M. D. 18 DUPLICATE 90R Depot Battalion Regiment

Regtl. No. 3132087

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

Major 8/4/18

1. Surname: TERRYBERRY
2. Christian name: Robert
3. Present address: Comber Ont.
4. Military Service Act letter and number: 707817 AC
5. Date of birth: August 7th 1892
6. Place of birth (town, township or county and country): Bridgeport Ont.
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: Farmer
10. Name of next-of-kin: Norman Terryberry
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Silverdale Ont.
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: No
15. Medical Examination under Military Service Act:—

(a) Place: Chatham Ont (b) Date: October 23rd (c) Category: A1

DECLARATION OF RECRUIT

I, Robert Terryberry, do solemnly declare that the above particulars refer to me, and are true.

February 27th/18 Robert Terryberry (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	25	yrs	6	mths.
Height	5	ft	6 1/2	ins.
Chest measurement — fully expanded	39			ins.
Chest measurement — range of expansion	4			ins.
Complexion	Medium			
Eyes	Brown			
Hair	Brown			

Distinctive marks, and marks indicating congential peculiarities or previous disease.

Eyes R. D 20/20 L. D 20/20

Hearing R. Normal L. Normal

A. E. Gilligan Lieut Col.

O. C. 18 Depot Btln.

90R Regt.

Place London Ont Date 28-2-18

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

N. D. Depot Battalion Regiment

Regtl. No.

REGIMENTAL DOCUMENTS

NAME TERRYBERRY, ROBERT Spr REGT. NO 3132087 UNIT 1/WOR H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
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)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob.
	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)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M.F.W. 67.					
2	Misc.					
7	Dr Dispatch					

05326

W 2589
100M-11-18
272-39-1377

Date of Enlistment 24-2-18.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

T 1574

Date of Assignment 1 June 1918.

6L-4T-3 Of.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion 1st Depot Bn. Dr. O Regt. 28 Dft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.CLARA DISHER,
COMBER,
ONT. 15 15.00
% 3132087 PTE ROBT TERRYBERRY
FIFTEEN DOLLARS

2

3

4

17888-R-6

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
June 18	P 22564		15-	15-	✓	
July	G 33198		15-	15-	✓	
Aug	J 34291		15-	15-	—	
Sept	P 42853		15-	15-		
Oct	J 48584		15-	15-	✓	
Nov	F 57817		15-	15-	—	
Dec	G 64542		15	15		
Jan	L 71438		15	15		
Feb	R 75866		15	15		
Mch	B 87682		15-	15-		
			15-0	15-0		

Ret'd per Olympic

Date 26/3/19 M.F.W.187 3/4-19

Closed W62275 OK H 4/19 RW

Mdl

M. F. W. 128.
400m—4-17—1779 49-1141
L. L. 22289—M. & D. 7993.

AUTHORITY FOR NEW ACC'T. N.R. M.D.1. B.1. R. Garry 27-5-18

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128.
400M.—4-17—1772 39-1141
L. L. 22320—M. & D. 7993.

SURNAME. Terryberry.

CHRISTIAN NAMES Robert.

REGL. No. 313 2 087 RANK Pte

UNIT ~~West Ont. Regt. 1st Dpo Bn~~ # 1. D. D.

FORMER CORPS Nil.

CARD No. MD 1 V

S.O.S. Demob. 29-3-19

D.O.D. 90 FOLL. 31-3-1919

T. O. S. Feb 26 1918

D.O. Part II No 57

NEXT OF KIN.

NAMES IN FULL Terryberry, Norman.

RELATIONSHIP TO SOLDIER Father

ADDRESS Silverdale, Ont

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Bridgeport Ont DATE Aug. 7th 1892

PLACE OF ATTESTATION London, Ont. DATE Feb 28th 1918.

O/S. 11-5-18: 12-45 7. 7.

RIC 24-3-19 290 15-8 Ppr.

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

No. 3132887 RANK Pte. NAME Terryberry Robt.

T. O. S. 27-2-18 UNIT 1st Depot Battalion W. C. Regt
D. O. 57/26-2-18

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Feb. 27	1918 Mar. 31	Nil		

Number 3132087 Rank Spr

Surname TERRYBERRY

Christian Name Robert

Units C. E. Theatre of War Overseas

Date of Service 9-8-18

Remarks

Latest Address Comber
Ont.

