

Unit Rank LT. COL Name FREDERICK MacKENZIE McROBIE

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

DEPT. MILITIA & DEFENCE OCT 17 1917 H.Q. CANADA

- 1. (a) What is your Surname? McROBIE, (b) What are your Christian Names? FREDERICK MacKENZIE
2. (a) Where were you born? (State place and country) MONTREAL, P.Q. (b) What is your present address? 647 GROSVENOR AVENUE, WESTMOUNT, P.Q.
3. What is the date of your birth? 9TH APRIL 1875
4. What is (a) the name of your next-of-kin? SUSIE McROBIE, (b) the address of your next-of-kin? 647 GROSVENOR AVENUE, WESTMOUNT, P.Q. (c) the relationship of your next-of-kin? WIFE
5. What is your profession or occupation? GENERAL MANAGER and SECRETARY CANADIAN TRANSFER COMPANY.
6. What is your religion? (PROTESTANT) PRESBYTERIAN
7. Are you willing to be vaccinated or re-vaccinated and inoculated? YES
8. To what Unit of the Active Militia do you belong? 3RD VICTORIA RIFLES
9. State particulars of any former Military Service.
10. Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? YES

The undersigned hereby declares that the above answers made by him to the above questions are true.

Signature of Officer.

Taken on strength (place) MONTREAL, P.Q. (date) JUN 12 1916

Signature of Commanding Officer. Lieut. Col. of 244th "Overseas" Battalion, C. E. F.

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date June 21st 1916

Place MONTREAL, P.Q.

Signature of Medical Officer. Major

*Insert here "fit" or "unfit"

71-0-81-162

OFFICERS' DECLASSIFICATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Nov 1981

71-0-02-162

QUESTIONS TO BE ANSWERED BY OFFICER

NOT CHARGED
OCT 20 1981

1/10/81
Nov 81

Unit 244th Bn C.C.F. Rank Lt Col. Name Frederick McKenzie McRobie

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname? McRobie
- (b) What are your Christian Names? Frederick Mackenzie
2. (a) Where were you born? (State place and country) Montreal, P.Q.
- (b) What is your present address? 647 Grosvenor Avenue, Westmount, P.Q.
3. What is the date of your birth? 9th April 1875
4. What is (a) the name of your next-of-kin? Susie McRobie
- (b) the address of your next-of-kin? 647 Grosvenor Avenue,
- (c) the relationship of your next-of-kin? Wife Westmount, P.Q.
5. What is your profession or occupation? General Manager and Secretary
6. What is your religion? Protestant, Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.
8. To what Unit of the Active Militia do you belong? 3rd Victoria Rifles
9. State particulars of any former Military Service.....
10. Are you willing to serve in the

CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

(Sgd) F. M. McRobie (Signature of Officer.)

Taken on strength (place) Montreal P.Q.

(date) Jun. 12. 1916

(Sgd) F. M. McRobie
(Signature of Commanding Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

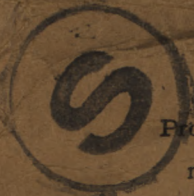
Date June 21st 1916

Place Montreal P.Q. (Sgd) D. S. Mac Taggart
Medical Officer. Major

*Insert here "fit" or "unfit"

True Copy.

Director of Records.



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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

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..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

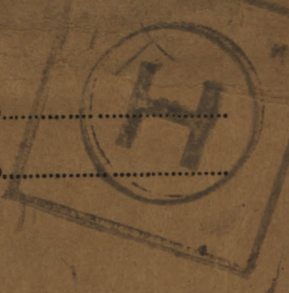
Last Pay Certificate.....

H. P. W. 67-1

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....



Name *McRobie, Frederick Mc Kenzie*

Regt. No. Rank *Lt. Col*

Corps *3rd Regt. from 244th Bn.*

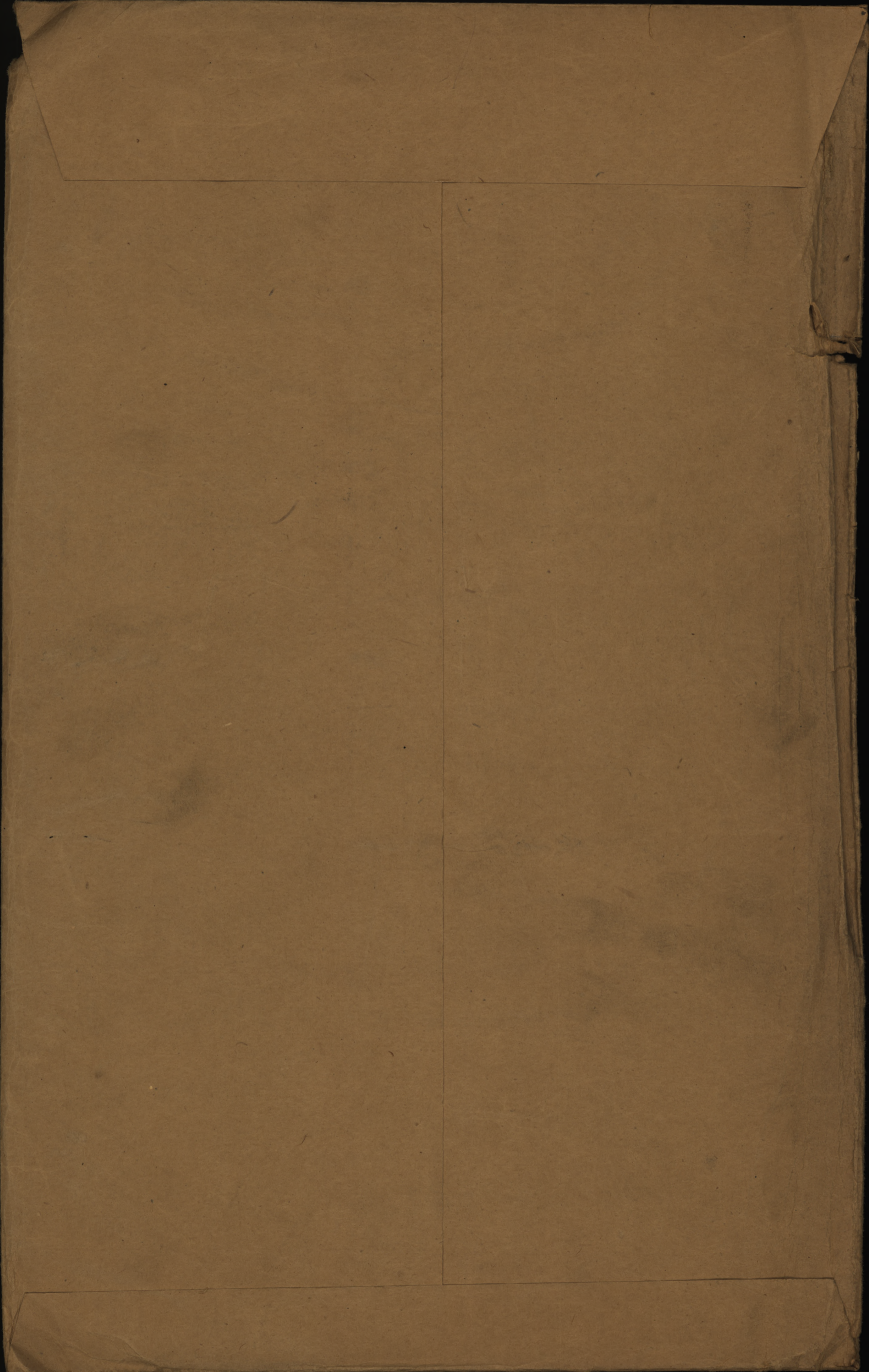
"Struck off Strength"

