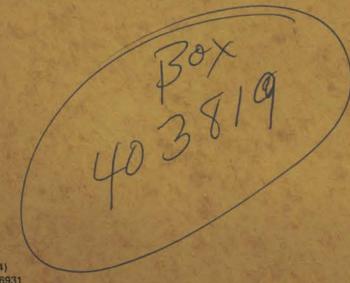
Com BE Cobernames/Prénoms GRIERSON

CANADIAN FORCES FORCES CANADIENNES

# PERSONNEL RECORDS ENVELOPE ENVELOPPE DES DOSSIERS DU PERSONNEL



CF 478 (10/74)

Levet: R. S. Combe.

24. Balen

A CONTRACTOR OF THE PARTY OF TH

	FORM P. 1 5986–25M–19/ ASSIGI	NED PAY.	UNIT. NAME OF	ITY	RANK.		DATE	AUTHOR	NAME.			
	Benefic	ciary	30 Bn				Lieu	et	4		Name &	onche
	Addres		31 "				1				Initials	
			11 Res Bn							*	Bank of	montreal.
	Amoun		27 Bn.									
	Separa	tion Allowance issued. Yes or No	Killed in	acte	ion 3	17	C.R.6	67-7	17			
	DATE 1915	PARTICULARS		CK. N		,	DR.	AS	SIGNED PAID IN ANADA	BALANCE	SPECIAL AUTH To be initialled by P.M.	ORITIES in every case.
f .	Oct.	Pa from 16 9 5-31 15 Mes Opd. P. L. 53rd Br. draft. Se	sfr. 139-x		168	60						
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and the second second	9				1.		108					
	3	Dank. Payder			111	1.	THE REAL PROPERTY.			•		
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	1916	Dark				10	1116	20				
	Jan	Pay Jan			111		Carlotte and the second					
		Bank					1116	50		0		
		Pay Dich			104							
		Bauk					1044			-0		
	Mar	Laymar.			./11	60						
		Ord Issue on Rashford 476.	N#5380	-			1	73				
		Bank	,				1100	87				
		Pay april			108					0		
,		Bank		1031			108					
		Pay may			111	60				0		
		Bank		h. W.			/	10				
	^			2441			1116			0		
		Tay June			108							
		Bank		399.	3							
	cety 20	Tay July			111	60						
U	44	R	A MANAGEMENT	1	-			1-				

	4		11 Testen				-			Bank of Morus	ear
	Amoun		27Bn.								
	Separa	tion Allowance issued. Yes or No	Killed in a	cteo	n 33	17.0	C.R. 66	1-7-17			
	DATE 1915	PARTICULARS		CK. NO.	CR.	/	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS 3//7
1 0		Pa from 16 95-31 15. M. Opd. P. L. 53rd Bridraft. S	less fr. 13 9-x		168	60		5			
		Opd. P. L. 53rd British &	lept				1		4		
		Bank					16760				
		- Pay mon	IF IS A STATE OF THE STATE OF T		108						
	2	Bank.					108				
	5	Payder			111	60					
	Nec	Bine		•			11160				
	0916	Bank Pay Jan			111						
-	fan						11160				
	n,	Back			104	110	THE R.				
4	Heh.	Pay Deh			, - 4		1044				
	6	Bank				1	10440		0		
		Laymar.			.///	60	4.				
		Ord Issue on Rashford Hi	14. N# 5580				10				
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	27	Bank		1031	1		108				
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	21	Back		vetet,			1116	0			
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-	1	Bank		3993			108				
					111	15					
6	July n	Lay July					1116	0			The state of
		Bank			111						
		Lay aug					1116	0			
	0	1 Danks			108		1110		-		
		Pay Sept.					1-8				
	27	Bank Donne		9469			108		-0		
		parus	ad	THE PARTY OF THE P					Alexander of the second		

FORM P. 15 5986-25M-19/1/17 ASSIGNED PAY.	UNIT.	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.	
Beneficiary ,	27 Bn.	L ding		Light	1	ES I	Name Comb	ie
Address .	1						Initials 89	
							Bank of Monte	eal
Amount. \$	41						/	
Separation Allowance issued. Yes or No							/	
DATE PARTICULARS		CK. NO	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE To	SPECIAL AUTHORITIES be initialled by P.M. in every case.	INITIALS
	and					-	*	
Oct 19 Pay Oct. 16 Rank			111 60					
nonvy Paymon		10998	108	11160		•		
Monvy Paymon vy Bauk. Deep Pay Dee		14190	11160	108		•	8	
Deep Pay Dec								4.4
191720 Bank			1	11/60		-		
Janno Pay Jan			111 60					
W Bank		19288		11160		-		
Tel 18 Pay Nel			10080					
23 Back				10080				
marr Pay mar			111 60					
23 Bank				11160				
aplite Pay april			108					
B B		2	700				Held may Puy	
n Bauk			9			1001	Stay 6 Ridging 86	
maybe Pay may 3 day			1080		1	1000	JN. K. 10-1-V. 87	7
July 10 Pay may 4-315			100 80			11160		
aug 17 Transfel M. EBranch V	×1534			11160				
		- k						
	William Inc.							

Amoun Separa	t. \$ tion Allowance issued. Yes or No									Bank of Mont	real		
DATE 1916	PARTICULARS	CK. NO.	CR.		DR.		ASSIGNEI PAY PAID CANADA	IN BAI	LANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS		
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25	Bank	10998	Y I		111	60			•				
	Paymon		108										1
24		14190							0				
	Pay Dec		11/1	60	1111	10							
1917 Jan 10	Bauk Pay Jan		111 8	60					O				
26	Bank	19288			111	60			0	A CONTRACTOR			
Tel 18	Pay Del		1008										
M	Back		111		1000	fo			0				
1/av22	Pay mar		///		111	60							
aplate	Bauk Pay april		108						0				
27	Rauk	3010			108				0	Hald may Pay			_
maying	Pay may 4-315	S& XO	100							Dr.L. 15-12 8	5		
July 10	Pay may 4-315		1008			,		br//	160				
aug 17	Transfel M. EBranch V#1534				111	60							
		, /			*								
												1	1
		STOP TOHES			100		-			I.			

	P—15.		1		-				
	ASSIGNED PAY.	UNIT.		-	RANK.			NAME.	C
			DATE	AUTHORIT		DATE	AUTHORIT		
*	Beneficiary	30 Batt.			Lieut	=		Name Combe	
	Address	to 32 Ballin.		9	-			Initials R.G	
								Bank of monto	eal
	Amount. \$				1				
	Separation Allowance issued. Yes or No.								
	DATE PARTICULARS		CK. NO	O. CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
	apriles Pay april (R)		-	108			108		
	April 1 Pay april (R)  27 Bank  may v3 Pay Smay (R)		1031		108		. 0	AUG 17 1919	
	may 13 Pay may (R)			111 60				TO THE TOTAL PORT OF THE PARTY	9 1
	June 21 Pay June (R)		2441	108	11169		Ø	Entered on N.E. Card Index	D.
- X	, 98 Bank		3993.	100	108		0	hecked by	
	July 20 Pay July R		5508	11160					
	Aug 18 Aug Say R.		03/8	11160	111 60	2	0		
	94	Bank	1400		111 60	0			
	Sur 19 Sept ony R.			108					
	Oet 19 Och Pay R.	Many	9469	111 60	108				
	26	Bank	10998		111 60				1
va-	nov & Nor Pay R.	Paux		108					
5	Dec/3 Der Pay	round	14190	111 60	108				
	1917	Bank	iý.	**/	1.11. leo		8-		
Statement of	fan 20 Jan Pan			111 60					
OOT TO	26 40	Bank	19288		111.60		6		
Account rendered	Feb 18 Feb Pay	0 1		100 80					

Amo	unt. \$					////cores	
Sepa	ration Allowance issued. Yes or No.						
DAT / 9 / 6	, and the second	CK. NO.	. CR.	DR. ASSIG	ID IN BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
- April	ry Pay april (R)	1031	108	108	108	Statistical Company	
May	3 Pay Sway (R) 16 Bank	2441	111 60	11160	p	AUG 17 1917	×
Juno	D ~		108	109	9	Entered on N.E. Card Index	<u>W</u> .
July .	o Pay July R	3993. 5505	11160	11160	a a		
aug	18 Aug Say R.	Buck 1400	11160	111 60			
Sut.	19 Slept ony R.		108				
	19 Och Pay R.	Many 9469	111 60	108			
Nov		Bank 10998	108	111 60			
	3 Der Pay		111 60	108			
Jana Jana	o Jan Pan	Bank	111 60	1.11. 600			
Statement of OCT 16 1917 Account rendered	4 Yel Pan	Bank 19288	100 80	111.60	6		
md2.	2 Pay March	Bank	/11 60	100 80	_0		
2.		Bank		11 60			