Roll No. B

Cap 10294

200m.-2-21.M.

DESP. DEC 19 1927
REGN. No. 36179

3132087

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Perryberry Christian name Robert

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 707217 A&

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) Comber, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd day of October 1917, by the undersigned medical board sitting at Chatham, Ont.

5. Age as stated 25 Years 2 Months. 6. Apparent age 25 Years 2 Months

7. Height 5 Feet 6½ Inches. 8. Weight 152 Pounds.

9. Chest measurement { Minimum 35 Ins. / Maximum 39 Ins. } 10. Complexion Medium { Eyes Brown / Hair Brown }

11. Physical development Good { Good / Fair / Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm / Left arm } 14. When vaccinated last

15. Distinctive marks and marks indicating congenital peculiarities or previous disease

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category [A]

RE 20/20 LE 20/20 Hearing Normal

W. A. Burpe, Maj. President

W. Gemmell, Capt. Member. A. H. Young, Lieut. Member.

Signature of Man

Date	Result	Vaccinations		Date	Result	Anti-Typhoid Inoculations, Etc.	
1/3/18		Vaccinated	M.O.	1/3/18		Vaccinated	M.O.
			M.O.	5/3/18			M.O.
			M.O.	12/3/18			M.O.

Joined day of FEB 27 1918 191 at LONDON, ONT.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Battalion, W.O.R.	3132087		FEB 27 1918
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
London, Ont.	11-3-18*	Cat A II	[illegible] Pres.
St. Thomas	3-5-18	2nd Cat A II	J. S. Munroe Capt. Pres.

N. B.—This sheet is 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 Terryberry Christian Name Robert

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

To be made out in duplicate. H.Q. 54-21-23-53

Duplicate

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.

---

(1) Name of Overseas Unit which Soldier joins 1st Depot Battn., W. O. R.

(2) Regimental Number 3132087

(3) Full Name of Soldier TREHYBERRY Robert

(4) Place of Birt Bridgeport Ont.

(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 ? No

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....Yes Norman Terryberry.....

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

(10) Is your Mother alive ?.....Yes Sedany Terryberry.....

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

.....

(11) If your Mother is a widow.....No.....

Are you her sole support, or not ?.....No.....

(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.

.....No.....

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

If so, in what Company ?.....Prudential Life Ins. Co.

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.

H L Mulligan Lieut. Colonel
1st Depot Battalion, W.O.R.
Officer Commanding.

Date.....28-2-18.....

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT ....

NAME OF SOLDIER Yerxa, R. C.

REGIMENT 60th Rank Pte No. 432084



INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	Dec 28 1918																			Examined by K. Berry		Complete

M.F.B. 465
2000M-1-17
1772-39 950

DENTAL HISTORY
CHARLOTTE MEDICAL COLLEGE

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) TERRYBERRY. R.

REGIMENT 7th C. E. RANK Spr. No. 3132087

Date of Examination in England ..... Date of Examination in France 9.1.19.



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

None

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) In Canada
- (*b*) In England No
- (*c*) In France

Signature of Dental Officer J. O'H. Marlatt

Capt.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3132087 Rank Sapper Surname Derryberry
(Given name in full) Robert

Unit or Corps 7th C.E. Batt. Birthplace Bridgeport Ont.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION: Estimated.

Physique Good Weight 170 lbs. Height 5 ft 8 in. Colour of Eyes Brown

Nutrition Good

Pulse 60 Regular

Condition of arteries Soft

Vision Rt. 6/12 + Left 6/12 +

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
nil

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

no disability

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Brancepeth (Overseas)

Date 19-2-19 Signed J. J. Tindall Capt M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature R. Tennyson

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

R. M.

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

ORIGINAL.

3132087

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname TERRYBERRY Christian name Robert

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 707817 AC

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) Comber Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd day of October 1917, by the undersigned medical board sitting at Chatham Ont.

