(a). Original

ATTESTATION PAPER.

No. 116725.

11th CAN. MOUNTED RIFLES

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? ..... Hickey, Charles Robert Reeves
2. In what Town, Township or Parish, and in what Country were you born? ..... Nanaimo B.C.
3. What is the name of your next-of kin? ..... Mrs C.E. Hickey (Mother)
4. What is the address of your next-of-kin? ..... Parksville B.C. Canada
5. What is the date of your birth? ..... September 10th. 1897.
6. What is your Trade or Calling? ..... Farmer
7. Are you married? ..... Single
8. Are you willing to be vaccinated or re-vaccinated? ..... and inoculated C.R.R.H. 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

C.R.R.Hickey ..... (Signature of Man.)

J. Elliston Taylor ..... (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Charles Robert Reeves Hickey, 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.

C.R.R.Hickey ..... (Signature of Recruit)

Date 17th March 1916. J. Elliston Taylor ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Charles Robert Reeves Hickey, 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.

C.R.R.Hickey ..... (Signature of Recruit)

Date 17th March 1916. J. Elliston Taylor ..... (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 Victoria B.C. this 17th day of March 1916 191 .

J. A. Ellis J.P. ..... (Signature of Justice)

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

Lieut.-Colonel
Commanding 11th Regt. Canadian Mounted Rifles ..... (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of Hickey, Charles Robert Reeves on Enlistment.

Apparent Age 18 years 1 1 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 11 ins.

Chest measurement.
- Girth when fully expanded 35 ins.
- Range of expansion 3½ ins.

Complexion Dark

Eyes Blue

Hair Black

Religious denominations.
- Church of England C of E
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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).

Mole left side of chest.

2 Vacs. left arm.

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 16th March 1916 191 .

Place Victoria B.C.

H. H. MacKenzie Capt. A.M.C.
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.

Charles Robert Reeves Hickey 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.

(Signature of Officer)

Date 17th March 1916 191 .

Lieut.-Colonel
Commanding 11th Regt. Canadian Mounted Rifles

REGIMENTAL DOCUMENTS

NAME Hickey Charles Robert R. REGT. NO. 116722 UNIT H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category 1
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
21	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				23297	DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category Almost Aug
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	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)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					4-18
1	Card Card					19-18
1	A.F.W.K. 37					32-18
1	Disc Wire					
9	Caps "					
1	Rec. Bd. "					
1	Rizz "					
16	Nuts					
1	M.F.W. 67					
1	P.E.					
1	O.H.P.					

W. 2689
100M-11-18
1772-39-1377

OPEN
A TIP

Box
4317

Rec'd G.H.

REGT'L No 116725.

NAME Hickey

RANK AND CORPS Pte

le. R. R.

11th Bn le M R.

H. Q. FILE No. 649-

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
2.	1st Western Gen Hospital Liverpool	25 27-7-16	Measles
7.	c. c. Hillingdon W. Uxbridge	20-8-16.	Measles.
11.	c. c. " " " "	25-8-16.	Measles discharge

Bd V by Air Min -745-H-192

Number 116725. Rank ~~Ote~~ F.S. 4

Surname HICKEY

Christian Name Charles Robert Reeves.

Units 11th C.M.R. Theatre of War England

Date of Service S.O.S. Comm R.N.A.S. 29-1-17; with 24th Res Bn at H.D.O. 20 d/29-1-17

Remarks ADMIRALTY ROLL No 1 Page 21
14 A(M) NP(2) 1835/13407

Latest Address

Roll No. A Page 5191

10m.-8-21.

R. 149.

Name Hickey Charles Robert Reeves. Rank Pte Reg. No. 116725

Unit ~~11th Bn C.M.R's~~ ~~24. Res Bn~~

Next of Kin CANADA. First Reserve

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27.7.	16	1st West. Gen. Fazakerley	Liverp'l.	Measles	2.		
20.8.	16	Hillingdon House	Uxbridge	✓	7.		
25.8.	16	Dis.		–	7		

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

No. 116925 RANK Tpr. NAME Hickey, C R R

T. O. S. 16-3-16 UNIT 11th Can. Mounted Rifles
D.O.40 of 18-3-16

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Mar. 16	Mar. 31	C		
Apr.		C		
May.		C		
June.		C		
July.		M.		

