

ATTESTATION PAPER.

No. 126506

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name? *Robert Anderson*
- 2. In what Town, Township or Parish, and in what Country were you born? *Ayrshire Scotland*
- 3. What is the name of your next-of-kin? *Robert Anderson*
- 4. What is the address of your next-of-kin? *39 Green St Lane Ayr Scotland*
- 5. What is the date of your birth? *Dec 5th 1880*
- 6. What is your Trade or Calling? *Horseman & Farmer*
- 7. Are you married? *No*
- 8. Are you willing to be vaccinated or re-vaccinated? *and inoculated* *yes*
- 9. Do you now belong to the Active Militia? *No*
- 10. Have you ever served in any Military Force? *yes 3 years H.O.S. Borders & Batt*
If so, state particulars of former Service.
- 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*

Robert Anderson (Signature of Man).
H. F. Shaw (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *Sept 13th* 191*5* - *Robert Anderson* (Signature of Recruit)
H. F. Shaw (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Robert Anderson*, 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.

Date *Sept 13th* 191*5* - *Robert Anderson* (Signature of Recruit)
H. F. Shaw (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 *Clutha* this *13th* day of *Sept* 191*5*.

Geo Jackson (Signature of Justice)

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

J. H. Bingham (Approving Officer)
Leut

Description of Robert Anderson on Enlistment.

Apparent Age 35 years - months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 5 ft. 8 ins.
 Chest measurement { Girth when fully expanded 39 ins.
 Range of expansion 3 ins.
 Complexion fair ruddy
 Eyes Brown
 Hair Brown
 Religious denominations. { Church of England
 Presbyterian
 Wesleyan
 Baptist or Congregationalist
 Other Protestants (Denomination to be stated.)
 Roman Catholic yes
 Jewish

(Zur scar right small of back
 scar 1/2" long left forearm
 2" below elbow
 Light finger right hand broken

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 Sept 13 1915
 Place Belgium

W. Shaw Mejer
 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 Anderson 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.

W. H. H. H. H.
 Lt. Col. (Signature of Officer)

Date Sept 13th 1915

Commanding 71st Batt'n C.E.F.

O. P. 71st Battalion
O. P. 7

Wm.

5' 3/20.

Q.

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

Casualty Form—Active Service.

126506

CERTIFIED COPY
 Canadian Record Office,
 Westminster House,
 7, Millbank, S.W.

Unit, Regiment or Corps 71st B.S. Bn
 Regimental No. 126506 Rank pte Name Anderson Robert
 Enlisted (a) 13-9-15 Terms of Service (a) W of W Service reckons from (a) 13-9-15
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report	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.
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TRANSFERRED TO 4th BATTN. C.E.F. MAY 1 1916

		EMBARKED FOR FRANCE		
2-5-16.	O.C.C.B.D.	Reinforcement arrived	Can.B.Dep.	2-5-16. Pt.2.Orders No.20, d/-14-5-16.
20-5-16.	do	Left for Unit.	4th Batt'n	20-5-16. N.R. D.C.R.313.
28-5-16.	O.C.4th Bn.	Joined Unit.	do	22-5-16. B.213. " 313.
13-8-16	do	to Hospital sick	Hospital	8-8-16 XB 213 " 356
20-8-16	do	Rejoined	Field	14-8-16 B 213 " 361
			Major	
			OC 36th Res. Battr CEF	
20-8-16	O.C.4th Bn.	Inspected L. Am	Adm	12-8-16 A36 O.C.R 344
20-8-16	do	do	sick	11-8-16 A36 " 344
15-10-16	O.C. 4th Bn	Wounded & Missing	Field	8-10-16. B.213 383

St 202069. d/26. 11.16
 [Signature]
 [Signature]

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

MISSING MAN.

(Acceptance of Death for Official Purposes.)

25-A-902.

XXXXXXXXXX
War Office Reference No. _____

THE DEPUTY ADJUTANT-GENERAL,
G.H.Q., 3RD ECHELON. *Canadian Section.*

No. 126506. Rank Private. Name Anderson R.

Regiment 4th Canadian Battalion. has been missing since
8th Oct 1916.

Reference has been made to the Unit, the Record Office and the Base, on the printed missing list, but no evidence of material value has been received which would indicate that he is not dead.

