

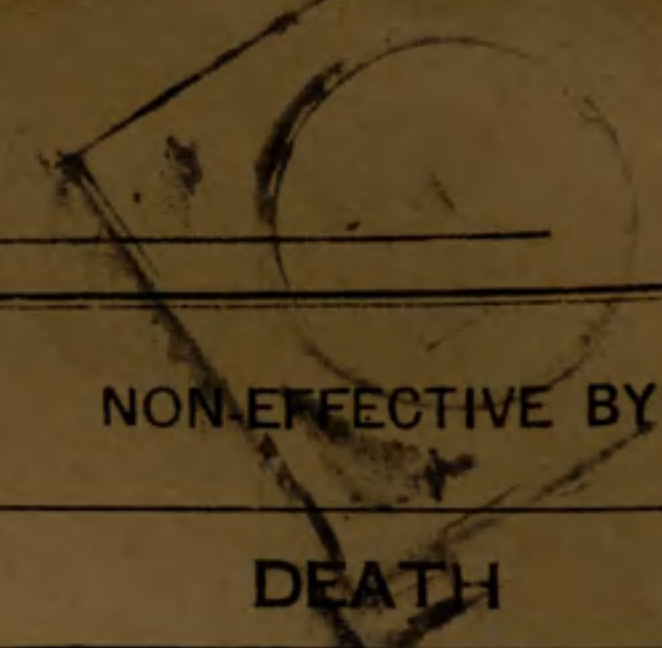
REGIMENTAL DOCUMENTS

NAME *BUTLER* *GEORGE HORACE*

Pte REGT. NO. *931077*

UNIT *2nd Const Batta* H. Q. FILE NO.

21/5/19



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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

2+2/7
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1 *Disp Cert*

1 *MFW 67*

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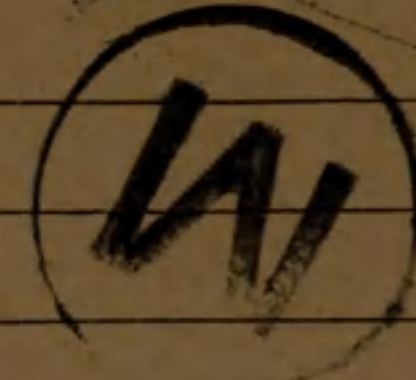
1 *R 1119*

1 *card*

1 *P 122*

Public Archives Records Centre

NO WILL



54869

DEATH

Category

DISCHARGE

Category

Demobilization

DESERTION

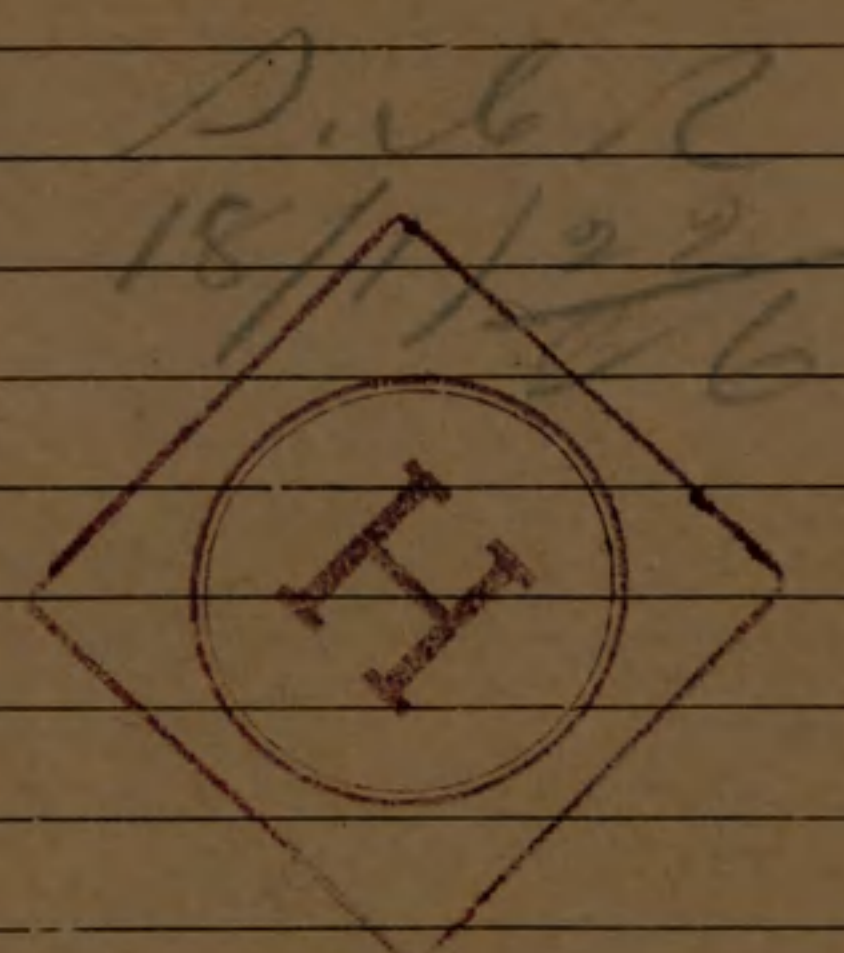
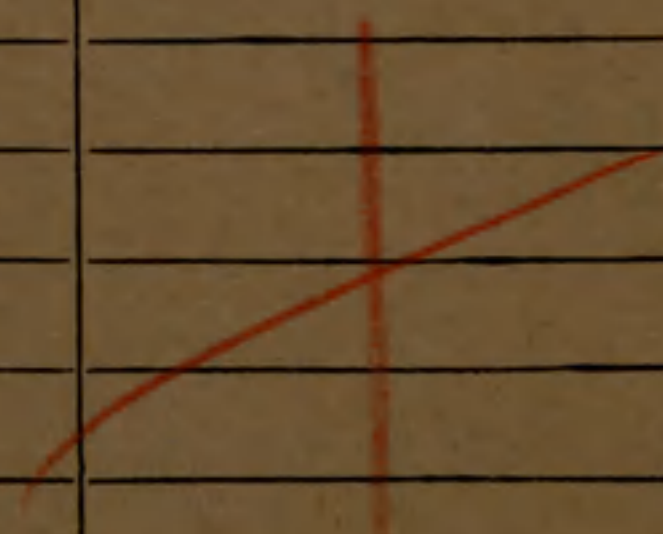
9-17