*Sgt. Blatch 229-21
G.P.*

34828



*6-11-19
6-11-19
6-11-19*



⁻²²⁻¹¹⁻¹⁵⁻
SURNAME.

1028-1
Mc Robie.

CHRISTIAN NAMES

Frederick MacKenzie.

Card No. ✓
Sob. 25-7-77 H

REGL. No.

RANK

Lieut Col.

UNIT *244 th.*

FORMER CORPS

3rd Victoria Rifles.

Bm

NAMES IN FULL

McRobie Mrs Susie.

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

*647 Grosvenor Ave, Westmount,
P.Q.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada. Montreal. P.Q

DATE

Apr 9th 1875.

PLACE OF ATTESTATION

DATE

From Halifax Per S.S. "Lapland" 28-3-17.

returned to Canada per S.S.

Troopship # 2810-10-7-17 auth. J. 340

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Gen manager &

RELIGION

Presbyterian

Secretary. Can Transfer Co.

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

June 21st 1916

Present Address

647

Grosvenor Ave, Westmount,

P.Q.

No.

RANK

Lieut. Col.

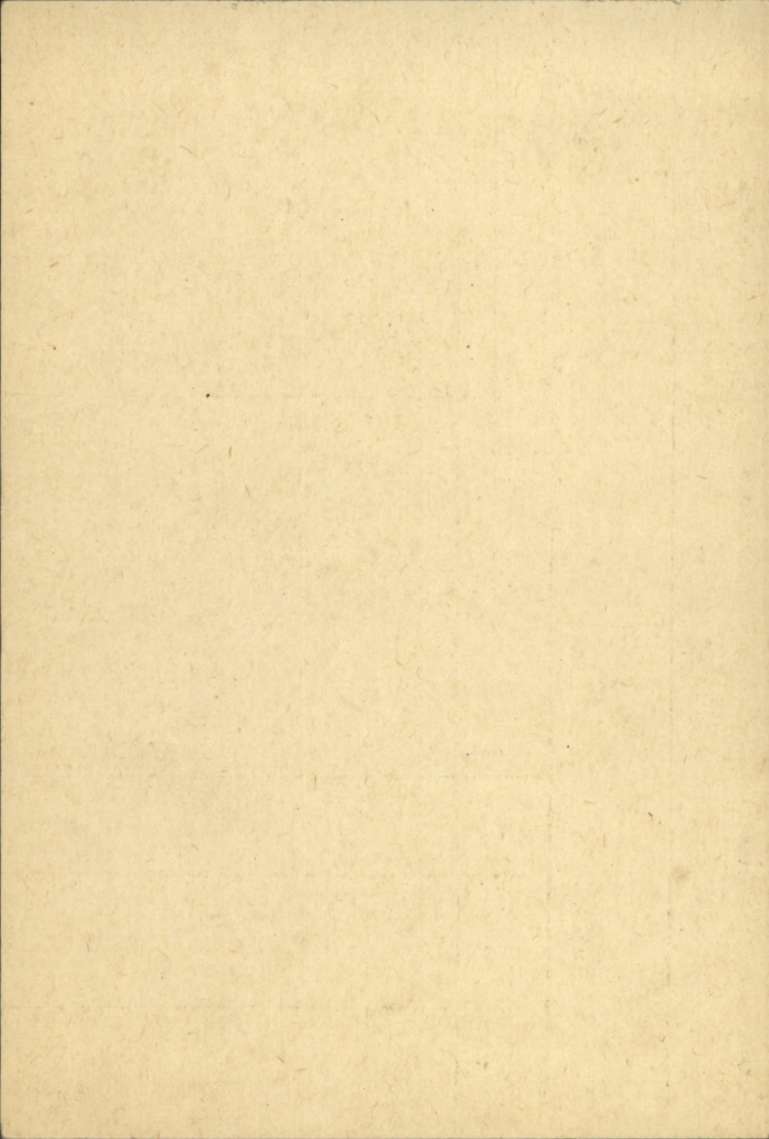
NAME

*Mc. Robie. J. M.*T. O. S. *12-6-16*

UNIT

*244th Battalion C. E. F.**no 4 of 27-6-16*M. D. *4*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>June 12</i>	<i>June 30</i>	<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept</i>		<i>✓</i>		
<i>Oct</i>		<i>✓</i>		
<i>Nov.</i>		<i>✓</i>		
<i>Dec.</i>		<i>✓</i>		
<i>1917</i>	<i>1917</i>			
<i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>u</i>		



2
Number Rank. ~~13~~ LIEUT-COL.

Surname. McROBIE

Christian Name. FREDERICK MACKENZIE.