In accordance with the decision of the Army Council, this soldier is to be regarded for official purposes as having died on or since the above date.

You are requested to state whether the soldier leaves a will or not— *Reply.*

- (a) In Pay Book ;
- (b) In Small Book ;
- (c) As a separate document ;

Not received

and to forward it, if found, to this Office.

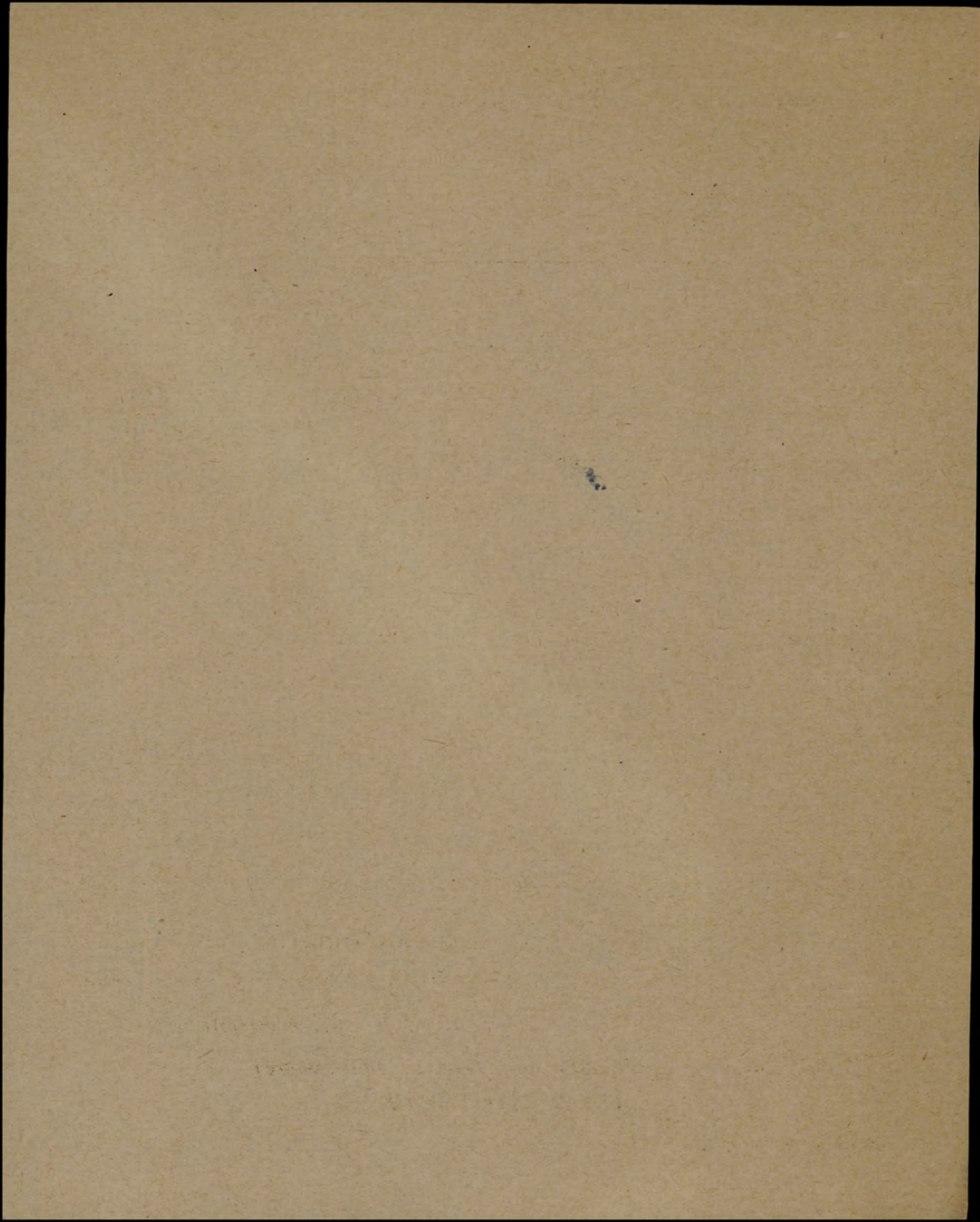
The Pay Book and the duplicate copy of this form should be forwarded to the Regimental Paymaster.