~~Lapland~~ Liverpool.

REMARKS: 23/7/16 on "Lapland" reported sick removed to Hospital from boat.

Married
No

Occupt.
Farmer.

Enlisted at
Victoria BC

Date
15 Mar/16

Vaccn.
Apr./16

Innoc Typ.h
3:- May.

Innoc Tet

Discharged to ~~duty~~ Hosp.
Date 25.8.16.

For Duty.

CANADIAN CONVALESCENT HOSPITAL,

AT

Canadian Convalescent Hospital,
Hillingdon House, Uxbridge.

A. & D. CARD.

Regt. No. 116725 A. & D. No. T43655

Rank Pte Corps 11th C.M.R.

Name Hicky. C.R.R. Age 19 Religion C of E

Service at Home 5/12

,, ,, Front Nil.

Diagnosis Measles

Admitted

Discharged

Place in Hospital

M. H. Rec'd

Transferred

Results

(See Document card)

P.T.O.

Bar to D.F.C.
L.G# 30989
D.F.C. L.G# 30827.

SURNAME. Hickey

CARD NO. Eng
S.O.S. Dis. 29-1-17.
comm R.N.A.S.
aut. 162 53-53-
8678.

CHRISTIAN NAMES Charles Robert Reeves

FOLL.

REGL. NO. ~~116 725~~

RANK ~~Tpr.~~ ~~Lieut~~ Capt

UNIT 11th C.M.R.

FORMER CORPS nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Hickey Mrs C.E.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS Parksville B.C.

COUNTRY OF BIRTH Canada Nanaimo B.C. DATE Sept 10th 1897

PLACE OF ATTESTATION Victoria B.C. DATE Mar 17th 1916

L. L. 90589.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Farmer. RELIGION Church of England

DESCRIPTION.

APPARENT AGE 18 YEARS 6 MONTHS

HEIGHT 5 FEET 11 INCHES

CHEST MEASUREMENT 35- INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Dark EYES Blue HAIR Black.

DISTINGUISHING MARKS Mole L. side of chest.
2 Vacc. L. arm.

MEDICAL EXAMINATION. PLACE Victoria, B.C. DATE Mar. 16th, 1916

D.M.S. 1300.

Surname: Hickey
Christian Name or Names: C.
Reg. No.: 116.725

Rank: Pte
Unit: 11th C. M. R.
Co.
Troop
Batty.

Hospital: 1st West. Gen. Liverpool
Date of Admission: 27-7-16

Transferred: Hillingdon Uxbridge Hosp. 20.8.16

Hosp.

Hosp.

Hosp.

Diagnosis: Measles

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

REMARKS

CL. 3-8-16 #2

" 28.8.16 7

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

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

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 116725 Army Rank Private G.H.K.

Name Hickey, Charles Robert Reeves G.H.K.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 24th Canadian Reserve Battalion

Battalion, Battery, Company, Depôt, &c. "A" Company
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.) G.H.K.

Date of discharge 29-1-17.

Place of discharge Bramshott Camp, Hants., England G.H.K.

1. *Description at the time of discharge.*

Age 19 years 4 months
Height 5 feet 11 inches
Chest measurement { girth when fully expanded 35 ins. / range of expansion 3½ ins.
Complexion Dark
Eyes Blue
Hair Black
Trade Farmer
Intended place of residence (To be given as fully as practicable) { R.N.A.S. / England

Descriptive marks.
Mole left side of chest.
2 Vacs. left arm

G.H.K.