Units Theatre of war. ENG.

Date of Service. 26. 3. 17. 10. 7. 17.

Remarks. France on Draft Conducting duty only May 1917.
C.F.C.

Latest Address. Address not Available

JUL 20 1921 28/7/21. SD.

Roll No. A Page 938

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
				<i>Returned to war material depot Singapore</i>

MRS

July 3rd, 1933.

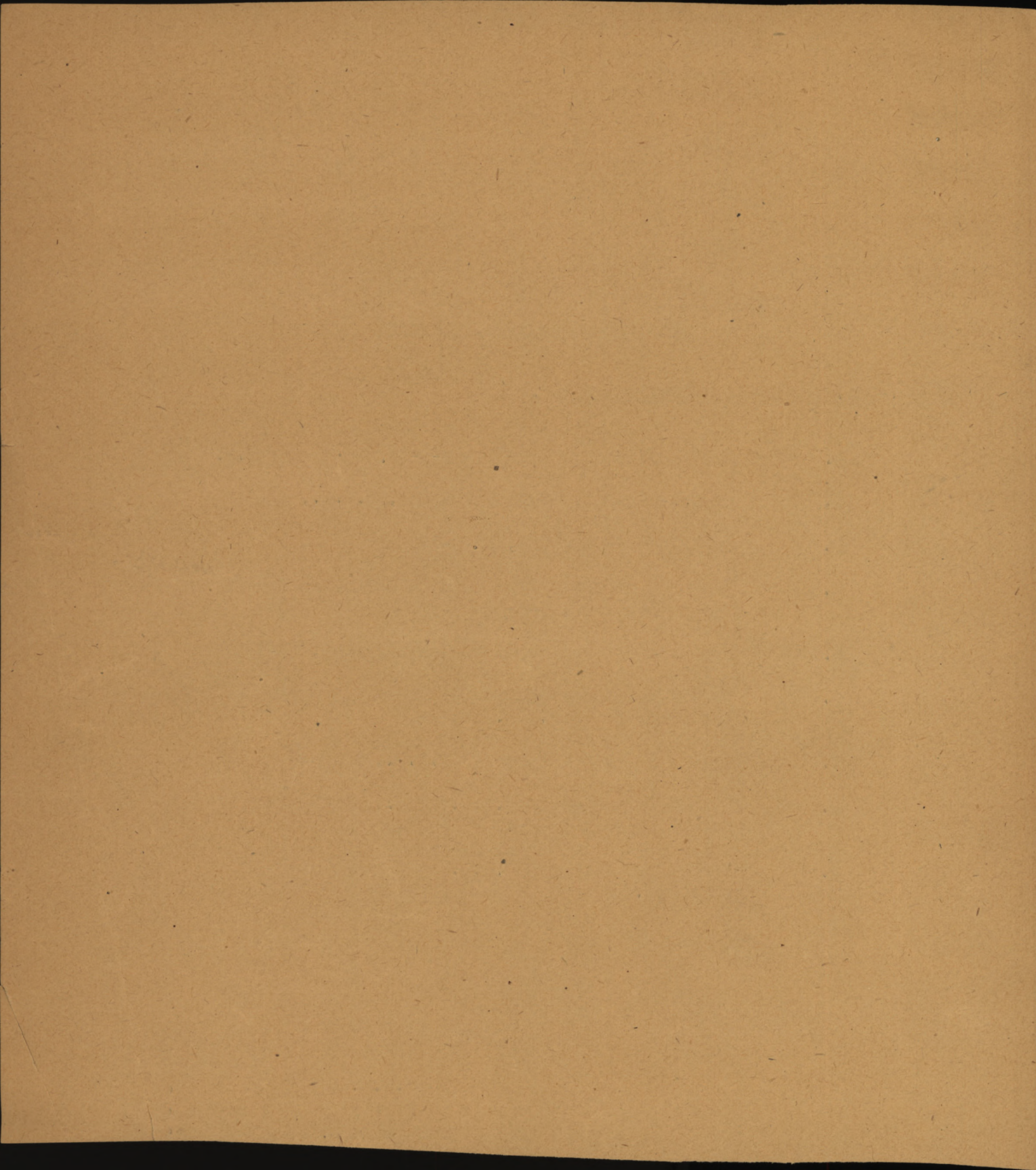
RECORD OF SERVICECanadian Expeditionary ForceLieut.-Col. Frederick McKenzie McROBIE.

1. Date and Place of Birth:- 9-4-75, Montreal, P.Q.
2. Lieut.-Colonel, 244th Battalion, C.E.F., 12-6-16
3. Embarked for England, 26-8-17
4. Taken on strength 22nd Reserve Battalion from 244th Battalion, 7-4-17
5. Proceeded to France on Conducting Duty, 23-5-17
6. Posted to Quebec Regimental Depot and shown "On Command" to C.F.C., 20-6-17
7. Ceases to be "On Command" C.F.C., 10-7-17
8. Struck off strength C.M.F. of C., Surplus to Establishment, 10-7-17
9. Struck off strength C.E.F. in Canada, 25-7-17
Resigned.