5. Age as stated 25 Years 2 Months. 6. Apparent age 25 Years 2 Months

7. Height 5 Feet 6 1/2 Inches. 8. Weight 152 Pounds.

9. Chest measurement { Minimum 35 Ins. / Maximum 39 Ins. } 10. Complexion Medium { Eyes Brown / Hair Brown }

11. Physical development. Good { Good / Fair / Poor } 12. Smallpox marks Nil.

13. Number of vaccination marks { Right arm / Left arm } 14. When vaccinated last

15. Distinctive marks and marks indicating congenital peculiarities or previous disease

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category **A**

17. (a) Vision. R. D 20/20 L. D 20/20

(b) Hearing. R. Normal L. Normal

Signature of Man Robert Terryberry

Sgd. W.A. Burpe Major C.A.M.C. President.

W.T. Gemmell Lt C.A.M.C. Member. R.H. Fraser Lt. C.A.M.C. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
1/3/18		M.O.	1/3/18		M.O.
		M.O.	2/2/18		M.O.
		M.O.	12/2/18		M.O.

Joined day of FEB 27 1918 191 at LONDON, ONT.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Battalion, W.O.R.	3132087		FEB 27 1918
Transferred to	2nd C.D. R.B. C.E. Pool			24.5.18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
London, Ont	19-3-18.	Cat A II	[illegible] Pres.
St. Thomas	3-5-18	24 Cat. A II	J.B. Munro Capt. Pres.

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

M. F. B. 313.
300M.—10-17.
1772-39-439.

J Loy

Surname Longbury Christian Name Robert

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 3132087 (Rank) Sapper

Name (in full) Seivewright Robert. enlisted in

the 1st Depot Batt. W. O. R.

CANADIAN EXPEDITIONARY FORCE at London Ont. on the 27th

day of Feb. 19 18.

HE served in 7th Batt. C.E.

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

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

Age 25

Height 5 feet 6½ inches.

Complexion Medium

Eyes Brown

Hair Brown

Marks or Scars

W.L.

Signature of Soldier

Eadoake

Issuing Officer

Date of Discharge

DISCHARGE SECTION
MAR 29 1919
No. 1 District Depot

Lieut

Rank

Date 29/3/19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

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

Name (in full) ..... enlisted in

the ..... on the .....

CANADIAN EXPEDITIONARY FORCE at .....

day of 19

He served in .....

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

Demobilization

Medical Unfitness

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

Age	Marks or Scars
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier

Date of Discharge

Issuing Officer

Rank

No. 1 District Depot
MAR 30 1918
DISCHARGE SECTION

To .....

Date .....

War Service Badge
Class "A" No. .....

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battn, W. O. R. 28-Bft. C. E. T. D.

Regimental No. 3132017 Rank Private Name TERRYBERRY Robt. Robert
C. E. F.

Enlisted (a) 28/2/18 Terms of Service (a) ~~P.F.~~ Dof Wt. Service reckons from (a) 28-2-18

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)~~ Gunner

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.
~~MAY 5 1918~~	1st Depot Bn. W.O.R.	Transferred o/s EMBARKED DISEMBARKED	London, Ont. CANADA ENGLAND	Authority H.Q.593-6-7 MAY 10 1918	~~MAY 5 1918~~
27/5/18	2nd CERB	T.O.S. of 2nd. CERB. from Canada	Seaford	24/5/18	Part II Order 105.
10/8/18	2 CERB	S. of 2 CERB. to Hr Col France	Seaford	9/8/18	Part II Ord #69 Above Lieut. C. E. for Adjutant, 2nd CE RB
11. 8. 18	C&RD	T.O.S. to Hr Col	6 G Tpt	11/8/18	NK 1346 P 87 dy 1918
15. 8. 18	do	Left for a CERB		15/8/18	do do
do	CERB	Arrd do	do	do	do 1263
10. 9. 18	do	T.O.S. to Hr Col		5/9/18	NK 5238 P 99 dy 1918
		do 7 Base Engrs			

(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.

Terryberry. R. 313207

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				
25.9.18	7 BN CE	TOS 7 EN CE—ON TRANS FROM C E R POOL.	Field	6.9.18	PART 2 NO 37
5.9.18	C.C.R.C	Left for 7 Bn C.E	"	5.9.18	N.R-D.C.E-123-R&R-1553
7.9.18	7 Bn C.E	Arrived "	"	7.9.18	B-213
15/2/19	Ch. Emb Havre	Proceeded To—England		15/2/19	Pt 19/1914.