O.S.B.

[Signature]
Capt. for Lt. Col. A.A.
Canadian Section G.H.Q. 3rd Echelon

Records,
3rd Echelon.

XXXXXXXXXX
WAR OFFICE,
Date June 14th 1917.



Rank Pte. Name ANDERSON, Robert.

Reg'l No. 126506.

Unit 71st to 36th Res. Bn. What Unit?
 If in perm. Corps, }

Married or Single Single.

Place and Date of Enlistment Clinton, Sept 13th 1915.

Place of Birth Ayrshire, Scotland

Name and Address, Next-of-Kin

~~Robert Anderson~~

Miss M. Anderson

c/o Frau Gamburg, Baggesensgade 4, Copenhagen N, Denmark, (Auth R.L. 29 dated 29.4.16)

~~39, Green Lane, Ayr, Scotland.~~

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

R.L. 25-A-804

Relationship

Discharge, Date and Place

Reason

Character

UOR Bg

Horseman + Farmer

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				
<i>6</i> 1.12.15	<i>OC. 36</i>	<i>Arrived in England.</i>	<i>Bandling</i>	<i>30</i> 11-15	<i>Pt II 707103 checked 3.5.16</i>
1.5.16	..	<i>Trans to 4th Bn</i>	"	1.5.16	<i>" 122. {14th Batt Pt II 20} 14.5.16</i>
29.8.16	<i>4th Bn.</i>	<i>Adm. in hosp.</i>	<i>Field</i>	8.8.16	<i>C/h. A442 Sick infected l. arm</i>
2.9.16	" "	<i>To Duty</i>	"	14.8.16	<i>" A446 " "</i>
7-11-16	---	<i>Wounded - Missive</i>	"	8.10.16	<i>" A4501</i>
25.11.16	---	<i>S.O.S. -</i>	"	8.10.16	<i>Pt II - 69</i>
12.6.17	---	<i>Prev. rept. W & M now for official purposes presumed to have died on or since</i>	"	8.10.16	<i>66a/673</i>

