B. 144.

0 Inf - 14209

CERTIFIED TRUE COPY
SUBSTITUTED FOR TRIPLICATE
K.R. & O. PARA. 1904.

UNIT ..... Regimental No. 59323

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS)
1.	What is your name?	Geo J L Jones
2.	In what Town, Township or Parish, and in what Country were you born?	Pachenham Canada
3.	What is the name of your next-of-kin?	Mrs L M Jones
4.	What is the address of your next-of-kin?	Brighton Ont Canada
5.	What is the date of your birth?	25 July 1892
6.	What is your Trade or Calling?	Civil service Clerk & Private Secretary
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? If so, state particulars of former Service.	4 yrs 2 O.R. Toronto Aldershot War Manoeuvers England
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

yes

G J L Jones (Signature of Man).

S H R Roblin (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Geo Jas L Jones, 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.

G J L Jones (Signature of Recruit).

Date 5 - 11 - 1914 S H R Roblin (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George James Lyndon Jones, 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.

G J L Jones (Signature of Recruit).

Date 5 - 11 - 1914 S H R Roblin (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 Kingston this 5 day of Nov 191

W S Hughes (Signature of Justice).

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

W S Hughes (Approving Officer).

Brighton 19.10.14

Certified true copy

for Officer i/c Records, C.E.F.

V. & S., Ltd. 30M. 18-12-15. 48297.

Description of George James L Jones on Enlistment.

Apparent Age 23 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 1/4 ins.

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

Complexion Dark

Eyes Blue

Hair Black

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

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.)

Mole Back of Left Hip

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 5 — 11 — 1914

Place Kingston

J. J. Sparks
Capt. A.M.C.
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.

L J Jones 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.

W. S. Hughes (Signature of Officer.)
Lt Col

Date 5 — 11 — 1914

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

JONES GEORGE JAMES LINDEN 59525 21ST BN 11683

DEMOB

Deceased 6-6-54

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 59525 (Rank) A.S.Q.M.S.

Name (in full) JONES, George James Linden enlisted in

the 21st Battalion

CANADIAN EXPEDITIONARY FORCE at Kingston, Ont. on the 5th

day of November 1914

HE served in Canada, England and FRANCE

and is now discharged from the service by reason of in accordance with R.O. 1343

Demobilization. Auth. 3DD 3. J.192, D. 23.1.19.

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

Age 26 years 6 months	Marks or Scars
Height 5 feet 7 inches	Mole at back of left hip
Complexion Dark	
Eyes Grey	
Hair Brown	

G. J. L. Jones

Signature of Soldier

F. S. Money Capt

Issuing Officer

for O. C. Discharge Section

No. 3 District Depot

Rank

Appointment

Date of Discharge 8.1.19

Signed at Kingston, Ont. this 8th day of January 1919

in Military District No. 3

File Reference No. 3DD 3.J.192.

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

On demobilization the particulars called for on the back of this certificate will not be completed.

.....

Name of Officer

.....

Rank

.....

Appointment

Rank L/Corpl. Name JONES. G.J.L. Reg'l No. 59525.

Unit 21st Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Kingston. Ont. 5th Nov. 1914 Place of Birth Pakenham. Can

Name and Address, Next-of-Kin Mrs R.N.Jones. Brighton. Ont. Can.

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to R139-20-46

Relationship

Discharge, Date and Place Reason Character

365

NI R B No 15336
File R.L.
Category Can OR.

Report Date	Report 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
19-5-15	O.C. 21st	Arrived per R.M.S. Mesagama	England	15-5-15	Inform Form
20.7.15	—"—	To be Corpl:	West Sandling Camp	20.5.15.	Part II orders. 209.
22.7.15	—"—	To be L/Corpl & to draw pay of Rank.	—"—	15.5.15.	—"— 211
26.7.15	" "	To be L/Corpl.	Canada	5.11.14	
			~~W Sandling~~	~~X.X.15~~	Nominal Roll. ~~1.7.15~~
8.10.15	" "	Confirmed in Appmt as L/Cpl	W. Sandling	1-7-15	Nom: Roll.
		Embarked for France	Folkestone	14/9/15	Inform. Form
8-2-16	W.O	Adm Hosb and Fld Amb. Div Rest Stat (Influenza)	France	15-1-16	Can List 140
8-2-16	W.O.	Trans to Div Rest Stat "	Godewaersvelde	16-1-16	" " 140
15.2.16	"	Discharged to Duty "	France	26-1-16	" " 146
14-5-16	21st Bn	Granted Leave from 1-5-16. to 10-5-16.	In the field	1-5-16	G.R.O 20.
18-5-16	"	Adm No 3 Can Gen Hosp	Boulogne	10-5-16	C.F.A 221. Appendicitis Alt.

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				
6-6-16	CCAC	Taken on strength.	F'stone	28-5-16	Pte O 202
2-6-16	21st Bn	203 Western Gen Hosp	Cardiff	28-5-16	C.L. Bty Appendicitis
7-6-16	"	Inward Trans/to CCAC	Folkestone	26-5-16	Pte O 23
13-7-16	"	Trans Bearwood Hosp	Wokingham	8-7-16	C.L. B 101
7-9-16	"	Disch. " "	"	29-8-16	- B 140 "
8-9-16	CCAC	On command Can Red X Soc. London P.B.D.	F'stone	6-9-16	Pte O 384
11.9.16	To Pay C	For duty to Can Red X Soc	London	7.9.16.	" 223
~~20.1.17~~	Hqrs London	TOS from C.M.F. posted to Can Red Cross Socy	London	19.1.17	Cpl. Pte D O 5
5.3.17	"	Att to Hqrs & detailed for duty to Can. Red Cross Socy	"	"	Cancelled. Hqrs. Lond. Pte D O 208 dy 26-10-17 / 4.5 + Cas C No 1 Del'd Pte II 100 117 d 4-18/5/17
10-5-17	CCRS	TOS on Comd Can Red X London.	Seaford	10-3-17.	Pte II O 59.
26-10-17	Hqrs London	To be Apd. Gnrd	A/S/O/M.S. London	26-10-17.	Pte II O 208.
6-11-17	C.C.R.S.	Ceases on Comd to Can Red X & is on Comd Headquarters A.M.F. of "Argyle House" for duty with Red X Hosp.	" Seaford	31-10-17	Pte O 239.
9-12-18	✓	Ceases on attch to Hqrs A.M.F.	A/S/O m.s Witley	28-11-18	P.O 304 Cancelled by A.O. 9 dy 11.1.19.
~~3-12-18~~	~~Gen Dep~~	TOS from Hqrs O.M.F. Ldn.	Sanns — do	~~24-11-18~~	~~287~~
12-12-18	C.O.R.S.	On comd C.O.S. Bungalow	A/S/O m.s — do —	11-12-18	307
18-1-19	"	S.O.S. to Hd Qrs to C.E.F. Canada	A/S/O m.s "	23-12-18	— 15

R. & O. 6020.

OVERSEAS CASUALTIES.

