

469246

I.D. number

No. d'identification

COLBURN

Surname

Nom de famille

Russell Earle

Given names

Prénoms

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location

Lieu

1844

“CONTENTS CONFIDENTIAL”
“CONTENU CONFIDENTIEL”



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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A. F. B. 122-1

a 21 B 2570a

Name COLBURN, RUSSELL, EARLE.

Regt. No. 469246 Rank Pte.

Corps 64th Bn.

Co.

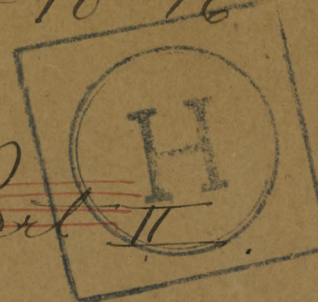
R. O. No.....

H. Q. No.....



27773

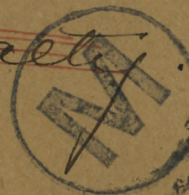
K. A. 1-10-16



~~Cards~~

~~Part II~~

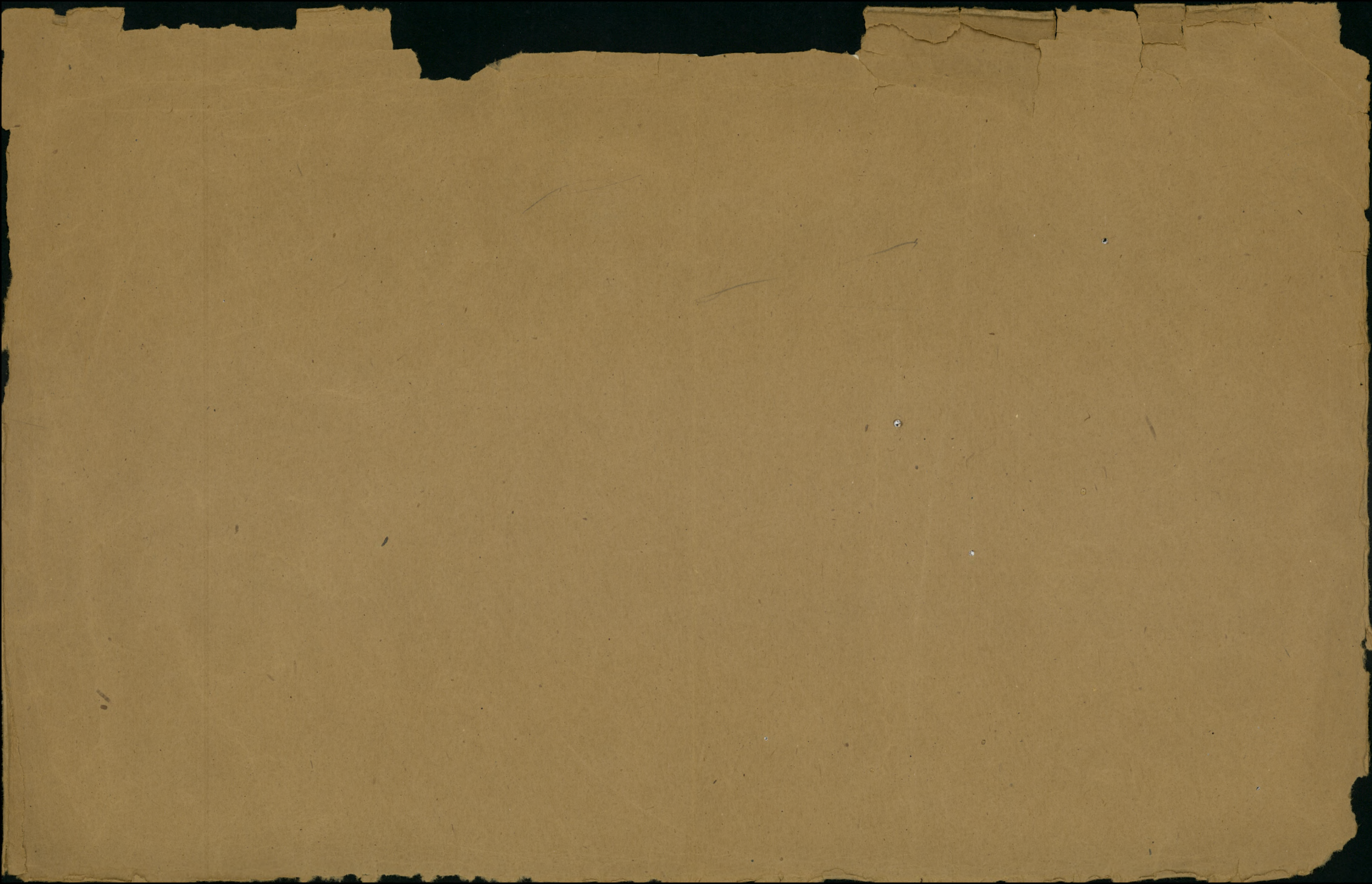
~~Casualty~~



#1844

12-19
12-19
7 19

M.X.
13-4-21
RR



ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 4 69246

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... Russell Colburne
2. In what Town, Township or Parish, and in what Country were you born?..... Shulie, N. S.
3. What is the name of your next-of-kin?..... Alice Colburne (Mother).
4. What is the address of your next-of-kin?..... Shulie N. S. Cumberland County Canada
5. What is the date of your birth?..... Sept 13th 1896.
6. What is your Trade or Calling?..... Millman.
7. Are you married?..... No.
8. Are you willing to be vaccinated or re-vaccinated?..... Yes.
9. Do you now belong to the Active Militia?..... No.
10. Have you ever served in any Military Force?..... No.
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.

Russel Colburne (Signature of Man.)
M. J. Butler (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Russell Colburne, 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.

Russel Colburne (Signature of Recruit)

Date Aug 23rd 1915 M. J. Butler (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Russell Colburne, 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.

Russel Colburne (Signature of Recruit)

Date Aug 23rd 1915 M. J. Butler (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, Sussex, N. S. this 23rd day August 1915.

H. M. Mansfield (Signature of Justice)
J. P. IN AND FOR THE COUNTY OF KINGS, N. S.

