

ATTESTATION PAPER.

No. 73782

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Benjamin Bell Gray
2. In what Town, Township or Parish, and in what Country were you born?..... Elcan Scotland
3. What is the name of your next-of-kin?..... H. J. Gray
- What is the address of your next-of-kin?..... London Daily Telegraph Paris
- What is the date of your birth?..... July 30 1887
- What is your Trade or Calling?..... Civil Service
7. Are you married?..... no
8. Are you willing to be vaccinated or re-vaccinated?..... yes
9. Do you now belong to the Active Militia?..... yes
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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} yes
- (Signature of Man).
..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Benjamin Bell Gray, do solemnly declare that the above answers made by me to the above questions 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.

..... (Signature of Recruit)

Date Oct 23 1914. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Benjamin Bell Gray, 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.

..... (Signature of Recruit)

Date Oct 23 1914. (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 Rejma this 23 day of October 1914.

..... (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

..... (Approving Officer)

Description of Gray Benjamin B. on Enlistment.

Apparent Age 27 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. 11 1/2 ins.

Birthmark over first sacral vertebra

Chest measurement { Girth when fully expanded 37 1/4 ins.
 Range of expansion 4 ins.

Complexion Dark

Eyes Hazel

Hair Dark

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

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 23 1914.

Place Regina

[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.

Benjamin B. Gray 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.

[Signature] (Signature of Officer)

Date Oct 23 1914.

[Signature]
OC 95 Regt

KA 20.12-18

Officers
DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Copy Will
card

1149
1122 - 1
misc - 2
B. card - 1

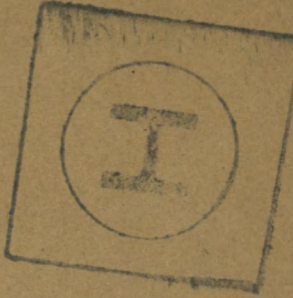
2-496
Form #473782

Name **GRAY BENJAMIN BELL**

Regt. No. ⁴³⁷⁸² Rank *Serjeant*

Corps *29th Bn. (32nd Bn)*

Kind 10-4-17



W

24227



2
2-2
2-2

M. F. W. 62.
Form 9-16.
H. Q. 1772-39-935.

MEDICAL HISTORY SHEET.

Surname Gray Christian Name Benjamin Bell

Examined { on 23 day of Oct 1914
 at Regina
 Birthplace { City or Town Regina
 County Saskatchewan

Approved by J. L. [Signature]
 Rank Capt M.O.

Apparent age 27
 Trade or occupation Civil Servant
 Height 5 Feet 11 1/4 Inches.
 Weight 1 Lbs.
 Chest measurement { Minimum 37 1/4 inches.
 Maximum expansion 4 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.
		M.O.

Vaccination Marks { Arm. Right. Left. +
 Number 3
 When Vaccinated last Feb 3/15
 (a) Marks indicating congenital peculiarities or previous disease

Date	Result	VACCINATIONS.
	<u>+</u>	<u>J. L. [Signature] Capt</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/12/15</u>		<u>J. L. [Signature] Capt</u> M.O.
<u>13/2/15</u>		<u>J. L.</u> M.O.
<u>23/2/15</u>		<u>J. L.</u> M.O.

Enlisted on 23 day of Oct 1914 at Regina

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>28th BATTALION</u>	<u>73782</u>		
Transferred to.. ..	<u>32nd Battalion C.E.F.</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.

"C"

Canadian

Regtl. No.

73782

Rank.....

Pte

Cadet Rank

Regiment.. *Sask*

32nd Canadian Expeditionary Force

Religion

Presbyterian,

Occupation

Journalist

Date posted to Bn.....

31st March 1916

Documents Received.....

W. 3068

Name & address of next of kin..

(B) F.H.T. Gray C/O B. Bell. U.S.

13, Hill Street.

EDINBURGH

PARTICULARS OF SERVICE IN BATTALION.

DATE.	CASUALTY, ETC.	REMARKS.
4.8.16.	Discharged to home 4.8.16 in 3rd Batta. Cameron H'drs Inver Gordon. Auth: Wobetter 43/40/42 with sent dated 14.8.16	

REGT'L NO

H. Q. FILE NO. 649-

NAME

Gray Benjamin Bell

RANK AND CORPS

Lieut.

29th Bn. (form 28th Bn)

FOLLOWS

NO.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

France.