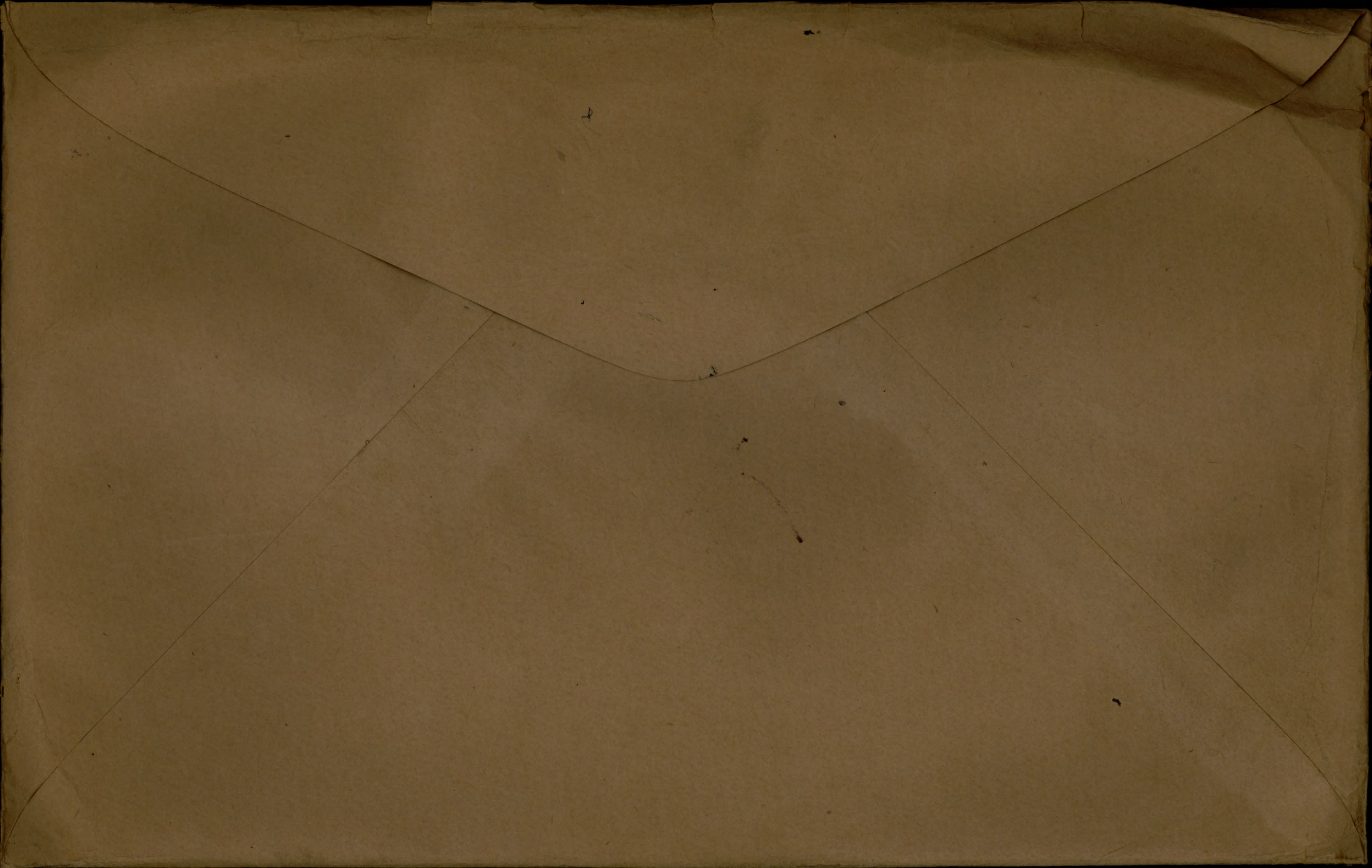
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5-17

2

403265





ATTESTATION PAPER.

No. 2 CONSTRUCTION, B'n. C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *B. Butler*
- 1a. What are your Christian names? *George Horace*
- 1b. What is your present address? *76. Alhermarble St. Halifax N.S.*
2. In what Town, Township or Parish, and in what Country were you born? *Halifax Nova Scotia*
3. What is the name of your next-of-kin? *Mr. Smith (O.K.)*
4. What is the address of your next-of-kin? *76 Alhermarble St. Halifax N.S. (O.K.)*
- 4a. What is the relationship of your next-of-kin? *brother (O.K.)*
5. What is the date of your birth? *July 23rd 1884.*
6. What is your Trade or Calling? *Labourer*
7. Are you married? *Married (widower)*
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? If so, state particulars of former Service. *No*
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? *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *George Horace Butler*, 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.

George Horace Butler (Signature of Recruit)
Date *August 2nd* 1916. *Robert L. Boehlk Supt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *George Horace Butler*, 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.

George Horace Butler (Signature of Recruit)
Date *August 2nd* 1916. *Robert L. Boehlk Supt* (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 *Halifax* this *2nd* day of *August* 1916.
[Signature] (Signature of Justice)

Description of George Horrace Butler on Enlistment.

Apparent Age... 32 years 1 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 5 1/2 ins.

Chest measurement { Girth when fully expanded..... 36 ins.
 Range of expansion..... 2 ins.

Complexion..... Dark

Eyes..... Black

Hair..... Black

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

Weight 145 lbs.

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..... August 2nd 1916

B. G. Johnson
Capt. a.m.c.
 Medical Officer.

Place..... Halifax N.S.