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

L. C. Carey Capt (Approving Officer)

Description of Russell Colburn on Enlistment.

Apparent Age 18 years 11 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. 4 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Dark

Eyes Hazel

Hair Dark

Religious denominations. { Church of England
Presbyterian
Wesleyan
Baptist or Congregationalist Yes
Other Protestants (Denomination to be stated.)
Roman Catholic Yes
Jewish

Scar on left foot.

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 Aug 23rd 1915.

Place Sussex, N B

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.

Russell Colburn, 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.

Date Aug 23rd 1914.

St. Mary's Camp
LT. COLONEL
(Signature of Officer)
CMDG. 64th "OVERSEAS" BATTN. C.E.F.

Surname

Colburne

Christian Name or Names

R.

Reg. No.

469246

Rank

Pte.

Unit

25th Bn.

Co.

Troop

Batty

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Prob'ly have Died on or
since 1-10-16.*

DISPOSITION

Date

C.L. 24.11.16 A378

REMARKS

Reported from Base wd.

~~16.9.16~~ 1-10-16

- 29-11-16 @377

Cf. 6.12.16 #382

19.7.17. @562

Rev. Wd + missing 1-10-16
Now. For. off. Piposel. Presumed
to have Died on or, since
1.10.16

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London,

R 48

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

2.

3.

4.

5.

6.

7.

Name COLBURNE ^{Russel}
 Rank Private Reg. No 469246

Unit 25th Battalion

Next of Kin Canada

RF25. C. 2358.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
16-9	Reported from Base Wounded					A373/05292/24-11
	Errata correcting date of casualty to 1-10-16					A377
1-10	Previously Reported Wounded Now Reported Wounded & Missing					A382/05910/6-12
	W S M					
	NOW FOR OFFICIAL PURPOSES PRESUMED TO HAVE DIED ON OR SINCE .1-10-16.					A562.
	W S M					

[illegible]

NAME Colburn Russell

REGT'L No 469246

H. Q. FILE NO. 649-

RANK AND CORPS Ple. 1st Lt. Bn. (form 64th Bn.)

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

C.