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

2. The above-named man is discharged in consequence of upon an appointment to a Commission in the R.N.A.S. Auth:— Adjutant & General's letter A.G. 32- A- 56 A.G. 4C, Canadians, dated 27th December 1916 K.R. & O. Para 392 (XXV)
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.) G.H.K.

To be filled in on the soldier quitting the Colours.

3. Military character :— Very good G.H.K. G.H.K.

4. Character awarded in accordance with King's Regulations :— Honest, sober, trustworthy and intelligent.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* ~~and that Army Form D. 480 was awarded in this case.~~ G.H.K.
Initials of Commanding Officer.

~~Army Form B. 2088 has been issued to~~*

1145 Wt. W. 6538/936 125,000 10/14 D. D. & L. Sch. 11* Forms B. 268 39

* Strike out if not applicable.

[OVER.

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

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

Service not long enough to earn a G.C. badge.

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

6. Campaigns, Medals and Decorations

Nil

Certificate of education .....

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

(Place) Bramshott Camp, Hants. Lieut. Col.

(Date) 29-1-17. Commanding 24th Can Battn. Reserve Regiment

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

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

(Place) Bramshott Camp, Hants. C.R.R. Hickey (Signature of Soldier.) Pte.

(Date) Jan 29th 1917 W.S. Hitch (Signature of Witness.)

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

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

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

C.R.R. Hickey (Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to 12th Jan 1917 (the date to which the record of service is completed) 0 years 362 days.

Further service „ „ 29th Jan 1917. (the date of confirmation of discharge) ... ... „ 17 „

Total ... — „ 319 „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date) 29TH. JANUARY. 1917.

(Place) BRAMSHOTT.

(Date) 29TH. JAN. 1917

Signature LT. COL.

O.C. 24th CANADIAN R.R. BATTN.

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

Reservations N I L

C R R Hickey.

LIST OF DISCHARGE DOCUMENTS.

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

See section 11 on second page

19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

N.B.—To be filed by M.O. inaccessible to Patients.

Forms I. 1237 10

(Part I.)

Army Form I. 1237. (C.I.F. 1.)

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 435	116725	Pte	Hickey	C R R

Year	Unit.	Age.	Service.
1916	11th. C M R	19	5/12

(Part II.)

(a) Station and Date.

Can. Con. Hosp. at Uxbridge 19-8-16 19...

(b) Disease Measles

(c) Date of origin 23. 7. 16 Place On the Boat Lapland. Country

(d) Cause

(e) History to Date.

	Admitted to	Date.	Special Treatment, &c.	Result.	Date Discharged
1	Grafton ST. Hosp. Liverpool	25. 7. 16.	Medicines		3. 8. 16
2	annex L'pool Fazakerley	3. 8. 16	Diet		8. 8. 16
3	Westminster Rd. Hosp L'pool	8. 8. 16	"		19. 8. 16
4	Mabridge	19. 8. 16			

(f) X Ray Report. None. From above

(g) Marks of Injury. External nil

Internal nil

(h) Present Condition. of physical state good Symptoms nil

of disability good

Complications nil

(i) Prognosis. good

(j) Treatment and Semi-Weekly Progress.

Date.	Treatment.	Progress.
19-8-16	Skeleton Physical training	good
21-8-16	" " "	"
25-8-16	" "	"

(k) Result. good

(l) Disposal. Transferred to unit For Duty

Date 25. 8. 16

Signed Wardin Capt., C.A.M.C.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.

(m)

ADDITIONAL MEMO. re Part I.

(1) Married No.

(2) Occupation Farmer

(3) Enlisted at Victoria Date 15 Mar. 1916

(4) Vaccinated for Small Pox Yes

(5) Inoculated for Typhoid Yes-3-

for Tetanus

(n)

Date.	TREATMENT, &c., re Part II.—continued.	Progress.

Signed [illegible] Capt., C.A.M.C.

(o)

MEDICAL HISTORY SHEET.

Surname Hickey Hickey *Christian Name* Charles Robert Reeves.

Examined { on 16th day of March 1916 / at Victoria B.C.