Under Supervision of
D. of R. & O. C.E.F.

Canadian Casualty
Assembly Centre.

Serial No. 0m/14209

Name Jones, G.J.L Rank Cpl. Regt. No. 59525

Last unit served with in France 21st Evacuated from France ..... Casualty .....

Taken on Strength in Part II. D.O. No. 202 Date 2-6-16 Casualty List .....

Hospital Admissions .....

(Name) ..... (Date) .....

..... ,, ...

..... ,, ...

Discharged to Centre 6.9.16 Reported .....

Medical Board Date ~~28-6-16~~ Finding P.B.W.

Disposition 384/6 Att. Can. Red X Sor. London
(Quote Pt. II. D.O.)

.....

O.C. Units are held responsible to see that this card is returned to the Canadian Casualty Assembly Centre :—

(1) In the case of the man being transferred to another unit,

(2) In the case of the man being drafted overseas, with covering letter giving particulars.

These cards will be carefully filed so that the necessary information for wastage returns can easily be obtained, when required.

D.M.S. 1313

Captain,

CANADIAN HOSPITAL, AT

~~2nd Eq. Canadian Convalescent Hospital,~~
Bear Wood, Wokingham, Berks.

A. & D. CARD.

Regt. No. 59525. A. & D. No. 2733.

Rank Cpl. Corps 21st Bn.

Name Jones. G. J. C. Age 24 Religion Cath.

Service at Home 9/12

" " Front 9/12

Diagnosis Appendicitis Op.

Admitted 7 JUL 1916 Cardiff

Discharged Clear Duty - Aug. 31-16

Place in Hospital 232 D.

M. H. Rec'd (See Document card)

Transferred

Results

P.T.O.

REMARKS: at Dickie bush 3.4.16.
adm Boulogne 11.5.16.
" Cardiff 24.5.16.
Thence here.

Operation.

complains weakness. - nervousness -
has had pneumonia since - sleeplessness.
Otherwise health fair.

No P.D.

Reg. No.	Rank.	Surname	Christian Names (1)	(2)	(3)	Category.	Dentally Unfit.
59525	a/S/qms	Jones	George	James	L	B3 Date 18.7.18.	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Province:	Age on	Date		Vaccination	
Toronto Ont	5th 11-14 23y 4m	EORD 1-11-17	C of E.	11/11/14, 3/12/14, 6/1/15	C Red X Soc

On Command	Hospital	Permanent Cadre Date taken on	Employed as
			Clerk
Date Proceeding	Date Admitted		

Record of Overseas Service:
Landed in France 14/9/15. 21st Bn

Profession or Trade (Civil)
Clerk. Civil Service

Transferred or Posted to ..... Date.....

Reason for Return: Invalided

Married or Single ... single

Address of Next of Kin... mother
Mrs Robert N Jones
P.O. Box 133. Brighton Ont

Country ... Canada

LEAVE.

No of Pass Issued	From	To	Free Transportation
	24.5.17	30.5.17	52/874418 874419
2514	31.8.18	9.9.18	Pds 1/2 2.6.

P Pass 486.

A.G. 10435.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
45	5-3-17	A7			
	16-2-17	A4			
208	26-10-17	A4	a/s/ams.		
212	31-10-17	SD			
201	5-11-17	A7			
279 3	28 11 18	a7	EORD	28.11.18	

Address

Holmleigh, Murray Rd.
Northwood, Middlesex

a/sqt

H. Q. FILE No. 649-

NAME Jones G. J. L. REGT'L No. 59523

RANK AND CORPS Cpl. 21st Batt. (2nd Can. Div.)

CABLE

NO. DATE

NATURE OF CASUALTY

NO. 694 XX

FOLL.

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
140.	No. 5 Can. Fld. Amb. Div. Rest Sta.	15-1-16	Influenza a.c.
" St	Div. Rest Stat. Godewaersvelde.	16-1-16	Influenza a.c.
146	No. 5 Can. Fld. Amb. Div. Rest Stat.	26-1-16	(Influenza) Disch. to Duty. c
A.221.	No. 3 Can. Gen. Boulogne.	10-5-16.	Appendicitis Set
B77	No. 3 Western Gen., Cardiff	28-5-16	Appendicitis
B101 To	Can. Convt Bear Wood Wokingham	8-7-16	Appendicitis Alt.
B.140.	Can. Conv. Bear Wood Wokingham	29-8-16	(Appendicitis) Dischg

No 264 RANK L/Cpl NAME Jones, George James Lindsay

5-9-25 May paylist

T. O. S. UNIT 21st Battalion
(2nd. O/S. Contingent)

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914.			
Nov. 11	Nov. 30.	✓		
Dec.		✓		
1915	Jan 1915.	✓		
Feb		✓	appointed L/Cpl 5-11-14.	D.O.88 of 23-2-15
Mar.		✓		
Apr.		✓		
May		✓		

UNIT SAILED
MAY 20 1915

Deceased 5 Jun 54

Number. 59525 Rank. C/S.Q.M.S.

Surname. JONES

Christian Names. George James L.

Unit. 21st Bn Can Inf. Theatre of War. France

Date of Service. 14-9-15

Remarks.

Latest Address. 95 Ellsworth Ave.
Toronto Ont

Roll No. B. Page 2256. 21st Bn

G. A 18.7 70 Lesp
JUN 28 1921
GC 44070 Lesp
OCT 11 1921

C.E.F. 59525

OK

JONES, George James L. 59525 A/SQMS

Medals prev desp:

649-J-10460

Cross to widow: Not eligible (Veteran disch. 28 Jan 19 & married 15 Feb 19)

Cross to mother: Deceased

Name **JONES. G.J.L.** *Rank* **Cpl.** *Reg. No.* **59525.**

Unit **21st. Battalion.**

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
15-1-16.	No.5.C.F.A.D.R.S.		Influenza	140		
16-1-16.	D.R.S.	Godewaersvelde.	do	140		
26-1-16.	No.5.C.F.A.D.R.S.- DISCHARGED TO DUTY.		do	146		
10-5-16.	No.3.Can Gen Hosp.	Boulogne	Appendicitis Slt	A221		
28-5-16.	No.3.Wstrn Gen.	Cardiff.	do	B77		
8-7-16.	C.C.H.	Bear Wood. Wk'ham.	do	B101		
29-8-16.	DISCHARGED.		do	B140		

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Jones. G.	J. L.	59525.

Rank	Unit	Co.	Troop	Batty
Cpl.	21st. Battn.			