Oh 295	23-11-16	Reported wounded Sept. 16th. 1916 (nature of wound not reported yet)
05910	5-12-16	Pre. Rep. Wounded Now. Rep. Wounded & Missing Since Oct. 1/16
Asst. Bn. Rep.	21-5-17	Pres. rept. wounded & missing now for official purposes presumed to have died on or since 1-10-16. (Rec'd. 7-6-17.)
M5745	19-7-17	

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 373.	Rep from Base	~~16-2-16~~	Wounded
A 382.	Pres rep wounded now rep wounded	1-10 (as per # P. R 377)	Missing
A 562	Pres rep wounded & missing now for official purposes presumed to be dead	11-10-16	since

Name COLBURNE Russel Rank Private

Reg. No. 469246

Unit 25th Battalion

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
1-10	Previously Reported Wounded & Missing		Now Reported			
					A382/05910/6-12	
May 21	Can. Res X					
1-10-16	Presumed to have <u>DIED</u>					
			As 62		19-7-17	

[illegible]

June 1916
Number

469246

Rank

OK

Surname

COLBURN

Christian Name

Russel

Units

25th Bureau Sq

Theatre of War

France

Date of Service

28-6-16

Remarks

(M) Mrs. William Colburne

Latest Address

Shulee, Cumb. Co.,
N.S.

Roll No.

200m.-6-21.

Page 22208

(This form to be filled in by all ranks on voyage to Canada.)

M.D. No.

NUMBER

RANK

SURNAME

INITIALS

Full postal address.....
(Street) (City or Town) (Province)

Name of one person to be notified of arrival.....

Address.....

Railway Station in Military District to which a furlough warrant is required.....

..... Railway.....

If married, is your wife on board..... Number of children on board.....

Their destination.....

(Sgd.).....

M. F. W. 2502.

50 M.-1-19.

1772-39-1289.

Scroll Desp. ~~Nov 20~~ 1921 Reqn. No. 25094

m

~~Plague~~ Desp. Nov 9 Reqn. No. P 15370
Colburne Russel, 1921 Bte. 469246 25th Bn. 649-C-7179

Med. & Dec. (Mother) Mrs. ^{Colburne} William Colburne ^E
~~Shulze~~, ~~Shulee~~
Cumb., Co., N. S.

P. & S. (Mother) Address as above.
(Serial 798786)

Mem. Crosse. (Mother) " " "

M. X. desp. (M) 46941 on 2/3/21

52823

Not Eligible for 14-15 Star

E " " V.M

E " " B.W.M.

K.R.



SURNAME.

CHRISTIAN NAMES

REGL. No.

UNIT

FORMER CORPS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

COUNTRY OF BIRTH

PLACE OF ATTESTATION

NEXT OF KIN.

CHANGE OF ADDRESS

DATE

DATE

CARD NO.

FOLL.

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Millman

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

18

YEARS

11

MONTHS

HEIGHT

5-

FEET

4 $\frac{1}{2}$

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

3

INCHES

COMPLEXION

Dark

EYES

Hazel

HAIR

Dark

DISTINGUISHING MARKS

Scar on left foot.

MEDICAL EXAMINATION.

PLACE

Sussex N. B.

DATE

Aug 23/15-

Shipped from Halifax Per. S. S. Adriatic 31/3/16

No. 69246

RANK

Plt.

NAME

Colburne, Russell.