W. 27717
B.L. 201/9030/21, 16 11.15
W. 312.15 920.

CERTIFIED CORRECT
FROM RECORDS

(W.E.L. Coleman), Major,
Officer i/o Records,
For Adjutant-General.



E. T. Surname

McROBIE

Christian Names

FREDERICK MacKENZIE.

R 23rd Res Bn 16.17

Rank Lieut. Colonel.

Name and Address of Next-of-Kin Wife.

Promotion

Susie McRobie.

647. Grosvenor Avenue. Westmount.

Quebec. Canada.

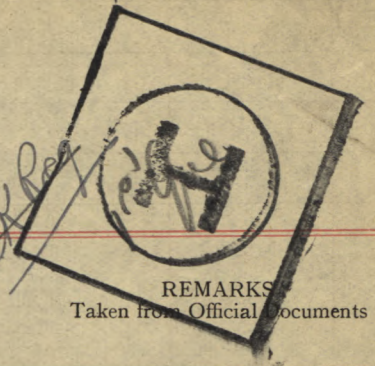
Unit 244th Battn.

Place of birth Montreal. Quebec. Canada.

Married (Yes or No) Yes.

Appointments

M



Date of leaving Canada *Sailed 26-3-17*

Date and Cause of Resignation

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			
1	9.4.17	Shoreham	I.O.S. 22 nd Res from 244 th Bn	7.4.17	R.O. 1609
2	21.11.17	Shoreham	Transferred to 23 Res Bn with effect	21.11.17	R.O. 1862
3	23.5.17	do	Proceeded O/Lias on conducting duty.	23.5.17	R.O. 2294
	29.6.17	do	Autonomous on proceeding offices to Can for Corps.	18.6.17	R.O. 2726 Canceled by R.O. 2812.
	13.7.17	D of Inst Cp.	act for a Can Res Bn. Vender Transfer.	20.6.17	R.O. 10.
4	23.6.17	do	Reported to 1 st Que RD + shown on command to Can for Corps.	20.6.17	R.O. 2784.
	13.7.17	do	ceases to be shown on command to etc. or return	10.7.17.	R.O. 121.
	20/7/17	A.C. 685	I.O.S. C.O.M.F. surplus to establishment	10.7.17	R.O. 2045 R.O. 3274

*23rd Res Bn
to
Can for Corps*

4025

A.F.B. 23
21 SEP 1917

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.

244TH "KITCHENER'S" OWN O/S BATT. C.E.F.

Unit, Regiment or Corps.....

Regimental No.....

Rank **Lieut. Col.**

Name

McROBIE, Frederick MacKenzie,

C. E. F.

Enlisted (a) ~~10-6-16~~

Terms of Service (a) **C.E.F.**

Service reckons from (a) ~~12-6-16~~ **26.3.17**

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) **Gen. Manager & Secretary**

Canadian Transfer Co.

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				
EMBARKED CANADA					
			<i>Halifax</i>	MAR 26 1917	<i>J. Brown</i>
DISEMBARKED ENGLAND					
			<i>Liverpool</i>	APR 7 1917	<i>J. Brown</i>
		Transferred to <i>2nd</i>	<i>Shoreham</i>	APR 7 1917	<i>J. Brown</i>
		Reserve Bn.			<i>#1609. Capt. & Adjutant</i>
11.4.17	22nd R. Bn.	Taken on strength.	Shoreham	7.4.17	D.P.11 O.53
25.4.17	22nd R. Bn.	Posted to 23rd Res. Bn.	Shoreham	24.4.17	D.P.11 O.67
25.4.17	23rd R. Bn.	Taken on strength.	Shoreham	24.4.17	D.P.11 O.112
<i>24.6.17</i>	<i>do</i>	<i>Posted to 1st. g. Bn.</i>	<i>do</i>	<i>20.6.17</i>	<i>D.P.172</i>
					<i>W. H. Hallett Lieut. for O.C. 26rd. Can. Res. Bn.</i>

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

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				
25-6-17		TAKEN ON STRENGTH	1st. Quebec Regt'l. Depot, SHOREHAM. Ft. IL. D.O.	97. 20-6-17	
23-7-17		1st. Que. Regt'l. Depot. TRANSFERRED To	<u>Returned to Canada</u>	<u>Ft. IL. D.O.</u>	131. 10-7-17

J. S. Ducey
 ADJUTANT,
 1ST. QUEBEC REGT'L. DEPOT.

CONFIDENTIAL.

The signature of each Officer composing the Board, &c., should be attached at the end of the Proceedings.

FOR OFFICERS ONLY.

ans
4-1-109

PROCEEDINGS OF A MEDICAL BOARD assembled

at St. Johns P-2

on the April 5th 1917 by order of

A. D. M. S. M. D. 4

for the purpose of examining and reporting upon the present state of health of

Lieut. Alexander Livingstone
MacLennan C.E.

PRESIDENT. Capt. Van Loven A.M.C.

MEMBERS { Capt. J. P. Campbell, A.M.C.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that he is fit for

overseas service in the C.E.F.

The opinion of the Board upon the questions herein is as follows:—

(1) Is the officer fit for service?* Yes

(2) If not so fit, how long is the disability likely to continue?.....

(3) To what extent does it prevent his earning a livelihood?.....

APPROVED,

[Signature]

SIGNATURES

Lieut. Colonel

A. D. M. S. Mil. District No. 4

[Signature] Capt. [Signature]

*If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

PROCEEDINGS OF A MEDICAL BOARD

THE BOARD OF MEDICAL EXAMINERS
OF THE STATE OF CALIFORNIA
OFFICE OF THE ATTORNEY GENERAL
SAN FRANCISCO, CALIFORNIA

by order of _____

for the purpose of examining and reporting upon the present state of health of _____

EXAMINATION

NUMBER

The Board, having ascertained pursuant to order, procured to examine the

above-named officer and find that _____

The opinion of the Board upon the questions herein is as follows:

- (1) Is the officer fit for service?
- (2) If not so fit, how long is the disability likely to continue?