Birthplace { City or Town Nanaimo / County B.C.

Apparent age 18 years 6 months

Trade or occupation Farmer

Height 5 Feet 11 Inches.

Weight ..... Lbs.

Chest measurement { Minimum 31½ inches. / Maximum expansion 35 inches.

Physical development .....

Small-Pox Marks .....

Vaccination Marks { Arm Right. Left. / Number – 2

When Vaccinated last .....

(*a*) Marks indicating congenital peculiarities or previous disease Mole left side of Chest

(*b*) Slight defects but not sufficient to cause rejection

Approved by H H Mackenzie

Rank Capt C & MC M.O.

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

Date.	Result.	Vaccinations.
7.4.16	+	H H M M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
7.4.16		H H M M.O.
20.4.16		H H M M.O.
19.5.16		H H M M.O.

Enlisted on 16th *day of* March 1916 *at* Victoria B.C.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	11th O.S. Regt. Cmr. C.E.F.	116725		16/3/1916
Transferred to	24th Can. Res. Battn			1-1-17

Discharged on 29th January 1917 upon an appointment to a Commission in the R.N.A.S.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
	Percy W. Amabstrong JUN 5 1916	Lieut. Adjt for O.C. 24th Can. Res. Battn.	fit CPB.

WILLOWS CAMP VICTORIA B.C.

(auth. adjutant General's letter A.G. 32-H-56, A.G. 4C Canadians at 27-12-16)

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.

200M—11-15.
H. Q. 1772 39-4?9.

Surname Mickey Christian Name Edward Robert Reeve.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Grafton St Ann Hosp att: 1st W. G. Hosp. Fazakerley.		25	7	16	3	8	16	Measles	9	Mild -	Mabel G. Cosper
Fazakerley Annex Hosp:		3	8	16	9	8	16	- do -	6	Convalescent Measles	Wellgray
Westminster Rd Ann Hosp: att 1st W. G. Hosp. Fazak		9	8	16	19	8	16	- do -	10.		J. G. Meagles
Canadian Convalescent Hospital, Hillingdon House, Uxbridge.		19	8	16	25	8	16	Measles.	7	On Board Lapland. repd Sick: admitted to Hospl on arrival of Steamer Discharged to Duty	

Canadian Form D.M.S. 1375.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Private Name Charles Robert Reeves Surname Hickey

Unit or Corps 11th C.M.R. attch 24th Res. Batt (If a soldier) Regtl. No. 116728

Born at Nanimo B.C. on, date Sept 10th 1897

Signature (for identification) Charles R. R. Hickey

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. Good

Weight 154 lbs.

Height 5 ft. 10½ in.

2. **NUTRITION AND DIATHESIS?** Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

NERVOUS SYSTEM? Normal

4. **RESPIRATORY SYSTEM?** Normal

5. **HEART?** Normal

Abnormal Sounds?

Abnormal Size?

Pulse Rate? Intermittence or irregularity?

6. **ARTERIES.**—Any hardening? Normal

7. **DIGESTIVE SYSTEM?** Normal

8. **GENITO-URINARY SYSTEM?** Normal

Urinalysis—S.G.?..... Reaction?..... Albumen?..... Sugar?.....

9. **SKIN, MIDDLE EAR, EYE** or any other part? Normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. No

11. Opinion as to the health and physical condition of the one examined? Good

Examined at Bramshott Signed N. W. Mackenzie Capt C.A.M.C. M.O.

Date Jan 12/17 Signed A. McTravish Capt C.A.M.C. M.O.

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

20

Perforated sheet for Will from Pay Book of Reg.

No. 116725

Name Charles Robert Reeves Hickey

Unit 11th S/S Batt. C.M.R.

Military Will

While on Active Service, I wish the money which is kept back from my pay to be paid to Miss A. Reeves, Royal Victoria Eye and Ear Hospital, Adelaide Road, Dublin, Ireland. In the event of my death, I will all my money and property to my mother, Mrs. R.T. Hickey, Parksville, B.C. Canada.