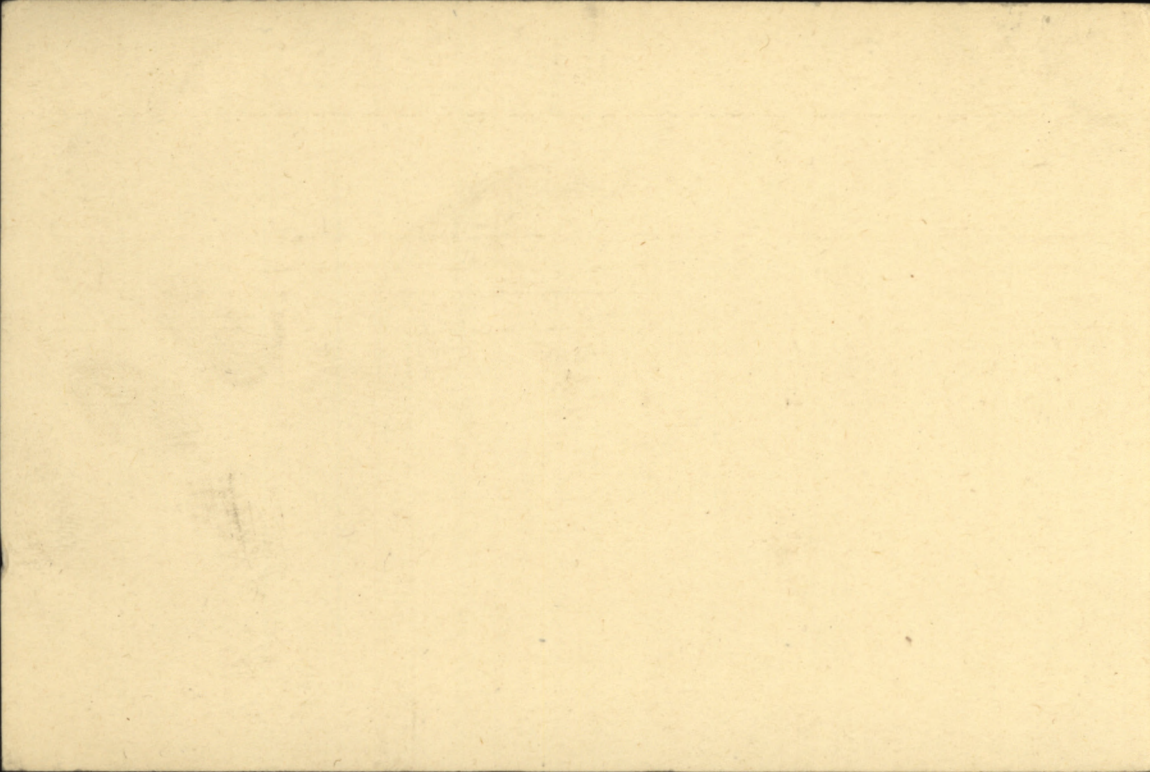
T. O. S. 21-8-15

UNIT 64th Battalion

D.O. 10 of 27-8-15

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Aug. 21	Aug. 31	✓		
Oct.		✓		
Nov.		✓		
Dec.		✓		
1916				
Jan.		✓		
Feb.		✓		
Mar.		✓	96 hrs. det. for absence	Mar. payroll.
				UNIT SAILED
				MAR 31 1916



ORIGINAL. *Blay*
MEDICAL HISTORY SHEET.

Surname Colburn Christian Name Russell Earl

Examined	on <u>23</u> day of <u>Aug</u> 191 <u>5</u>	Approved by <u>J. Sperrin</u>
	at <u>Shulie J. L.</u>	Rank <u>Capt 64th</u> M.O.
Birthplace	City or Town <u>Shulie J. L.</u>	
	County <u>J. L.</u>	
Apparent age	<u>18 yrs 11 mos.</u>	
Trade or occupation	<u>Drumman</u>	
Height	<u>5</u> Feet <u>4 1/2</u> Inches.	
Weight		
Chest measurement	Minimum <u>33</u> inches.	
	Maximum expansion <u>3</u> inches	
Physical development	<u>good</u>	
Small-Pox Marks	<u>none</u>	
Vaccination Marks	Arm <u>Right</u> Left <u>1</u>	
	Number <u>1910</u>	
When Vaccinated last	<u>1910</u>	
(a) Marks indicating congenital peculiarities or previous disease	<u>none</u>	
(b) Slight defects but not sufficient to cause rejection	<u>none</u>	

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.
<u>22/2/16</u>	<u>JSB</u>	M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9/9/15</u>	<u>JSB</u>	M.O.
<u>9/24/15</u>	<u>JSB</u>	M.O.
		M.O.

Enlisted on 21 day of Aug 1915 at Shulie J. L.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Blay 64th</u>	<u>469246</u>		
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

Surname:

Date of Arrival
at the
Station.

DATE OF

Admission into Hospital.

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.



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

Casualty Form—Active Service.