	FORM P. 15. 5986—25M—19/1/17 ASSIGNED PAY.	UNIT.	AUTHORITY	RANK.	E AUTHORITY	NAME.
	Beneficiary Address	NAME OF DATE	AUTHORITY	Lieut	Aomenin	Name Combe
		1100	1			Bank & Montreal
	Amount. \$ Separation Allowance issued. Yes or No	"KJa. 35/17 68	667-45			
	DATE PARTICULARS	0	NO. CR.	DR. ASSIGNE PAY PAID: CANADA	IN BALANCE	SPECIAL AUTHORITIES pe initialled by P.M. in every case.
	aplist Pay A		108			
	May 14 K. Ja 3 1/2 Band a to Cease	ans 9	010	108	av i	loes may Ita.
	× 22 Pay R 10 3 19	V o 2420	1080		10 80 ha	nsferred to Leagh in 12
	July 10 Pay may 4-3137	1 /2/1/22	10080	111 60	len 111 60	AUG 17 1017
	1610an Needig Citis I'm Court of	124/22		777 00		Commonwell
						stered on N.E. Card Index J. L
-0						
	Lieut Hotes Hoter Hay 200 " Daller 60					
	" Dalle 60					
	" " meno 100	1 1 1 1				

-	Amour	nt. S			-	E						Bank & Mond	nul
		ation Allowance issued. Yes or	No K. Ja. 35/17	6866	57 - Y	5/2							
*	DATE 1917	PARTIC		CK. NO			DR.	PAY	IGNED PAID:IN NADA	BALAN	ICE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	v 27	Bank R. Ja 3 / Jand a. to C. Pay R. To 3 / Pay Vnay 4-31. Tecfy 6. P. M. chk.		3010		80	108	60		10.	80	Hoed May 7 ta.  The grand League to League to 15  AUG 17 1017	86/19
												Entered on N.E. Card Index	LD.
		Sing Hate.											
State	ment of	Lieut Hotes Hoter Hay 200 " D'aller 60 " " Muss 100											
	16 1917 L-rendered		Can: ar hu	i as p	en Gl	taw	a Slip	0/29-	5-17.				^

FORM P. 1 5986—25M—19	5.	A CHARLEST AND A STATE OF		Transition of the		HERE!			TI		
	NED PAY.		UNIT.	1		RANK.			NAME.		6
			NAME OF	DATE A	UTHORITY		DATE	AUTHORITY			4 ***
Benefic	ciary			179					Name		* * * * * * * * * * * * * * * * * * * *
Addres	s					7			Initials		
					1				Bank		
Amoun											
Separa	tion Allowance is	sued. Yes or No									
DATE		PARTICULARS		CK. NO.	CR.	DR,	ASSIGNED PAY PAID IN CANADA	BALANCE TO	SPECIAL AUTHORITIES	INITIALS	
							CANADA	То	be initialled by P.M. in every case.	INITIALS	1
	William William				Verifica III			1			
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7.		11/15/19	XIE .					Bank	
Amoun							did gets		
Separa	tion Allowance issued. Yes or No				1				
DATE	PARTICULARS	CK, NO.	CR.	DR.		ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	
						CANADA	7	To be initiation by F.M. In every case.	
11									
				1					
					te.				

564

ARMY FORM B. 178.

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

Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

### MEDICAL HISTORY of

Surname COMBE	Christian Name	Robert Griersen.
T	ABLE I.—GENERAL TABLE.	The supplement of the s
Birthplace Parish Aber	deen County_	Scotland.
fon	day of	July. 1915.
Examined at		
	DEMETT COM	,,
	years	II mtns. days.
Trade or Occupation —	Chemist.	
Height		10 inches.
Weight	160	lbs.
Chest Girth when fully Expanded -	391	inches.
Measurement Range of Expansion	4 2	inches.
	Normal.	
	Right	
		•
Vision $\left\{\begin{array}{ll} R. \\ \overline{L}. \end{array}\right\}$	E.—V=	
(a) Marks indicating con- (a)		
a geculiarnies or		
(h) (l) (l) (l) (l) (l) (l) (l) (l) (l) (l		
(b) Slight defects but not sufficient to cause rejec-		
tion		
Approved by (Signature)	H Lowther,	
(Rank)		t.AMC.
(Ethin)		Medical Officer.
_		
Enlisted {at_	Prince Albert	
(on.	lst_day of	April 191 5
Joined on Enlistment	Corps.	Regtl. No.
Joined on Editistment	53rd Battalion	
Transferred to	32nd Reserve Battal	ion. Lieut
Boommedian effective by	re with the Corres	
ponding Attestation Paper, and entries made		*
taken from the Attestation Paper.	day of	191
ir (Styllature) 13 8	Way .	
(Rank)	Lieut,-Col,	
(4887.) W 9597/1588 500M 9/15 C Poets	Rian Contingent B. 178	P.T.O.

# Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant

Indiana pun pun	Admit	ted to H	ospital	Discl	harge l Hospita	from	ing cremings it	Number	Remark	s bearing on the cause, nature, or treatment of the
Name of Hospital	Day 14	Month	Year	1	1.	Year	Disease  Kum ba as (24)	of days in Hospital	s k	s bearing on the cause, nature, or treatment of the use. In cases of syphilis, admissions and re-adm subsequent progress, including particulars of treatment of the special syphilis case sheet.  Dis: to duty "Class B"
No14 g. H. Avamereusc Miss Pollock's Hospital	29				7	16	Rheumatism and	20	111111111111111111111111111111111111111	rogress was slow was sent to
50 Weymouth St.					The second		Lumbago.			- 100
2012					6					
		419								
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-	-	,				-	1		-	

## ons to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

	100		The same of the sa
Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.  Dis: to duty "Class B"	Signature of Medical Office
	20	As progress was slow was sent to Bath for further treatmen	J.B. Blaikie.
eumatism and	20	As progress was slow was sent to bath for further treatment	J.D. DIAIRIE.
imbago.			
			The second second
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Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
May 11'15.	InoculationsPlus - H.L.
July 21'15. Aug 7'15.	-do-
9.10.16	2 month's Home Service. W. McKeown Lt. Col. President.
-	

#### Table IV.-Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
				***************************************	
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certify the	foredoind to	ha a true ço	by of an original enti	y on a	
Medical Wa					
	for the Off	icer in Cha dian Contin	C.A.M.C.		

hat elieble for 14/15' Star.

COMBE, Robt. Grierson V.C. Lieut. 27th Bn.

MEDALS & DECORATIONS

Mrs. Jean T. Combe (Widow) c/o Mrs. Donald, Mossomin, Sask.

9933

PLAQUE & SCROLL

CROSS

Widow, as above.

Serial mo.,

Widowanas above.

Mother, predeceased. Rem No /ag

: Pago9

Desp JUNE 1 1920 (W/6/2682



#### Casualty Form-Active Service.

Regiment or Corps\_53rd Battalion C.E.F.

- 4	Regim	ental No	Rank Lie	out N	ame Combe	Robert G	·rierson	Commission of the State of the	
	Date o	f promotion esent rank	Terms of Service to  Da  Re-engaged	te of appointm to lance rank	ient)	Nume	kons from (a) erical position ll of N.C.Os.		tem
	Date	Report From whom received	Record of promotions, reduct casualties, etc., during acti- reported on Army Form B. 2 A. 36, or in other official do	ve service, as 13, Army Form	Place	Date	taken from Ar Army Form	marks my Form B. 213 A. 36, or othe documents.	r
MAR 2'	7 101	( 0 to 3)	authority to be quoted in  Fransferred to 32  Proceeded on d	and Reserve			/	1	
IIAN &	( 151	0	Proceeded	As.	Bing	nest		Battalion, DITIONARY FO	Additant RCE
			Combarker	i for	France		3794 01	44.	
28-	3-16	Base Comot	Combacles Ceft Base of	or wit	Fixed	The same of the same of	3794 on	KRT2182	MLX. 618.
31.	4-16	Pt-2915	and and	it- Our	4	27/3/16 29.3.16		130.	
1	3 %	'n mees	Lumbala	" Why	Muit M. CCP.	15/10	ASS.	37. 12676	
	1 6/16 1 6/16 11	" SOM	who has re-engaged for, or enlist	haus led into Section D. Arr	M. Mindelet	s of such re-engs	egement or enlistment	t will be entered.	.0.