*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.

..... George Horrace Butler..... 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.

D. H. Sutherland..... (Signature of Officer)

AUG 10 1916

Date..... 1916

CANADIAN EXPEDITIONARY FORCE

M. D.
6.

War Service Badge Issued,
Class. No. 310118

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 931077 (Rank) Pte

Name (in full) Butler George Horace enlisted in
the 2nd Construction Bn.

CANADIAN EXPEDITIONARY FORCE at Halifax on the 2nd
day of August 1916

HE served in France & Belgium - 2nd Const Bn.

Demobilization.

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

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

Age 34 9/12 Yrs

Height 5' 5 1/2"

Complexion Dark

Eyes Black

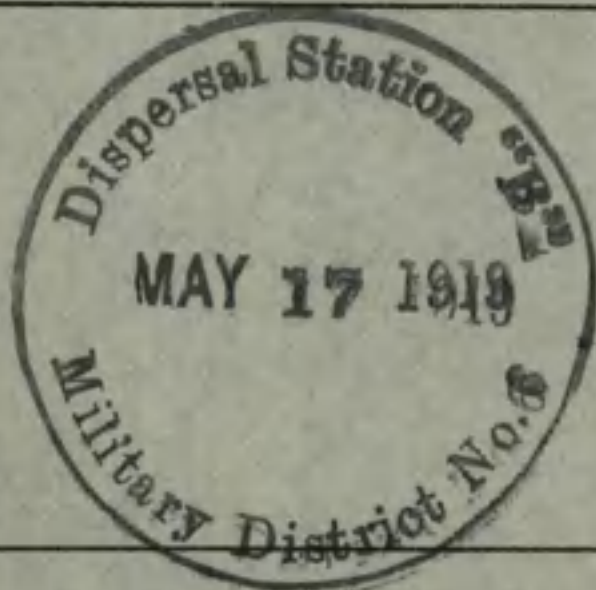
Hair Black

Marks or Scars None

George Horace Butler
Signature of Soldier

W. J. Smith
O. C. Dispersal Station "B"
Issuing Officer

Date of Discharge



Rank

Date MAY 14 1919 1919

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____

Name (in full) _____

the _____

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

day of _____

HE served in _____

and is now discharged from the _____

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

Age _____

Height _____

Complexion _____

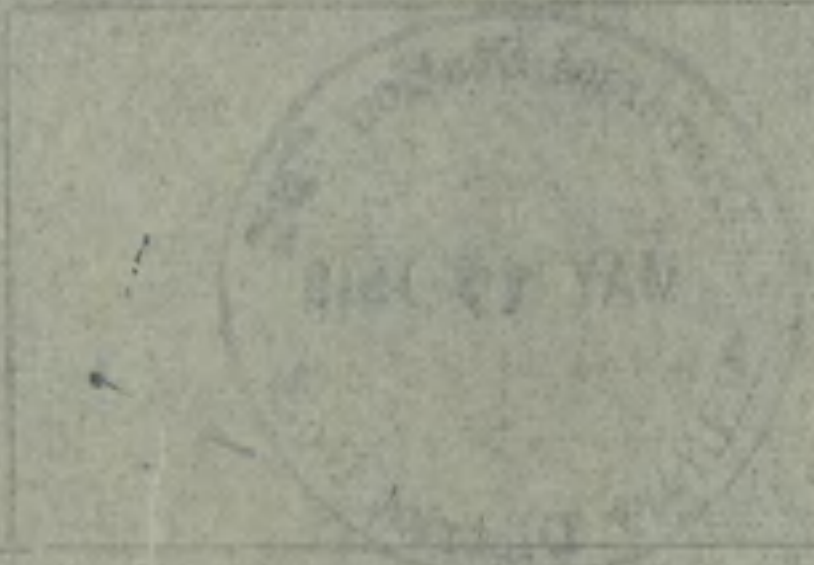
Eyes _____

Hair _____

Marks or Scars _____

Signature of Soldier _____

Date of Discharge _____



Rank _____

Rank _____

Date _____

19 _____

A. B. — As no duplicate of this Certificate will be issued, any person having same is requested to forward same in unopened envelope to the Secretary, Military Department, Ottawa, Canada.

M. F. B. 107
1918-1919
M. F. B. 107

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

1184

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names *George Horace* 2. Surname *Butler*
- 3. Rank *Pte* 4. Original Unit *2nd Construction* 5. Reg. No. *931077*
- 6. Address, in full, to which future payments of gratuity are to be forwarded *Royal Bank of Canada
Halifax*
- 7. Date of enlistment in the C.E.F. *Aug. 2, 1916*
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *none*
- 9. Relationship of such dependent *not applicable*
- 10. Address, in full, of such dependent *not applicable*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *not applicable*
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *2 years 8 mos no 2 Construction Co*
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *no*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *no*

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ORIGINAL
MEDICAL HISTORY SHEET

Surname Butler Christian Name George Horace

Examined { on 2nd day of August 1916
 at Halifax N.S.
 Birthplace { City or Town Halifax
 County Nova Scotia

Approved by B. Johnson
 Rank Capt. A.M.C.

Apparent age 32 years
 Trade or occupation Labourer
 Height 5 feet 5 1/2 Inches
 Weight 145 lbs.
 Chest measurement { Minimum 34 inches
 Maximum expansion 36 inches

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

Physical development Good
 Small-pox Marks nil

Vaccination Marks { Arm ~~Right~~ Left
 Number one

Date	Result	VACCINATIONS
<u>4/17</u>	<u>1st</u>	<u>San Murray</u> M.O.
		M.O.
		M.O.

When Vaccinated last 1900
 (a) Marks indicating congenital peculiarities or previous disease

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>24/10/16</u>	<u>2 x R</u>	<u>H.V. Keel Mays M.O.</u> M.O.
<u>31/10/16</u>	<u>2 x R</u>	<u>H.V. Keel Mays M.O.</u> M.O.
<u>6/11/16</u>	<u>1 x R</u>	<u>H.V. Keel Mays M.O.</u> M.O.

