

card
28-10-14

ATTESTATION PAPER.

No. 1251675

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Esdaile*
- 1a. What are your Christian names? *Robert Es Blair*
- 1b. What is your present address? *307 Pine Ave Montreal*
- 2. In what Town, Township or Parish, and in what Country were you born? *Montreal Que.*
- 3. What is the name of your next-of-kin? *Mrs. A. Esdaile*
- 4. What is the address of your next-of-kin? *307 Pine Ave. Montreal*
- 4a. What is the relationship of your next-of-kin? *Mother*
- 5. What is the date of your birth? *July 7th 1898*
- 6. What is your Trade or Calling? *Student*
- 7. Are you married? *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
- 9. Do you now belong to the Active Militia? *No*
- 10. Have you ever served in any Military Force? *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *Yes*
- 12. Are you willing to be attested to serve in the } *Yes*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Esdaile Robert Blair*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Oct 11th* 191*6* *R. Blair Esdaile* (Signature of Recruit)
W. Goldsworth (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Esdaile Robert Blair*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Oct 11th* 191*6* *R. Blair Esdaile* (Signature of Recruit)
W. Goldsworth (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Montreal* this *11th* day of *Oct* 191*6*.

W. Goldsworth J.P. (Signature of Justice)

Description of Esdaile Robert Blair on Enlistment.

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 9 ins.

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

Complexion Fair

Eyes Blue

Hair Brown

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

Scar on right side neck

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.
 Date Oct 11th 1916 [Signature]
 Place Montreal Que [Signature]
 Medical Officer.

*Insert here "fit" or "unfit."
 NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Robert Blair Esdaile having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

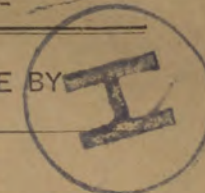
Date Oct 11th 1916 by [Signature] (Signature of Officer)
79TH DEPOT BATTERY C. E. F.

REGIMENTAL DOCUMENTS

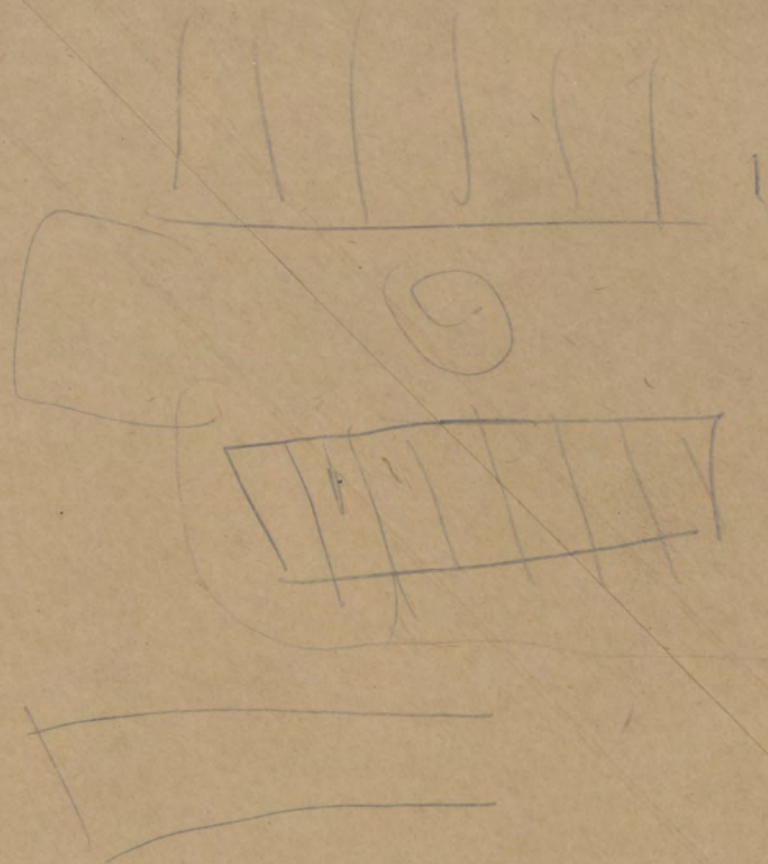
07678

NAME *Esdraile Robert Blair* REGT. NO. *1251625* UNIT _____

H. Q. FILE NO. _____



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					<i>2 M.F.W. (Case) - 13 Dec 17</i>
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category
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
1 LAST PAY CERTIFICATE (M.F.W. 44)					
* PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>11 122</i>					
<i>2 misc</i>					
<i>1 08</i>					



2

79TH BATTERY, C. E. F.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins... 79TH DEPOT BATTERY, C. E. F.