	Date	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.
	19696	00.79 h	Resta hou, Meh, adu,	full joles.	13 676	Bris: 1398. 16 52. AG. T. 3913 - KI. 2005140
14.	6.16	upertook 10 CCS.	Lundago Agon haus	14 few Hosp	14.6.16	457 W 3034 A 26. 148-2852 N.R.O. 2762 -149A. 222
	19 % 28%	r Office	myalqua ramples.	n. WA	Who	w3013. A 1 0/17- 776
	16%	144	mysleia white	14M	16 h	19 10 14
		9.0.C. C.T.D.	B414 B (B	FOR LTCOL.	29616	D.o. 3625
		C.T.D.	Posted to Gen. La	21.	K	Burham.
18.0	9.16.	9.0. C. C.T.W.	altachel 11th Nes. B	u. (	11.9.16	11) 11875
		e.t.W.			Her	horeubbel ant.
					14.	En W. L. L. G C. 1. W.

Section G. H. O. 3rd Echelon, B. E. F.

<sup>(</sup>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 qualificat in technical Corps duties.

Report	Record of promotions, reductions, transfers,			Remode
Date From whom received	casualties, etc., during active service, as	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	Standard and American			in all a Livery to be being
	American in Sengary 4	and appropriate		i uniforming to straig of
	Challed and the second second		- September	ani, Bapinase
Since of the second sec	A PROPERTY OF THE PROPERTY OF	A STATE OF THE STA		A Section 1 Section 1 Section 2 Sect
	SI AN SI-EL-S MO CONS	A thereto		
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	100-d1-6-160			

No.

Folio.

# CANADIAN OVER-SEAS EXPEDITIONARY FORCE

	QUESTIONS TO BE PUT	BEFORE ATTESTATION.
- 300	THE RESERVE OF THE PARTY OF THE	Robert Combe.
1.	What is your name?	0, 7 0.44
2.	In what Town, Township, or Parish, and in what Country were you born?	(Werdern . Des Naud :
3.	What is the name of your next-of-kin?	Jean Donald Combe (Wyl)
4.	What is the address of your next-of-kin?	Morsony Sack.
5.	What is the date of your birth?	Glight 5. 1880.
6.	What is your trade or calling?	On mod.
7.	Are you married?	150.
8.	Are you willing to be vaccinated or revaccinated?	ys.
9.	Do you now belong to the Active Militia?	wy h b of y
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	13 T.B. Mayal Theilure 14n.
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?	(Signature of Man.)  Wignature of Witness.)
mad to b beta the	de, and I hereby engage and agree to serve in the attached to any arm of the service therein, for ween Great Britain and Germany should that was termination of that war provided His Majesty charged.	nat I am willing to fulfil the engagements by me now the Canadian Over-Seas Expeditionary Force, and the term of one year, or during the war now existing are last longer than one year, and for six months after should so long require my services, or until legally (Signature of Recruit.)  (Signature of Witness.)
in o	r true Allegiance to His Majesty King George t	MAN ON ATTESTATION.  , do make Oath, that I will be faithful and the Fifth, His Heirs and Successors, and that I will as Majesty, His Heirs and Successors, in Person, Crown and obey all orders of His Majesty, His Heirs and over me. So help me God.  (Signature of Recruit.)
Da	te 1 MM 1913 ·	(Signature of Witness.)
	CERTIFICATE C	OF MAGISTRATE.
bee	The above questions were then read to the I have taken care that he understands each of duly entered as replied to, and the said Recru	me that if he made any false answer to any of the as provided in the Army Act.  Recruit in my presence.  question, and that his answer to each question has it has made and signed the declaration and taken the this day of 191:  (Signature of Justice.)
	I certify that the above is a true copy of the	Attestation of the above named Recruit.  (Approving Officer.)
M. 20	F. W. 23. 0 M.—3-15.	Captrag

(To be determined according to the instructions given in the Regulations for Army Medical Services.)	genital peculiarities or previous disease.
ASSET PARTY ABOTHE	(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
Height 5 ft. 10 ins.	Officer.)
Girth when fully ex-	
panded 392 ins.  Range of expansion 42 ins.	
Range of expansion 42 ins.	
Complexion Fush	
B	
Eyes Blook	
Hair. /SLUCYL	The same and the s
/Church of England	
Presbyterian Ywo	formed washing organization and on on the
Methodist.	
mility / Baptist or Congregationalist	
Baptist or Congregationalist Other Protestants	
Methodist  Baptist or Congregationalist  Other Protestants (Denomination to be stated.)	
Roman Catholic	
Jewish .	
He can see at the required distance with eith free use of his joints and limbs, and he declares that I consider him* for the Canada Date. Luly 16 1915  Place Sewell Court - "Insert here "fit" or "unfit."	nd find that he does not present any of the causes edical Services.  eer eye; his heart and lungs are healthy; he has the
(	
inspected by me this day, and his Name. Age. Date of	ER COMMANDING UNIT
been recorded, I certify that I am satisfied with the	having been finally approved and f Attestation, and every prescribed particular having correctness of this Attestation.  (Signature of Officer.)

# STATEMENT OF PAY ACCOUNT.

No. Rank L	ieut.	Nr	me R.G. COMBE.		
				ttn	
A least the state of the state			ent in O.M.F. of C. 30th.Bat		
Discharg	se 3/5	/17	Authority Killed in	Action	n.
Date non-effective Decease.			C.L.667 dated 7/5,	/17	*************
( Descrite			7.27		
AF. CREDITS.	. \$	с.	DEBITS.	\$	C.
From 16/9/15 191, to 31/5/17			Total Cash Payments	2136	07
No. of days 624	3940		Total Assigned Pay @ \$per month		
Pay @ 2.00 per diem	1248	-	Total Assigned Pay @ \$		
F.A. @	374	40	per month	-	
F.A. @ .60¢ per diem From 13/9/15191 , to 31/5/17			Other Charges		
No. of days. 627			(Particulars)		
messing 1 00	627	_			
F.A. @per diem			Debit Bal.Fwd:-	1	-
Other Credits			Ordnance Issue:-	_	73
(Particulars)			ordinando resido.		10
Adjustment of Exchange (see below)					
Cash in effects: -Nil.					
Debit Balance			Credit Balance	111	60
Debit Dalance			Credit Dalance		
150					
Total	2249	40	Total	2249	40
Sterling equivalent of above	Balanc	e @ \$1.	863= £ 22.18.7d		
			y List to		
			Pay Branch on		
Total Cash Payments for period the f	during w		ments were made @ \$5.00 to		1
Exchange @ \$5.00	***		£		
Exchange @ \$4.863					
Difference in sterling	-,,,,		£i		
Or Canadian Currency @ \$4.863		*** ***	8		
1007.70		u	Certified correct,	1	The same of the sa
OCT 16 1917 Account rendered	101	1	Je - 1 a	a de	+ 1
Account rendered	. 101	17	E. Ch	ief Payn	nastav
United States		c .		iej Fayn	nuster
State if balance due is paid	or trans	starrad t	er sattlement:		

DISCI	HARGE	FROM	HOSPI	TAL	AL REGISTRY
Do not fail to strike out two of these on each sheet.	2. To Off	icer i/c Record	nk, London, s, Canadians nk, London,	HEAD CWADIAN TO (Casualty S.W.	JUL 1916 QUARTERS. TRAINING DIVISI Branch),
	110	00	P	1	

Rank and Name	2 R. G. Combe
Regiment or Corps	2) Canadians
The above-me	entioned Officer Nursing Sister has been discharged from
A 1	
this hospital this	18.1 day of July 19.16
Hospital this	day of 1920
	augen ower
	Captn. R.A.M.C. / Lt. Col. R.A.M.C.
-	THE QUEEN ALEXANDRA Hospital. MILITARY HOSPITAL
	MILITARY HOSPITAL

Canadian Officers and Nursing Sisters from both Overseas Forces and Forces stationed in the British Isles, may be discharged from any hospital, whether British or Canadian. They will be discharged for boarding by a Canadian Standing Board, unless special authority for boarding them otherwise has been given by Director Medical Service, Canadians.