Signature Charles Robert Reeves Hickey.

Rank and Regt. Pte. No. 116725

Date Oct. 15th 1916.

55600

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

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(1) Name of Overseas Unit which Soldier joins 11th O/S Battn C.M.R.

(2) Regimental Number 116725

(3) Full Name of Soldier Hickey, Charles Robert Reeves

(4) Place of Birth Nanaimo, B.C.

(5) Are you married, or not ? Single

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

(b) Present Postal Address

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address Major R. F. Hickey. 11th C.M.R.

(10) Is your Mother alive? Yes Mrs C. E. Hickey

If so, state name and address Parksville. B.C

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

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

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

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

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured? Yes.

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

E. W. Kirkpatrick
Officer Commanding.

Date 12/6/16

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 11th C/s. Regt: C.M.R., C.E.F.

Regimental No. 116725 Rank Pte. Name Hickey, Charles Robert Reeves

Enlisted (a) 16-3-16 Terms of Service (a) D. of W. C.E.F. Service reckons from (a) 16-3-16

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

Extended Re-engaged Qualification (b) Farmer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
10-1-17	O.C.11th C.M.R.	Transferred to 24th Can. Reserve Battalion	Bramshott Camp, Hants	1-1-17	Part 11 Orders, No.10, dated 10-1-17. Lieut.Act.Adjt.11th Battn. C.M.R.
10-1-17	O.C.24th Can.Res. Battn	Taken on strength ~~of~~ of 24th Can.Res.Battn.	Bramshott Camp,Hants	1-1-17	Part 11 Orders, No.1, dated 10-1-17. Lieut. & Adjt.
29-1-17	O.C.24th Can.Res. Battn.	Discharged upon appointment to a Commission in the R.N.A.S. (Authority,- Adjutant General's letter A.G.32-H-56, A.G. 4 c, Canadians of 27-12-16.). S.R.O. Para 392 (xxv)	Bramshott Camp, Hants.	29.1.17	Part II Orders, No.20. dated Lieut. & Adjutant for O.C.24th.Can.Res. Battn.

(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				

R—122

WGB Rank Name HICKEY, Charles Robert Reeves Reg'l No. 116725

Unit 11th C.M.R. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Victoria, B.C. 17th March 1916. Place of Birth Nanaimo, B.C.

Name and Address, Next-of-Kin Mrs C.E.Hickey,

Parksville, B.C. Canada Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship N/E R.B.II

Discharge, Date and Place Reason Character Comm. R.N.A.S.

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arr. in ENGLAND S.S. LAPLAND 25-7-16			
3.8.16	11th C.M.R. Cas. Dept.	Admtd. to 1st Gen'l. West. Hop. Fazakerly	Liverpool	27.7.16	measles. D.C.L. # 2 D.O. 93 (31.7.16)
28.8.16	do.	Trnsfd. to C.Con. Hosp. Hillingdon House	Uxbridge	20.8.16	D.C.L. # 7
26.8.16	11th C.M.R.	Discharged from Hospital. reported to Batt'n	Shorncliffe	25.8.16	Pte II D.O. 199 D.C.L. 17 (17.10.16)
10/1/17	11 CMR	S.O.S. To 24 Res Bn	Bramshott*	1*1*17	pt 11 DO 10
10/1/17	24 Res Bn	T.O.S. From 11 CMR	Bramshott*	1*1*17	pt 11 DO 10
29-1-17	"	S.O.S. on appt'm't to Com. in R.N.A.S.	"	29-1-17	—— 20.

1167/25

Hickey C.R.R.

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.				

L. L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M F W 12.
50m.—4-16.
H. Q. 1772-39-819.

580

1

6

To Whom Mrs R. J. Hickey

Address Parksville B.C.

Rate $15.00

JUL 1 1916

By Whom Assigned Hickey C.R.R.