Lieut.
for Lt. Col., A.A.G.,
Canadian Section

S-O-S- 7th Bn. C.E. on proceeding to Canada Pt-2-30 D 15 3 19

EMBARKED S S OLYMPIC SOUTHAMPTON 17-3-19

R. B. Blandford Capt.
Adjutant, No. 8 Trans-Atlantic Conducting Staff

TOS No1 Dist. Depot
Displ. Stn. K 17. 3 .19
SOS dispersed
29.3.19 D.O. No90

FOR O.C. DISP STA K

Form R 122.
2353—100M—9-1-16

CR. Rank Name TERRYBERRY, Robert. Reg'l No. 3132087.

Unit 28th Dft C.E.T.D If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment London,Ont. Feb.28th. 1918. Place of Birth Bridgeport,Ont.

Name and Address, Next-of-Kin Norman Terryberry,

Silverdale, Ont., Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

I
N/E. R.B. No. 8162
File No.
CAN.OR
Category
A.F. 103 CHECKED 16 JUL 18

Report. Date.	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.
		Arrived in England 24-5-18 S/S RUNIC 1st CERE. TOS on ARVL* From* CANADA24.5.18. DO5d27/5			
10-8-18	2nd L.E.R.B.	S.O.S. to C.E.R. Pool	Spr. Seaford	9-8-18	pt II DO 69 CERE D088 J68
20-9-18	C.E.R. Pool	S.O.S. to 7 Bn C.E.	" Field	5-9-18	D.O.98 7 Bn CE 37/25/9/18
17-3-19	7th Bn.	S.O.S. to Canada. S/L41 - D.A. "K"	Spr Brushett	17-3-19. 17-3-19.	PtII O.30.

3132087

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.					

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1 June 1918	EFFECTIVE DATE:-
AMOUNT:- $15.00	AMOUNT:-
NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	
Mrs Clara ~~Fisher~~ Disher Comber (Cousin) Ont. Auth. from Roll Assigned Pay.	

NAME:- TERRYBERRY, Rob!

NUMBER:- 3132087

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
2nd CERB. Pt II 5	MAY 25 '18	Spr

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2nd CERB. CETC.

DATE ACCOUNT FIRST OPENED:- JUN 1 '18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
~~19 1/19~~	~~1175~~		~~3 93~~				
~~2 2/19~~	~~1242~~		~~3 93~~				
~~10 2/19~~	~~1308~~		~~5 60~~				
~~16 2/19~~	~~F110~~	~~Brandon~~	~~43 .~~				
			86 06				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- From to Canada 1/3/19 Regt R. 3290 Brandon 18 Brandon Mtl. 2. 19/2/19 L.P.& D. Incl. 3.33

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	31-5-18			Balance from Canada.					44 40		
June	Spr.	33		Can.				15			
				315. 19.6.18. 1 CERB	43 80						
				1100. 13.6.18 1 CERB	2 93				16 87		
		33			46 73			15			
July	Spr's Pay	34 10		C.A.R.				15			
				911. 22.7.18 1 CERB	19 47						
				874 15.7.18 ✓	9 73				6 07		
		34 10			29 20			15			
Aug	Pay	34 10		C.A.R.	29 20			15			
				8184 G.B.D. 18.8.18	4 46						
				1809 2 Sweeks. 14.8.18	3 57						
		34 10			8 03			15	14 14		
Sept	Pay	33.		C.A.R.				15.			
				349 4 C.E. 14.9.18	4 14						
		33.			4 14			15.	28 00		Readjusted 29/4/18
Oct.	Pay	34 ~~50~~ 10		C.A.R.				15.			
				443 4 C.E. 1.10.18	3 93						
				518 ✓ 16.10.18	3 93				39 64		
		34 10			4 46			15.			
Nov.	Pay	33.		C.A.R.				30.			
Dec	✓	34 10		583 4 C.E. 2.11.18	3 93						
Jan	✓	34 10		649 ✓ 20.11.18	13 06						
				759 ✓ 3.12.18	3 93						
				C.A.R.				15.	45 32		
		101 20			20 52			45.			