(3) To what extent does he prevent the carrying on his official duties?

APPROVED AND FORWARDED:

ATTORNEY GENERAL

CONFIDENTIAL.

FOR OFFICERS ONLY.

The signature of each Officer composing the Board, &c., should be attached at the end of the Proceedings.

PROCEEDINGS OF A MEDICAL BOARD assembled

at Saint Johns P.R.

on the 5th Jan 1917 by order of

O. G. Dix No. 1

for the purpose of examining and reporting upon the present state of health of

A. L. Mc Lennan

Lieut Gen Eng

PRESIDENT. A. H. Mac Cordick Capt R.M.C.

MEMBERS { Capt Payne R.M.C.

{ Capt Kirkland R.M.C.

The Board having assembled pursuant to order, proceed to examine the

above-named officer and find that he is fit.

The opinion of the Board upon the questions herein is as follows:—

(1) Is the officer fit for service?* Yes

(2) If not so fit, how long is the disability likely to continue?.....

(3) To what extent does it prevent his earning a livelihood?.....

I CONCUR.

SIGNATURES { A. H. Mac Cordick Capt R.M.C.
G. Payne Capt R.M.C.
A. H. Hawley Kirkland Capt R.M.C.

R. Mac
Lieut-Colonel,
A.D.M.S. M.D.#4

If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

9/1/17

6-8-56

CONFIDENTIAL

FOR OFFICERS ONLY.

The signature of each Officer composing the Board, &c. should be attached at the end of the Proceedings.

PROCEEDINGS OF A MEDICAL BOARD assembled

at Montreal

on the 21st March 1917 by order of

G. O. C. M. D. # 4

for the purpose of examining and reporting upon the present state of health of

Lieut Col - F. M. Mc Robie

244th Batt C. E. F.

MILITARY DISTRICT No. 4
MAR 23 1917
M. D. 4

PRESIDENT Capt O Van Luven A.M.C.

MEMBERS Capt F. E. Rogers A.M.C.

Capt C. K. Church A.M.C.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that he is fit for service

The opinion of the Board upon the questions herein is as follows:

(1) Is the officer fit for service? * not applicable

(2) If not so fit, how long is the disability likely to continue? not applicable

(3) To what extent does it prevent his earning a livelihood? not applicable

SIGNATURES

O. Van Luven Capt A.M.C.
C. K. Church Capt A.M.C.
F. E. Rogers Capt A.M.C.

*If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

PROCEEDINGS OF A MEDICAL BOARD

Name of Patient: _____

Rank: _____

Regiment: _____

Company: _____

Medical History: _____

Physical Examination: _____

Diagnosis: _____

Recommendation: _____

Signature of Surgeon: _____

Date: _____

Place: _____

Remarks: _____

PATIENT

NAME

RANK

REGIMENT

COMPANY

DATE

PLACE

REMARKS

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.

DEPT. MILITIA & DEFENCE
OCT - 2 1917
H.Q. CANADA

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.

244th "OVERSEAS BATTALION, C. E. F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number..... **Lieutenant Colonel.**

(3) Full Name of Soldier..... **Frederick MacKenzie McRobie,**

(4) Place of Birth..... **Montreal, P.Q.**

(5) Are you married, or not?..... **Yes**

(6) If married, state,
 (a) Full name of your wife..... **Susie Elizabeth McRobie**

(b) Present Postal Address..... **647 Grosvenor Avenue, Montreal, P.Q.**

(7) Are you a widower?.....

(8) Have you any children?..... **Yes**

If so, give number of boys and girls..... **Two Boys and one Girl,**

Also their names and ages..... **Donald - 5 years**

..... **Frederick - 2 years and 9 months**

..... **Baby Girl not yet christened.**

Q133-3-10-17
323

(9) Is your Father alive?..... **No**.....

If so, state name and address

(10) Is your Mother alive?..... **No**.....

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

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

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

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

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

(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.

Separation Allowance applied for

(15) Are you insured?..... **Yes**.....

If so, in what Company?..... **Manufacturers & British Empire.**.....

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

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

Date..... **JUN 28 1916**.....

James Roche

Officer Commanding.

Lieut.
o/c 244th "Overseas" Battalion, C. E. F.

m. 24

FORM OF WILL

I, Fredrick Mackenzie McRobie (Name in full)

Regimental Number serving in 244th Battalion CEF

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

will in safe
647

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Procurator
Westmount
Montreal

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 20th day of March A.D. 1917

Fredrick McRobie Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness.....

Address of Witness.....

THE TWO
WITNESSES

Occupation of Witness.....

MUST
SIGN HERE

Signature of Second Witness.....

Address of Witness.....

Occupation of Witness.....

E. J. AD

MR off April 17

L.P.C. to March 31/17. charged March.

13.

Assignment as at
April 1st 1917.

McRobie,¹⁴

F. M.

Lieut-Col.

cc
244th Battalion.

55

Lewis McRobie,

2nd, Washington Apartments,¹⁴

9 St. Mathew Street,

Montreal.

\$ 55⁰⁰

Payment Stopped
A. 3 M Form

Trans. to bank 1 July 1917.

Remarks,
Casualties, etc.

Balance

Total
Debits

Other
Charges

Assigned
pay

Cash
Payments

Voucher
No Date

Total
Credits

Other
Credits

Field Allowance
Amount Rate
No. of Days

PAY
Amount Rate
No. of Days

Date
To From

Name McRobie Lt Col.