442
CERTIFIED CORRECT.
Canada, M. F. W. 54. (A. F. B. 103.)
250 M. — 1-16
H. Q. 1772-39-920
7, Millbank, S.W.

Unit, Regiment or Corps 64th "OVERSEAS" BATTN. C.E.F.

Regimental No. 469246. Rank Private. Name COLBURN, Russell Earle.

Enlisted (a) 13-8-15 Terms of Service (a) Duration of War Service reckons from (a) 28-8-15

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) (Millman)

Report		Record of promotion, 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				

28. 6. 16	OR 12 M.H.	Embarked Halifax us 31-3-16 Debarked Liverpool Eng 4-4-16 Taken on strength The life 24.6.16			
27/6/16	Agrs. 1st-CTB.	TRANSFERRED TO <u>25th Bn</u> <u>Ouseman</u> <u>Shoncliffe</u>		28/6/16	ADJUTANT 64th "OVERSEAS" BATTN. C.E.F. <u>ASST. ADJ. 12th RESERVE BATTALION C.E.F.</u>
29-6-16	Can. B. Dep	Taken on strength	25th Bn	29-6-16	Pt O. 28-21-7-16.
"	"	Proceeded to join Unit	On route	12-7-16	D.C.S. 185-26-7-16.
14-7-16	25th Bn.	Joined Unit	Field	13-7-16	" " "
6. 10. 16	"	Wounded.			
25. 11. 16	"	Wounded & Missing			
			Not stated.	1-10-16	8773 D.C.S. 248 20-11-16.
				1-10-16	KI 116/1722
					74 Trade 82- 2-12-16

(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.]

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.	469246
Rank	Private.
Surname	Lealburne
Christian name	Russell Ball
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	
Date of discharge	
Place of discharge	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....years.....months.	Descriptive marks
Height.....feet.....inches.	
Complexion	
Eyes	
Hair	
Trade	
Intended place of residence (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
Authority for discharge.....	
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.	
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 soldiers 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.	
200M.—5-18.	
H. Q. 1772-39-113.	

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

(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, and that I have received my permanent discharge certificate.

(Place)..... (Signature of Soldier.)

(Date)..... (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).....

(Signature).....

(Date).....

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.)

List of Discharge Documents.

Reg. Conduct Sheet	Millitia form B. 303	Attestation Paper	Millitia Form W. 32
Separation	Conduct Sheet	Particulars of Record	W. 133
Company	Conduct Sheet	Proceedings on Discharge	and call B. 318
Field Conduct Sheet	W. 178		
Copies of Convictions by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Med. Hist. Sheet	Millitia form B. 313		
Casualty Form	W. 24		
Medical Report for Invalids	W. 317	PROCEEDINGS ON DISCHARGE	
Dental History Sheet	B. 463	(a) Proceedings on Discharge	
Last Pay Certificate	W. 44	(b) Attestation	
Duplicate Discharge Certificate	W. 39A		
Form of Will	W. 82	(c) Medical History Sheet	
Only if discharged "Medically unfit"			
Only if man has not been overseas.			
Documents not accompanying this form should be crossed out in case of discharge.			
I hereby certify that the following documents are unobtainable:			
to correspondence in duplicate in form B. 317.			
Officer Commanding			
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.			

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet,	or Particulars of Recruit	“ W. 133
	“ B. 263a	Proceedings on Discharge	“ B. 218
or Field Conduct Sheet	“ W. 178		
Copies of Convictions, by C. P.	in MS.	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.	
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	“ W. 54		
Medical Report for Invalid§	“ B. 227		
Dental History Sheet	“ B. 465		
Last Pay Certificate	“ W. 44		
Duplicate Discharge Certificate	“ W. 39A		
‡Form of Will	“ W. 82		
§Only if discharged “Medically unfit.”			
‡Only if man has not been overseas.			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

B/C.H.

Army Form B. 2090c.

MISSING MAN.

(Acceptance of Death for Official Purposes.)

War Office Reference No. ~~XXXXXX~~ 25-C-2097.

THE DEPUTY ADJUTANT-GENERAL,

G.H.Q., 3RD ECHELON.

Canadians.