(2) Regimental Number... 1251625

(3) Full Name of Soldier... Essdale Robert Blair

(4) Place of Birth... Montreal Que

(5) Are you married, or not? ... Not married

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

(b) Present Postal Address...

(7) Are you a widower? ...

(8) Have you any children? ...

If so, give number of boys and girls...

Also their names and ages...

DUPLICATE
(9) Is your Father alive? *Yes* *Chas. B. Esdail*
If so, state name and address *307 Pine Ave. W. Montreal*

(10) Is your Mother alive? *Yes* *Mrs. Annie Esdail*
If so, state name and address *307 Pine Ave W. Montreal*

(11) If your Mother is a widow.....
Are you her sole support, or not?.....

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

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

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

(15) Are you insured? *No*
If so, in what Company?.....
Have you made arrangements for payment of your Insurance premium.....
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *Oct. 11th 1916*

W. C. Conroy
Officer Commanding
79TH DEPOT BATTERY, C. E. F.

Ent. at Montreal

M D H

79TH BATTERY, C. E. F.
FORM OF WILL.

I, Robert Blair Esdaile (Name in full)

Regimental Number 1251675 serving in 79^a Battery C.E.F.
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
made and declare this to be my last Will.

I bequeath all my real estate unto

Wm. C. B. Esdaile
307 Pine Ave West
Montreal, P.Q. } Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Wm. C. B. Esdaile
307 Pine Ave West
Montreal } Name and Address
of person or
persons to receive
personal estate*
(See note).

IMPORTANT NOTE this 8th day of November A. D. 1916

**This must be Signed
and Dated by
THE SOLDIER
HIMSELF.**

R. Blair Esdaile Signature of Soldier.

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

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

Signature of First Witness C. O. Fraser

Address of Witness 942 Dorchester St. Montreal

**THE TWO
WITNESSES
MUST
SIGN HERE**

Occupation of Witness Clerk

Signature of Second Witness G. H. Morris

Address of Witness 2401 Esplanade Ave. Montreal

Occupation of Witness Clerk

FORM OF WILL

I, _____ of the County of _____ State of _____ do hereby certify that _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

That _____ of the County of _____ State of _____ is a person of sound mind and memory and is capable of making a will and is desirous of making a will.

MEDICAL HISTORY SHEET

ORIGINAL

Surname Esdaile Christian Name Robert Blair

Examined on 11 day of Oct 1916
 at _____
 Birthplace { City or Town Montreal
 County Que.

Approved by [Signature]
 Rank [Signature] M.O.

Apparent age 18
 Trade or occupation Student
 Height 5 feet 9 Inches
 Weight 126 lbs.
 Chest measurement { Minimum 31 inches
 Maximum expansion 36 inches
 Physical development Good
 Small-pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
 Number 2

Date	Result	VACCINATIONS
<u>11/17/16</u>		<u>[Signature]</u> M.O.
		M.O.
		M.O.

When Vaccinated last 1907
 (a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>NOV 2 1916</u>		<u>[Signature]</u> M.O.
<u>NOV 9 1916</u>		<u>[Signature]</u> M.O.
<u>NOV 18 1916</u>		<u>[Signature]</u> M.O.

Enlisted on 11th day of October 1916 at Montreal

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	<u>79th Depot Battery</u>			<u>11th Oct 16</u>
Transferred to	<u>C. E. F. C. S. S.</u>	<u>1251675</u>		
	<u>RESERVE BRIGADE</u> <u>C. F. A.</u>			<u>4-12-16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>25/10/16</u>		<u>Fit.</u>

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

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Wm. Lewis Esdaile

Name of Soldier

L. B. Esdaile

PAYMENTS

Number: 1251625. Dep. Bulf. E.F.

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

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰</i>
April	1916			
May				<i>\$15⁰⁰ Refund requested. ASP. P. 2 P. 8117.</i>
June				<i>AQ649-E-3207. Brnⁿ 21¹²/₇</i>
July				
Aug.				
Sept.				
Oct.				<i>Account Stopped Oct 31/17</i>
Nov.				<i>Comm in Imp Army</i>
Dec.				<i>Cable P. 31/17. Date 17/11/17</i>
Jan.	1917	<i>H35112</i>	<i>15</i>	<i>Have wired for return of exchequer</i>
Feb.		<i>M 37931</i>	<i>15</i>	
March		<i>M 43862</i>	<i>15</i>	<i>15 P.</i>
April		<i>M 50556</i>	<i>15</i>	<i>15 L</i>
May		<i>Q 1699</i>	<i>15</i>	<i>15 L</i>
June		<i>J 7683</i>	<i>15</i>	
July		<i>Q 14405</i>	<i>15</i>	<i>15</i>
Aug.		<i>021843</i>	<i>15</i>	<i>15</i>
Sept.		<i>U 27930</i>	<i>15</i>	<i>15</i>
Oct.		<i>J 35794</i>	<i>15</i>	<i>15</i>
Nov.		<i>J 42037</i>	<i>15</i>	<i>15</i>
Dec.		<i>A. 26664</i>	<i>15</i>	<i>15</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