Hospital — Date of Admission

No. 5 Fld. Am. Div. Rest Sta. 15-1-16.
to Div. Rest Sta. Godewaersvelde. 16-1-16.

Transferred	Hosp.
# 3 Can. Gen. Boulogne.	Hosp. 10.S.16
# 3 West. Gen. Cardiff.	Hosp. 28.S.16
Woolwich Comb.	Hosp. 8.7.16.

Diagnosis

(1) Influenza.

Later Diagnosis (if changed)

(2) Appendicitis. Alt.

(3)

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Dis to duty — 26.1.16
Disc — 29-8-16

REMARKS

C.L. 8-2-16.	140.
" 15-2-16	146
" 18.8.16.	H221
" 2.6.16.	B77
" 13.7.16.	B.101.
" 7-9-16	B140.

A.M.D. 2 Dept.

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

R

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

*Name Jones. George, J. L. Rank S.D.M.S. Regtl. No. 59525

Original unit 21 Present unit Fyle Depot 3-9-192

M. or S. Age 27 Religion C of E Ref. H.Q.

Port, ship, and date of arrival H.M. Johns Transcain 3-1-19

Next of kin Mrs. L. J. Jones Brighton Ont

Address on leave Same

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Civil Servant Date and place of enlistment 5-11-14 Kingston

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
9-1-19	T.O.S. Casualty Company No. 3 District Depot. From Os	
	for Disposal, Part Two D.O. 9 Eff 5-1-19.	
	Leave & Sub 5-1-19 to 19-1-19.	

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

Forms
I. 1237.
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

C/E

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2733	59525	Cpl	Jones	G.J.K.
Year 1916	Unit. 21st. Batn		Age. 24	Service. 18/12

Station and Date.
Brd. Conval. Hospital, Bear Wood.
7 JUL 1916

Disease appendicitis

2324 3/4/16 at Dickiebusch.

to Boulogne on 11/5/16;- to Cardiff on 27/5/16;- thence here.

operation

complains weakness- nervousness- had had pneumonia since - sleeplessness otherwise health fair.

NOAD

CANADIAN CONVALESCENT HOSPITAL REGISTRARS 1-SEP 1916 OFFICE BEAR WOOD, WOKINGHAM, BERKS.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Forms
I. 1237
10

3rd W. G. Cardiff

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
557 C.	59525.	C.	Jones.	George Jame Lynda
Year 1916.	Unit. 24 Can B.		Age. 1 7/12 F 9/12.	Service. C.E.

Station and Date. 3rd W. Gen. Hosp. Cardiff

Disease Appx. Pneumonia

27. 5. 16. appendicitis (twice) operation May 11th 1916. at Boulogne. In 4 days. contracted "Pneumonia" Temp. was 104. Coughing & spitting up. ~~blo~~ bloody tinged sputum. Admitted to 3rd W. Gen Hosp Convalescent

6/6/16 Feels weak. Has palpitation. Has felt shaken up since in France. Has D. A. H. at times.

June 11. Stiff neck & aching in limbs & Headache

15. Pains generally better but still has some pain in muscles of neck.

July 3. Feels better generally. Rh pains

Capt Lewis
Major

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S. P.T.O.

Station and Date.	

Forms
I. 1237.
10

Copy.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
55 F.C.	595-25	Cpl	Jones	G. J. L.

Year	Unit.	Age.	Service.	
1916	21 Canadians B.G.	24	16/12	8/12

Station and Date.	Disease App. Pneumonia.
3rd West. Gen. Hospital Cardiff. 27-5-16	Appendicitis (twice) Operation May 4th 1916 at Boulogne. In 4 days contracted "Pneumonia" Temp. was 104 coughing & spitting up streaky blood stained sputum. Admitted to 3 W.G.H. convalescent.
6/6/16	Feels weak. Has palpitation. Has felt shaken up since in France. Has D.A.H. at times.
June 11 15	Stiff neck & aching in limbs & Headache Pains generally better but still has some pain in muscles of neck.
July 3.	Feels better gets Gen Rh. pains

(Signed) Cyril Lewis
Major

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Army Form B. 103.

Regimental Number 69525

Casualty Form—Active Service.

Regiment or Corps 21st Bn.

Rank Pte/Cpl/Lt/S. Surname Jones. Christian Name George James.

Religion ..... Age on Enlistment ..... years ..... months.

Enlisted (a) 13-5-15. Terms of Service (a) ..... Service reckons from (a) 15-5-15.

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and Rate .....

..... Signature of Officer.

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 ...			
9-12-18	EORD	Attached Depot Coy	Witley	28.11.18.	
12-12-18	to	"ON COMMAND" 1st C.D.D., BUXTON.	to	11-12-18	D.O. 307
					T.F. Edwards Lieut. i/c Records.
12.12.18		Attached C.D.D. Buxton for return to Canada, Part II Order No. 294			East Ont. Regtl. Depot.
		Ceases to be attached C.D.D. Buxton on embarking for Canada.			
		A.L. Macmillan Lt. for Lt.-Col. Commanding Canadian Discharge Depot.			
23-12-18		Embarked for Canada.	Sailing No. 101. S.S. Teutonian		
			J.J. Allen		Capt & Adjt
					for O.C. No. 14 C.T.D.C.S.

(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, Shoeing-Smith, &c.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B 103/4. E./354.

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				
9/1/19	T.O.S. Casualty Company No. 3 District Depot for Disposal, Part Five D.O. 9		Kingston	3/11/19	
					LIEUT. for O.C. Casualty Co., No. 3 District Depot
28-1-19	D.D.S.	Discharged	Kingston	28-1-19	AB 19
					Lieut. for O.C. Discharge Section No. 3 District Depot

/GM

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P.) 250M.-12-18.
1772-39-903.

LAST PAY CERTIFICATE

ORIGINAL

Regimental No. 59525 Rank A/S.Q.M.S. Name Jones, G.J.L.
(Surname first)

Unit H.Q. who was* Discharged

On January 28th 1919, to Category "C1"

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Jan. 1st to Jan. 28th 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		148.02
Regimental Pay 28 days at $ 1.80		50.40
Field Allowance 28 days at $ .20		5.60
Separation Allowance		
Clothing Allowance		35.00
Post Discharge Pay		
*Other Credits Subs.		12.00
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on ~~transfer~~ or on discharge, cheque No. 1983	251.02	
Total	251.02	251.02

*Give particulars.

A monthly stoppage of $ NIL (†) has (‡) been paid on account of

Assigned Pay for the month of 191
and Separation Allce. for month of 191 } (to) Assignee

(Address)

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment married or single

(2) Separation Allowance, entitled or not No (3) Reason for discharge

(4) Authority for discharge ~~or transfer~~ 3DD.3-J-192

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date January 27th, 1919

Place Kingston, Ont.