M1834 13-4-17

Killed in action April 9th - April 10th 1917.

A7B.20900 17-4-17

Rouen

(Date rec. 28-5-17) Killed in action 10-4-17.

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

648

Rept from Gen HQ

10-4-17

Killed in action

10/11

NAME *Gray, Benjamin B. ell*

H. Q. FILE No. 649-

REGT'L. No. *73728*

RANK AND CORPS

Pte.

28th Battalion

CABLE

NO.

DATE

NATURE OF CASUALTY

non Sicul

NO. *1358.*

FOLL *X*

Dead

YK

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

80 O. Co. 28th Battalion reports 15-11-15 sick

✓ 80 Discharged to duty 15-11-15 sick

Name GRAY. B.B.

Rank PRIVATE.

Reg. No. 73728

Unit 28th. BATTALION:

CHESHIRE LANCERS

Next of Kin T.H.T.Gray. C/O.London Daily-Telegraph.
Paris. France.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-11-15.	ADMITTED TO HOSPITAL.		SICK.	80.		
15-11-15.	DISCHARGED TO DUTY.		III	80.		

Number

Rank

Lieut

~~B~~
✓

Surname

GRAY.

Christian Name

BENJAMIN. BELL.

Units

Theatre of War

France

Date of Service

5-10-16

23-11-16

10-4-17

Remarks

B.C.R.

Latest Address

Miss Norrothea C. Gray,
8, Lennox St.,
Edinburgh Scot.

Roll No

B
Page 10776

Comm Insp. Army

4.8.16

SCROLL DESP.

~~FEB 1 1921~~

221761

Plague Desp.

~~DEC 22 1921~~

Regd. No.

P21987

✓ GRAY, Benjamin Bell, Lieut.

✓ 29th Bn.

AM

MEDALS & DECORATIONS

(Sister)

Miss Dorothea Elizabeth Gray
8 Lennox St., Edinburgh,
Scotland.

PLAQUE & SCROLL

Mrs. Cecilia C. Fraser (Elder sister)
19 Falkner Sq., Liverpool, Eng.

Serial No. 782541

MEMORIAL CROSS

No one entitled.

{ Orig. 14/15 star pte 28th Bn # 73782.
B.W.M.

22766

noted w. O. cost 121
21 JH

DEC 21

Name GRAY Rank Lieut.

Unit Benjamin Bell
29th. Bn.

Reg. No.

A 7 B 104-93

Next of Kin Miss D. E. Gray (Sister) Bureau de Control

16 Rue Chauveau Lagarde

Paris France

Date	Movement	Place	Casualty	L. No.	Filed N/K O.	W.O. List
------	----------	-------	----------	--------	--------------	-----------

10.4.17.	Rep. from G. H. Q.	KILLED IN ACTION	648	M1834	14.4	
----------	--------------------	------------------	-----	-------	------	--

04544

No. *482*
 73782 *Sub. paylnk* RANK *Pte*

NAME *Gray Ben* *B.*

T. O. S.

UNIT *28th Battalion*

M. D. *10*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i> <i>Nov 9</i>	<i>1914</i> <i>Nov 30</i>	<i>✓</i>		
<i>1915</i> <i>Dec</i>	<i>1915</i> <i>Jan</i>	<i>✓</i>		
	<i>Feb</i>	<i>✓</i>		
	<i>Mar</i>	<i>✓</i>		
	<i>Apr</i>	<i>✓</i>		
	<i>May</i>	<i>✓</i>		

UNIT SAILED
MAY 29 1915



SURNAME.

Gray

602-7-97

CARD NO.

D

CHRISTIAN NAMES

Benjamin Bell

*S.O.S Dis 4-8-16
Comm - FOLL - Imp A.
page 39. 16-25-3
8-16-18
Date of last 4-8-16
auth: *[Signature]* 13-4-17
O.H.S.*

REGL. No.

73782

RANK

~~*Det*~~ *Lieut.*

UNIT

~~*28th*~~ *29th Bn.*

auth: M. 18004-13-4-17.

FORMER CORPS

nil

NAMES IN FULL

Gray, L. H. L.

NEXT OF KIN.

CHANGE OF ADDRESS

RELATIONSHIP TO SOLDIER

ADDRESS

*cp "London Daily Telegraph"
Paris, France*

COUNTRY OF BIRTH

Scotland, Elgin

DATE

PLACE OF ATTESTATION

Regina, Sask.