COMPORT, E.W.

This return is to be made out in quadruplicate, and one copy is to be forwarded to each of the officers specified. One copy is to be retained by Hospital for its records.

	A MEDICAL BOARD 4. 1916
assembled at 86. Thank	Emdon 18 - august
by order of D.M. A. Can	adians.
(Rank and Walne) & R. S. 6	cing upon the present state of health of complete (Corps) 27-B4.
Age 35. Service / 5/12 Disa	Theumatism x Lunbago
Date of commencement of leave granted for 1	
Date on which placed on half-pay for present	// /
The Board having assembled pursua	nt to order, and having read the instructions
on the back of the form, proceed to exam	nine the above-named officer and find that
this Officer has un	proved ! He has just
Completed Treatment	t at Bath Brance
	when below. or or
	C Con
	M C Fin
22	0-12
	, Kenta
ddies aboyne ate	rdeenshire. Egg.
	er d
	I Boo
The opinion of the Board upon the questions	
(1.) a. Is the officer fit for "General Se	
b. If not so fit, how long is he likely	
(2.) a. If unfit for General Service, is I	7
	ly to be unfit for service at home ? Weeks
	ne, is he fit for light duty at home? The
(3.) Was the disability contracted in the	
(4.) Was it contracted under circumstand no control?	
(5.) Was it caused by military service?_	yes.
(6.) If caused by military service, to what specific conditions is it attributed?	Esposure
(7.) If the disability was not caused by mil service, was it aggravated by it?	litary Mrs applicable.
Day-	id Danaed Campresident.
2	
Signatures Emil	Davis legs le amo. Members.

#### Instructions

- 1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.
- 2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.
- 3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

PROCEEDINGS OF A MEDICAL BOARD	916.
assembled at 86 Strand. Linden & September of D. M. D. Ceanadians.	her
by order of D. M. D. Ceanadians.	
for the purpose of examining and reporting upon the present state of health of	
(Rank and Sicol R. G. Combe (Corps) 27 Bh.	,
Age 35 Service / //2 Disability hermalism + cum	lago
Date of commencement of leave granted for present disability/8 = July / 9/6.	
Date on which placed on half-pay for present disability	
The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that improved but must fit for full old	
my men	/
address 11. Pes. B'n.	
Thomelette.	
addus 11. Pes. B'n. Thomselfe.	
The opinion of the Board upon the questions herein is as follows:—  (1.) a. Is the officer fit for "General Service"?	
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RANK AND CORPS CABLE NATURE OF CASUAL No. DATE L. L. 18950-M. & D. 7789 M. F. W. 42-30M.-4-17. H. Q. 1772-39-893.

DATE OF ADMISSION LIST No. HOSPITAL REMARKS 3-5-17 Killed in action. R. 149. Grierson. Reg. No. 96273 Name Combe Robert Rank Lieut. Unit 27th Bn. Next of Kin Canada. List Notified Date Movement Place Casualty W.O. L No. N/K O. 14-6-16 14GENERAL HOSP. WIMEREUX. Lumbago Blt. 891 24-6-16 ditto. Discharged duty "B". ditto. 26-6-16. No.2 Gen. Hos. Havre . Myalgia slt. AS Panama 405 6 Thiss Pollocks Hory 16 Bath Off to Hos. 28 mailtor's Bldgs Bath " 423

Date	Movement		Place	Casualty	List No.	Notified N/K O.	W.O. List		
v 1 -   v e				4 1987 T					
							2		
1.									
							4		

332-105-4 CARD NO SUR ME. Combe CHRISTIAN NAMES Robert Grierson 90154 RANK Light REGL. No. UNIT 53 rd (2nd R.D. FORMER CORPS Ist V. B. Royal Lusiliers NEXT OF KIN. CHANGE OF ADDRESS NAMES IN FULL Combe, Jean Donald RELATIONSHIP TO SOLDIER TO XADDRESS / Hazel Grove yelverton Devon England. COUNTRY OF BIRTH Scotland, aberdeen DATE July 16 th 1915 PLACE OF ATTESTATION Serve T. T. 90589.-M. & D. 6312 M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED / Jes WIDOWER SINGLE TRADE OR CALLING RELIGION DESCRIPTION. YEARS MONTHS APPARENT AGE FEET INCHES HEIGHT **EXPANSION** CHEST MEASUREMENT INCHES INCHES EYES HAIR COMPLEXION DISTINGUISHING MARKS hwarded Victoria Cross. auch. J. J. June 26/17 MEDICAL EXAMINATION. PLACE DATE

	1	REGT'L NO
NAME Comple Or	) J	H. Q. FILE No. 649-
RANK AND CORPS Lieut	27th. By	Follows No.
No. DATE	NATURE OF CASUALT	
		A CONTRACTOR OF THE CONTRACTOR
		11
L. L. Job 90581-M. & D. 6314.	and the same to the same to	M. F. W. 42-50m-1-16. H. Q. 1772-39-893.

LIST No #14 Len Wimerenf 14-6-16 Lumbago PH. 100.) Wisel to Nuty Class 18"24-6-16 40412) #2 Len. Havre (U1) 26-61-6 405(1) A.S. Paname WO) 29-6-16 Miss Pollockes 50 Weymouth 18 7-16 St. W. (a.m. S). Direnarged 453(2) BathOfficers, 28 marlbrough 465.(2) 4 11 Fise 6.816

Number	Ran	1k Lile	if /
Surname COMBE.			
Christian Name Robert	Grierson	v	X
Units The			
Date of Service 4-9-15.	27.3-16	3-5-17	
			1
Latest Address Mrs.	1 1	0. 2	
Latest Address	mrs L	0	0
	*		
Roll No. B. Page 14292	· Ono	Sask	
200m2-21.M.		Solk.	



r. o. s.	UNIT 5	3rd Battalion do.	£. I.
			M. D. //
PAID PAID	SIG. OR	PROMOTIONS, TRANSF	ERS, DISCHARGES, ETC.
FROM TO	REC'T	PARTICULARS	AUTHORITY
1915 1915 W1 april 3	0 2		
June	e		
ausg	-		
			UNIT SAILED
			MAD 9 9 1916

Rank and Name COMBE. Robert Grierson Lieut. Name and Address of Next-of-kin Regimental No. ganglers, casualties, etc., during active Dr.EBEMARKSinU .Bn. to 32mt Bn. in each case. Prince Albert April 1st 1915. Date of enlistment Moosomin, Sask, Cana Place of birth Aberdeen. Scotland Yes or No) Date and place of discharge M in Permanent Force eason for discharge Character on discharge Promotions or appointments Record of promotions, reductions. transfers, casualties, etc., during active From whom service. The authority to be quoted Date Taken from Official Documents received in each case. Granted certificate having completed 3-1-16 to 18-3-16 D.O. 1480. R.O. 494 Pf-II ord 77. (32 B4) Proceeded to 27 Bm. France. 4.4.16. 27th Batt. Jaken on the Shength 27th. 27.5.16 Pt II ord. 15. 15-6-16 W.O. adm to No 14 Year Hosp Wimereise 14-6-16 CL391 Discharged to Duly Class 10 30-6-16 W.O. War to 2 Few Hoop adm H.J. Janane adm Hosp 28 Marll orough Building Bath 18 7-7-16. 27 Bn. Oick transfit 14.9.16 Soc es D. atta to 11th Bn. Z-10-16 11 th Bin On Command 6. In. S. 2.10.16 Phi Ora. 235

Rank and Name morroit dradon Hamil Regimental No. Report Record of promotions, reductions, transfers, casualties, etc., during active REMARKS From whom service. The authority to be quoted Date Taken from Official Documents received in each case. Date of enlistment Place of birth 90CCTD. Transforto termanent badre 11 Brifom Scliffe Quelid 1 Holan 31 hille Party Sch West 20.4.17 11th Res. S.O. S. to. 27 Bu ofs. ry. Bn. . 20. as Runf on arrival from England 12 st 19 11 0. 23 transfers, casualties, etc., during active to place of place of the property of the authority to be quoted to be quoted to be quoted to be service. The authority to be quoted to be quoted to be service. awarded 1.3.19 & perpormed at S of acherell mance on 35.17 adon't to the to You Hoods Wismering adm deap It Marlhorangh Paughpy Both 18716 Ch