W. Peters Captain,
OFFICER I/C DEMOBILIZATION PAY DIV.
MILITARY DISTRICT No. 3 *Paymaster.*

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

cheque #1983 attached

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
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.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

KS.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Kingston DATE Jan. 22-19.

1. 1 (a) Unit 3 C.C.D.D. (b) Regimental No. 59525 (c) Rank S/Q.M.S.

(d) Surname JONES (e) Christian name George James Linden

(f) Home address Brighton Ontario C/Standard Bank.

(g) Next of Kin Mrs. R.N. Jones (h) Relationship Mother

(i) Address of Next of Kin Brighton, Ontario.

2. Age last birthday 27 Date of birth 25-7-1890

3. Enlistment, or Appointment (if an Officer) (a) Place Kingston (b) Date 19-10-14

4. Personal description:

(a) Height 5-7 (b) Weight 138 (stripped) (c) Complexion Dark

(d) Colour of hair brown (e) Colour of eyes gray. (f) Identification marks, Scars, etc.

5. Former trade or occupation Civil servant.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4yrs. 4 months	

	Periods	
	From	To
Canada 20 B'n C.E.F.	19-10-14	1-5-15
England 21 B'n C.E.F.	1-5-15	14-9-15
England Hqrs. C.M.F.C.	29-6-16	23-12-18
France or other theatres of War 21 B'n C.E.F.	14-9-15	29-6-16
Canada 3 C.C.D.D.	23-12-18	To Date.

7. Original disease, or injury V.D.H.

(a) Date of origin 1916 (b) Place of origin France

(c) Cause Man states slight enlargement in training developed V.D.H. following pneumonia.

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

V.D.H. Vitial Rignigitation.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

SUBJECTIVE. Man complains of shortness of breath on exertion accompanied by a vague prerordial pain, also says he has dizziness when fatigued or standing on feet for a long time. Complains of myalgic pains in left shoulder in damp weather.

OBJECTIVE. Man appears well nourished and in fair condition. Present weight 135 lbs. about 10 lbs. below weight at time of enlistment. On auscultation a soft mitial systolic murmur is heard at apex accentuated by exercise and slightly transmitted towards axilla. Pulse at rest 80 B.P.M. on making time one minute pulse 130 B.P.M. returning to 80 B.P.M. in one minute. Heart efficiency is splendid with good compensation. A moderate ayspnoca notised while making time. Respirations normal some hypertrophy of left heart to left apex being ½ inch within nipple line. Man has well heiled appendertomy scar Lungs normal except for a few scattered Bronchical rales. Man appears to be somewhat of a nervous disposition. Other systems are normal.

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....Cardio-Vascular System.....Genito-Urinary System.....
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.

Special Senses.....Respiratory System.....Integumentary System.....

Disturbances of Mentality.....Digestive System.....Muscular System.....

Osseous and Joint Systems.....Any other general condition.....

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

Enlisted October 19-1914 being excellent health. While in training in England developed enlargement of heart in July 1915. Had Bronchitis before anappendectory performed in May 1916. Developed pneumonia about three days following his operation. Treated in Canada General Boulogne 12-5-16 to 25-5-16, then to 3rd Western General Cardiff 27-5-16 to 7-7-16 then to Bellwood C.C.H. 7-7-16 to 29-8-16 following discharge from hospital remained on duty in England until returned to Canada in December 1918.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Ordinary diseases of childhood Treated for Catamels in 1914 before enlistment.

(*c*) (Here give a description of wounds, scars and deformities.

Well healed appendectory scar perfect recovery.

11.—(*a*) Did the disabling condition have its origin before enlistment? no.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N-a.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? no.

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

3rd Can. General Boulogue 12-5-16 to 25-5-16.

3rd Western General Cardiff 27-5-16 to 7-7-16.

Bearwood Can. Convalescent Home 7-7-16 to 29-8-16.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

no

16. Can the former trade or occupation be resumed? yes

(If not, briefly state why)

17. Recommendations fir Category C1.

E. Burnell Capt. A.M.S.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned.....have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

Pte. 3/10 Lond. R.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

yes.

19. Is the invalid fit for

(a) ~~General service~~,	(~~Category A~~) (~~Yes or No~~.)
(b) ~~Service abroad, not general service~~,	(~~" B~~) (~~Yes or No~~.)
(c) Home service (Canada only),	(" C) (Yes or No.) **C1.**
(d) ~~Temporarily unfit~~.	(~~" D~~) (~~Yes or No~~.)
(e) ~~Unfit for service in Categories A, B and C~~	(~~" E~~) (~~Yes or No~~.)

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) ~~Should pass under his own control~~.
(d) Should not pass under his own control.
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

fit Category "C1" with disability due to service.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

R.F. Rowan Capt *President.*

PLACE Barriefield

DATE Jan. 22. 1919.

Benj. Hutchinson Capt A.M.S. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE.....

DATE..... } Members

APPROVED BY

E.W. Melbourne Lieut
Assistant Director of Medical Services M.D. 3

DATE 22-1-19

APPROVED BY

Director-General of Medical Services.

DATE.....

Rank Corpl. Name JONES. G.J.L. Reg'l No. 59525.

Unit 21st Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Kingston. Ont. 5th Nov. 1914 Place of Birth Rakehham. Can

Name and Address, Next-of-Kin Mrs R.N.Jones. Brighton. Ont. Can. Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
June 1	June 30	30	1.00	30	30	.10	3	950	4250			Ho -			40	250	Cr. bal. May. Promoted Cpl Ho 5/5/15
1/7	31/7	31	1.05	32 55	31	.	3 10	445	40 10			Ho			Ho	260	adjust' Lee bay from 1/5/15
								213	213							473	Exchange
1/8	31/8	31	1.10	34 10	31	.	3 10	.	3720			3893			3893	3—	
1/9	30/9	30	.	33	30	.	3	.	36			535			535	3365	
1/10	31/10	31	.	34 10	31	.	3 10		3720			2093			2093	4992	
1/11	30/11	30	.	33	30	.	3		36			357			357	8235	
1/12	31/12	31	.	34 10	31	.	3 10		3720			1428			1428	10527	
1/1/16	31/1/16	31	.	34 10	31	.	3 10		3720			1396			1396	12851	
1/2/16	29/2/16	29	.	31 90	29	.	2 90		3480			785			785	15546	
1/3/16	31/3/16	31	.	34 10	31	.	3 10		3720			436			436	18830	
				330 95			30 50	1608	37753			18923			18923	18830	Lab, 1 July, 16

Checked

BALANCE TRANSFERRED TO NEW LEDGER

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			No.	Date						

MARRIED OR SINGLE: S.