(b) Slight defects but not sufficient to cause rejection

Enlisted on 2nd day of August 1916 at Halifax Nova Scotia

CORPS	REG'TL NUMBER	HABITS	DATE
No. 2 CONSTRUCTION, M.N. C.E.F. Transferred to <u>931077</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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.

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. No 2 Construction Batta.

(2) Regimental Number 931077

(3) Full Name of Soldier George Horace Butler

(4) Place of Birth Halifax N.S.

(5) Are you married, or not? yes

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

(b) Present Postal Address 76 Albermarle St.
Halifax N.S.

(7) Are you a widower? no yes

(8) Have you any children? —

If so, give number of boys and girls. —

Also their names and ages. —

(9) Is your Father alive? no

If so, state name and address

(10) Is your Mother alive? no

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

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

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

Wife Hef Brok Frank Smith
Mrs Ethel Butler
76 Albermarle St Halifax N.S.

(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? Yes

If so, in what Company? London Life

Have you made arrangements for payment of your Insurance premium? Yes

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

Date OCT 23 1916

C. H. Reis Capt
ja Officer Commanding.

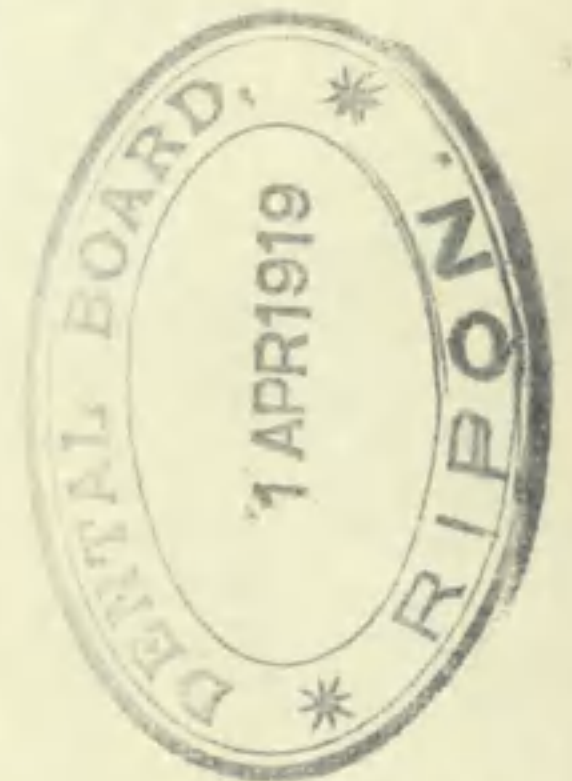
CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BUTLER E. H.
REGIMENT N.S. R.D. RANK PTE. No. 931077
Date of Examination in England 1 4 19 Date of Examination in France _____

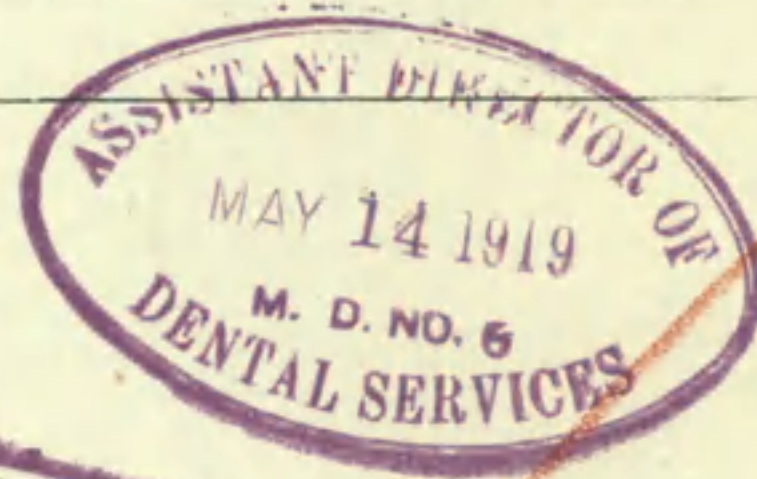
DIRECTIONS TO DENTAL OFFICERS

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS _____
2. EXTRACTIONS 3.
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper 3. 11.
 - (c) Full Lower _____
 - (d) Part Lower _____

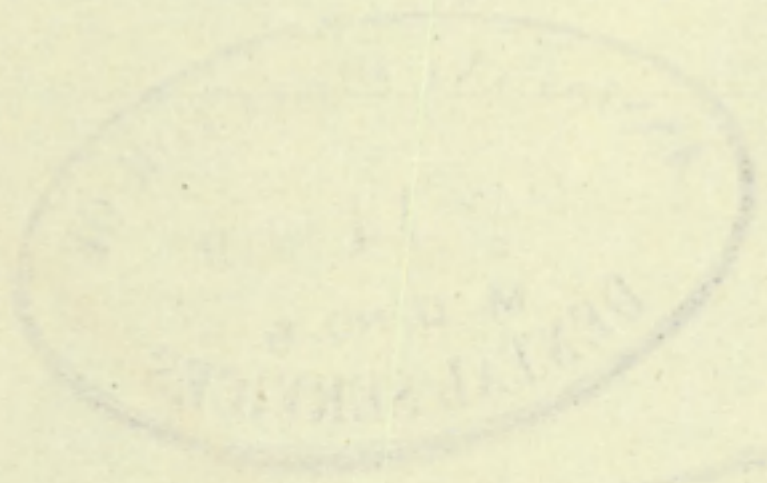


HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (a) In Canada _____
- (b) In England _____
- (c) In France _____

Signature of Dental Officer R. Ponce



- 8 -

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

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

No. 931077 Rank Pvt. Surname BUTLER
(Given name in full)
Geo H.
 Unit or Corps M.S. P.I. Birthplace Halifax N.S.