2nd Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

506

To Whom *Mrs. J. Carbert,*
Address *Clinton*

By Whom Assigned *Auderson, R.*

Regtl. No. *126 506*

Rank *Pte*

Corps *Sp1 Recif 71 Batta C.E.F*

Rate *25⁰⁰ - 20⁰⁰ Mar 16*
1 2 M 19/8/16 80/20/9/16
DEC 1 - 1915

PAYMENTS

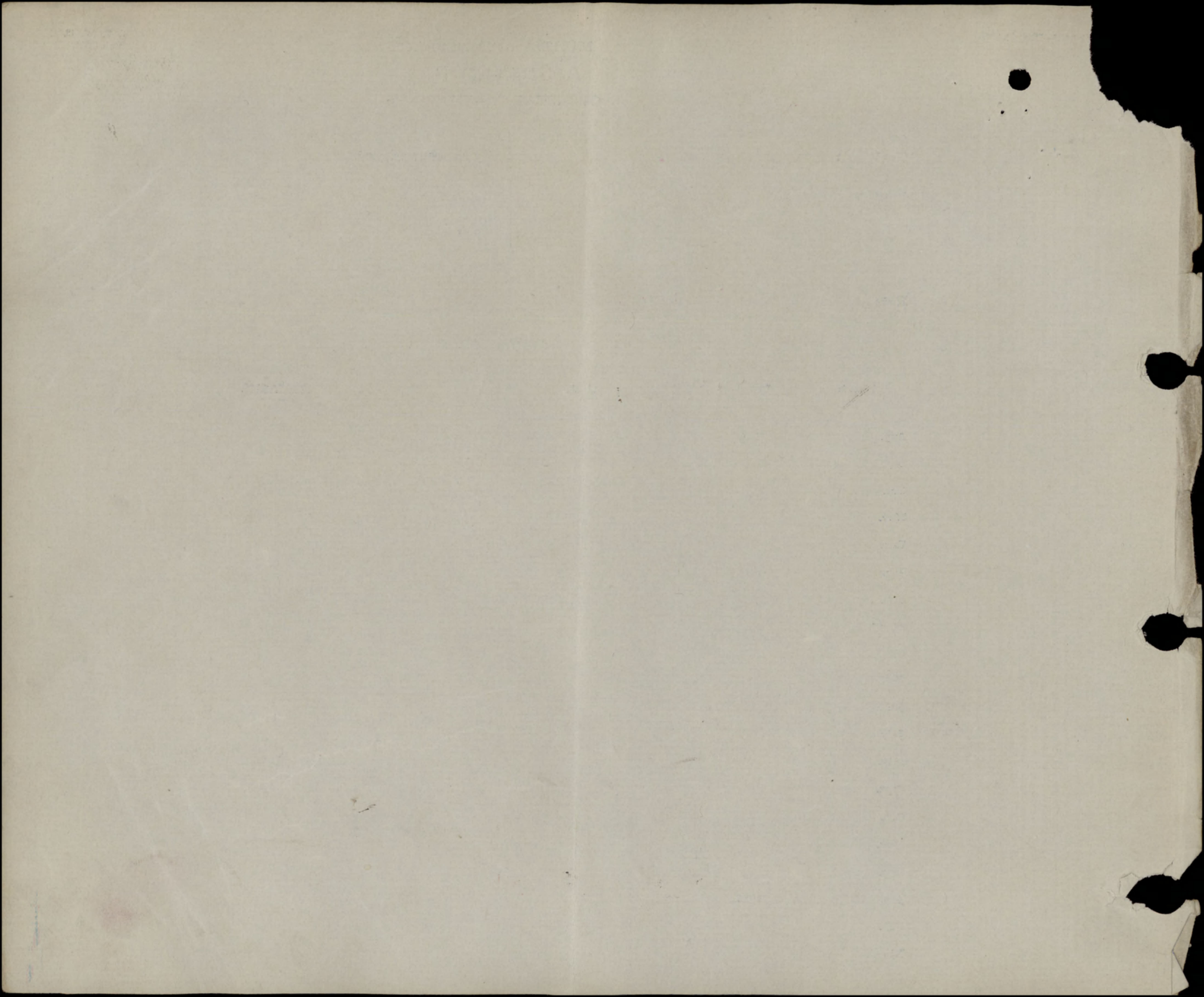
leave Mar 16 3m 9 76 by

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Stop Payments</i> <i>Missing 3 M. 10/11/16</i> <i>1/12/16</i> <i>6/12/16</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<i>Missing wounded 8th Dec/16 C.L. (28) 8/11/16</i> <i>Casualties</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>L 5872</i>	<i>25</i>	
Feb.		<i>N 12999</i>	<i>25 -</i>	
March		<i>O 15361</i>	<i>25</i>	

75

Pensions Notified Date *17/8/17*
 Killed in Action }
 Died of Wounds } Date *8/10/16*
 Missing }
 C. L. *(3) 15/8/17*; Clerk *B.N. March*
 Date Noted *17/8/17* 1917

Sept adjustment



ASSIGNED PAY

501
50m-4-16.
1772-39-819.

Mrs. Thos. Carbert

OVERSEAS CONTINGENTS

Name of Soldier

Anderson Robert
126506 Pte Kemp 71 at Battr.

Sheet No. 2.

PAYMENTS.

L.L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
				20 ⁰⁰ March 16
April	1916			C.F.X \$255 ⁰⁰ - 18th March 17/8/17. 2 M 19 ⁰⁰ 16/16 12/19/16 140 ⁰⁰ Sept cheque to adjust 20 ⁰⁰ future. up to close 1/12/16 etc. by 3M. 6 ⁰⁰ / ₁₆ Stop 31 st Dec 16 CAR <div style="border: 1px solid red; padding: 5px; display: inline-block;">Casualties</div>
May				
June				
July				
Aug.				
Sept.		M 17014	140	
Oct.		E 19621	20	
Nov.		E 24544	20	
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

Missing 28
 P-56
 Reg'l No. 126506.

Rank Pte. Name ANDERSON, Robert.

Unit 71st to 36th Res. Bn. If in perm. Corps, What Unit?
 4th

Married or Single Single.

Place and Date of Enlistment Clinton, Sept 13th 1915.

Place of Birth Ayrshire, Scotland

Name and Address, Next-of-Kin Robert Anderson,

39, Green Lane, Ayr, Scotland.