No. 469246. Rank Pte. Name Russell Colburne

Regiment 25th. C. Battalion. C.E.F. has been missing since

1st. 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 ;

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.

~~XXXXXX~~
O.S.B.

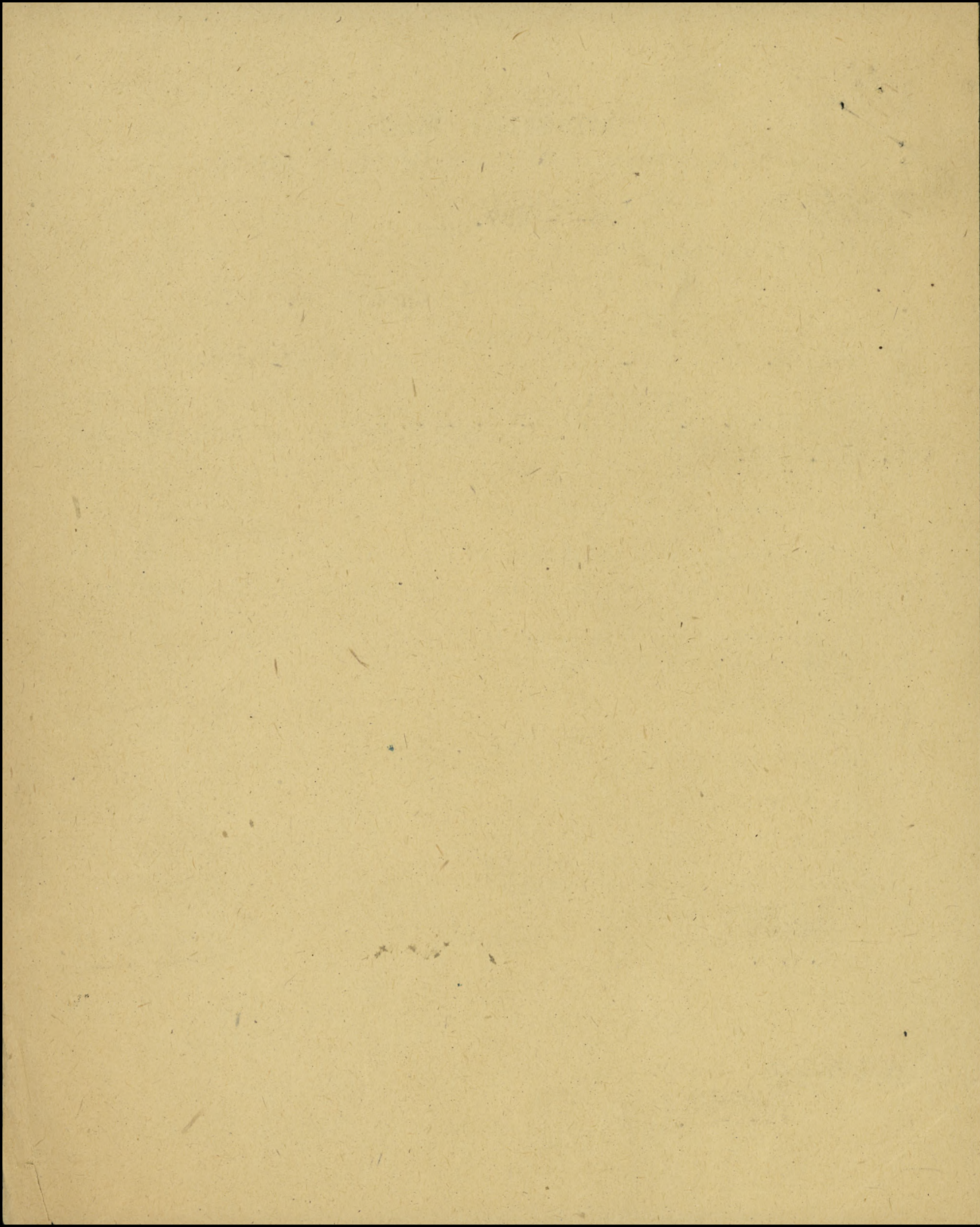
Capt. for Lt.-Col., A. A. G.

Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Records,
3rd Echelon.