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

I. GENERAL DESCRIPTION:

Physique Weight 145 lbs. Height 5 5 1/2 ft. Colour of Eyes black
 Nutrition good
 Pulse 48 regular
 Condition of arteries soft
 Vision Rt. 6 Left 6
 Hearing (conversational voice) Rt. 21 ft.
 Left 21 ft.

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

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of Mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

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

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at *Repton*.....(Overseas)

Date *12/3/19*..... Signed *John May*.....M.O.

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

Signature *George Horace Butler*.....

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada).

Date Signed M.O.

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

Signature

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

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

931077 Pte Butler G. H.

Sheet 2

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1137 of 1918. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					
			Proceeded to England		23-2-19	BROOK 20-11-11 Pt II. O. 69 aft 7-8-19
						Lieut Capt for Lieut-Col. Off. of records O.M.B.C.

Nothing to be written in this margin.

18
312
1

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—I.
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/8

HWV(RS77)

5/19

250,000

P2364

W1071

19

28

8

(1)* Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------	----------------

(10) Date of Enlistment (b) (<i>Insert date of being called up for service in the case of Recruits under the Derby Scheme or Military Service Act.</i>) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service } (14A) Religion	(11) Engagement (c)	(13) Special conditions (if any) of enlistment (d)
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------	----------------------------------------------------

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(22) Extended { (23) Re-engaged { (24) Miscellaneous entries:—
---------------------------------------------------------------------------------------------	---------------------------------------------------	----------------------------------------------------------------------

Signature of O.C. Unit to which the man is first posted.

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 40 of 1918). (b) Whether voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.
 N.B.—(1) Note (e) above refers to heading No. 14.

War Service Badge
Class "A" No.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps _____ Regimental Number 931079

*Substantive Rank _____ Surname Butler Christian Names George Horace

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

Nothing to be written in this margin.

A1834 W.6425-P1600 500.00 10 18 G.W.P.Co.3973.

To be folded on this line.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
17-5-17	Arrived in England via S.S. Southland 2.C.C.C.	Pt II O# 1159 d/14-6-17	Arrived in France	Field		
	"	Pt II O# 2 d/11-2-19	Forfeit full allowance & is placed under stoppage pay. @ rate 50 ^d deurs while in hap for 13-12-18 to 2-2-19	"		
12-2-19	"	Pt II O# 3 d/12-2-19	S.O.S. trans. to Records List			
24-2-19	N.S.R.D.	DO# 44 d/25-2-19	J.O.S. fr. 2 nd C.C.C.	Ripon		C.R.L. DO# 12 d/14-2-19
4- APR 1919	N.S.R.D.	78	S.O.S. To M.D. No 6	Ripon	14-4-19	

[Signature]
LIEUT.
FOR LT: COL: I/C RECORDS, C.O.M.F.

[Signature]
OFFICER IN CHARGE RECORDS,
NOVA SCOTIA REGTL. DEPOT.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			<p>Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. <u>6/4/19</u>. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No: _____</p> <p><i>Amey L. Rydman Lt</i> Commanding _____ Wing, Kinmel Park Camp.</p> <p>EMBARKED S.S. "CASSANDRA" MAY 2 1919 DISEMBARKED <i>for. O.C. #23. P.C.S.</i></p>			
			<p>2/3/19. T. O. S. No. 6 D. D. from..... <u>6/5</u>..... and posted..... <u>Disp St B. Hef's D.O. 136.</u></p> <p>17/5/19. <u>S.O.S. on Discharge.</u> " " 136</p>			
						<p><i>Allen</i> Capt. & adf</p> <p><i>Cloud</i> Lieut. Officer 1/0 Records No. 6 D.D.</p>

Nothing to be written in this margin.

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

aww

M. F. W. 54. (A. F. D. 1035)

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *2nd Construction Batt. C.E.F.*

Regimental No. *931077* Rank *pte* Name *George Horace Butler*
C. E. F.

Enlisted (a) *2-8-16* Terms of Service (a) *period of war* Service reckons from (a) *2-8-16*
6 months

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) :

CERTIFIED CORRECT.
 17/1/17
 6 JUN. 1917
 CAN. RECORDS, LONDON.

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				
		<i>Embarked, Canada</i>	<i>Halifax, N.S.</i>	<i>25/3/17</i>	
		<i>Disembarked, England</i>	<i>Liverpool</i>	<i>7/4/17</i>	
		<i>Proceeded Overseas</i>	<i>Seaford</i>	<i>17/5/17</i>	<i>Pl 2 20#</i> <i>Grayer Capt</i> <i>Pl Capt & Capt</i>
		<i>Landed in France</i>		<i>17-5-17</i>	<i>N.R.</i>
<i>4-6-18</i>	<i>oc</i>	<i>Still with unit</i>	<i>Field</i>	<i>4/6/18</i>	<i>K 9. 18/11/84</i>
<i>29.6.18</i>	<i>do</i>	<i>Granted 14 days leave</i>	<i>at</i>	<i>29.6.18</i>	<i>li 13.7.18 B 22</i> <i>8 July 1918</i>
<i>20.7.18</i>	<i>do</i>	<i>Rejoined from leave</i>	<i>Field</i>	<i>16.7.18</i>	<i>B 213</i>
<i>20.7.18</i>	<i>Gen Hosp</i>	<i>v. d. g.</i>	<i>admitted Gen Hosp</i>	<i>24.7.18</i>	<i>108065</i>
<i>27.7.18</i>	<i>do</i>	<i>v. d. g.</i>	<i>To Hospital Field</i>	<i>24.7.18</i>	<i>B 213</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