Relationship

Assigned Pay Monthly \$ 25.00

Payable to Mrs J. Harbert,

Assigned cancelled Mar 1. 16

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

To Canada
9-10-16

Reason

4.2-16
11.2-16

Character

Entered on N.E. Card Index

Checked by W. Williams
1673-12-6-17

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
Nov 16	31	46	1.00	46	46	10	460	1.50	62.10			4.87	25.00		25.00	37.10	1000 clothing 1.50 for from previous del
Jan 1	31	31	1	31	31	10	310		34.10			14.60	75		44.47	26.73	
May 11	11	11	1	11	11	10	110		12.10				75		75	13.83	
Sept 12	29	18	1	18	18	10	180		19.80					10	10	3.83	
March 1	31	31	1.00	31.00	31	10	310	10.00	44.10	896		9.73			12.28	55.45	Pl. cancelled. 10.00 clothing debited when estimated for discharge recredited when taken back on strength.
				13.71					172.20			31.75	75	10	116.75	55.45	
							13.70	21.50							116.75		

Statements of
 JUN 23 1917
 Account rendered

BALANCE TRANSFERRED TO NEW LEDGER.

Checked C. Robertson

Issued

Surname *Anderson* Christian Name or Names *R.* Reg. No. *126506*

Rank *Pte.* Unit *4th. Br.* Co. Troop Batty.

Hospital *Canadian Fld Amb.* Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Later Diagnosis (if changed)

Sick. Q. Infected w/ Arme.

(2)

(3)

Additional Diagnoses: If more than one state present

A.M.D. 2 DEPT.

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

DISPOSITION

Reg. Unit

Date

14-8-16

C.L. 29-8-16 A 442

e.L. 2-9-16 A 446

Ch. 14-9-16 H 456

7. 11. 16 A 501

" 12. 6. 17. A 673

REMARKS

Rep'd from Base; "Sick to Hospital" 8-8-16

Rep from Base wd & Missing 8.10.16

Prev. Reptd. wd + Missing Now. for Official purposes. Presumed to have died on or. since 8-10-16. R.

RW

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

^L ANDERSON, Pte. R., ^L #126506, ^{ROBERT.} 4th ^W ^W 649-A-2493. ✓

not eligible for 14/15 Star.

MEDALS. (Sister) Miss Mary Anderson,
c/o James Cunningham, Esq.,
Stanwix,
Newlands,
Glasgow, Scotland.

Decorations

PLACQUES. (Father) Robert Anderson, Esq.,
19 Carrick St.,
Ayr, Scotland.

Serial No 784518

C. OF S. (N I L)

Scroll Desp. FEB 24 1921 Regn No 222996

Plaque Desp. NOV 9 Regn No P15430

1921

OK

WS (P)



No. 126506 RANK Pte.

NAME Anderson R.