DATE

Oct. 25th 1914

Pod 1/3 29-5-15. 11

Sailed from Montreal ^{Per} S.S. "Northland" 29/5/15

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Present Address.

Gray.

B.

B.

THE D.M.S.

REPORT

NAME

Lieut.

29th. Bn.

IN THE YEAR 1917

()

IN THE YEAR 1918

()

()

()

()

KILLED IN ACTION:-. 10-4-17.

IN THE YEAR 1919

()

()

()

()

()

C.L. 14-4-17. 648.

IN THE YEAR 1920

NAME

A.M.D. 2 DEPT.

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

THE D.M.S. REPORT

R.

Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

Surname

Christian Name or Names

Reg. No.

Gray.

B. B.

73728

Rank

Unit

Co.

Troop

Batty.

PC

28th Batt.

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Sick

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: if more than one state present

DISPOSITION

Date

Discharged Duty

15.11.15

REMARKS

C.L. 30.11.15

80(2).

O.C. 28th Batt. Reports.

Admitted Hospital

15.11.15.

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.

9-4-483
MILITIA AND DEFENCE

ASSIGNED PAY

10467

To whom *Mr. B. Bell. W.S.*
Address *13 Hill St., Edinburgh.*
Scot.

By whom assigned *Gray B. B.*
Regtl. No. *73782*
Rank *Pte.*
Corps, &c. *28th. Bath. Bdeoy.*

Rate *£ 5.00*

Date to Commence *1st Oct. 1915*

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>53520</i>	<i>15</i>	✓
Nov.		<i>73059</i>	<i>15</i>	✓
Dec.		<i>91912</i>	<i>15</i>	✓
Jan.	1916			
Feb.				
March			<i>45</i>	Carried Forward.

FILE

ASSIGNED PAY.

By whom assigned

Gray R. B.

Regtl. No.

13782

the

28th Battalion 12 Coy

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916	<i>113931</i>	<i>15</i>		
Feb.		<i>129212</i>	<i>15</i>		
March		<i>150943</i>	<i>15</i>		
Apl.		<i>6869</i>	<i>15</i>		
May.		<i>35289</i>	<i>15</i>		
June		<i>61944</i>	<i>15</i>		
July		<i>91954</i>	<i>15</i>		
Aug.			<i>150</i>		
Sept.					Payment Stopped 22.7.16 <i>[Signature]</i>
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

Rank

Name GRAY. B.B.

Reg'l No. 73782. ②

Unit

28th Bn.

If in perm. Corps,
What Unit?

Married or Single Single.

Place and Date of Enlistment Regina. 23rd Oct 1914.

Place of Birth Elgin. Scot.

Name and Address, Next-of-Kin F.H.I.Gray. C/o London Daily Telegraph. Paris France.

Relationship

Assigned Pay Monthly \$

Payable to

Relationship |

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

N/E. R. B. 6a
N/E. R. B. No.Category Com Inf
REMARKS
Taken from Official Documents

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	Remarks
Date	From whom received				
		Emb ^d for England. S.S. Northland Mill Embarked for France. Plymouth		29.5.15. 5.6.15	
30.11.15.	W.O.	Admitted to Hosp. Sick.		17.9.15. 15.11.15.	Now Rec 28 th Bn 19.10.15 Cao. Rpt. # 80.
30.11.15.	W.O.	Discharged to Duty		15.11.15	" " 80.
29.2.16.	28 th Bn	Granted 16 days special leave	On the field	7.2.16	Pr II 10.
5.3.16.	32 nd Bn	Taken on stn- 32 nd Bn	Shorncliffe	4.3.16.	Pr II 56 " 1st Lt for comm ^d
21.3.16	off ^r 9 th	Trans. to base.	Rowen.	4.3.16	Pr II 13.
1.4.16	OC 32	Baline Col on To No 6 Officers cadet unit Shorncliffe		1.4.16	Pr II 82
13-9-16	Ob. 22 nd	S.O.S on appointment to com: in Imperial Army		4-8-16	Pr II 236.

73782 Gray BB

Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
5-1-17	AFB.265	S.O.S on appointed to a batt in Imperial Army	E. Sandling	4-5-16	Adulth HA.6H.41-g-924 No letter 43/Y.O./142 (MSK 6504) dated 15 th inst

Rank

Name GRAY. B.B.

Reg'l No.

73782.

Unit

28th Bn.

If in perm. Corps,
What Unit?