### CONFIDENTIAL.

PROCEEDINGS OF A MEDICAL BOARD

asse	ombled at (13. Westbourne Gardens, Folkestone,) on 19. 3. 7
by	order of admic Canadians
(Ra	the purpose of examining and reporting upon the present state of health of nk and Name) It 1. 4. Cacche (Corps) 2732 (11 Mes 15
	36 Service 25/12 Disability Zumbago
	e of commencement of leave granted for present disability 18-7,14
Dat	e on which placed on half-pay for present disability
	The Board having assembled pursuant to order, and having read the instructions the back of the form, proceed to examine the above-named officer and find that
<u> </u>	is office has now recovered -
3_	
1000	
	B. E. F. Not First Board.
-	
The	opinion of the Board upon the questions herein is as follows:—
	(1.) a. Is the officer fit for "General Service"?
	b. If not so fit, how long is he likely to be unfit?
	(2.) a. If unfit for General Service, is he fit for service at home?
	b. If not so fit, how long is he likely to be unfit for service at home?
	c. If unfit for General Service at home, is he fit for light duty at home?
	d. If not so fit, how long is he likely to be unfit for light duty at home?
1 .	the Officer fit to perform 700
1	duties not coming within the high he had
2	cove categories? If so,
13	which he might perform.
4.0	sull subortion
	is it attributed?
	(7.) If the disability was not caused by military)
	service, was it aggravated by it?
	SINKLE THE STATE OF STATES
	Mr Mullimer Prosident.
	Signatures Allegace Walls Gelegon 3
	Members.
	4 8 4 A
(5725)	W. 16789/M260. 200m. 2/16. C. P., Ltd. Forms
(529)	W. 12554/M1258. 50m. 1/17. A.45 27 [P.T.O.

#### Instructions.

- 1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.
- 2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.
- 3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

THIS IS THE LAST WILL AND TESTAMENT of me Robert G. Combe of the town of Melville in the Province of Saskatchewan, Druggist.

I DEVISE, BEQUEATH AND APPOINT all the real and personal estate which I am seized of or possessed of or entitled to or over which I have any power of appointment to my wife. Jean Combe and appoint her the sole executrix of this my will.

IN WITNESS WHEREOF I have set my hand this nineteenth day of July. A.D. 1915.

by the above named Robert G. )
Combe. testator. as and for his last will and testament. in the presence of us both present at the same time. who, at his request and in his presence, have hereunto subscribed our names as witnesses.

)(Sgd) R.J. Combe.

(Sgd.) W.B. Moore (Sgd.) Lewis T. McKim

Melville, Sask.

CANADA.

THE AND TESTAMENT

ESTATES BRANCH,

NOV 12 1917

MILITIA DEPT.

-8. Shewan. Advocate.

145 Union Street. Aberdeen.

Tarp.

THIS IS THE LAST WILL AND TESTAMENT OF ME Robert G. Combe of the town of Melville in the Province of Saskatchewan, Druggist.

I DEVISE, REQUEATH AND APPOINT all the real and personal estate which I am seized of or possessed of or entitled to or over which I have any power of appointment to my wife, Jean Combe and appoint her the sole executrix of this my will.

IN WITHESS WHEREOF I have set my hand this nineteenth day of July. A.D. 1915.

SiGNED PUBLISHED AND DEGLARED

by the above named Robert G.

Combe, testator, as and for his

last will and testament, in the

presence of us both present at

the same time, who, at his request)

and in his presence, have hereunto)

subscribed our names as witnesses.)

WILL and TESTAMENT of R.J. Combe.

Dated A.D. 1915.

(Sgd.) W.B. Moore (Sgd.) Lewis T. McKim

Melville, Sask.

CANADA.

ESTATES BRANCH,

NOV 12 1917

MILITIA DEPT.

J.S. Shewan, Advocate,

143 Union Street. Aberdeen.

[P.T.O.

### CONFIDENTIAL.

(139.) W.5373/M726, 200m, 8/16,

017/1/10/

PROCEEDINGS OF A MEDICAL BOARD

a	SHORNCLIFFE—  sembled at (18, Westbourne Gardens, Folkestons.) on Dec . 19/16
	y order of A.D.M.S. Canadians
	or the purpose of examining and reporting upon the present state of health of
17	Rank and Name) Lieut. R.G. Combe (Corps) 27th Batt
	age 35 Service 22/12 Disability Lumbago
	Date of commencement of leave granted for present disability 18-7-16
	Date on which placed on half-pay for present disability Not applicable
	The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that
-	This Officer still suffers pain in his back and we feel
	he should not be exposed to cold and wet.
-	Not first Board Expeditionary Force.
do.	
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do	
7	
0.0	
	I'he opinion of the Board upon the questions herein is as follows:—  No
	(1.) a. Is the omcer at for "General Service !
	o. It hot so it, now long is no marry to so dimer-
	(2.) a. If unfit for General Service, is he fit for service at home?  10. If not so fit, how long is he likely to be unfit for service at home to applicable.
	c. If unfit for General Service at home, is he fit for light duty at home?
	d. If not so fit, how long is he likely to be unfit for light duty at home?
	(2) Weg the disability contracted in the service?
10	es over which he had Yes
- mark	auties not coming within the
- 1 h	c regories? If so, specify
110	i t perform. Exposure and infection
	not application
	(7.) If the disability was not calculated by it?  Not applicable?
	service, was it aggravated by it.
	President. 8
	Signatures Members. 5
	C
(	5725.) W.16789/M260, 200m. 2/16. C. P., Ltd. Forms

[P.T.O.

017/1/10/

## PROCEEDINGS OF A MEDICAL BOARD

ns	SHORNCLIFFE— sembled at (19, Westbourne Gardens, Folkestone.) on Dec.19/16
	order of A.D.M.S. Canadians
	r the purpose of examining and reporting upon the present state of health of
	Cank and Name) Lieut. R.G. Combe (Corps) 27th Batt
	ge 35 Service 22/12 Disability Lumbago
	ate of commencement of leave granted for present disability
	ate on which placed on half-pay for present disability Not applicable
	The Board having assembled pursuant to order, and having read the instructions at the back of the form, proceed to examine the above-named officer and find that
-	This Officer still suffers pain in his back and we feel
	he should not be exposed to cold and wet.
	Not first Board Expeditionary Force.
	- Him tradings belief the server of the process of the contract of the contrac
do _	
_	
do	
-	
0 -	
Т	The opinion of the Board upon the questions herein is as follows:—  No
	(1.) a. Is the officer fit for "General Service"?  b. If not so fit, how long is he likely to be unfit?  3 months
	(2.) a. If unfit for General Service, is he fit for service at home? Yes
	b. If not so fit, how long is he likely to be unfit for service at homent applicab
	c. If unfit for General Service at home, is he fit for light duty at home?
	d. If not so fit, how long is he likely to be unfit for light duty at home?
	(3.) Was the disability contracted in the service?  Yes
	(4.) Was it contracted under circumstances over which he had no control?
	(5.) Was it caused by military service?
	(6.) If caused by military service, to what specific conditions is it attributed?
منسنت	(7.) If the disability was not caused by military service, was it aggravated by it?  Not applicable?  Not applicable?
	Signatures   Mergusonlat   Print   Mergusonlat   Print   Print
(5	(25.) W.10/89/M200. 200M. 2/10. C.1., 2500
	39.) W.5373/M726. 200m. 8/16. A.45 26

#### Instructions.

- 1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.
- 2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.
- 3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

[P.T.O.