T. O. S. 13-9-15.
(D.O. no 19 of 20-9-15).

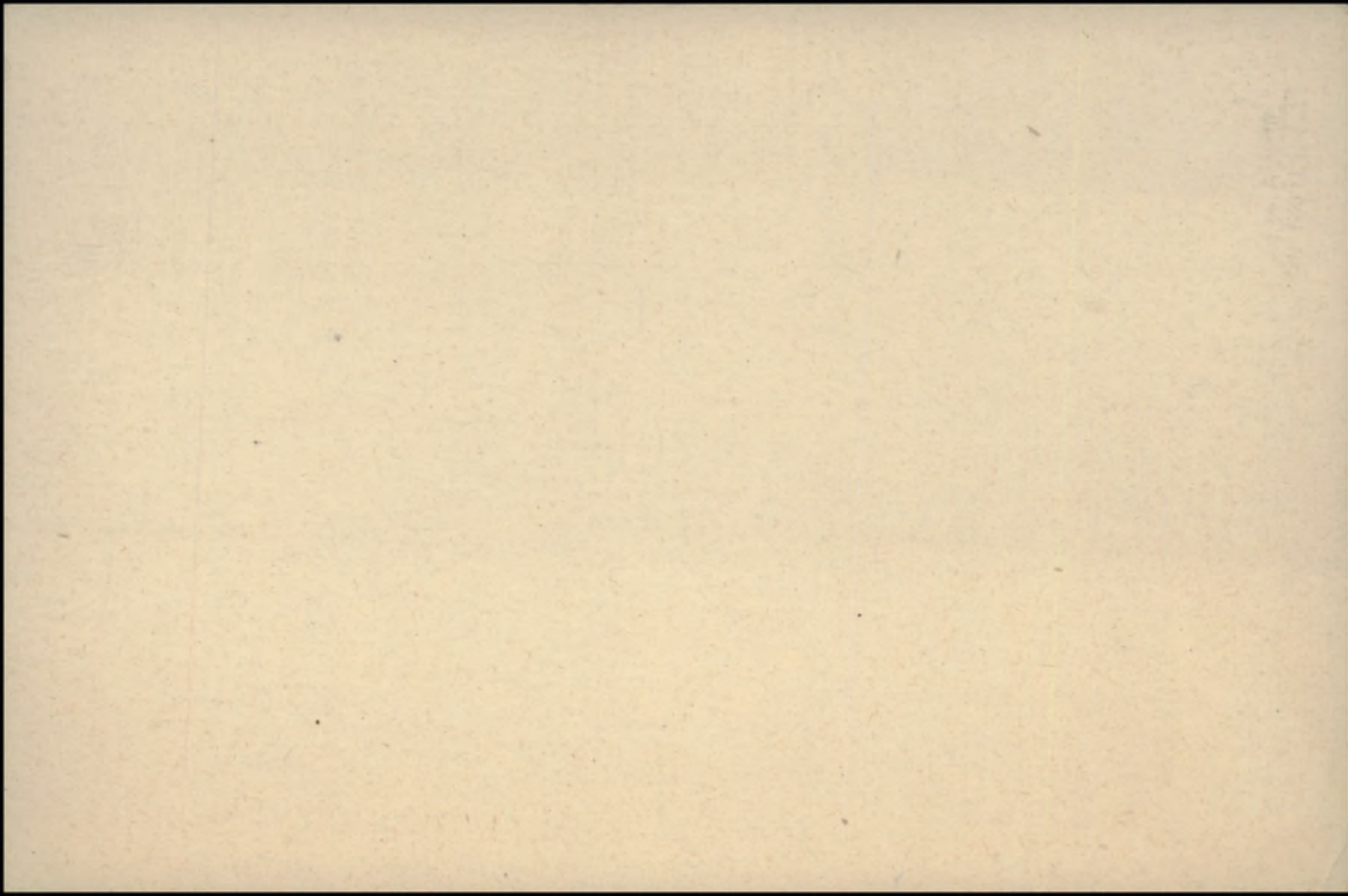
UNIT

71st Battalion C. E. F.

M. D. /

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
^{19 15} Sept 13	^{19 15} Sept 30	✓		
Oct.		✓		
Nov 1	Nov 15	u.		

UNIT SAILED
APR 2 1916



NAME *Andersson Robert*RANK AND CORPS *Pte. W. Th. Bu. (Form. Form. 91st/1st R.D.)*

CABLE

NO.

DATE

C

NATURE OF CASUALTY

NO.	DATE	NATURE OF CASUALTY
04251	9-11-16	Reported missing, wounded Oct. 8 th /16
Cas. Brn. rep.	14-6-17	Prev. rep. missing ^{wounded} now for offic.
Recd	8-8-17	purposes presumed to have died on or since 8 in Oct. 1916

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A. 449.	Rep. from Base	8-8-16	("Sick" to Hosp.) Sick.
a 440.	Rej. unit. & hosp.	14-8-16	Sick . Infected l. arm. as per list a 456.
Q. 501	Rep. from Base	8-10-16	Wd. & missing
a 673	Prev. rep. wounded		& missing now for office purposes presumed to have died on or since 8-10-16

Name ANDERSON? Robt Rank Pte.

Reg. No. 126506

Unit 4th. Batt.

Miss. M. Anderson, c/o Fru Gamborg Baggesensgade
Copenhagen, N. Denmark.

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
-8-8-16	Rept. to Hos.		Sick	A442		
14-8	Rejoined Unit no 2 C. F. A		do	A446	A 456	14/4 note
8-10	reported <u>WOUNDED & MISSING.</u> D.C.S. 383.d/31-10-16.			A501.04251.	7-11.	
<p style="text-align: center;">25-A-804</p> <p>Now for official purposes presumed to have died on or since 8-10-16. Et by 3.</p>						

Name ANDERSON Robert Rank

Pte. ✓

Reg. No. 126506

Unit 4th Bn.