Married or Single

Single. ✓

Place and Date of Enlistment

Regina. 23rd Oct 1914.

Place of Birth Elgin. Scot.

Name and Address, Next-of-Kin

F.H.I.Gray. C/o London Daily Telegraph. Paris France.

Relationship

Assigned Pay Monthly \$

15⁰⁰ Oct 1/15

Payable to

Mr. B. Bell. W.S. 13 Hill St. Edinburgh Scot.

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Commission

Reason

Comm'd.

Character

Army List Sept 1916
Col 1484 a

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						
June	1-30	30	1 ⁰⁰	30	30	1 ⁰⁰	3			33			30	3	
July	1-31	31	"	31	31	"	3 10			34 10			32 50	4 60	
								168		168					628 Adj: of Exc.
Aug	1-31	31	"	31	31	"	3 10			34 10			31 63	875	
Sep	1-30	30	"	30	30	"	3			33			17 27	2448	47 15 Oct 1.
Oct	1-31	31	"	31	31	"	3 10			34 10			5 23 15	38 35	
Nov	1-30	30	"	30	30	"	3			33			14 27 15	42 08	
Dec	1-31	31	"	31	31	"	3 10			34 10			5 23 15	55 95	
Jan	1-31	31	"	31	31	"	3 10			34 10			5 24 15	69 81	
Feb	1-29	29	"	29	29	"	2 90			31 90			2 6 15	81 48	
Mar	1-31	31	"	31	31	"	3 10			34 10			147 05 15	46 77	
				305			30 50	168		337 18			293 65 90	393 65	

Checked J. Hutchings

Carried forward to 2/2 Sheet

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary
Address

NAME OF UNIT DATE AUTHORITY
32 Bn.
29 "

DATE AUTHORITY
Mess 6¹⁰/₁₆ DO. 5224 C.T.D. 6¹⁰/₁₆

Name Gray
Initials B.B.
Bank of Montreal

Amount. \$

Separation Allowance issued. Yes or No.....

Killed in action 10⁴/₁₇ C.L. 648-14⁴/₁₇

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1916								
Jan 13	Bank. P. 45-31 ¹⁰ / ₁₆ Mess. 6 ¹⁰ / ₁₆ Bank			96 20				
18	P. 45-31 ¹⁰ / ₁₆ Mess. 6 ¹⁰ / ₁₆ n. 14369		96 20					
	Pay Jan.		108	x				
27	Bank			108				
Dec 11	Dr Bal in transfer of 4431. Pay #			11 30				
12	Pay Dec		111 60					
1917	Bank.			100 30			<i>Hold apl Pay Tpa to NE Ledger D.N.R. - 12 to 12</i>	
Jan 23	Pay Jan		111 60					
	Bank.	19288		111 60				
Feb 16	Adn. in Old 100 for. 28 ¹² / ₁₆ n. 657			17 44				
21	Pay Feb.		100 80					
22	Bank.	21937		83 36				
Mar 22	Pay Mar.		111 60					
24	Bank.			111 60				
Apr	Pay Apr. 10 days.		36			36		
June 20	Transferred to NE Branch n. 170 NE			36				
July 12	Pay April 11-30 ⁴ / ₁₇		72					
12	Transferred N.E. Branch n. 1156			72				

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Name

Address

Initials

Bank

Amount. \$

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

ASSIGNED PAY.

UNIT.

RANK.

NAME.

19 JUN 1917

NAME OF DATE AUTHORITY

Misc
DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

32-Bn.
29-Bn.

Lieut.

6th DISTRICT

Name

Gray
L.B.

Initials

Bank of Montreal

Entered on N.E. Card Index

Keels in action 10/4/17 C.L. 648-14 1/2

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

Checked by
SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

1917.

Apr. P.A. 1st - 10th vo. 1149.

36 .

36 .

Spec. apr. Pay

McB. Sch. Juncy P.A. 11-30th 17 P.A. Bin 10th 17

72

108 -

to the ledger

Cell 17 C.L. Mchr #564 Sett of Estate. V 20/37.

108 -

~~108 -~~

*Transferred from
Ledger #17 to
Ledger #12. 11th 17.*

*Lieut Gates
Ratio of Pay 2⁰⁰
" " 3.00 .60
" " Miss 1⁰⁰*

Statement of
SEP 17 1917

Acc Pay bank til as per L.L. 893-1-12 as of 2nd 17

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Name

Initials

Bank

Amount. \$

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

ASSIGNED PAY.