PLACE OF BIRTH: Pakenham. Canada.

NAME AND ADDRESS OF NEXT OF KIN: Mrs R.H. Jones. Brighton. Ont.

RELATIONSHIP OF NEXT OF KIN:

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
To S.O.M.S.	26/10/17	H.Q.2a.D.O.208

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 59525 RANK Corpl. NAME Jones. G.L.

IF IN PERMT. CORPS WHAT UNIT: UNIT 21st Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Kingston. Ont.

DATE OF ATTESTATION 5th Nov. 1914.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO C.C.A.C. DATE 6-6-16 AUTHORITY P.O.23 7/6/16

TRANSFERRED TO P.R.O DATE 7/9/16 AUTHORITY Form published in Orders Sept 11/16

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

Red Cross. ✓
Book. WR

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
							30	50							377	53														189	23	188	30			
Apr	1-30	30	1.10	33	30	.10	3								36	1063 1020		1098						349 349	436				08 259	1401	2102	9			Q.M.S. chgs Mch.
May	1-31	31		34	10	31		3	10						37	20	1457						3-478 G.C. C.P.19.3-5-16		170		9734	4380			1428	1045	5	109		
checked, LaPaterie	June	1-5	5		5	50	5			60					6	00																1100	55			
	June	6-30	25	1.10	27	50	25	10	2	50					30	75																1413	0			Obs No 1. 202 Coy 21st Bn May/1915 Unsuccessful on Sept 15 days 5d.
	July	1-31	31	1.10	34	10	31	10	3	10					37	20																1785	0			
	Aug	1-31	31	1.10	34	10	31	10	3	10					37	20							Rmce 15/8				2433			2433		1911	37			
Checked. J. Merston	Sept	1-6	6	1.10	6	60	6	10		60					7	20							Cash 7/9				973			973		1911	47	188	84	Trans P.R.O 7/9/16 P.R.O DO Dep 11/16
	Dept														56	08														3806		1889	94			Error of 10¢ in May 31 Belec
	Oct	7-30	24	1.50	36		24	20	4	80	24	10	24	-	64	80	1726		1857						4867		6813					1168	0	1369	4	
	Nov	1-31	31		46	50	31		6	20	31		31		83	70	Prog Cert		2753	31/10/16					3893		4867					876	0	1330	4	
	Dec	1-30	30	.	45	00	30	.	6	00	30		30		87	00		2455	15 11/16	2636	31 11/16						4350	3893					8273	1313	1	130	
	Jan 1917	1-31	31	.	46	50	31	.	6	20	31		31		83	70		2971	15 12/16			1544	Aug 15/16 9/11/16				8273		244				8517	1294		130	
					69	60			69	60																										
	Jan	1-31	31	1.20	52	70					31		31		83	70	3216	Canm	31/8	15 1/17	3444	31 1/17	1457	80m Workman	255	3893	4350		243			8371	1258	3	130	
															96	59																8805				

Countersigned Pay Kit
A.P.M. Canlay
20/5/19

13

Pay. 1.80
Fa. .20
Subs. 1.00
3.00

a/sgmt

59525 - Corpl. Jones G.G.L.

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
															96598														8010	12583		130 00		
Feby 1/28	28	1.20	47	60					28	1.00	28	00			75 60			3676	15/7	3944	28/7	11044 3-8-16 16449 23-9-16 1286 26-2-17 823 5-5-17 1767 32-8-17	CCH Workington C C A C CCH Workington		38 93	31	63	43 43 43 43			70 56	130	87		180	
Mar 31	31		52	70					31		21				83 70			4196	10/8	4373	31/3			38 93	34	34	43 43 43 43			82 72	131	85			
April 30	30		51	00					30		30				81 00			183	16/4	407	10/4				3893	3893				7786	13499				
May 31	31		52	70					31		31				83 70			632	15/5						4380					4380	17489				
June	30		51	—					30		30				81 —			1045	15/6	1288	30/6				73 00	48 67				121 67	134 22				
July	31		52	70					31		31				83 70			1441	13/7	1735	31/7				43 80	43 60				87 60	130 32				
Aug	31		52	70							31				83 70			1962	15/8	2145	31/8				38 93	43 80				82 73	131 29				
Sept	30		51	—							30				81 —	117 Co				195	30/9			38 93		38 93				77 86	134 43	P	130		
															1619 34														1884 95					
																													3553					

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	REC. ALLOW.
Oct 1	Bal Frwd	~~134 4 3~~							134 4 3		
Oct		83 70		4R 2476 25/10 LAO	43 80						
				9648 26/10/17 Lao	43 80				130 53		
		83 70			87 60						
Nov.	2 days @ 3	90		AR 10153 LAO. 15/11/17.	38 93.						
	No Roll P.T.O. 26/10/17 to 31/10/17. 6 days @ 30	180		AR 19862 LAO. 29/11/17.	43 80						
Dec	31 days @ 3	93		AR 23766 " 8/12/17.	43 80				130		
				AR 29440 " 15/12/17.	43 80				145		
		184 80			170 33						
1918				Same on Roll 26/10/17							
Jan	31 days @ 3	93		A.535-206. 6/11/17.	8 56						
				AR 63239 LAO. 8/1/18	43 80				185 64		
		93			52 36						
Feby	28 days @ 3	84		AR 94788 LAO. 19/2/18	43 80						
		84		AR 82082 " 23/1/18	38 93.				186 91		
					82 73						
Mch 31	31 Days @ 3.00	93		AR 5986 " 14/3/18	45 67						
				AR 7922 " 19/3/18.	48 67						
				AR 11721 LAO 28/3/18	43 80				138 77	130	
		93			141 14						

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	REC. ALLOW.

14/3/18

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:-	EFFECTIVE DATE:-
AMOUNT:-	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

L.P.C. Compiled 3-12-18. E Paterson
Dis. to Canada. Auth A.G. 3a 2095.
Ex Phlee. $207.89 Def. $130.00

New Pay Book 41892 4/7/18

NAME:- JONES G.J.L.

NUMBER:- 59525

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
HQ DO 208	26/10/18	To be Sgt M.S.
HQ Do. 279. 28/11/18	28-11-18.	~~Sgt~~ Sgt M.S.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 21st Battn

DATE ACCOUNT FIRST OPENED:- 1-6-1915

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Redcross
			Hagos
HQ Do. 279. 28/11.	28-11-18.	25/1/19	Gen. Depot. NEW

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
~~14-11-18~~		~~London~~	~~48 67~~				
~~28-11-18~~			~~43 80~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
HQ. DO 208	1 80	20		1
~~Do. 26. 28/11/18.~~	~~1 80~~	~~20~~		
HQ Do. 279. Eff 28/11.	1 80	20		—

Red Cross.