M. F. W. 41
10 M.-5-16.
1772-39-889.

1028-1

Regimental No.

Name and address of next-of-kin

Unit 244th

Date of enlistment

Place of

S.O.S 25-7-17

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$ 55⁰⁰ 12/6/16 to 31/8/17 open closed 31/8/17
55⁰⁰ 1/4/17 to 31/7/17 closed 31/7/17

Reason for discharge

To whom payable

Pub Ex.

Character on discharge

Y 2810 10⁷/₁₇ to 21⁷/₁₇

1st Lt. Dr. Battalion
1st Lt. CP Clear to 30-6-17

Form 2876 M. & D. 0092

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher No.	Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days										Rate
1/7/17	25/7/17	25	5 ⁰⁰	125 ⁰⁰	25	125	3125				55 ⁰⁰	60 ⁰⁰		<p>107-77C</p> <p>X 3a August 1917</p> <p>90 P. D. 1917</p> <p>Com pay 1/1/17 to 9/7/17 0.50</p> <p>1/1/17 to 25/7/17 0.50</p> <p>18025 X men in Eng 1/7/17 to 9/7/17</p>	
<u>Struck off strength 25/7/17 Cheque sent 31/8/17</u>															
										11 ⁰⁰					am. L.P.C.
										9 ⁰⁰					O.P.D. Com pay 1/1/17 to 9/7/17
										BALANCE DEBTOR		20 ⁰⁰	20 ⁰⁰	Rendered P. D. P. 20, 31/7/17	
										20 ⁰⁰					

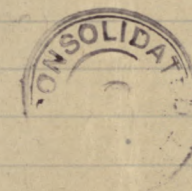
Recovered fr. P. D. Pay 12/18.
Auth. list to gmj

SEPARATION ALLOWANCE

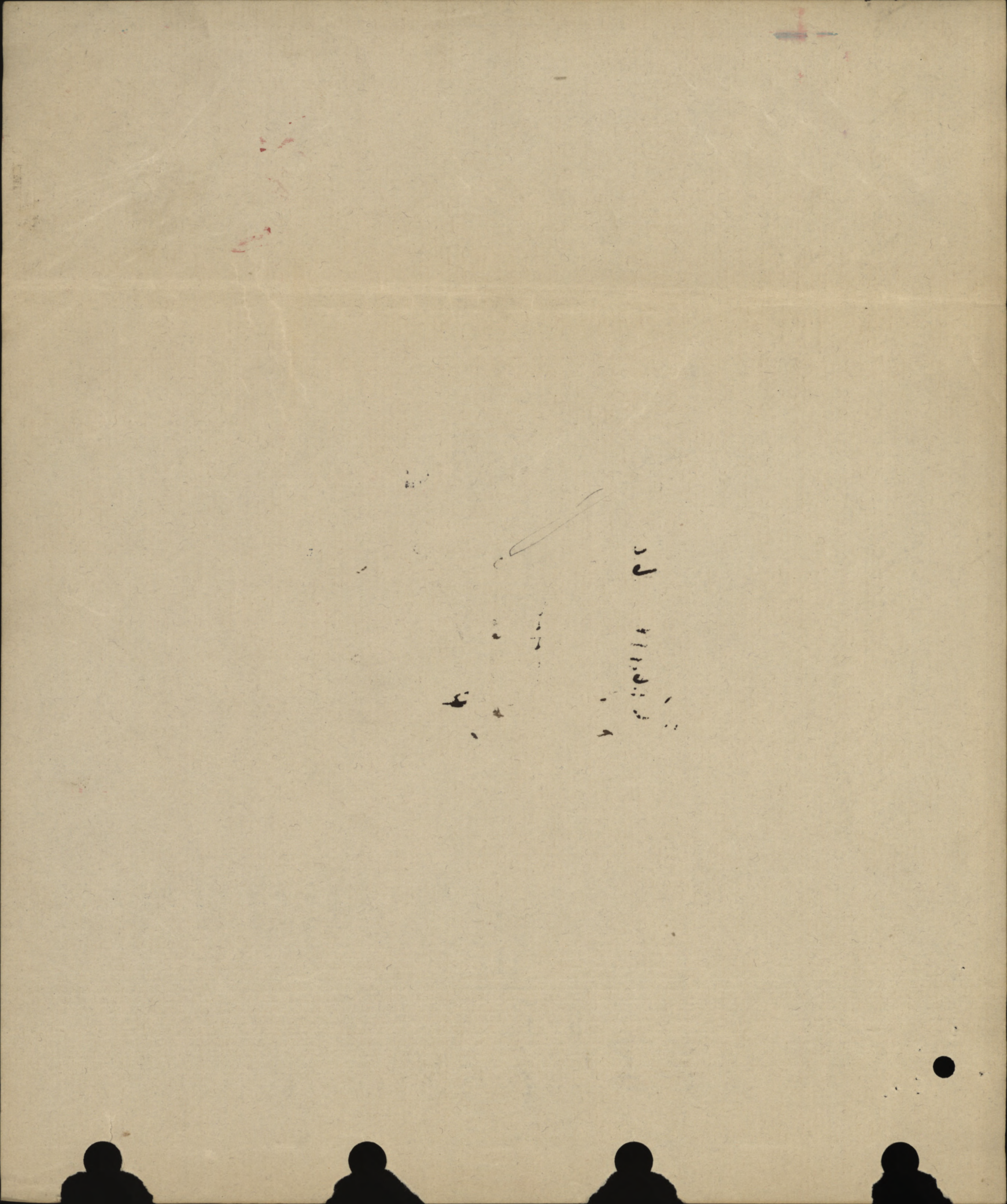
Name Susie E. McRobie Name of Soldier Mc Robie Fredk. Mack.
 Address 647 Grosvenor Ave. Regtl. No.
Westmount Rank Lieut. Colonel
Que. Corps 244th Batt
 Relation to Soldier }
 wife, child or mother } Wife
 To what Corps belonging }
 when called out }

PAYMENTS

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



ACCOUNT CLOSED
 DATE..... PER.....
 W



MILITIA AND DEFENCE
SEPARATION ALLOWANCE

191

M. F. W. 11a.
 50m.-4-16.
 1772-39-818.

Sheet No. 2.