DEC 1 1916

Noted on card 18/10/17. E.H.

\$165 M.V

*over payment 15⁰⁰
of closed Oct 1/17. Ed. 1/17*

A 26664 Cancelled

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom

M. A. Esdaile

By Whom Assigned

R. B. Esdaile

Address

~~*307 Rue de la Montagne*~~

Regtl. No.

1251625

St. Albert St. Montreal

Rank

Quartermaster

St. Agathe de Monts.

Corps

49th Depot Bally C. E. F.

Rate

15⁰⁰

DEC 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Payment stopped Oct 1/17. 3. M. Oct 30/17. E.D. 1/14/17. Cause - Com in Imp Army.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1940

1940

J.P.

Rank

Name ESDAILE, Robert Blair. /

Reg'l No.

R-122
8-401-50,000-21-16-16,
251625.

(5)

Unit Dft. 79th Dep't. Batty. }
If in perm. Corps, }
What Unit? }

Married or Single Single.

Place and Date of Enlistment Montreal. 11th Oct. 1916. /

Place of Birth Montreal. Que. /

Name and Address, Next-of-Kin Mrs A. Esdaile. /

307 Pine Ave. W. Montreal. Que. /

Relationship Mother. /

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 4265
File R.L. 23-E-82
Category 6m 6

Discharge, Date and Place

Reason

Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England S.S. Motayama		7.12.13	
8-12-16	Pres Bde	Taken on strength of Bliffe		7-12-16	P 110316
3-5-17	do	SOS on posting to Regt Depot	do	2-5-17	P 1234 Regt Depot P 15876-577
24-2-18	C.P.R.D.	B.C.S. Discharged in British Isles	Witley	18-7-17	P 110.55 Army List 654. C 15/5/55, B
		Dis in British Isles		18-7-17	Army List 231 23-18 K.R.40 Para 392. Sec 25 London Gazette 8-8-17

ORIGINAL

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

M. F. W. 54. (A. F. B. 103.)

350M.—5-16

H. Q. 1772-39-9-0.

Casualty Form—Active Service.

Unit, Regiment or Corps. **79TH DEPOT BATTERY, C. E. F.**

Regimental No. **1251625** Rank..... Name. **Esdaile Robert Blair**

C. E. F.

Enlisted (a) **11th Oct 16** Terms of Service (a) **Duration of war** Service reckons from (a) **11th Oct 16**

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

Extended..... Re-engaged..... Qualification (b) **Nil (Student)**

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked Halifax		27-11-16	
		Disembarked Liverpool		7-12-16	
8-12-16	O.B. Res Bde C.F.A	Taken on strength Res. Bde C.F.A	SHORNCLIFFE	7-12-16	B.O. Part II No 316.
4-5-17	O.C. Res Bde C.F.A	S.O.S to Reg. Depot. and is attached to 5 th Battery.	SHORNCLIFFE	3-5-17	B.O. Part II No 123
6/5/17	O.C. C.A.R.D.	T.O.S. from Res. Bde C.F.A & shown on Com to 5 th Bty Res. Bde.	S'cliffe	3/5/17	Pt II D.O. # 58
13/5/17	do.	Shown On Com. to R.F.A. DISCHARGED IN UNITED KINGDOM.	S'cliffe	12/5/17	Pt II D.O. # 65

K.R. & O. PAR. 392, SEC. XXV

Esdaile
Lieut.
Officer Commanding,
No. 2 Canadian Discharge Depot.

Winkward
LIEUT. & ADJ.
FOR O.G. CAN. ART REGIMENTAL BATTAL.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form - Active Service

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				
24.2.16	B.A.P.O.	S.O.S. being his in } British Isles.	Witley	18.7.17	Par = do. 55. Army list 654.6.6.8.88/17
 					

SURNAME.

Esdaille

CARD NO.

4

CHRISTIAN NAMES

Robert Blair

REGL. NO.