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918											
March 31	Balce Forwd								138 77	130	
April	P & A	90		AR 1640 L.A.O 17/4/18	48 67						
				AR 3930 " 29/4/18	38 93				141 17	130	
		90			87 60						
May	P & A	93		AR 6314. 15.5.18	48 67						
				AR 8342. 30.5.18	43 80				141 70	130	
		93			92 47						
June	P & A	90		AR 11910 21/6/18	43 80						
				AR 10963 14/6/18	48 67				139 23	130	
		90			92 47						
July	P & A.	93		AR 14806 L.A.O 5-7-18	48 67						
				✓ 18502 ✓ 24-7-18	53 53				13003	130	
		93			10220						
Aug	P & A.	93		AR 22122. Rec. 19/8/18	48 67						
				AR 26311 " 23/8/18	43 80				13056	130	
		93			92 47						
Sept	P & A.	90		AR 36146. L.A.O. 20/9/18.	38 93						
				AR 31876 " 9/9/18.	48 67				13296	130	
		90			87 60						
Oct	P & A.	93		AR 46903. L.A.O. 10/10/18.	48 67						
				AR 54919 " 25/10/18.	43 80				13349	130	
		93			92 47						
Nov.	P & A.	90		Invalided Sub. 29/11/18 to 30/11/18. 2 days.		2.			22149		
				AR. 65215 L.A.O 15-11-18	48 67				17282		
				AR. 7+325 ✓ 28-11-18.	43 80				12902		
Dec.	P & A.	62.		✓ ✓	✓				19102		
	Interest on Def. Pay.	1687		✓ ✓	✓				20789	130	
		1687			92 47 ->						

Deduct Appeal Pay N.L.
Gratuity 15/5/19

NUMBER 59525 RANK W.M.S. NAME Jones G.J.L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 59525

2 Rank. A.S.C.M.S.ergeant

3. Name. Jones, George James Linden

4. Unit. No. 3 District Depot.

5 Date of Discharge | 28.1.19. | Place Kingston, Ont.

6 Reason for Discharge Demobilization

7. Authority. 3DD 3. J.192, D. 23.1.19.....P.O.1343

8. Proposed Residence after Discharge ~~Brighton, Ont.~~ 95 Ellsworth Ave Toronto, Ont- 9-9-20.

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.? 39

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Medical Documents Forwarded to [redacted] B.P.C. on APR 7 1919

Place Kingston, Ont.

Date 28.1.19. Date

Signature (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

MM

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No.

2. Rank.

3. Name.

4. Unit.

5. Date of Discharge ..... 19..... Place .....

6. Reason for Discharge .....

7. Authority .....

8. Proposed Residence after Discharge .....

9.

CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. No. .....

.....

.....

Signature of Soldier.

10.

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place .....

Date .....

.....

Signature.....

(O. C. Discharging Unit.)

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 135
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

ORIGINAL

MEDICAL HISTORY SHEET.

264
55-7-C
6 JUN 1916

Surname Jones. Christian Name George Johnson

Examined { on 5th day of Nov. 191 4
at Kingston

Birthplace { City or Town Pakenham Ont
County Canada

Apparent age 23 4

Trade or occupation Civil Service Clerk

Height 5 Feet 4 2 Inches.

Weight 1 Lbs.

Chest measurement { Minimum 3 3 inches.
Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left.
Number none

When Vaccinated last 1911

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by J. P. Bark
Rank Capt. A. M. C. M.O.

Date	Fit or Unfit	Examined for Re-engagement,	
29/8/16		C. Gaylord Capt	M.O.
27/11/16	B II	C.K. Wallace Capt Canada	M.O.
15 JAN 1918	B III	C.K. Wallace Capt Canada	M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations.	
4/4/15		F. Etherington Maj A.M.C.	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
1/4/14		F. Etherington Maj. A.M.C.	M.O.
3/12/14		F. Etherington Maj. A.M.C.	M.O.
			M.O.

Enlisted on 5 day of Nov. 1914 at Kingston

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	21st CANADIAN BATTALION.	59526		
Transferred to..				

Medical History Sheets of all men proceeding overseas must be forwarded by Officer Commanding their unit to the Records Office England.
Lieut.-Col. In Charge of Records Canadian Contingent

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bearwood CH.	Aug 29/16	V D H.	Permanent Base Duty
3 Southampton St London W.C. 2.	30/11/17	" " "	B III unlikely to be raised in next 6 mos. Pro'd.
18 Berners St London	2/2/18	W. D. H.	B III not likely to be raised in category within six months

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.

M. F. B. 313.
50M—8-14.
H. Q. 1772—39—439.

Witley 4/12/18 V.D.H. B III Geo. R. Hammond Capt. A.M.C.

21st Battalion (C.E.F.)

Bernfield. Jan. 22/19. V.D.H. C.T. R. Buell Capt

Corpl. G.J.L. Jones

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital. Day	Month	Year	DATES OF Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Kingston		19	2	15	22	2	15	Influenza	4	Recovered	H Bowen Capt:
3rd Western Genl Hosp: Cardiff	27-5-16	27	5	16	7	7	16	Appendicitis & Pneumonia	42.	Convalescent. Transfer. to Wokingham.	
Can. Conval. Hospital, Bear Wood.		7	7	16	29	8	16	do	54	Discharged to C6 ab. P.B. duty	J.A. Briggs Capt. Can. M.C.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

O Inf 14209.

CERTIFIED CORRECT
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 2nd Battalion.

Regimental No. 59525 Rank Pte Name Jones G. J. Lt.

Enlisted (*a*) ~~19.10.14~~ 5-11-14 Terms of Service (*a*) Duration of war. Service reckons from (*a*) ~~19.10.14~~ 5-11-14

Date of promotion to present rank 15.5.16. Date of appointment to lance rank ____ Numerical position on roll of N.C.Os. ____

Extended ____ Re-engaged ____ Qualification (*b*) ____

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Disembarked	Boulogne	SEP 14 1915	
		From: Corpl.	to Sanding	20.5.16	P. 2. D.O. 4 20/7/16
23/1	5 C.F.A.	Influenza	D.R.S. Sodeke	16/1	a36 23/1/16 B213. 30/1/16 DCR 74
23/1	5 C.F.A. D.R.S.	Mitral Regurgitation	5 C.F.A. D.R.S.	16/1	" 23/1 " 75
30/1	5 F.A. D.R.S.	Influenza.	To Duty	26/1	" 30/1 " 78
	3 Bn.	Granted leave	—	1.5.16 to 10.5.16	B13 5/5/16
26/5	3 Can Sec	Invalided to Eng. Sick for appendicitis developed Pneumonia	H.S. George	26/5	3683 26/5/16 9th Order No 83 dy 7/6/16
26/5	3 Can Sec	Appendicitis pneumonia	to Eng	26/5	3836 26/5
		Re-appendicectomy	H.S. George	26/5	a36 26/5

Takwn On Strength CCAC Pt. II. D.O. 202-2-6-16-
Attached from CCAC to CanRed X Soc.,
pt II D.O. No. 3836-8-9-16

McCrostie LIEUT.
FOR LT COL.
A.A.G.