~~XXXXXX~~
WAR OFFICE,

Date 12-9-17.



ent
30.6.17.

15319

649 87179 ✓

No.469246 Pte.Russell Colburne

Will extracted by Capt. R.Malcolm Hope
Paymaster 64th.Battalion. CEF.

No. 469246 B
Name. Pte. R. Colburne
Unit. 64th. Batt. C.E.F.

Military Will.

ESTATES BRANCH

SEP 20 1917

MILITIA DEPT.

In the event of my Death
I give the whole of my
Property and effects to my
Mother Miss Alice Colburne

Shuler

Ernest L.

M. S.

Signature. Pte. Russell Colburne

Rank & Regt. 64th Batt. C.E.F.

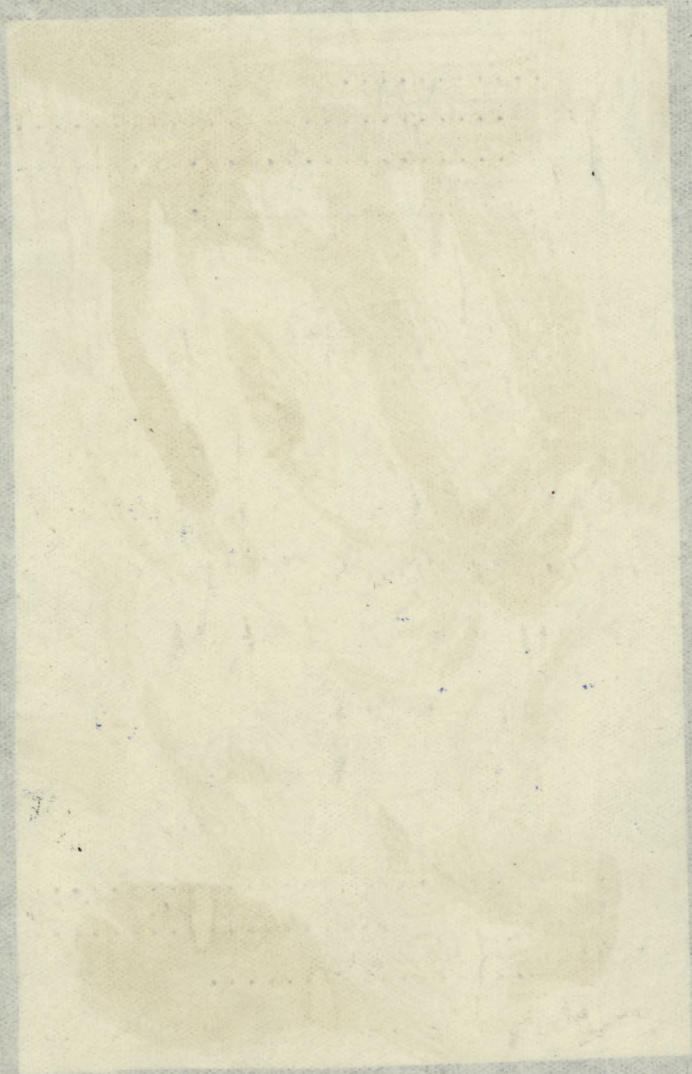
mDate. My 9/10

✓

15319

No. 469246 Pte. Russell J. Colburne

Will be accepted by Post Office
at New York, N.Y.



Rank *Pfc* Name COLBURNE Russel / Reg'l No. 469246 /
 Unit 64th. Battalion If in perm. Corps, }
 What Unit? } Married or Single Single /
 Place and Date of Enlistment *B* Sussex, N.S. Aug. 23rd, 1915. / Place of Birth Shulee, N.S. /
 Name and Address, Next-of-Kin Alice Colburne /