1251625

RANK

Gr

UNIT

79th Bty. C.F.A. (1st R.D.)

FORMER CORPS

nil

S.O.S. 18/7/17 24/6/18

with: 10/15/17 16/6-18

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Esdaille Mrs. Annie

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

~~*807 Pine Ave. Montreal*~~*St. Albert St. St. Agathe
des monts, P.Q.*

COUNTRY OF BIRTH

Canada, Montreal P.Q.

DATE

July 7th 1898

PLACE OF ATTESTATION

Montreal P.Q.

DATE

Oct 11th 1916

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M. -8.16. H. Q. 1772-39-334

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Student

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

18 YEARS

— MONTHS

HEIGHT

5 FEET

9 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION

5 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

scars on right side neck

MEDICAL EXAMINATION.

PLACE

Montreal P.Q.

DATE

Oct 11th 1916

Present address,

307 Pine Ave. Montreal

P.Q.

No. 125-1625 RANK

Gr.

NAME

Esdale, Robert B.

T. O. S. 11-10-16

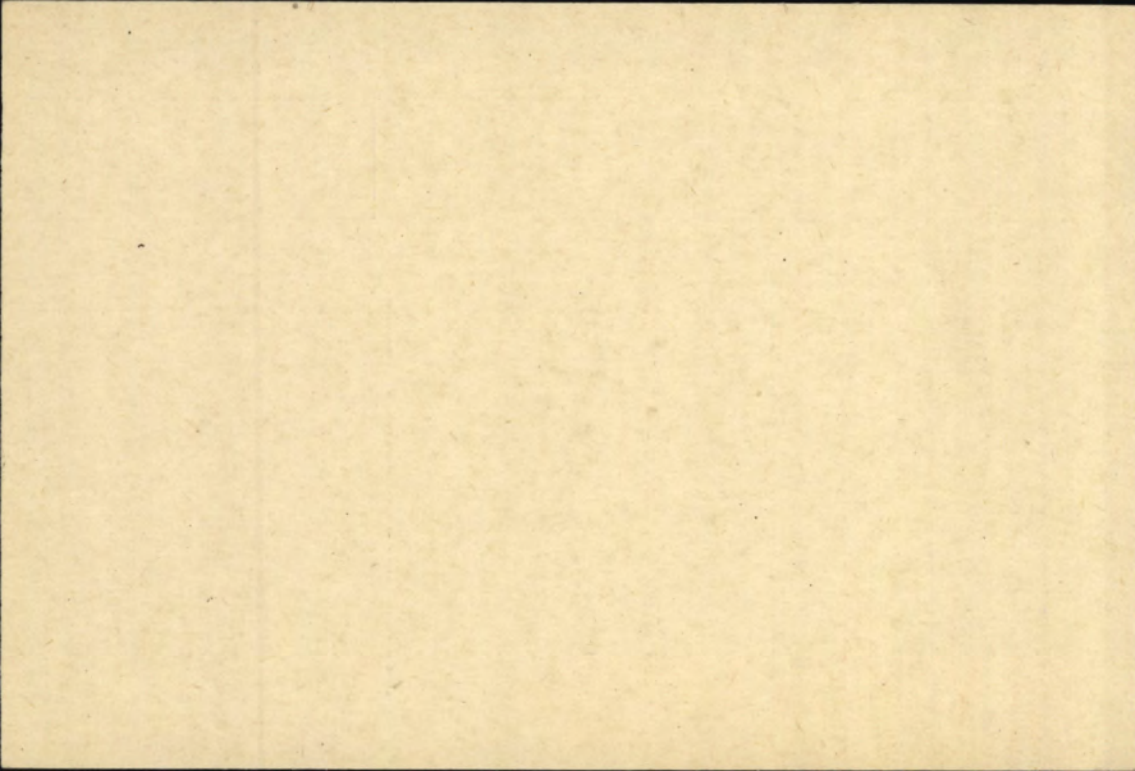
UNIT

79th Battery. C 7A - C E 7

0067-20-10-16

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Oct-11	1916 Oct-31 Nov	n n	On o/s draft: 22-11-16	DO-101-23-11-16



Form only by W.O. Aut. 649-E-3207

Number 1251625 Rank Ens

Surname ESDAILE

Christian Name Robert Blair

C. F. A. Theatre of War England

S.O.S Comm R.F.C. 18-7-17 with C.A.F.O. P.I.D.O. 55.1/24 2-18.