(*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.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
16th Feby		Promoted Acting Sgt., with pay, Taken on Strength C.C.A.C.	London	H.Q.L.T.Ltr.T.L.D. 2-J-46 Pt. II D.O. No. B.M.16217.	
10/3/17		~~ATTACHED~~ TRANSFERRED FROM C.C.A.C. TO East Ont Regt Depot		PART II D.O. No. 171 3-4/5/17	
2					
26-10-17	P/c HqCLA	To be acting Staff Quartermaster Sergeant	London	26/10/17 Pt II D.O. 208	26-10-17
31-10-17	"	Ceases to be attached to Hq's C.L.A. on reposting to Hq's C.M.H.Q. London.	London	Pt II D.O. 212.	
1-11-17	HQOMHQ	attached to HQOMHQ from E.O.R.D. on reposting from HqCLA	London	1-11-17	Pt II D.O. 201
28-11-18	do.	Ceases to be attached to HQOMHQ on returning to E.O.R.D.	do.	28-11-18	Pt II D.O. 279.

Lieut. for,
Officer Commanding
CANADIAN TROOPS, LONDON AREA.

Lieut.,
Officer i/c Details,
H.Q. C.O.M.F.

PART I.

A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 59525 Rank S.Q.M.S. Surname JONES. Christian Name George James Lindon.

Unit or Corps—(*a*) Overseas from United Kingdom 21st (*b*) In United Kingdom 21st Bn

Born at—Town Pekenham County or Province Lanark. Ontario. Country Canada.

Date of Birth—Day 25 Month July. Year 1891 Age 26 yrs. 6 months.

Joined at Kingston. Date 19th October/14

Former Trade or Occupation Civil Service.

Permanent marks or peculiarities that will serve for future identification:—

Four-months Appendix scar about four inches long, five stitch holes on either side. Tuft of hair on left side of back.

Height—feet 5 inches 5½ Colour of eyes Grey

Signature of Soldier (*for identification purposes*) G. J. Jones

Medical Report.

☛ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*). V.D.H.

Disabilities Group (*b*). Not applicable.

Disabilities Group (*c*). Not applicable.

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Strain on Active service.	On active service.	May 1915
(*ii.*) As to Group (*b*) above.	not applicable		
(*iii.*) As to Group (*c*) above.	not applicable.		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? No If yes, has Active Service aggravated it?

(*ii.*) As to Group (*b*) above? not applicable If yes, has Active Service aggravated it?

(*iii.*) As to Group (*c*) above? not applicable If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? Yes

(*ii.*) As to Group (*b*) above?

(*iii.*) As to Group (*c*) above?

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? not applicable (*ii.*) While off duty? not applicable

(*iii.*) Was a Court of Inquiry held? (*iv.*) Where? not applicable (*v.*) When? not applicable

(*vi.*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Had enlargement of heart July.1915 at Sandling, sent on leave. Went to France September 1915. Had a chest condition before operation for Appendicitis, after operation developed Pneumonia. At the 3rd Canadian Gener Boulogne 12/5/16 to 26/5/16, came to 3rd Western General Cardiff 27/5/16 to 7/7/16 then to Bearwood C.C.H 7/7/16 to 29/8/16. complained of shortness of breath and giddiness in France, marked V.D.H. ugust 29/1916.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

V.D.H. Mitral systolic still present. Has shortness of breath. Dizzy spel when tired.
Respiratory system-Normal
Nervous system-slight tremor of hand.
Digestive system-suffers from Indigestion.
Circulatory system-V.D.H.

8. OPERATION. (*i.*) Was one performed? not applicable.

(*ii.*) If so, state what.

(*iii.*) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? No

(*ii.*) If so, describe.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty?

(*b*) Fit for base duty? Yes. B.111 unlikely to be r ised within six months.

(*c*) Invalid to Canada?

(*d*) Discharge from the Service as permanently unfit?

Date of Report January 31st 191 8 Signed C. Smith Lt Colonel
Officer in medical charge of case.

Station London.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

R Gibson Captain C.A.M.C.
{Officer i/c Hospital / S.M.O. / Brigade} Strike out one of these.

Dated at 3 Southampton Street, Strand, London. Station, on January 31st 191 8

* Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)?
If not, indicate it. Yes.

12. Is the cause of the disability, fully indicated in Part I. (2)?
If not, indicate it. Yes.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? No. / Aggravated? No. } (*b*) Misconduct of the Soldier { Caused? No. / Aggravated? No. }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
N.A.

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
N.A.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?
N.A.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?
N.A.

18. Remarks.

Man looks healthy, well developed, well nourished. Complains of praecordial pains, dyspnoea and dizziness on exertion. Has nervous tremors and does not sleep well. Since operation for appendicitis has been troubled with constipation an indigestion and is unable to carry on on ordinary diet. Systolic murmur at apex. Slight cardiac enlargement to nipple line. Other systems normal.

19. Recommendation:—(*a*) Fit for duty? No.
(*b*) Fit for base duty? B.iii. Not likely to be raised in Category within six months.
(*c*) Invalid to Canada? No.
(*d*) Discharge from service as permanently unfit? No.

Classification for the Military Hospitals Commission. G.

Date of Board 2/2/18.

President.

Signatures of the Board { Sgd. J. D. Adamson, Capt. CAMC. / C. A. McDiarmid, Capt. CAMC. }

Station 13 Berners Street, London.

Approved [signature] Major, C.A.M.C.
for A.D.M.S., Canadians, London Area.

A.D.M.S. A.D.M.S. CANADIANS. LONDON AREA. LONDON.

Dated at Station 5 FEB 1918 191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

President.

PART I.

A.F.B. 179 Canada (Revised).

Reserved for M.H.C.

Regt. No. 59525 Rank Sgms. Surname JONES Christian Name GEORGE JAMES-LINDON

Unit or Corps—(a) Overseas from United Kingdom 21st Battn. (b) In United Kingdom 21st Battn.

Born at—Town PAKENHAM County or Province LANARK. ONTARIO Country CANADA

Date of Birth—Day 25 Month July Year 1891 Age 26 yrs. 6 months.

Joined at Kingston Date 19 October 1914

Former Trade or Occupation Civil Service

Permanent marks or peculiarities that will serve for future identification:— Appendix Scar about four inches long. Five stitch holes on either side Tuft of hair on left side of Back.