UNIT.

RANK.

NAME. 10 JUN 1917

NAME OF DATE AUTHORITY

MISS DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

32nd Reg. Bn.
79 Bn.

Lieut.

6-10-16
D.O. 52246.T.D.
d/6-10-16.

Name Gray
Initials B.B.
Bank of Montreal.

Entered on N.E. Card Index
Checked by

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case	INITIALS
1916								
Nov 13	Bank. P.d. fr. 5-10-16 to 31-10-16. Mess. fr. 6-10-16 to 31-10-16.			96 20				
18	do do V. 14369.		96 20					
	Nov. Pay (R)		108					
27	Bank			108				
Dec 11	Dr. Bal. on transfer. V. 4431 <i>br Pay II</i>			11 30				
12	Pay Dec. (R)		111 60					
19	Bank			100 30				
1917	Jan 23		111 60					
	Jan Pay (R)							
	Bank			111 60				
	Feb 16			17 44				
	Adv. in field 100 fcs 28.16	10657						
	21		100 80					
	Pay Feby (R)							
	22			83 36				
	Bank.	21937						
	Mar 22		111 60					
	Pay March (R)							
	24			111 60				
	Bank			639 80				

Statement of
SEP 17 1917
Account rendered

Surname GRAY,

Christian Names Benjamin Bell

Rank 2nd Lieutenant.

Name and Address of Next-of-Kin

Promotion Temp. Lieut.

Miss D.E. Gray (Sister)

Bureau de contrôle

16 Rue Chauveau Lagarde

Paris, France.

Unit. (Spec. Res. Bn. Cameron Highlanders.)

to 32nd Batt'n. C.E.F.

Place of birth

Elgin, Scotland.

Married (Yes or No)

Appointments

Date of leaving Canada

Date and Cause of Resignation

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				
6-10-16	G.O.C. C.T.D.	To be temp. Lieut. C.E.F. posted Gen. List & att'd	32nd Battn.	5.10.16 6.10.16 5/10/16	Low Gas. 25/11/16. Pt II Ord 286 (32nd) D.O. 5224.
17-11-16	"	Transferred to Permanent Cadre	32 Bn	11-11-16.	DO 5955. Pt II Ord. 298. 32 Bn
23-11-16	OC. CTD.	Proceeded to 29th Bn.		22-11-16	D.O. 6077 (appn)
4.12.16	29th Bn	Having arrived from England	208.	23.11.16.	Pt II Ord. 70.
14.4.17	CRO.	Reported from Gen. Hdqrs	Killed in Action	10.4.17	R 648 Pt II Ord 32 (27B 2090A 104-93) establs 2-5-17

A.F.B. 13.
28 DEC. 1916

22 NOV. 1918

29th Bn
to
C.E.F.

H

M

Se

a. 7. 0
29th Bn
1-3-17

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?

Classification for service, or proficiency pay Class

6. Campaigns, Medals and Decorations

Flanders.

Certificate of education

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

(Place) SHORNCLIFFE.

(Date) August 22nd 1916.

Raymond

Lieut. Colonel.
Commanding 32nd Battalion
CANADIAN EXPEDITIONARY FORCE.

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) SHORNCLIFFE.

(Date) August 22nd 1916.

Burbury
D. D. Smith

(Signature of Soldier.)

(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.

Burbury

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to 14.8.16 (the date to which the record of service is completed) 1 years 286 days.

Further service " " (the date of confirmation of discharge) " " "

Total " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for (date)

(Place) SHORNCLIFFE.

(Date) August 22nd 1916.

Raymond

Signature Lieut. Colonel.
Commanding 32nd Battalion,
CANADIAN EXPEDITIONARY FORCE.

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.)

Approximately £7.0.0.

Bunbury

LIST OF DISCHARGE
DOCUMENTS.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to re-serve (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 depôt 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, despatch,
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.

ORIGINAL NOT AVAILABLE. **DUPLICATE.**

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number _____

CERTIFIED CORRECT

28 DEC. 1916

CANADIAN RECORD OFFICE

Regiment or Corps 32nd PATTALION, C.E.F.

Rank Lieut. Surname GRAY Christian Name Benjamin Bell

Religion Presbyterian Age on Enlistment _____ years _____ months.