S. E. Mc Robie

Wife
 PAYMENTS.

Name of Soldier Mc Robie F. M.
Lieut Colonel

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		2/10930	158	158
Sept.		6/16918	60	60
Oct.		X 1/19159	60	60
Nov.		2/22988	60	60
Dec.		EP 26407	60	60
Jan.	1917	Q 29778	60	60
Feb.		Q 35103	60	Q 33066 Could Write Ch
March		Q 26381	60	60
April		1/2188	60	60
May		2/5578	60	60
June		Q 9208	60	60
July		2/12342	60	60
Aug.		Y 15733	60	60
Sept.			8780	
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$878⁵⁰ (JP)

etc closed in auth: P.M.L.
 HQ. 1028-1, 1-9-17 on file
 R. 12584-7-1 Jolynech 4/9/17

ACCOUNT CLOSED
 DATE..... PER..... W

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 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.				

(sister)

auth. J. W. Borden
see entry
no 1-7-17

MILITIA AND DEFENCE

M. F. W. 12

50m.—7-16

H. Q. 1772-39-819

ASSIGNED PAY

Miss A. S. McRobie SEAS CONTINGENTS

To Whom

~~Lewis M. Robie~~

By Whom Assigned

McRobie Frederick M^cK

Address

~~2 Washington apts~~

Regtl. No.

396 St. James St. 9 St. Matthew St.

Rank

Lt. Col.

Canadian Transfer Co. 78 1/2 Wentworth Ave

Corps

244th Bn.

Rate

55.00 ^{78 1/2} _{Wentworth Ave}

APR 1 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			39m 27/9/17 gale 28/9/17 Transfd to Canada g/c closed 1/7/17.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

COPIED
FOR
4
CASUALTIES

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2.

~~Lewis Mc Robie~~
 Miss A. S. Mc Robie

PAYMENTS.

Name of Soldier

Mc Robie Frederick W
 Lt Col. 2444 APR 1 1917

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		N 6132	55	
May		Y 10607	55	55 ¹⁶⁵ Y-10607 Attd & cancelled 7-7-17
June		D 16131	55	S-D-16131
July		165-L A 14414	165 -	Handed out 7-7-17.
Aug.			55	No 396 St. James St. % Canadian Transfer Co. Montreal. 2/8/17
Sept.				*220.00 net closed 31/7/17
Oct.				as per H.Q. 1028-1
Nov.				File R-12554-F-1 ad 15/8/17
Dec.				from C.P. 1/8/17
Jan.	1918			
Feb.				
March				*220.00 FX ad 4/9/17
April				
May				
June				
July				

jer

55.00

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.				

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name **McRobie, Frederick McKenzie**
Surname Christian Name

12554 - F-1.

Regimental Number _____ Rank **Lt.Col.**

Address (in full) **647 Grosvenor Ave.**

Unit **244th Bn.**

Westmount, P.Q.

Original Unit _____

District where paid **Ottawa**

Date of Discharge **25-7-17**

P. D. P. Filing Number **10M011**

Rates:—Regimental pay \$ **5.00** per diem: Field Allowance \$ **1.25** per diem. Separation Allowance \$ **60.00** per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
748 75	4827	11/10/17	247 50	4761	10/11/17	247 50	4805	14/12/17	233 75	20 00	728 75

Remarks:

M. F. W. 127.
 60M-6 17.
 1772 39-1140.

File No. 1912554-7-1

WAR SERVICE GRATUITY.

Register No. MC 1524

Nov. 28-11-19 W118

Reg. No. St. Col. Dependent Mrs F. M. McRobie (wife)

Name McRobie Fred Address same

Address 647 Grosvenor Ave

Westmount

Montreal debit balance

Net due paid as below

Pay Soldier \$ 13.75 Pay Dependent \$ 240.00

Days 153 Rate 6.25 Due 1256.25

Rate 60.00 Due 1002.50

Less P.D.P. credited 748.75

Less further Dr. Bal. or overpayment.

Net 253.75
507.50

RW 604
5/20

Amended.
Baron - Neville
RA 30/12/19.

R. 134
12-19.

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
<u>28/11/19</u>	<u>46318</u>	<u>542516</u>	<u>13 76</u>		<u>28/11/19</u>	<u>46319</u>	<u>542517</u>	<u>240 00</u>
<u>31/12/19</u>	<u>50918</u>	<u>546590</u>	<u>193 75</u>		<u>31/12/19</u>	<u>50919</u>	<u>546591</u>	<u>60 00</u>

GEN'L AUDITOR
Posting checked by
A. Bell
Date 28/11/19

of 30/1/19

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount.

Separation Allowance issued. Yes or No.....

22nd Res. Co.
E. B.

Canada

\$ 55⁰⁰ fr. 1.4.17.

