influenza.

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Slight pulmonary weakness.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

OBJECTIVE SIGNS-Chest Specialist's report reads as follows-"Muscular-Some flatness upper chest both sides.Coarse cooing sibilant rales over both roots and lower lobes.Harsh breathing at apices." I agree with this excepting I was unable to elicit the "Coarse cooing, sibilant rales over both roots and lower lobes."See X-Ray report attached.No Tubercle Bacilli in sputum.No elevation in temperature.I am of the opinion that the disability is slight.He is well nourished and has gained 9 pounds since enlistment,March 4th,1919.

SUBJECTIVE SYMPTOMS-Complains of cough which is intermittent.There is slight expectoration.If he walks fast for a hundred yards he says he suffers from pain in chest.No Haemoptysis at present.

CHEST SPECIALIST'S REPORT. 10-7-19

SYMPTOMS-Cough,Expectoration,Tires easily,Says he has been spitting blood.
HISTORY-Influenza in Dec.1918.Influenza again andsmallpox in April 1919.
EXPOSURE-NO. SPUTUM-Negative.
EXAMINATION-Muscular, some flatness upper chest, both sides.Coarse cooing and sibilant rales over both roots and lower lobes.Harsh breathing at apices.
DIAGNOSIS-Bronchitis. REMARKS-X-Ray plates, sputum analyses.
(Sgd.)D.A.Craig,Capt.CAMC.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System...NO... Cardio-Vascular System...NO... (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System...NO... (Albumen and Sugar will be excluded.)

Special Senses...NO... Respiratory System...NO... Integumentary System...NO...

Disturbances of Mentality...NO... Digestive System...NO... Muscular System...NO...

Osseous and Joint Systems...NO... Any other general condition...NO...

X-RAY REPORT. July 12th,1919.

The bony contour heart and aorta are normal.The right apex is decidedly less transradiant than the left.The right root is heavier than the left and the right ascending bronchial tree and 1st interspace trunks show a great deal of thickening and matting.Elsechere the lung tissue is clear and the diaphragm shadows are regular.
(Sgd.)H.S.Wismer,Capt.CAMC.

10. (a) History (of the condition referred to in Section 9 (a).)

He says he has had 3 attacks of influenza, since Nov.1918, 1st attack about Nov.15th,1918.In bed 5 days.2nd attack,Dec.1918, in bed 11 days 3rd ~~attack~~ attack March 1919.In Isolation Hospital, London, 18-3-19 to 29-3-19.Since last attack has been troubled with cough, pains in chest and general bodily weakness.Has showsn some improvement during past month.Gives a history of haemoptysis on one day only,on 8-7-19.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

In Isolation Hospital, London, with suspected small pox from 7-4-19 to 5-5-19. Diagnosis not determined. No disability now.

(*c*) (Here give a description of wounds, scar, and deformities.

None, other than described in 4(f)

11.—(*a*) Did the disabling condition have its origin before enlistment? NO

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

NOT APPLICABLE.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) 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? 3 months.

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

Hospital 6 days, rest and diet.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? NO

(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes, but it would be advisable for him him to have outside employment.
(If not, briefly state why)

17. Recommendations Discharge as fit for Home Service, Canada only.

J. H. Treacy Capt

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned R. W. Tiffin 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

R. W. Tiffin Pte. Rank.

Signature of invalid 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 criticised.

The board agrees except that no evidence of any Bronchitis on this examination.

Section (17) Fit for general service.

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) [illegible] (Give the nature of the condition and of the treatment required and its probable duration.)

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

21. It is recommended that the invalid [illegible] (When not for discharge add special recommendation.)

Is fit for General Service.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

C. A. Mitchell Major RCAMC
President.

PLACE London, Ontario,

DATE 17-7-19

Moriarty Captain RCAMC
} Members

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 invalid 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.....

DATE.....

} Members

APPROVED BY

A. T. Marrocks Lt. Col.
Assistant Director of Medical Services.

DATE N.715.

APPROVED BY

.....
Director-General of Medical Services.

DATE.....

64

London, Ont., May 28th. 1919.

To:- Capt. Craig.

Pte. R.W. Tiffin, # 2691728 C.G.R.
X-Ray report No. 609, chest.

The bony contour heart and aorta are normal. The diaphragm shadows are regular. The lungs do not show any abnormality except a slight thickening of the right hilus shadow.

H. Swisher Captain,
Officer i/c X-Ray.

Clmf

DIVISIONAL LABORATORY

Rank Pte. Name Tippin No. 269728 Corps

Ward Date July 11/19

Rec'd from

The specimen of Sputum

shows numerous

diplococci, Few

Staphlococci.

Absence of Tubercle

Bacilli

Examined by Armstrong Lt.

M. F. W. 2538.
10M.—5-18.
1772-39-1315.

DIVISIONAL LABORATORY

Rank Pte. Name Tuffin No. 269728 Corps

Ward J. Date July 14/19

Rec'd from

The specimen of Sputum

shows Absence of

Tubercle Bacilli

Examined by E. L. Armstrong Lt.

M. F. W. 2538.
10M.—5-18.
1772-39-1315.

DIVISIONAL LABORATORY.

Rank Pte. Name Tuppin No. 269728 Corps C.

Ward Date July 12/18

Rec'd from

The specimen of Sputum

shows absence of

Tubercle Bacilli

Examined by E. H. Armstrong Lt.

M. F. W. 2538.
10M.—5-18.
1772-39-1315.

AUDITOR J.T. | PAYMASTER

M. OR S.

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

REGT. No. 2691728 RANK Pte NAME (IN FULL) TIFFIN Robert Wesley (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN Rev. a C Tiffin — RELATIONSHIP Father

ADDRESS Watford Ont

IS SEPARATION ALLOWANCE PAID? No. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

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

PLACE OF ATTESTATION London Ont — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 4-3-19 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY. $ Nil. — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE London — DATE 30.7.19 — REASON Dem — AUTHORITY D/O 210 — IF ENTITLED TO POST DISCHARGE PAY No

MONTH 1919	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																						
March	28	1/10	30	80					30	80	15/14				107	31	5	-			15	-									20				10	80	0864 Attested 4-3-19
					10	80																															D0.89 Hosp 29-3-19
Apl.	30	1/10	33	-					43	80	26	26					5	-													5	-			38	80	D0.98 adm Hosp 7-4-19
					38	80																															D0125 Hosp discharged 5-5-19
May	31	1/10	34	10					72	90	36	16	45	15	68	20	28	-	18	-	24				10				62	10			10	80	Kit 10/-
					10	80																															Kit 03/- 30/- — 30/-
June	30	1/10	35	-					43	80	14	13			88	27	15	-			23	-			30 03 30				33	63			10	17	
July	30	1/10	33	-	35				68	-	103	14			115	1	10	-			61	52	5	00	165				78	17	Paid						D0195. Hosp Adm 10.7.19
																																					205 " DIS 23.7.19
																																					D0210 Dis 30.7.19 35 Kloal 1.65 Kit Nowsq

E Jermain Lgd Capt
for Paymaster i/c No. C.A.R. 6-3-20

60m.-11-18. L. L. 51777. M. & D. 9585.

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

DIVISIONAL LABORATORY

Rank Pte. Name Tuppin No. 69178 Corps 8

Ward J Date July 15/19

Rec'd from

The specimen of Sputum

shows Few Staphlococci.

Absence of

Tubercle Bacilli.

Examined by E. H. Armstrong Lt

M. F. W. 2538.
10M.—5-18.
1772-39-1315.