RL. 25A804.

Next of Kin Miss M. Anderson, c/o Fru Gemborg, Baggesensgade
4, Copenhagen, Denmark.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
8-10.	reported <u>WOUNDED & MISSING.</u>			A501.04251.7-11.		
	D.C.S.383.d/31-10-16.					
Apr 10	N.K.					
May 24	Cap. Pres X. D.C.S.					
8-10-16	Presumed dead			A673.		12/6/17

Number

126506

Rank

Pte

Q

Surname

ANDERSON

Christian Name

Robert

Units

4th Bn C Inf

Theatre of War

France

Date of Service

1.5.16 III

Remarks

(Sister) Miss Mary Anderson,

Latest Address

90 James Cunningham,
Stanswry, Newlands,
Glasgow, Scot.

Roll No.

200m. - 6-21. M.

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* DUE TO SERVICE
* NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

UNIT

IN CATEGORY

INVALID

WHERE TO)

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

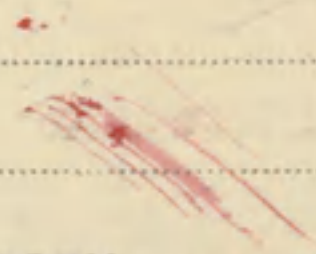
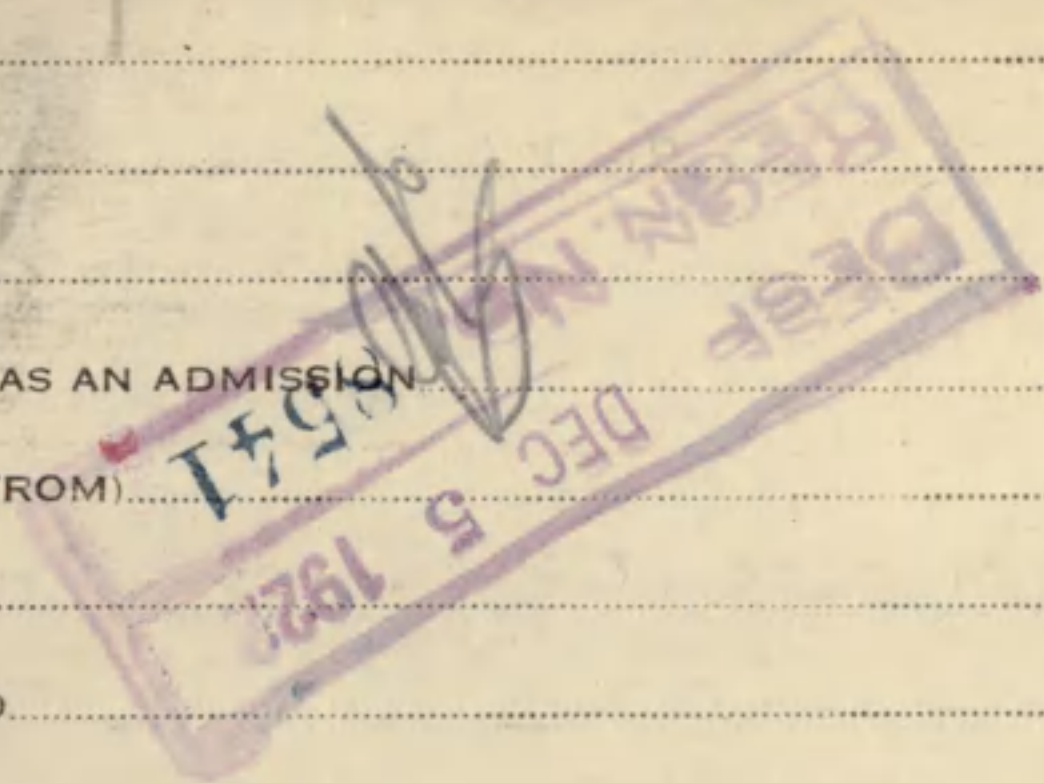


Table III. - Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
28.2.16.	Vacc.
19.10.15.	Inoc. C. McCree. Major.
2.11.15.	