Height—feet 5 inches 5½ Colour of eyes Grey

Signature of Soldier (*for identification purposes*) G. J. Jones.

Medical Report.

☛ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*).
(*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*). V.D. H.

Disabilities Group (*b*). Not Applicable

Disabilities Group (*c*). Not Applicable

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Strain on Active Service.	On active Service.	May 1915
(*ii.*) As to Group (*b*) above.	not applicable		
(*iii.*) As to Group (*c*) above.	Not Applicable		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? no If yes, has Active Service aggravated it? —

(*ii.*) As to Group (*b*) above? not applicable If yes, has Active Service aggravated it? —

(*iii.*) As to Group (*c*) above? not applicable If yes, has Active Service aggravated it? —

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? yes.

(*ii.*) As to Group (*b*) above? —

(*iii.*) As to Group (*c*) above? —

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? Not Applicable (*ii.*) While off duty? Not Applicable

(*iii.*) Was a Court of Inquiry held? Not Applicable (*iv.*) Where? Not Applicable (*v.*) When?

(*vi.*) Opinion of the Court? —

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Had Enlargement of Heart July 1915 at Sandling sent On leave went to Frankston Sept. 1915. Had a Chest Condition before operation for Appendicitis after operation developed Pneumonia. At the 3rd Canadian General at Boulogne. 12/5/16 to 26/5/16 came to 2nd Western General Cardiff 27/5/16 to 7/7/16 then to Beechwood, C.C.H. 7/7/16 to 29/9/16. Complained of Shortness of Breath & Giddiness in France Marked V.D.H. August 29th/16

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

V.D.H. Mitral Systolic still present.
Has Shortness of Breath, Dizzy Spells when
Resp. Respiratory System Normal.
Nervous System Slight Tremor of Hand.
Digestive System. Suffers from indigestion
Circulatory System V.D.H.

8. OPERATION. (*i.*) Was one performed? Not Applicable

(*ii.*) If so, state what. —

(*iii.*) Was one advised and declined? —

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe. —

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? —

(*b*) Fit for base duty? ~~Yes~~ B III probably to be Raised in six months C.7.D.

(*c*) Invalid to Canada? —

(*d*) Discharge from the Service as permanently unfit? —

Date of Report Jan 31st 1916 Signed Chas T Penfield Capt
Officer in medical charge of case.

Station London

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

R. Gibson Capt. RAMC { ~~Officer i/c Hospital~~ / S.M.O. ~~Brigade~~ } Strike out one of these.

Dated at 3 Southampton St. London Station, on Jan. 31st 1916

* Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? yes
If not, indicate it.

12. Is the cause of the disability, fully indicated in Part I. (2)? yes
If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? no / Aggravated? no } (*b*) Misconduct of the Soldier { Caused? no / Aggravated? no }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

15. THE PENSIONABLE DISABILITY—(*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

18. Remarks.
Man looks healthy, well developed, well nourished. Complains of precordial pain, dyspnoea and dizziness on exertion. Has nervous tremors and does not sleep well. Since operation for appendicitis has been troubled with constipation and indigestion and is unable to carry on on ordinary diet. Systolic murmur at apex. Slight cardiac enlargement to mid-axillary line. Other systems normal.

19. Recommendation:—(*a*) Fit for duty? no
(*b*) Fit for base duty? B.III not likely to be raised in category within six months.
(*c*) Invalid to Canada? no
(*d*) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission. C.

Date of Board 2/2/18

Station 13 Berners St, London

Signatures of the Board J. Edwards Capt RAMC
President.
R.A. Wodehouse Major RAMC

Approved [signature]
Major, C.A.M.C.
A.D.M.S.

A.D.M.S. CANADIANS.
LONDON AREA.
LONDON.

Dated at A.D.M.S., Canadians, London Area. Station 5 FEB 1918 191

PART III.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

12/9/18 033 confirmed
C Wallace
Capt Can

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER Jones G.J.L.

RANK Sgt. Maj.

REGIMENT 20

No. 58525

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919	13 / 3.14.13. 2 14.15.16. 17.18.29.30 31.32									1 / 1									D.W. Grossay. Capt.		1 car. #19
																						Work being completed at Kingston Clinic

M.F.B. 465.
150M-5-18.
1772-39-930.

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 3 Southampton St. 30/11 1917

No. 59525 Rank S/2 M.S. Name JONES, G.J.L.

Local Unit H.2.0.M.7 Overseas Unit 21st Battn Age 26

Examination held at 3 Southampton St. Strand London

DISABILITY.
Overseas—~~Local~~
(scratch one out).

V.D.H

PRESENT CONDITION.

In France for 9 mos; evacuated for Pneumonia. Heart - Mitral systolic murmur at apex transmitted to axilla - Some irregularity - Lungs negative - Somewhat anaemic - Condition fair. Complains of shortness of breath - Unlikely to be raised within the next 6 mos.

BOARD RECOMMENDS:—

1. ~~Fit for Duty~~ B III

2. ~~Fit for duty after~~ ..... weeks' physical training.

3. ~~Fit for Temporary Base Duty~~ ..... weeks.

4. ~~Fit for Permanent Base Duty~~

5. ~~Discharge~~

Signatures:—

Members { R Gibson Capt. CAMC President
C K Wallace Capt CAMC

APPROVED

Dated 4 DEC 1917 1917. G O'Reilly Captain C.A.M.C., For A.D.M.S.
for A.D.M.S., Canadians, London Area.

17-5-18-R3 A McKie Capt

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. 59525 | RANK S.Q.M.S. | NAME (IN FULL) Jones G.J.L.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No.

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
2.00		
S/a. M.S. Jones, George Jas. Lyndon, Brighton, Ont.		

ORIGINAL UNIT C.E.F. H.D. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ Nil. | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Nil

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Kingston | DATE Jan 28/19 | REASON Demob. | AUTHORITY 3-J-193 | IF ENTITLED TO POST DISCHARGE PAY

1183

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account							207	89	207	89																									207	89	
Dec											25 3/18		31 12/18		4/19		4	87	50	00	5	00								59	87			148	02	
1-1-19	28	2.00	56		35		12		103				1983						251	02										251	02					100 P. Subs/15 days Clothing
Jan 28/19	183 days		W. S. G.				420	00	A5679								70	00											70	00			350		W.T.W. 25.95 Received
Mar 5/19									G235681								70	00											140	00			280		
Mar 25/19									G370103								70	00											70	00			210		3rd - pay
Apl 24/19									G319497								70	—											280	—			140		
May 23/19									G332513								70												350	—			70		
June 24/19									G925796.								70												420				0		

60m.-11-18. L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

No. 3 District Depot
Paymaster
JAN 22 1919
Kingston, Ont.