### PROCEEDINGS OF A MEDICAL BOARD

assembled at 86, Strand,	on 8.9.16.
by order of D.M.S. Canadians.	
for the purpose of examining and reporting upon the prese	ent state of health of
(Rank and Name) Lt.R.G. Combe. (Corps)	
Age 35 Service 1-6/12 Disability Rheumatism	
Date of commencement of leave granted for present disability	
Date on which placed on half-pay for present disability	
	1 (1 1 1 1
The Board having assembled pursuant to order, and having on the back of the form, proceed to examine the above-name	
This officer is now much improved but not	yet fit for full
duty.	
13+b Dag Da Channelle	
The opinion of the Board upon the questions herein is as follows:-	
	lo,
b. If not so fit, how long is he likely to be unfit?	
(2.) a. If unfit for General Service, is he fit for service at h	
b. If not so fit, how long is he likely to be unfit for serv	vice at home?not applic
c. If unfit for General Service at home, is he fit for light of	Spie
d. If not so fit, how long is he likely to be unfit for light dut	
(3.) Was the disability contracted in the service?	Yes.
(4.) Was it contracted under circumstances over which he had no control?	Yes.
(5.) Was it caused by military service?	Yes 2
(6.) If caused by military service, to what specific conditions is it attributed?	find office
(= ) TO () 21 131.	Sep aldest
(7.) If the disability was not caused by illitrary	
(7.) If the disability was not caused by military service, was it aggravated by it?	500
service, was it aggravated by it?	ni j
service, was it aggravated by it?	Major C. President.
service, was it aggravated by it?	Major, C. President.
service, was it aggravated by it?  (Sgd) C.N.Cooper-Cole,  "G.N.Davis, Capt.	Major, C. President.

#### Instructions.

- 1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.
- 2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.
- 3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

PROCEEDINGS OF A MEDICAL BOARD	
assembled at De Sacrue Cardens (Picastone)	
by order of and formations	
for the purpose of examining and reporting upon the present state of health of	
(Rank and Name) 1 19.7. on be (Corps) 27 6 189	
Age 35 Service C/3/12 Disability Lumbago.	
Date of commencement of leave granted for present disability	
Date on which placed on half-pay for present disability Whather	
The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that	
I tis free in till pain in his broke	
3 tought in overs-illae joints. Thre	
I a some infection about the feety	
I de is het fil frygneral service	
. We see	tse
Printing of the second of the	ngen
C. S.	r Del
erein is as follows	F.O.
(c). If unfit for general service at home, is he fit for light cuty ly to be unfit? 2 hope.	7 77
he fit for service at home?    to be unfit for service at home?	2
(d). If not fit, how long is he likely to be unfit for service at home? (e) he service?	
at home? Life nees over which he had	
(e). Is the Officer fit to perform	
any duties not coming within the above categories? If so, specify the nature of the duties which he	
might perform.	
President.	
Members.	
(7) If the dischility was not caused by Military Service	1
inhalle by it?. 45	1
100000000000000000000000000000000000000	3

#### Instructions.

- 1. On the occasion of an Officer's first appearance before a Mcdical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.
- 2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.
- 3. Question 2 is only to be answered by the Board, when specially instructed by the convening authority.
- 4. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

### FIELD SERVICE.

Army Form B. 2090A.

REPORT of Death of a Sold. to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36, or from other official documentary sources. A.F.B. 2090 A REGIMENT) 27th. Cdn. Battalion. Squadron, Troop, OR CORPS Battery or Company Lieut. Regimental No .\_ Combe. Christian Names Surname 3-5-17. \_Place\_ In the Field (France Died Killed in Action. Cause of Death\* Casualty List No. 976 dated 4-5-17. Nature and Date of Report\_\_\_\_ A.G. G.H.O. By whom made\_ Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure white on military duty, or from injury while on military duty. Place Burial By whom reported\_ (a) in Pay Book (Army Book 64) (b) in Small Book (if at Base) State whether he leaves a Will or hot (a) asperate document All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and in any will is found it should be at once forwarded to the War Office. Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible. A duplicate of this Report is to be sent to the Fixed Centre Paymaster at Home, or to the D.F.A.G., Indian Expeditionary Force. or Field Disbursing Officer, as the case may require, together with the Deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report. Station and | Rouen 12-5-17. Signature of Officer in charge of Section) Adjutant-General's Office at the Base Date A.G. Cdn. Sect. 3rd. Ech. GHO.

	PROCEEDINGS OF A MEDICAL BOARD	
	assembled at 86 Strand. Lindon on 18 July 191	6
1	by order of D. m. S. Canadians.	
	for the purpose of examining and reporting upon the present state of health of	
	(Rank and Name)ieul R. S. Combe (Corps) 27 ?. Bh	
	Age 35 Service 14/12 Disability Rhumalism + Lumbago	
	Date of commencement of leave granted for present disability 18 - July 1916.	
	Date on which placed on half-pay for present disability	
	The Board having assembled pursuant to order, and having read the instructions	
	on the back of the form, proceed to examine the above-named officer and find that	
	This Officer suffers from desability meted above	
	the was taster see as Of. Elvi in april: Sent to	
	Tw/4. General Bully m in 14 th Jum 1916: Was	
	Then Two weeks: Transferred to Miss Pollocks	
	Hufutal on 29 June 1916. He has impured	
	Very slowly in hupital and still wast's lane	inte
	with aid I a come: amangements have been	nge
	with the first theatment as Back	
	made In him to laise treatment as Back	OC C
		10 m
	The opinion of the Board upon the questions herein is as follows:—	0 00
1	(1.) a. Is the officer fit for "General Service"?	3
2	b. If not so fit, how long is he likely to be unfit? / Mouth.	13
7	(2.) a. If unfit for General Service, is he fit for service at home?	2
h	b. If not so fit, how long is he likely to be unfit for service at home? Zone c. If unfit for General Service at home, is he fit for light duty at home?	
5	d. If not so fit, how long is he likely to be unfit for light duty at home? I Month	!
1	(3.) Was the disability contracted in the service?	
1		
	(4.) Was it contracted under circumstances over which he had no control?	
	(4.) Was it contracted under circumstances over which he had no control?  (5.) Was it caused by military service?	
	(5.) Was it caused by military service?  (6.) If caused by military service, to what specific conditions	
	no control?  (5.) Was it caused by military service?  (6.) If caused by military service,	
	(5.) Was it caused by military service?  (6.) If caused by military service, to what specific conditions is it attributed?  (7.) If the disability was not caused by military service, was it aggravated by it?	
	(5.) Was it caused by military service?  (6.) If caused by military service, to what specific conditions is it attributed?  (7.) If the disability was not caused by military service, was it aggravated by it?	
	(5.) Was it caused by military service?  (6.) If caused by military service, to what specific conditions is it attributed?  (7.) If the disability was not caused by military for and service, was it aggravated by it?  Aavid Donard Cause President.  Signatures  Signatures	
	(5.) Was it caused by military service?  (6.) If caused by military service, to what specific conditions is it attributed?  (7.) If the disability was not caused by military for applicable service, was it aggravated by it?  Aavid Donard Cause President.	

Colhess. 252. Fresh Western Never.

#### Instructions.

- 1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.
- 2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.
- 3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

