Regimental Number	931062			
Surname	Clark			
Christian Names	Randolph			
Initials				
Number of Pages	45			
Officers Declaration or Attestation	attestation			
Unit	No.2 Construction Battalion			
Rank	Private			
Present Address				
Present Address Street				
Present Address Town	Cambridge, St. Joseph, BWI			
Present Address Province				
Present Address Country	Barbados			
Date of Birth	1895-10-10			
Place Born	Cambridge, St. Joseph, BWI			
Place of Birth				
Place of Birth Street				
Place of Birth Town	Cambridge, St. Joseph, BWI			
Place of Birth Province				
Place of Birth Country	Barbados			
Citizenship				
Religion	Church of England			
Trade or Calling	Mining			
Marital Status	single			
Religion (Officer's Declaration)	Church of England			
Attestation Willingness	yes			
Name Next of Kin	Cumberbach, Constance			
Address Next of Kin	Cambridge, St. Joseph, BWI			
Relationship to Next of Kin	Sister			
Number of Dependents				
Medical Examination Results	Considered fit for the Canadian Over-Seas Expeditionary			
	Force.			
Date of Medical Exam	1916-07-28			
Place of Enlistment	France			
Date of Enlistment				
Additional Information				
Apparent Age in Years (Attestation)	21			
Apparent Age in Months (Attestation)	10			
Height in Feet (Attestation)	5			
Height in Inches (Attestation)	7 1/2			
Weight (Attestation)	168			
Eye Colour (Attestation)	Brown			
Hair Colour (Attestation)	Black			

Complexion (Attestation)	Black				
Race	Black				
Chest Full Expansion	37 ins				
Chest Range of Expansion	3 ins				
Identifying Marks	Scar on left upper arm. Small scar middle of forehead.				
Vaccination Willingness	yes				
Medical History Sheet or Form B.178	history-sheet				
Date Examined	1916-07-28				
Place Examined	Sydney, NS				
Birthplace Parish	Cambridge St. Joseph				
Birthplace County	Barbados				
Age in Years (Medical)	21				
Age in Months (Medical)	10				
Trade or Occupation	Miner				
Height in Feet	5				
Height in Inches	7 1/2				
Weight	168				
Chest Minimum	34 in				
Chest Maximum Expansion	37 in				
Physical Development	Good				
Smallpox Marks					
Vaccination Marks Right Arm					
Vaccination Marks Left Arm	Left				
Vaccination Marks Total Number	5				
When Vaccinated	1906				
Vision Right Eye					
Vision Left Eye					
Previous Disease Marks					
Slight Defects					
Examined or Discharged after Medical	no				
Approved for Service?	yes				
Table III Boards synopsis					
Joined On Enlistment Corps					
Joined On Enlistement Regimental Number	931062				
Transferred to Corps					
Transferred to Regimental Number					
Examined or Discharged Medical Board	Halifax				
Station	Пашах				
Examined or Discharged Medical Board Date	1919-03-18				
Examined or Discharged Medical Board Disease	Gonorrhea				
Examined or Discharged Medical Board Result	Stayed in hospital for 13 days				

Conscription	enlisted
Qualification	
Active Militia	no
Served In Military Force	no
Military Force Particulars	
Engagement Understanding	yes
Rank Upon Enlistment	
Rank Highest Achieved	
Regiment Upon Enlistment	
Take On Strength Location	
Taken On Strength Date	
Military Force	
Departure Ship	
Departure Date	
Saw Service In	
Regiment at Death	
Unit Ship Squadron	
Battalion	
Additional Company	
Additional Company Location	
Company	
Officer Rank	
Date of Enlistment or Conscription	1916-07-28
Monthly Pay Rate	
Total Earnings	
Killed In Action?	
Murdered?	
Courts Martialed?	
Sentence	
Vimy Casualty?	
Survived War?	
Interned?	
Prisoner of War?	
Date of Discharge	
Unit at Time of Discharge	
Discharge Category	
Struck-Off Strength Date	
Reason Struck-Off Strength	
Return Ship	
Return Date	
Post War Last Address	
;	
Date of Death	
Date of Death  Age at Death	

Location of Death	
Name on Grave	
Epitaph	
Died At	
Cause of Death	
Soldier Reburied?	
Remains Buried In Country	
Remains Buried In Village	
Remains Buried In Cemetery	
Remains Buried In Plot	
Remains Buried In Row	
Remains Buried In Grave	
Commemorated	
Cenotaph	
Student Name	
Student Name (Verified By)	
School	
Last Update Time	

## **Awards**

## **Battles**

## **Battalions**

# **Locations & Timeline**

Location Latitude Longitude Significance Start Date End Date

# **Medical Cards**

II :4 - 1 D:	A	dmission	Discharge	e Total	Evaluation	0-4
<b>Hospital Dis</b>	ease	<b>Date</b>	Date	Days	Evaluation	Outcome