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				
19.8.18	Jura Host	To Duty		19.8.18	W. 803/H 622
24.8.18	Mr	Repaired from Hospital	Sued.	19.8.18	B213.
24.8.18	Do	Defect Field allowance is placed under stoppage of pay at rate of 50 cents per diem while in hospital from 24.7.18 to 19.8.18 (27 days)			B213 p. 51 of def 1918
11/12/18	Do	Trans. to England & posted to U.S. Reg. Dept.	Bransford	11/12/18	PT 344
					W. Hewett Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17/12/18	A. S. R. D.	T.O.S. attached to 2nd C.C. Co for 9th Division	R. Short	14-12-18	D.O. 2005
2-2-19	CHS	Arrives at CHS from 51 Gen Hospital	Sued	2-2-19	B.E. 4300.
2-2-19	S/Gen	Defect Field allowance is placed under stoppage of pay at rate of 50 cents per diem while in Hosp from 13-2-18 to 2-2-19 (52 days)			W. 803/1643/10999 p. 51 of def 1919.
12-2-19	A.A.G.	D.O.D. B.G.B (col) on trans to bay & Record List		12-2-19	(du sec 9.11.2 3rd Ech Pt 4 03 d/ 12-2-19
"	"	D.O. bay Record List on trans from C.C. (col)		13-2-19	" " " Pt 4 012 d/ 14-2-19

V.D.S. Clinic,
Camp 34, RIFON.

931077. Butler J.H. Pte.

19.3.19.

The marginally named other rank has received a full Army course of treatment for V.D.S. and is free from syphilitic lesions. He may be permitted to proceed to Canada, where he should be placed under observation and given treatment, if necessary.

H.K. Bates

Major, C.A.M.C.
officer i/c V.D.S. Clinic

300 13-6-17
Form ADMS, B12

Return showing inoculation state of
officers and other ranks.

Army Council Instruction No.1339 /1916

Unit _____	Strength		Number Inoculated		Remarks
	Officers	Other Ranks	Officers	Other Ranks	

Date

Signature

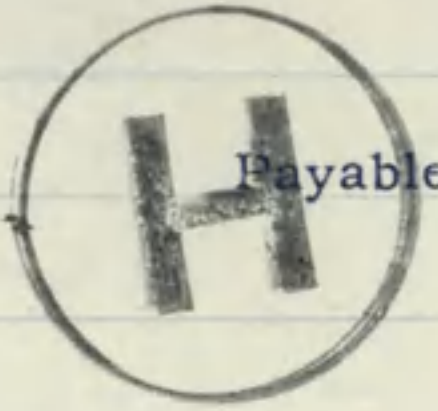
JM

Account book

Rank **BUTLER, George Horace.** Reg'l No. **931077**
 Unit **No. 2 Const. Bn.** If in perm. Corps, }
 What Unit? }
 Married or Single **Widower.**
 Place and Date of Enlistment **Halifax N.S. 2nd Aug 1916.** Place of Birth **Halifax, N.S.**
 Name and Address, Next-of-Kin **Frank Smith.**
76 Albermarble St., Halifax, N.S. Relationship **Half-brother.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to



B. N/E. R.B. No. **9033**
 Relationship File R.L.
 Category **OP' CAN**

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—9546-16.

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 via S. J. Southland		7.4.17	<i>Aw.w.w.</i>
14-6-17 [#]	2 nd C.C.C.	Arrived in France	Field	17-5-17	115
11-2-19	2 nd C.C.C.	forfeit field allowce + is placed under stoppage pay at rate 50 c p diem while on stop from 13-12-18 to 2-2-19			2
12-2-19	2 nd C.C.C.	LOS + transferred to C. Recor. Lt		12-2-19	3/b.h. Do. 12. 14. 2. 19)
25.2.19	NSRD.	TOS from 2 nd ccco.	" Ripon	24.2.19	44.
5-4-19	NSRD	LOS to no 6 m. D. W. Phyl.		5-4-19	78497d/7.4.19 <i>msw</i>
		Sailing No 57d/ 3-5-19	Disp Area B		Emb Arr 3
6-5-19	M.P. 6	S.O.S. to Canada	pte Phyl	2-5-19	126

A.F.B. 103 CHECKED
 28 MAY 1917

MS

Misc

SEPARATION ALLOWANCE

Sheet No. 2.

E. Butler

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

Butler G.H.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<i>X14352</i>	<i>19</i>	<i>19</i>
Sept.		<i>B 15311</i>	<i>20</i>	<i>20</i>
Oct.		<i>N 18646</i>	<i>20</i>	<i>20</i>
Nov.		<i>P 21702</i>	<i>20</i>	<i>20</i>
Dec.		<i>P 25147</i>	<i>20</i>	<i>20</i>
Jan.	1917	<i>27762</i>	<i>20</i>	<i>20</i> <i>27762 cancelled per add 31/1/17.</i>
Feb.		<i>X</i>	<i>X</i>	<i>20 no cheques woman reported</i>
March		<i>X</i>	<i>X</i>	<i>dead.</i>
April		<i>X</i>	<i>X</i>	
May		<i>X</i>	<i>X</i>	
June			<i>XX</i>	
July			<i>X</i>	
Aug.			<i>X</i>	
Sept.			<i>X</i>	
Oct.			<i>X</i>	
Nov.			<i>X</i>	
Dec.			<i>X</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$ 99⁰⁰ WAC

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

2-8-16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

59

SEPARATION ALLOWANCE

Name *Ethel Butler,*
Address *76 Albermarle St.
Halifax, N.S.*

Name of Soldier *Butler, Geo. Horace*

Regtl. No.

Rank *Pte*

Corps *No 2 Construction Batt. C.E.F.*

Relation to Soldier } *Wife*
wife, child or mother }

To what Corps belonging }
when called out } ✓

PAYMENTS

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



12 207100

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

BUTLER

G.H.

931077

RANK
Pte.

UNIT

N.S. 2 Co. Con.

TROOP

BATTY

HOSPITAL

DATE OF ADMISSION

C.F.C. Hos. La Joux Jura

24-7-18

1. S-1 Gen H Staples

HOSP. 13-12-18

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

V.D.G. ^{no}
mosch.

1.

2.

3.