NUMBER . . RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Feb.	Pay	30 80		Forward					45 32		
				889 Y.C.C. 19.12.18	4 66						
				1012 " 3.1.19	3 43						
				C.A.T.	8 39			15.			
				1308 Y.C.C. 15.2.19	5 60						
				1242 " 2.2.19	3 43						
				1125 " 18.1.19	3 43						
				Y.117 C.C.C. 14.2.19	43 .						
				D.1046 " E. 8/3/19	9 73				13 06	F.	
		30 80			104 18			15			

45.32
30.80
106.12

8.39.
86.06
94.45
15.
109.45
106.12
3.33

L.O.S. Canada 17/3/19 S.K. H.I. C.E.

War Service Badge
Class "A" No. 84933

SHORT FORM.

D. A – K.
C. A. G. – 1

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3132087
2. Rank. Spr.
3. Name. Ferryberry, Robert.
4. Unit. 7th A. C.E. Lete WORKSB
5. Date of Discharge 29-3-19 Place London
6. Reason for Discharge Demobilization

7. Authority.
8. Proposed Residence after Discharge

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? R. Ferryberry

Signature of Soldier.

Deceased 1939. 17645
Title 6-4-9-1-

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

TOS No1 Dist. Depot
Displ. Sth. K 17. 3 19
SOS dispersed

Place

Date 29.3.19 D,O,No90
Comrake at
FOR O.C. DISP STA K

Signature

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F W 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.P. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Medical Certificate (D.M.S. 1083).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (A.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
9. Enclosed in special envelope (260M).
10. Copy of Discharge Certificate (M.F.W. 39a).
11. Universal Certificate (C.D.S.).
12. Equipment } Statement Q.M.G. Form (D.O.S. 2).
13. Clothing }
14. Last Pay Certificate (P.851). 1 Dup
15. Pay Book (A.B.64)
16. War Service Gratuity (Form M.F.W. 2595).
17. Sundry Documents.

B

Group.....

Checked by No. 9

.....

Date 15 3 19

AUDITOR | PAYMASTER

1. P.M 44-3-8.2 ✓ 283

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

M. OR S. | REGT. No. 3132087 ✓ | RANK Spr ✓ | NAME (IN FULL) Terryberry Robert ✓ (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP | ADDRESS | IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE | TO WHOM PAID | RELATIONSHIP | ADDRESS Nil ✓

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. W.O.K.D. | IF IN P.F. WHAT UNIT? | Comber Ont ✓

PLACE OF ATTESTATION | TRANSFERRED TO L.A.S. D.D. # 1 | DATE 17/5/19 | AUTHORITY D.O. 90

DATE OF ATTESTATION 27-2-18 ✓ | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY. $ 15.00 paid & closed by Ottawa 31-3-19 ✓ | DATE EFFECTIVE

PAYABLE TO Mrs Clara Disher ✓ | RELATIONSHIP (Cousin) | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Comber, Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE London ✓ | DATE 29/3/19 ✓ | REASON Dem | AUTHORITY D.O. 90 ✓ | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.
Balance from previous account	28-2-19 ✓									
	1-3-19 ✓	1 ✓	1.10 ✓		To 25 ✓					
	31-3-19 ✓	31 ✓	1.10 ✓	34	10 ✓				139	10 ✓
	122 days ✓		280 00 ✓		280 00 ✓					
			280 -		280 - ✓					

WAR SERVICE GRATUITY

ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.
						487 ✓		5 - ✓		101	17 ✓	15 ✓				333 ✓				333 ✓					
																973 ✓				135	77 ✓				
						1SD 2a																			
						70 ✓																			
																220 ✓									
						6780 ✓																			
						70 ✓																			
						70 ✓																			
						27780 ✓										220 ✓		280 ✓							

Soldiers Dependent	
210 00 ✓	
207 80 ✓	
140	
70	
	Capt.

PARTICULARS OR REMARKS

Ref per Olympia 26/3/19 ✓
Balance Engaged L.A.S. 28-2-19 ✓
Pay to estimated date of discharge 31-3-19 ✓
Allotment Allces 1st pay day ✓
Draft Olympia Mponey Orders ✓
Advance Chitt $ 3-1-19 ✓

A. McMortimer Major ✓
1st Payment W.S.G. as above ✓

Cheque to adjust to date of discharge 2 days Cr. ✓
74296 APR 26 1919
29/3/19 $85973
JUN 28 1919 99106

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