1916

# MEDICAL HISTORY SHEET.

Examined at Sewell Camp.  Birthplace City or Town Cherchen  Birthplace County Scotland.  Apparent age 3 H 173. Il Mons  Trade or occupation. Chemist  Height. Feet Inches.  Weight: 160 Lbs.  Chest measurement Maximum expansion H 2. inches.  Physical development. Normal  Small-Pox Marks  Vaccination Marks  Vaccination Marks  When Vaccinated last. Children  (a) Marks indicating congenital peculiarities or previous disease  (b) Slight defects but not sufficient to cause rejection	Date	Result	Haw ther  Capt A, M, C, M.O.  EXAMINED FOR RE-ENGAGEMENT,  M.O.  M.O.  M.O.  M.O.  M.O.  M.O.  M.O.  M.O.  M.O.
Birthplace City or Town Caberdeen County Scotland.  Apparent age Hyrs. II Mons Trade or occupation. Chemist  Height. Feet Inches.  Weight: '60 Lbs.  Chest measurement Maximum expansion H/2 inches.  Physical development. Normal  Small-Pox Marks  Vaccination Marks  When Vaccinated last. Childhen  (a) Marks indicating congenital peculiarities or previous disease  Weight: 10 Marks or 10 Marks  When Vaccinated last. Childhen  (a) Marks indicating congenital peculiarities or previous disease		Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,  M.O.  M.O.  M.O.  M.O.  M.O.  M.O.
Apparent age 34 48. 11 Mons  Trade or occupation 6 he must  Height 5 Feet 10 Inches.  Weight: 160 Lbs.  Chest measurement 1 Maximum expansion 1 2 inches.  Physical development 1 Mormal  Small-Pox Marks 1 Left.  Vaccination Marks 1 Number 1  When Vaccinated last 1 Chillipsel 1  (a) Marks indicating congenital peculiarities or previous disease 1 Left.			M.O.  M.O.  M.O.  M.O.  M.O.  M.O.
Trade or occupation	Date		M.O.  M.O.  M.O.  M.O.  M.O.  M.O.
Height 5 Feet 10 Inches.  Weight 160 Lbs.  Chest measurement { Minimum 35 inches.   Maximum expansion 4/2 inches.   Physical development 10 male   Small-Pox Marks   Vaccination Marks { Arm Right   Left   Number   Number   When Vaccinated last   Childhood   (a) Marks indicating congenital peculiarities or previous disease   WL	Date		M.O.  M.O.  M.O.  M.O.  M.O.
Weight:  Chest measurement { Minimum 35 inches.   Maximum expansion 4/2 inches.   Physical development   Normal   Small-Pox Marks   Vaccination Marks { Arm Right   Left   Number   When Vaccinated last   Childhood   (a) Marks indicating congenital peculiarities or previous disease   WC	Date		M.O. M.O. M.O.
Chest measurement { Minimum 39 inches. Maximum expansion 4/2 inches. Physical development 10 male   Small-Pox Marks   Vaccination Marks { Arm Right   Left   Number   When Vaccinated last   Childhood   (a) Marks indicating congenital peculiarities or previous disease   WC	Date		M.O. M.O.
Chest measurement { Maximum expansion # 2. inches. Physical development Normal   Small-Pox Marks   Left.   Vaccination Marks { Arm Right. Left.   Number   Number   Left.   Number   Left.   Number   Left.   Left.	Date		M.O. M.O.
(Maximum expansion A. inches.  Physical development Normal  Small-Pox Marks  Vaccination Marks  Arm Right Left  Number  When Vaccinated last Childhord  (a) Marks indicating congenital peculiarities or previous disease	Date		M.O.
Small-Pox Marks  Vaccination Marks  Arm Right Left  Number  When Vaccinated last Childhood  (a) Marks indicating congenital peculiarities or previous disease	Date	Result	
Vaccination Marks  Arm Right Left.  Number (a) Marks indicating congenital peculiarities or previous disease  When Vaccinated last (b) (a) Marks indicating congenital peculiarities or previous (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Date	Result	M.O.
Vaccination Marks  Number  When Vaccinated last  (a) Marks indicating congenital peculiarities or previous disease  W	Date	Result	
When Vaccinated last childhood  (a) Marks indicating congenital peculiarities or previous disease  WL			VACCINATIONS.
(a) Marks indicating congenital peculiarities or previous disease			M.O.
disease WL			м.о.
(b) Slight defects but not sufficient to cause rejection			M.O.
(b) Slight defects but not sufficient to cause rejection	Date	Result	Anti-Typhoid Inoculations, Etc.
		NO	4
- he	17	Mus.	/k . M.O.
	July.	21°	M.O.
	Rug	7h.	Æ: M.O.
Enlisted on 1st day of april	1916	5 at	Prence albert.
Joined on enlistment 33 to 8th Lieut 27th Bn		Habits	
EXAMINED OR DISCHARGED	BY A	MEDI	CAL BOARD.
STATION. DATE. I	DISEASE.		RESULT.
			Medical History Sheets of a need by the Officer porning , they isave England.
This sheet to be disposed of in accordance wit			n he

Remarks on nature of the disease: how induced: if mile pletely recovered from; whether any particular treatment we venereal cases state nature of primary disease, and whether me, given. If an accident, state whether it occurred on duty and who of inquiry was held. Date of issue and particulars of artificial teeth cappliances supplied. Particulars of prophylactic inoculations. DATES OF Number of days in Hospital. Date of Arrival Discharge from Hospital. Admission into Hospital. DISEASE. STATION. at the Station. Day Month Year Day Month 10 Wamerenou 16 20 16 Dosted to here, Government Christian Name Surname

### MEDICAL CASE SHEET.\*

	The second secon
No. in Admission and Discharge	Regimental No. Rank. Surname. Christian Name.
Y. F 43  Year  1916.	Unit. Age. Service.  27 Canadians 35 15.
Station and Date.	Disease Diagnosio 93/ Myalgia Place v date of most of disease  April 1916 - St Eloi
Bath officers Josp.	Place y date of meet of disease
28 hallow Boys.	- april 1916 - St Elvi
Batt	
	Condition on admission
	nius culas pains + 5 hpress - general
	1
	Treatment -
	Satus XC
	Total S.
	Thog was.
	Good
	Condition on discharge
	Improved
	lacading and the to O'lai Agains
	Was dise are due to military Lewico
	Date of admission 18.7.16.
	bate of admission 18.7.16. V  pate discharge Anglo /16 / praces

Station and Date.

	Surname.	Chi	ristian	Name.		
	COMBE Rank.	R. Unit.	G.			
	Lieut.	27th.	Batt.			
			Da	ate of a	dmission.	
	Hospital.					
	Transferred			Hosp.		
			<b></b>	Hosp.		
				Hosp.		
				Hosp.		
	Diagnos Repor				LLED IN A	
	Later diagno	sis				7
		***************************************				
			•••••			
	Disposition.			Date	· .	
						a
(	C.L. <b>7-5-17</b> C.L.	667Remarks				
(	C.L			A.M.D. S	DEPT.	
(	5.L.		Boh. of		O.M.F.C. Lo	ndon.
C	S.L.					

D. M. S. 1347.	10 34 15	1,000,000		
Surname	Christian	Name		Reg. No.
Rank	Unit			
MEDICAL BOARD held at	57 2	Date		Serial No.
(1)				
Other Medical Boards at	100	Date		Serial No.
(2)				
(3)				
(4)				
(5)				
Condition found by Board				
Disposition Recommended				
(1)				
(2)				
(3)				
(4)				
(5)		The state of the s		
PENSIONS & CLAIMS BOARD h	eld at			Date
Disposition			1 B	
Remarks				

# 8284-5000-16/10/16 Duplicate

### MILITIA AND DEFENCE

### SEPARATION ALLOWANCE

21. F Ell some Address 389 great Western Road aberdeen Scatfand

Relation to Soldier - wife, widowed mother or guardian of child or children

Name of Soldier am lu Rank heut.

To what Corps belonging

when called out

PAYMENTS.

Forwarded to

	Month	Year	Cheque No.	Amt.	0 -1			REMARKS			
	Aug.	1914			up	166	ior	41 beaut.	dye	, Joa	
	Sept.				ell	ierra	y =	18-8-00		May	
-	Oct.										
	Nov.									.glut.	
	Dec.										
	Jan.	1915									
	Feb.										
	March	THE REAL									
	Apl.									Dec	
	May										
	June										
	July	e.	aug	174				194,413			
	Aug.	7.		36							
	Sept.	2.	6405	30				Same Leve			
	Oct.	3.		30							
	Nov.	3.	1	30 30							
	Dec.	- 7		30							
	Jan.	1916	1	30						100	
	Feb.	3	12829	30	7						
-	March	1	1	as							1
	march	100	ied forward	20				onward balancy		1	

### MILITIA AND DEFENCE.

### SEPARATION ALLOWANCE.

Name of Dependant						Name of Soldier						
Relation to Soldier						Regtl. No.						
				Regal No.	49.03	Rank Addition of the Book and t						
	Transfer spell						Corps					
							t Corps belonging					
	***************************************						alled out					
							/// AND MAKE TO SERVICE DOWN ONLY					
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······································							*					
							- A					
Month.	Year.	Cheque No. or Postal Draft Book No.	Amount.	Amount.	Date.	£ s.	d. REMARKS					
		Brought forward					NAME OF THE PARTY					
Apl.	1916	\3\	30				Aug. 1914					
May	***************************************	1408	30									
June		24 PH	30									
July		4635	30				Nov					
Aug.		6144	30		·····							
Sept.		8129	30				2002					
Oct.		18101	30		*********		Art .					
Nov.	***************************************	12694	30				And					
Dec.		14401	30				And the second s					
Jan.	1917	Haspy	30									
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Mar.		22d H1	30									
Apl.		W38	30									
May		553/020	30	3000								
June		553/020	30				lens in Inanted by cable 17					
July		"/085	30		-		\$480 p.M #6.6.2107					
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Sept.		178					-02					
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The state of the s	CONTRACTOR OF THE PARTY OF THE	The second secon				17 200	draff.					