Enlisted (a) _____ Terms of Service (a) duration of War Service reckons from (a) enlistment 5/10/16

Date of promotion to present rank 5-10-16 Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
or Corps Trade and Rate _____

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<u>6-10-16</u>	<u>G.O.C.C.T.D</u>	<u>1st Lt Temp Lieut C.E.F. posted G.O.C. attached 32nd Bn.</u>		<u>5-10-16</u>	
<u>6.10.16.</u>	<u>Gen List.</u>	<u>Attached to 32nd Battalion on transfer from Imperial Army.</u>	<u>E. Sandling.</u>	<u>6.10.16.</u>	<u>Pt. II. 256. d/6.10.16.</u>
<u>22.11.16.</u>	<u>O.C. 32nd</u>	<u>Proceeded Overseas to 29th PATTALION.</u>	<u>E. Sandling Field.</u>	<u>22.11.16.</u>	<u>Pt. I. 299 d/22.11.16.</u>
			<u>General</u>		<u>Lieut. Asst. Adj.</u>
			<u>for O.C. 32nd</u>		<u>Battalion,</u>
			<u>CANADIAN EXPEDITIONARY FORCE.</u>		
<u>23-11-16</u>	<u>CBS</u>	<u>Arr. CBS + G.O. 1. 29th Bn</u>	<u>France</u>	<u>23-11-16</u>	<u>Wh. 4044 1/2</u>
<u>1-12-16</u>	<u>OC 29th Bn</u>	<u>Arr 29th Bn</u>	<u>Field</u>	<u>28-11-16</u>	<u>B. 213</u>

(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) Signaller, Shosing Smith, &c.

[P.T.O.]

Unit _____ Rank _____ Name _____

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (a) What is your Surname? Gray
- (b) What are your Christian Names? Benjamin Bell
2. (a) Where were you born? (State place and country) Edgum Scotland
- (b) What is your present address? The Field
3. What is the date of your birth? July 30, 1887
4. What is (a) the name of your next-of-kin? D. G. Gray (Miss)
- (b) the address of your next-of-kin? Bureau de controle, 16 rue Chauveau Lafontaine
- (c) the relationship of your next-of-kin? Sister
5. What is your profession or occupation? Low level servant (Sark God)
6. What is your religion? Presley herian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? 95th Sask Rifles (PIA)
9. State particulars of any former Military Service? Oct 22¹⁹¹⁴ - Aug 5 1916 1st Bn 128th Bn
Aug 5 1916 - Oct 5 1916 2nd Bn 90th Cameron Hvy
10. Are you willing to serve in the
CANADIAN OVERSEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

Benjamin Bell (Signature of Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him * fit for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date 7/12/16 1916

Place In the field D. E. Little Capt Medical Officer.

* Insert here "fit" or "unfit."

M.D. 29th Bn

Place

Date 191

I consider him for the CANADIAN OVERSEAS EXPEDITIONARY FORCE

Medical Services

I have examined the above-named Officer in accordance with the regulations for Army

CERTIFICATE OF MEDICAL EXAMINATION

(Signature of Officer)

Questions are the

The undersigned hereby certifies that the above answers made by him to the above

CANADIAN OVERSEAS EXPEDITIONARY FORCE

- 1. Are you willing to serve in the
- 2. State particulars of any former military services
- 3. To what Unit of the Active Militia are you related
- 4. Are you willing to be vaccinated or re-vaccinated and inoculated
- 5. What is your religion
- 6. What is your Profession or occupation
- 7. (a) the relationship of your next of kin
- 8. (b) the address of your next of kin
- 9. What is (a) the name of your next of kin
- 10. What is the date of your birth
- 11. (a) What is your present address
- 12. (b) Where were you born? (State place and country)
- 13. (c) What are your Christian names
- 14. (d) What is your surname

(Signature)

QUESTIONS TO BE ANSWERED BY OFFICER

CANADIAN OVERSEAS EXPEDITIONARY FORCE

OFFICERS, DESTABILIZATION BUREAU

Unit Rank Name

Casualty Form—Active Service.

CERTIFIED CORRECT.