Shulee, N.S. Cumberland County, Canada. / Relationship Mother. /

Assigned Pay Monthly \$

Payable to

Relationship

N.E.R.B. 5

Separation Allowance \$

Payable to

Relationship

Rl. 5. 6-2308

Discharge, Date and Place

Reason

Character

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.				
	"C"				
		Arrived in England. S.S. Adriatic 9-4-16			
30-6-16	oc 64	Trans to 12 th Bn Shorncliffe	24-6-16	Pl II 154	
28-6-16	oc 12 Bn	Taken on strength Shorncliffe	24-6-16	Pl II 0180	
"	"	Trans to 25 th Bn overseas	28-6-16	" 180	
21-7-16	25 th	TOL. 25 th Bn from 12 th Bn (Reg) in 2 nd	29-6-16	" 29	
24-11-16	"	Reported from Base	"	16-9-16	CRA 373. Wounded ON
29-11-16	"	Date of last rep ^d on CRA 373 of 24/11/16	"	1-10-16	" A377
2-12-16	"	confirmed 15 read 1-10-16	"	1-10-16	Pl II 82.
6-12-16	"	Reported Wounded + Missing	"	"	CRA 382 ON.
	"	Prior rep'd "W" now reported Wounded + Missing	"	"	
		Over			

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.				
19 th 7.17	25 th Bn	Now for official purposes	Juba	on or since 1.10.16	C.L. A 562
20.9.17	1	Presumed to have died do do		1.10.16	MII O 105

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 15m.—3-16.
 H. Q. 1772-39-819.

Sheet No. 2.

Mrs Alice Holburne

Name of Soldier

Holburne Russell

L. L. Job 95618—M. & D. 6555.

PAYMENTS.

469246

64th Battr

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>\$20-</i>	
April	1916	<i>U2407</i>	<i>20</i>	
May		<i>U5389</i>	<i>20</i>	
June		<i>U7339</i>	<i>50 -</i>	
July		<i>77405</i>	<i>20</i>	
Aug.		<i>H11530</i>	<i>20</i>	
Sept.		<i>P.17266</i>	<i>20</i>	
Oct.		<i>P22431</i>	<i>20</i>	
Nov.		<i>25409</i>	<i>20</i>	
Dec.	<i>canceled</i>	<i>K32138</i>	<i>20</i>	<i>6-4-2-30-11-16 no. P. 8-7-17 account closed has</i>
Jan.	1917		<i>160</i>	
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Casualties.

E.F.X. " Date *3-10-17* m.g.H.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
15m.—3-16.
H. Q. 1772-39-819.

L
To Whom *Mrs. Alice Colburne.*
Address *Shulie, N.S.*

By Whom Assigned

Regtl. No.

Rank

Corps

*Colburne Russell,**469246**64 R.O. Batt. 684*Rate *20⁰⁰**APR 1 - 1916*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Casualties

Pensions Notified Date *9-7-17*
 Killed in Action }
 Died of Wounds } Date *8-10-16*
 Missing }
 C. L. *12/1/17* Clerk *Colburne*
 Date Noted *9-7-17* 1917

*7. 12-12-16*E.F.X. " Date *3-10-17* *m. l. l. l.**Wounded & missing to 11-12-17**3 M. 7¹² confirming C.L.**Stop Jan. 1/17
ap. adj. by Pens. Br. 15/17*

100

18

100

137

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES. PROMOTIONS, &c.

[illegible]

ADMISSIONS TO HOSPITAL, &c.

[illegible]

REG'L NO. 469246 RANK

NAME Colburne, Russell

IF IN PERMT. CORPS
WHAT UNIT

UNIT 64th Bn TRANSFERRED TO 25th Bn. DATE 11/4/46

AUTHORITY 30-6-1

AUTHORITY 30-6-1

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO *N. E. B.* DATE *2-10*

AUTHORITY *Be 82 3/10*

PLACE OF ATTESTATION *Sussex, N.B.*

TRANSFERRED TO _____ DATE _____

DATE OF ATTESTATION 22-8-15

TRANSFERRED TO _____ DATE _____

ASSIGNED PAY MONTHLY \$ 20⁰⁰ DATE EFFECTIVE

PAYABLE TO *Alice Colburne, Shute, N.S.*

RELATIONSHIP *Mother*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 7-12-16 EFFECTIVE 1-1-17

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

~~7-12-16~~ 2-10-16 Entered on N.E. Card Index *on 4*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked by H. Lillotson

In Agreement with Ottawa O.P. Slip.
 With HQ 593-12-16 & 20-12-16, 1945

Statement of
JUL 31 1917
Account rendered