S.O.S. Disp. A. 4 Ottawa H.Q. Case 2045-2077

D. Col. ~~U.S.~~ 4.4.17
From Canada
R.O. #1609 (skm)
4.9.4.17.

Name

Initials

Bank

M. Robie
J. M.
of Montreal.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1917								
		1917-18						
	Balance forward from Can. 3/13/17	1573		224 75		224 75		
	do do	195	224 75					
21	at Can.				55			
24	Pa. fr. 1 st 7-30 th 17. Men. fr. 7 th 7-30 th 17. No 775.		241 50					
25	Bank	3009		186 50				
May 16	at Can.				55			
20	Pay May (R)		255 75					
22	Bank	5932		200 75				
June 12	at Can.				55			
	June Pay (R)		247 50					
21	Bank	7976		192 50				
July 14	at Can.				55			
	July Pay (R)		224 75					
	of paid com. pay 20 th 7-30 th 17 No 1696		255 75			224 75		
Aug 13	Credited Pra. 1-31 st 17 No 215.			224 75		158 75		
14	Asst pay chgd not paid for July 1917. No 115		55					
Sep 15	Rations 1-18 th 17 (less 13 dys) No 4776							
15	Transferred to suspense acct No 214		11					

Draw to Can.
L.P. to the 30th 17.
Pa to be carried
forward under return
224 75
158 75
1 for N.C. Ledger
from Ledger 13 - 4th 17.
7th 9 amended L.P.
sent to Canada
showing at Bales
\$11.00
* 6/8
3/18. Ottawa, H.Q. 52-21-23-82 4/20/17
advise recovery of \$11.00
Suspense acct credited Jan 18
2/18

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

Name

Initials

Bank

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

12. 6. 16

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

60			
----	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.
 Rank *Lt Col* Promoted Reverted Discharge
 Soldier's Name *Fredk. Mack Mc Robie*
 Battalion *244 Batta*
 Beneficiary *Susie E. Mc Robie*
 Relationship *wife*
 Address *647 Grosvenor Ave Westmount Que*

Name
 Address
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>1917</i> <i>Dec 31</i>	<i>—</i>	<i>878</i>		<i>878</i>

REMARKS

Account Closed
Auth P.M.L. No. 2: 1028-1, 1-9-17 on file
R. 12554 - F-1 J.A. Lynch 4-9-17.

CONFIDENTIAL.

The signature of each Officer composing the Board, &c. should be attached at the end of the Proceedings.

FOR OFFICERS ONLY.

PROCEEDINGS OF A MEDICAL BOARD assembled

at Montreal

on the 21st June, 1916 by order of

O.C., M.D. No. 4.

for the purpose of examining and reporting upon the present state of health of

Sub. Col. F. H. McKelvie

PRESIDENT. Major D.D. MacTaggart R.O.

MEMBERS

Capt. A.A. Robertson, A.M.C.

Capt. J.T. Rogers, A.M.C.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that his general health and physical development are good.

The opinion of the Board upon the questions herein is as follows:—

(1) Is the officer fit for service?* Yes.

(2) If not so fit, how long is the disability likely to continue?.....

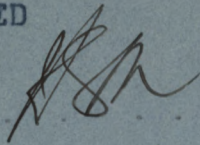
(3) To what extent does it prevent his earning a livelihood?.....

SIGNATURES

D.D. MacTaggart Major
A.A. Robertson Capt
J.T. Rogers, Capt.

* If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

APPROVED

A handwritten signature in dark ink, appearing to be 'A.A.D.M.S.', written over a dotted line.

Major.

A/A.D.M.S., M.D. No. 4.

Montreal, P. Q.

22nd June, 1916.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

Station Montreal, Que.

Date 10th Sept. 1917.

1. (a) Unit 244th Batt., C.E.F., and 3rd Regt. C.M.
(b) Rank Lt. Col.
(c) Surname McRobie (d) Christian name Frederick MacKenzie
2. Age last birthday 42 Date of birth Apr. 9, 1875.
3. Date of appointment to the C. E. F. (for officers of the C. E. F.) June 1916.
Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training)
4. Personal description:
(a) Height 5' 11½" (b) Weight 170 lbs.
(c) Complexion Dark (d) Colour of hair Brown.
(e) Colour of eyes Brown (f) Scars or tattoo marks None.
5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) 647 Grosvenor Ave., Westmount.
(b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent
6. Former trade or occupation General Manager & Secretary.

7. Service

	Years	Days
	PERIODS	
	From	To

8. Disease or disability (use authorized nomenclature) None.
(a) Date of origin Not applicable. (b) Place of origin
(c) Cause Not applicable.
9. Present condition. (Important, to be a full description of the present condition or conditions.)
Good. Heart and lungs normal.
Urine 1020, acid, no albumen, no sugar.
Blood pressure 125 syst. 90 diastolic.

[After describing all abnormalities, anatomical and functional, contributing to incapacity (see Question 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

- 10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8.
[Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

MEDICAL HISTORY OF AN INVALID
None.

- 11. To what extent, state in percentages, is incapacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each and that due to all combined.

Not at all.

- 12. Did the disability arise on or off duty? Not applicable.

- 13. Was a Court of Inquiry held? Not applicable.

- 14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes **No disability** No **aggravation.**

(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

- 15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? Not applicable.

(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.)

- 16. What is the probable duration, in months, of the disability or of each of the disabling conditions if there is more than one? No disability.

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

- 18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

- 19. Can the former trade or occupation be resumed? Yes.

- 20. Recommendations.

Fit, Category "A".

A. A. McRobie Cap

Medical Officer by whom the case is brought forward.

(Sections 8, 9 and 10 are to be read to the Officer.)

I, the undersigned... **It. Col. F. M. McRobie** have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of **nothing.**

F. M. McRobie
Signature of Officer examined. *Cap*

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the officer'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 officer concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that 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.

22. Is the Officer fit for (a) General service (b) General service (c) Home service (d) Temporary duty (e) Unfit for service in Categories A, B and C (Yes or No)

23. Is it recommended that the Officer (a) Receive no further treatment (b) Receive further treatment (c) Should not be sent under his own control (Strike out condition not applicable)

24. It is recommended that the Officer be discharged (When not for discharge add special recommendation) (Strike out condition not applicable)

President
 Approved by
 Date
 Director General of Medical Services