Canadian Record Office,
Westminster House,
7, Millbank, S.W.Regiment or Corps 28th N^oth West Batt.Regimental No. 73782 Rank Pte Name Gray Benjamin BellEnlisted (a) 23 10 14 Terms of Service (a) Duration of war Service reckons from (a) 23 10 14

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) _____

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.	Embarked <u>Montreal 29.5.15</u>		Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received		Place	Date	
18.9.15	O/C	Disembarked	Boulogne	18/9/15	Norm. Poll 10/25/15
19.1.15	O/C	Sick since not to duty To duty	In the field	14.11.15	B213
21.1.16	.	att ^d Grenade Sch	.	17.1.16	DCS. 79
28.1.16	.	Ret ^d to duty	.	24.1.16	- 83
	.	att ^d Gren. School	.	25.1.16	- 83
4.2.16	.	Ret. to duty	"	3.2.16	. 96
11-2-16	"	Granted 16 days spell leave	"	7-2-16	B213 Part 4 orders no. 10
25-2-16	O.C. Unit	Returned to duty from leave	"	23-2-16	B213-102 112
3-3-16	O.C. Unit	Attached Can. Training Det.	"	3-3-16	B213-Part 4 orders no. 12
10-3-16	O.C. Unit	Transferred Canadian Casualty Assembly Centre, Folkestone, Kent. for purpose of attending Cadet School with a view to being granted a commission.		4-3-16	a.a. & Can. Section File no 2983 of O.C. 28th An B213 of 10-3-16 Part 2 orders no. 13 of 21-3-16

B. Johnston
Lieut. for
Lieut. Colonel
A.A.G. Can. Section
3rd Bchelon, G.H.Q.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

P.30

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				
5.3.16	OC 32	To S 32 nd Bn	Shoncliffe	4.3.16	P II 56
21.3.16	OC 28 ^d	Trans to CCAC	Rowen	4.3.16	P II 13
31.3.16	OC 32 nd	On Command No. 6 OC Bn. Oxford.	Oxford.	31.3.16	P II 3/91. d/31.3.16.
14.8.16		Discharged in England on appointment To a Commission in the Imperial Army.			

.....Lieut. Colonel.
 Commanding 32nd . Battalion,
 CANADIAN EXPEDITIONARY FORCE.

Henry Gray 1887

Unit *24th Bnth Can Inf* Rank *Lieut* Name *B. B. Gray*

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (a) What is your Surname? *Gray*
- (b) What are your Christian Names? *Benjamin Bell*
2. (a) Where were you born? (State place and country) *Elgin Scotland*
- (b) What is your present address? *The Field*
3. What is the date of your birth? *July 30, 1887*
4. What is (a) the name of your next-of-kin? *(Miss) D. E. Gray*
Bureau de Confiance
 (b) the address of your next-of-kin? *16, Rue Chauveau Lapierre*
Paris, France
 (c) the relationship of your next-of-kin? *Sister*
5. What is your profession or occupation? *Civil Servant (Susk Govt)*
6. What is your religion? *Presbyterian*
7. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
8. To what Unit of the Active Militia do you belong? *Pte 4516 Saskatchewan Rifles*
9. State particulars of any former Military Service? *Oct 22, 1914 - Aug 5, 1916 Pte*
Aug 5 - Oct 5 1916 3rd Cameron 2nd Bn
28th (2nd) Bn
10. Are you willing to serve in the
 CANADIAN OVERSEAS EXPEDITIONARY FORCE? *Yes*

The undersigned hereby declares that the above answers made by him to the above questions are true.

B. B. Gray (Signature of Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him * *fit* for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date *7/12/16* 191*6*

Place *In the Field*

* Insert here "fit" or "unfit."

J. L. Hetta Capt
Medical Officer.

1935

Person's Office

Date

101

I consider him for the CANADIAN OVERSEAS EXPEDITIONARY FORCE

Medical Services

I have examined the above named Officer in accordance with the regulations for Army

CERTIFICATE OF MEDICAL EXAMINATION

(Signature of Officer)

Questions are the

The undersigned hereby declares that the above answers made by him to the above

CANADIAN OVERSEAS EXPEDITIONARY FORCE

1. Are you willing to serve in the

2. State particulars of any former Military Services

3. To what part of the Army does your name belong?

4. Are you willing to be vaccinated or re-vaccinated and inoculated?

5. What is your religion?

6. What is your profession or occupation?

(a) the relationship of your next of kin?

(b) the address of your next of kin?

7. What is (a) the name of your next of kin?

8. What is the date of your birth?

(a) What is your present address?

9. (a) Where were you born? State place and country?

(b) What are your Christian names?

10. (a) What is your surname?

(Signature)

QUESTIONS TO BE ANSWERED BY OFFICER

CANADIAN OVERSEAS EXPEDITIONARY FORCE

OFFICER'S DECLARATION TABLE

Unit

Rank

Name