27-2-15

MILITIA AND DEFENCE

Duplicate

### SEPARATION ALLOWANCE

Name Mrs fean D. Combie Name of Soldier Combie. Rolet G.

Address & Hazel Grove Regti. No. 9-C-273

252 Hussen Gelverston. Deven Rank Lieut

Corps 53 Balton

Relation to Soldier

wife, child or mother

Wife when called out

#### PAYMENTS

42229 M. GO.					
Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1914				Marriage Certificate Produced
Sept.					** APR 1 1916 **
Oct.					18.8.09. gras
Nov.					The second secon
Dec.					
Jan.	1915				
Feb.					
March					
Apl.					
May					
June	N	978	124	(11)	
July	g	978 6906 6705	30	-	
Aug.	f.	6705	30	-	
Sept.		I. 9266.			3000
Oct.		H. 15886	30		
Nov.		I. 12905.			
Dec.		115307			The state of the s
Jan.		1 15826			
Feb.		116832	11212		
March		115333	30		#394

### MILITIA AND DEFENCE.

# SEPARATION ALLOWANCE.

Relati	2811	oldier Wilcz Wasku Rd Cardau	3 P.O.	ou. D.	Regtl. No.	Name of Soldier Combe Roll; G. Regtl. No. a - C - 273  Rank Jeut  Corps 6 3 6 8 att.  To what Corps belonging  when called out					
	**************										
P.O.	••••••	1	P.O.								
Month.	Year.	Chaue No. or Pos Draft Book No.	1	Amount. Dat	e. £ s. d.	REMARKS.					
		Bought Forwar	20.1								
Apl.	1916	131.	30.			SAENTION					
May		1418	30			1/8 11 NON 6					
June		2764	30			28SEP. 1915					
July		4635	30								
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Sept.		8156	30								
Oct.		10/8/	30			31 31 32 33 33 33 33 33 33 33 33 33 33 33 33					
Nov.		14701	30			Lilled in Action 35 17					
Jan.	1917	14 411	30			82 664 . Y. 5. 13					
Feb.		19437	00			Thanklerrel & Pers					
Mar.		12741	30			10/9/14					
Apl.		738	30/								
May											
June											
July			/								
Aug.		/									
Sept.		/									
		Comied Form	rd								
		Carried Forwar	La								

#### WAR SERVICE GRATUITY

то

### DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 332-105-49

#	Regt'l No. Name Name Unit. 21 Km Rank Lie	Robert &. (Christian Name)  Posts of enlistm	Combe (Surname)
1	Date of casualty	B.P.C. File No	50 R 1
M.F.W. 2052 25M-6-20. H.Q. 1772—89-473	Name Mrs. Jean. Traquais Amale Address To Mrs. Donald Moosomm Sack	DEPENDENT  (. Combe Relation	
25.H.— H.Q. 1773	Eligible for Gratuity	\$ Total of SEP 18 1921	\$ 240.00 150.00 deductions \$ 150.00 alance due \$ 150.00

### POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge

	Name												
		Surname		Christian Na	me								
	Regimenta	I Number			Rank			Address (in full)					
	Unit												
	Original U	nit											
	District wh	nere paid					1.0 (A)						
	Date of Discharge						14.50	, S(1					
Rates:—Regimental pay \$ per diem; Field Allowance \$ per diem. Separation Allowance \$ per month.													
L.L. 53961—M. & D. 9721	- Tallyna	San puriling	- Trans	Mary Inc.					1				
	Total	- 2 - F	IRST PAYMEN	т	SE	COND PAYMEN	Т	FI	NAL PAYMENT		Balance Overpayments	Total Amount	
	Credits 91 days	Cheque No.	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No.	Date	Amount 31 days	to be Recovered	Paid	
				Hatel .									
									4				
	200	T William To a					H 100						
	374.5												
		Marine Marine								=======================================			
		a 1986 F.	4 4 4						ellie dissile	*			
W. 127 -1-19 9-1140	Remarks:	1 - (44, 11) C - (14, 11)	4 4 4						ella discre	3			
4. F. W. 127 300.4-1-19 1772-39-1140	Remarks:												
M. F. W. 127 300M-1-19 1772-39-1140	Remarks:												
M. F. W. 127 300M-1-19 1772-39-1140	Remarks:								21 to 11 to 12				
M. F. W. 127 300M-1-19 1772-39-1140	Remarks:												

#### MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name of Soldier Combe Roft G.

Address

Regtl. No.

Rank Lieut

Corps 53 rd Battu

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

PAYMENTS

					PAIMENTS
	Month	Year	Cheque No.	Amt.	REMARKS
	Aug.	1914	<u> </u>		Emplored for payments
	Sept.	7			Empland for payments
	Oct.				
	Nov.				Pension Granted 1-8-17
	Dec.			-	
	Jan.	1915	- 11116		B.P.C. to Recover \$
	Feb.				Clerk. J. P.L Date 27-7-17
	March				
	Apl.				
	May				
	June		1978	12H .	124
	July	9	6006	30	30
	Aug.	$\checkmark$	6006	30	30
	Sept.	0			
	Oct.			-	Pensions Notified DATE 21/8/19
	Nov.		19		2/2/11
1	Dec.				C 834 7/5/17 Conckinler
	Jan.	1916			6 834 7/5/17 Empliner
	Feb.				
	March			14	

Taken on for pay from Ep UNIT ASSIGNED PAY:-MONTHLY AMOUNT TO WHOM PAYABLE Bank of Montreal BANK IN WHICH PAY & ALLOWANCES DEPOSITED G. B. & S. PAY RATE OF PERIOD No. of Days FIELD AMOUNT OF FIELD ALLOWANCE CR. FROM PREV. ACCOUNT ALLOWANCE AMOUNT OF ADJUTANT TOTAL PAY COMMAND ALLO REGIMENTAL 16/9/15 31/10/15 1/11 30/11 1/12 31/12 31 2 1/16 31 1/2/16 31/3/16 31/3/16 31 18.60 62 ... 62 .. 18 60 62... 62 .. 17.40 58 .. 18 60 62 .. PARTICULARS CHEQUE NO. 892 Statement of DOT 16 DAY

Taken on for pay from Sep PL Draft 53 Bu DATE OF APPOINTMENT MARRIED (YES OR NO) NEXT OF KIN: **ADDRESS** Bank of Montreal DATE NON-EFFECTIVE) PEPOSITED AND CAUSE) PAY RATE OF ALLOWANCES TOTAL PAY CR. FROM PREV. ACCOUNT AMOUNT OF FIELD ALLOWANCE AND Assign ADJUTANT P. F. TOTAL PAY ALLOWANCE MESSING SUBSISTENCE TOTAL ALLOWANCES ALLOWANCE 7760 76 60 168 60 30 18 108 1 62 .. 18.60 310. 4960 111.60 62 .. 18 60 31 .. 49 60 111 60 58 .. 17.40 29-104.40 46 40 62 ... 18 60 31 ... 411 60 49 60 SUNDRY PAYMENTS PARTICULARS lees. 100

Combe R. G. Leut oraft 53 Bu Afuil 15 1915 Prince albert. DATE OF APPOINTMENT MARRIED (YES OR NO) My R. G. Combe. NEXT OF KIN: **ADDRESS** DATE NON-EFFECTIVE) AND CAUSE) LOWANCES TOTAL PAY Assigned PAY DEPOSITED IN BANK SUNDRY DEDUCTIONS PAID IN CARRIED AND REMARKS ALLOWANCES TOTAL MESSING SUBSISTENCE arrived 13 95 RO refry COD 76 60 168 601 16760 7897 1815 1 Everpaid Pt 5310 Bu Draft Sep 30 108 108 1 4960 111.60 111 6Q 310 111 60 49 60 111 60 31 .. 104 40 29-46 40 104.40 Pordissu or Rashford 4 76 V5580 (Ord Eng) 110 87 411,60 49 60 IDRY PAYMENTS AMOUNT REMARKS 20 10 11 100