DISPOSITION

C.L. 31-7-18 A278
" 24-8-18 A300
20-7-18 A401.
10-2-19 A440.

Dis. 19-8-18

DATE

" 2-2-19

REMARKS

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

.....

2.

.....

3.

.....

4.

.....

5.

.....

6.

.....

7.

.....

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1278	Can. Ar. Corps. L. J. Ford	24-7-18	(2 Con) U.D.G.
1300	Disch	19-8-18	
1401	51 Gen. Staples	13-12-18	736
1440	Discharged	2-2-19	142

NAME

Butler G

REGT'L No.

931077

RANK AND CORPS

Pt.

H. Q. FILE No. 649.

CABLE

NATURE OF CASUALTY

FOLLOWS
No.

NO.

DATE

FOLLOWS

From Halifax per S.S. Southland 28-3-17.

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

32

YEARS

1

MONTHS

HEIGHT

5

FEET

5 1/2

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark

EYES

Black

HAIR

Black

DISTINGUISHING MARKS

Not Stated

MEDICAL EXAMINATION.

PLACE

Halifax, N.S.

DATE

Aug 2, 1916^{not}

Present Address. 76. Albermarle St. Halifax N.S.

SURNAME.

Butler.

B-6 CARD NO.

v

CHRISTIAN NAMES

George Horace.

FOLL.

REGL. NO.

931077.

RANK

Pte.

UNIT

No 2. Construction (coloured.)

Bn.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Butler, Mrs. Ethel.

RELATIONSHIP TO SOLDIER

Wife.

ADDRESS

76. Albermarle St, Halifax. N.S.

COUNTRY OF BIRTH

Canada. Halifax. N.S.

DATE

July 23. 1884. nd

PLACE OF ATTESTATION

Halifax. N.S.

DATE

Aug 2. 1916. nd

*R/b. 13-5-19. nd 316 Pte
32.*

cash

Number

931077

Rank

M. Plt
13

yes

Surname

BUTLER

Christian Name

George Horace

Units

C.O.L.C.C.

Theatre of War

France

Date of Service

17-5-17

Remarks

188 Reynard

Latest Address

~~105 Market Street~~
Halifax
N.S.

Roll No.

200m.-6-21.

Page 21272.

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

DEPT DEU 5 192
REG. NO. 5427

No. 931077. RANK Pte

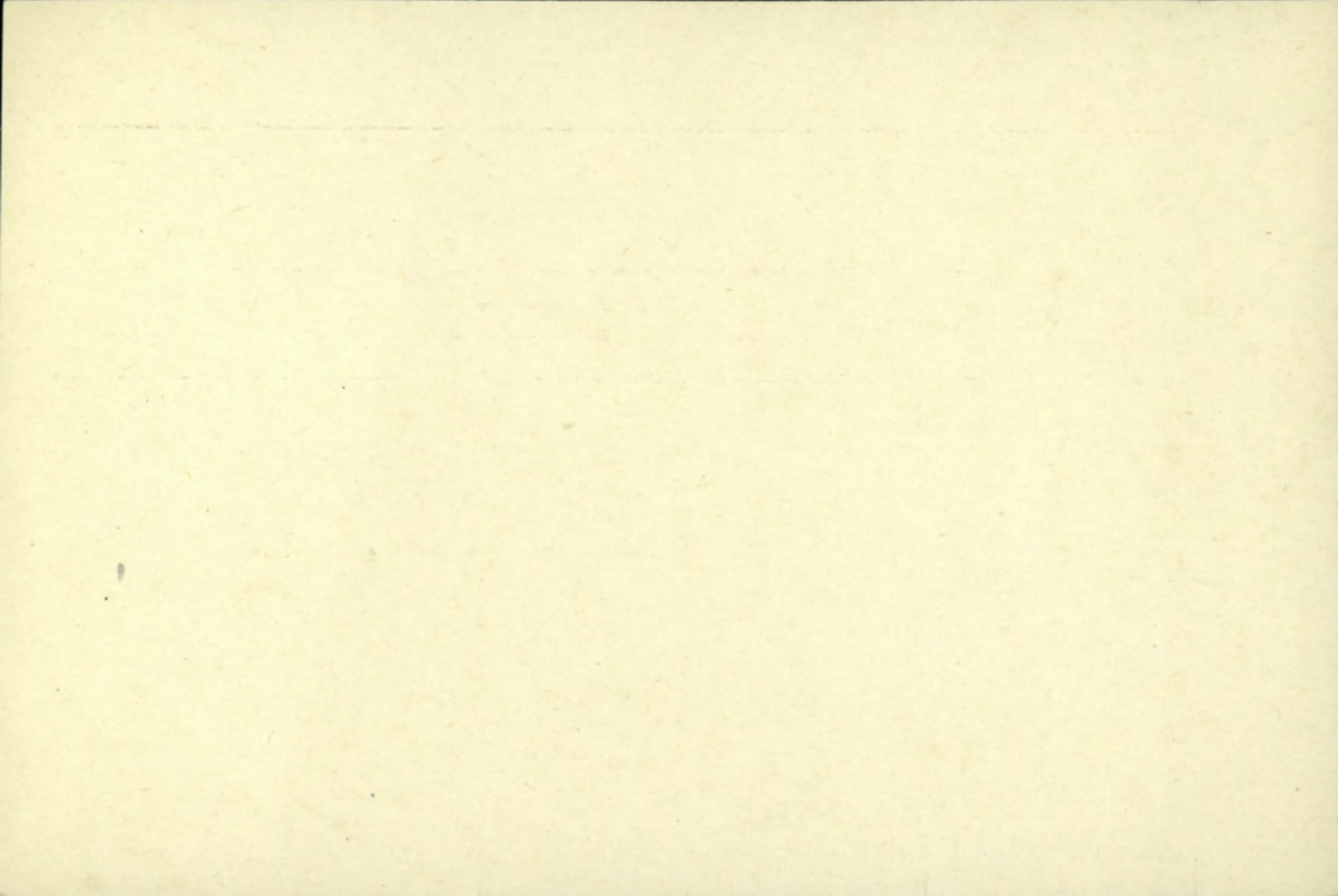
NAME Butler George Horace

T. O. S. 2-8-16
D.O. 6 7-8-16

UNIT No 2 Construction Battalion

M. D. 6

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916 Aug 2	1916 Aug 31	n		
	Sept.	n.		
	Oct.	n.		
	Nov.	✓		
	Dec.	✓		
1917	Jan 1917	✓		
	Feb.	✓		
	Mar.	n		