Table IV. Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

DUPLICATE.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
 Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ANDERSON Christian Name Robert

TABLE I. - GENERAL TABLE.

Birthplace ... Parish Ayrshire County Scotland.
 Examined ... { on 13th day of September 191 5
 at Clinton
 Declared Age ... 35 years ... days.
 Trade or Occupation ... Forseman and Farmer
 Height ... 5 feet 8 inches.
 Weight ... 150 lbs.
 Chest Measurement { Girth when fully Expanded 39 inches.
 Range of Expansion 3 inches.
 Physical Development ... Good
 Vaccination Marks { Arm ... Right
 Number ... Left
 When Vaccinated ... 1905
 Vision ... { R.E. - V=
 L.E. - V=



(a) Marks indicating congenital peculiarities or previous disease ...
 (b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) J.H. Shaw.
 (Rank) Major. Medical Officer.

Enlisted ... { at Clinton
 on 13th day of September 191 5

Joined on Enlistment ...	Corps.	Regtl. No.
Transferred to ...	<u>71st Batt. C.E.F.</u>	<u>126506</u>

Became non-effective by ...
 This Medical History Sheet has been compared with the original on ... day of ... 191 ...
 pending Attention Paper, and entries made in red have been taken from the Attention Paper.

MARRIED OR SINGLE **S**

PLACE OF BIRTH *Argyleshire, Scotland*

NAME AND ADDRESS OF NEXT OF KIN *Robert Anderson
39 Green St. Lane, Argyleshire, Scotland*

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

COMPILED BY [Signature]
CHECKED BY [Signature]

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>W:3 missing</i>	<i>8/10/16</i>	<i>ch 501 7/16</i>
<i>O.P.D.</i>	<i>8/10/16</i>	<i>Ch 501 7/16</i>

ADMISSIONS TO HOSPITAL, &c.

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

REG'L No. *126506* RANK *Pte* NAME *Anderson, Robert*

IF IN PERM. CORPS WHAT UNIT *36th Bn* TRANSFERRED TO *Hth Bn* DATE *1/1/16* AUTHORITY *Bo 122*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *N.E. B.* DATE *9/1/16* AUTHORITY *Ch 501 7/16*

PLACE OF ATTESTATION *Clinton Ontario* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *Sept. 13. 1915* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *46.00* DATE EFFECTIVE *March 1/1916*

PAYABLE TO *Mrs. M. Carbert, Clinton, Ontario* RELATIONSHIP *M*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *9-11-16* EFFECTIVE *1-12-16* REASON *Wounded & missing 8/10/16 ch 501 7/16*

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *9/10/16*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index
Checked by *T. J. Williams*



DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE				1	2				3	4	CREDIT	DEBIT	
			\$	C.			\$	C.			\$	C.																								1
<i>1916</i>																																				
<i>April 13</i>																																				
<i>1. 30</i>	<i>30</i>	<i>10</i>	<i>30.00</i>	<i>30</i>	<i>10</i>	<i>3.00</i>																														
<i>May 31</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>3/10</i>																														
<i>June 30</i>	<i>30</i>	<i>"</i>	<i>30</i>	<i>30</i>	<i>"</i>	<i>3</i>																														
<i>July 31</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>3.10</i>																														
<i>Aug 1</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>3.10</i>																														
<i>Sept 1</i>	<i>30</i>	<i>"</i>	<i>30</i>	<i>30</i>	<i>"</i>	<i>3</i>																														
<i>Oct 1</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>3.10</i>																														
<i>Nov.</i>																																				
<i>Aug 17</i>																																				
<i>Dec 1/18</i>																																				

Checked *CAH* [Signature]

STATE OF ILLINOIS
JUN 23 1917
ACCOUNT...

[Signature]

Small Ledger Sheet

over

126506

Pte Anderson Robert

14.57
11.90
2.67

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT							
			\$	C.			\$	C.			\$	C.																							
June 18																																			
Aug																																			

MONTH PARTICULARS CR.1 CR.2 PARTICULARS DR.1 DR.2

Refer to Page "0"
P.M.G. 2353 1/8/18 3/17 46.97
46.97

46.97
166

BALANCE DEFERRED PAY