Regtl. No. 116725

Rank Pte

Corps 11 C.M.R.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Stop Payments Feb 1/17 Discharged Appointed R.N.A.S. 3M E/1/17 a.t.c. 16/2/17
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. R. A. Hickey

L. L. Job 310.—Req. 6574.

Name of Soldier Hickey CRR
116725 11 Cmd pte

$15.00

JUL 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		W 12780	15	
Aug.		U 13002	15	
Sept.		J 16737	15	
Oct.		I 21281	15	
Nov.		K 26635	15	
Dec.		O 31653	15	
Jan.	1917	Z 39746	15	Stop Feb 1/17
Feb.		~~Z 45082~~	~~15~~	Z 45082 Cancelled and
March				15P
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

U.P

Co

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.				

P. 559.

MARRIED OR SINGLE Single

PLACE OF BIRTH Nanaimo B.Columbia

NAME AND ADDRESS OF NEXT OF KIN Mrs. C.E. Hickey

Parksville B.C.

RELATIONSHIP OF NEXT OF KIN mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

Comm ?

REG'L. No. 116725 RANK Private NAME Hickey, Charles Robert Reeves

IF IN PERMT. CORPS WHAT UNIT } UNIT 11th C.M.R. TRANSFERRED TO Non-Eff Br. DATE 5/1/17. AUTHORITY P.9.59.1.24

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Victoria, B.C. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 16th March 1916 TRANSFERRED TO DATE FEB 9 1917 AUTHORITY

PAY OFFICE, N.E. BRANCH CANADIAN CONTINGENT

ASSIGNED PAY MONTHLY $15.00 DATE EFFECTIVE 1st July 1916

PAYABLE TO Mrs. Hickey, Parksville, Vancouver Island, B.C. RELATIONSHIP mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 8/1/17. EFFECTIVE 1/1/17 REASON Discharged - Transferred to R.M.C.A.S.

DISCHARGE DATE AND PLACE England. 29/1/17. REASON AND AUTHORITY Discharged - Trans. to R.M.C.A.S. 1/1/17 auth. P.9.59.1.24

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index C.H.

Checked by F.K. Murray.

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916															38 20															38 20					July balance from Canada
Aug.	31	1.	31	-	31	.10	3	10							34 10												15 -		15 -	57 30					
Sept.	30	1.	30	-	30	.10	3	-							33 -	92	31/8	130	15/9/					38 93	4 87	1 21	15 -		60 01	30 29					
Oct.	31	1.	31	-	31	.10	3	10							34 10	169	30/9/	221	14/10/					14 60	4 87		15 -		34 47	29 92					
			92				9	20								252	30/10/							9 73		1 21									
Nov.	30	1-	30	-	30	.10	3	-							33 -	241	20/11/							4 87			15 -		29 60	33 32			33 32		
Dec.	31	1.	31	30	31	.10	3	10							34 10	295	27/11/	275	15/11					14 60	4 87		15 -		34 47	32 95					
			15		15		1	50																					34 47						
Checked [illegible]	1917																							19 47					33	2 88				
Jan. 1-4	4	1.10	4	40	4	-		40							4 40.	333	27/12							7 33			15 -		39 33	2 88		2 88		
"		1-10		40																				10 70	14 61	1 21								
																													90					
																													208 82					
Mch-1917.	25	1.10	27	50											27 50													Balance transferred to N.E. Branch.		2 88.				
																													30 38.	Nil.				

Aldershot Comm'd. 18.29/1/17. M.E. Lowe 9/2

Discharged. Trans. to R.M.C.A.S. 1/1/17 Q.M.R. Pa.59-1-24. 12.2.17

S.P.7. Rendered. 8/1/17. L.P.C. Rendered. 9/1/17. Pa. Bal. 42-38.

X Taken from A.S.P.O. 30.38. Pd. by P.M. Aldershot Cons. Branch Bank Jan 1917. 2735. 28 days Pd. Commandant's Office. 29-1-17.

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 $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4				CREDIT	DEBIT			