Date of Service

Remarks Air Force Roll #1 Page 100

A.M. 252361/20/S. 4 of 1972/20

Latest Address

C. B. M. Esdale Esq. (F.) 311 Peel St., Montreal, P.Q. (Deceased)

Roll No

Special Roll

200m.-2-21.M. Air Force Roll #1

DATE

at page 5057

HISTORY

CASUALTY BRANCH

(FILES)

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

HISTORY

DATE

ESDAILE, Robert Blair 2/Lieut. R.A.F.
(Formerly #1251625 - Gnr. - C.F.A.)

MEMORIAL CROSS

Mother

Mrs. Esdaile,
c/o C. B. Esdaile,
Board of Trade Building,
Montreal, P.Que.

311 Peel St.
Montreal. on Receipt

11^{1/2}

DESP. JUN ~~18~~ 1925
REGN. NO. X. 55/115

ackn.

17-6-25-

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

23 8 82

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

No. <u>1251625</u>	Army Rank <u>Gnr.</u>	
Name <u>Edaile, Robert Blair.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>		
Corps <u>79th Batty.</u>		
Battalion, Battery, Company, Depot, &c. <u>Art. R. S.</u> <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)</small>		
Date of discharge <u>18/7/17.</u>		
Place of discharge <u>No. 2. G. R. W. London</u>		
1. <u>Description at the time of discharge.</u>		
Age <u>19</u> years <u>—</u> months	Descriptive marks. <u>Scar on right side neck.</u> accpt. 13-11-17 done by R.A.C.	
Height <u>5</u> feet <u>9</u> inches		
Chest measurement { girth when fully expanded <u>36</u> ins. range of expansion <u>5</u> ins.		
Complexion <u>Fair</u>		
Eyes <u>Blue</u>		
Hair <u>Brown</u>		
Trade <u>Student</u>		
Intended place of residence (To be given as fully as practicable) { <u>R. Y. C.</u> <u>Box 200</u>		
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>		
2. The above-named man is discharged in consequence of <u>appointed to Commission in Royal Flying Corps. 19/7/17</u> <u>Auth. - KRCD-392-XXV & W.O. 43/Y.O. 1593 M.S.K. 504 of 23/7/17</u> <u>London Gaz. 8/8/17. P. 5097.</u> <small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>		
3. Military character :— <u>GOOD</u>		
4. Character awarded in accordance with King's Regulations :— <u>MILITARY CHARACTER. GOOD</u>		
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 439 was awarded in this case.		
Initials of Commanding Officer. <u>[Signature]</u> LONDON		
Army Form B. 2088 has been issued to*		

To be filled in on the soldier quitting the Colours.

*Strike out if not applicable.

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

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

Not applicable

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

6. Campaigns, Medals and Decorations

Nil

Certificate of education *Not Available*

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

(Place) *18/4/14*

(Date) *18/4/14*

Commanding *[Signature]* Battn. *[Signature]* Regiment.

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

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

(Place) *18/4/14*

(Date) *18/4/14*

[Signature] (Signature of Soldier.)
[Signature] (Signature of Witness.)

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

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

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

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to *18/4/17* (the date to which the record of service is completed) ... years ... days.

Further service " " *18/4/17* (the date of confirmation of discharge) " *281* "

Total " *281* "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for *18/4/17* (date)

(Place) *18/4/14*

(Date) *18/4/14*

[Signature] Signature

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

None

LIST OF DISCHARGE
DOCUMENTS.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to reserve (if any).
(Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any).
Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any).
Army Form B. 221.)
8. Court of Inquiry on an injury (if any)
(Army Form A 2.)
9. Regimental conduct sheet.
(Army Form B. 120.)
10. Company conduct sheet.
(Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet.
(Army Form B. 178.)
13. Medical report on invalid (if any).
(Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form.
(Army Form B. 103.)
20. Employment sheet.
(Army Form B. 2066.)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Dec. 1, 1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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R. B. Esdaile

PARTICULARS OF SEPARATION ALLOWANCE

No. *12 516 25*
 Rank *Gnr.* Promoted Reverted Discharge
 Soldier's Name *R. B. Esdaile*
 Battalion *79th Depot Batty. C. E. F.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Anne Esdaile,*
 Address *St. Albert St., St. Agathe de*
 Change of Address *Monte, Montreal,*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>			<i>165</i>	<i>165</i>	<i>Acct. closed Oct 31/17 per 3 m Oct 30/17. Com. in Imp. Army. Cable P 3142 17¹⁰/₁₇ #150 - A.P. recovered cheque C.S. 3002 4/18 Gm 20/3/18</i>