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

2-8-16

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20			
----	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____
 Rank *Pte.* Promoted _____ Reverted _____ Discharge _____
 Soldier's Name *Geo. Horace Butler.*
 Battalion *No 2 Bonstrm, Battrn.*
 Beneficiary *Ethel Butler.*
 Relationship *wife.*
 Address *76 Albermarle St. Halifax. N.S.*

Name _____
 Address _____
 Change of Address _____
 1 _____
 2 _____
 3 _____
 4 _____

	Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1916	Dec		99	99	99	No cheques, woman reported dead. S.A. a/c Susp. A.P. No a/c

LIST OF DISCHARGE DOCUMENTS.

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

- 1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
- 2. Casualty Form (M.F.B. 103).
- 3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
- 4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
- 5. Field Conduct Sheet (A.F.B. 122).
- 6. Last Pay Certificate (M.F.W. 44).
- 7. Certificate of Discharge (M.F.W. 218a).
- 8. Certificate of Discharge (M.F.W. 218a).
- 9. Certificate of Discharge (M.F.W. 218a).
- 10. Discharge Certificate (M.F.W. 218a).
- 11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
- 12. Last Pay Certificate (P. 171).
- 13. Pay Book (P. 61).
- 14. Warrant Card (Form M.F.W. 2595).
- 15. ...

Group A
 Checked by No. 24
 Date 9/4/19

Group
 Checked by No.
 Date

War Service Badge
 Class "A" No. 310118



SHORT FORM.

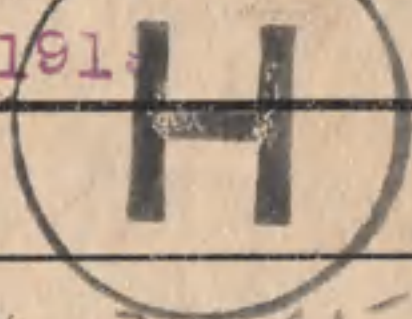
PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M. D. 6.

22/10/19
 31 BARKE S.S. CASSANDRA
 MAY 2 1919

DISSEMBARKED



1. No.	<u>931077.</u>
2. Rank.	<u>Pte.</u>
3. Name.	<u>Butler George Horace.</u>
4. Unit.	<u>Res. M.R.D. Orig. 2nd Const. Corp</u>
5. Date of Discharge	<u>17 5 19</u> Place
6. Reason for Discharge	<u>Demobilisation.</u> <u>Went of his Step-Brother (F. K. Smith)</u> <u>Occupation, Labourer Group 7</u> <u>Service in France, 21 Mos Group</u> <u>Category, A.</u>
7. Authority.	<u>R.O. 1420</u>
8. Proposed Residence after Discharge.	<u>Halifax, N.S.</u> <u>105 Market St.</u> Dispersal Station B
9. CERTIFICATE TO BE SIGNED BY SOLDIER.	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? <u>George Horace Butler</u> Signature of Soldier.
10. CONFIRMATION.	The discharge of the above named man is hereby confirmed. <u>HALIFAX, N.S. MAY 14 1919</u> Place Date <u>W. H. ...</u> Major Signature <u>O. C. Dispersal Station "B"</u> (O. C. Discharging Unit.)

Cassandra May 12, 19
 PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
 DAILY RATE OF PAY AND ALLOWANCES

M. OR S. _____ REGT. No. *931077* RANK *Pvt.* NAME (IN FULL) *Butler G. B.* 1184
 (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN _____ RELATIONSHIP _____ ORIGINAL UNIT *U.S.A.* IF IN P.F. WHAT UNIT? _____
 ADDRESS _____ PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE _____ ASSIGNED PAY \$ *1.00* DATE EFFECTIVE _____
 TO WHOM PAID *Hub* RELATIONSHIP _____ PAYABLE TO _____ RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____
 ADDRESS _____ ADDRESS _____
 STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____
 DISCHARGED *Hub* PLACE DATE REASON AUTHORITY IDENTIFIED TO POST DISCHARGE PAY
Hub *17-5-19* *Leav.* *Leo. 134*

E.L.P.C.

Royal Bank of Canada

BALANCE FROM PREVIOUS ACCOUNT	MONTH	NO. OF DAYS	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
			AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT		
			\$	C.			NO.	DATE	NO.	DATE	NO.	DATE					\$	C.		\$
	<i>3/1/19</i>				<i>369.79</i>															<i>By Bal. Certificate</i>
	<i>17/5/19</i>	<i>47</i>	<i>10</i>	<i>51</i>	<i>70.00</i>	<i>526.49</i>				<i>487.50</i>	<i>47.69</i>			<i>38.93</i>		<i>526.49</i>				<i>By W.S. G. Bill</i>
					<i>35.00</i>															<i>Adm. B. Bill</i>
					<i>70.00</i>															<i>Adm. for May</i>
																				<i>Adm. for 6.</i>
					<i>W.S.G. S.A.</i>															<i>1st Comd W.S.G.</i>
					<i>350.00</i>	<i>350.00</i>														<i>398373 17-6-19</i>
																				<i>888199 16-7-19</i>
																				<i>1123112 14-8-19</i>
																				<i>1496158 17-9-19</i>
					<i>350.00</i>	<i>350.00</i>														

Completed
 Certified that all payments due on this acct. have been paid.
H. H. Allison
 For Senior Officer Pay Services, M. D. 6

