Triplicate

ATTESTATION PAPER.

No. 21718

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

11th Battn

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — LeRoy Bell Reilly.
2. In what Town, Township or Parish, and in what Country were you born? — Stanley Bridge Prince Edward Island Canada
3. What is the name of your next-of-kin? — Mrs C W Reilly (Mother)
4. What is the address of your next-of-kin? — Stanley Bridge Prince Edward Island Can
5. What is the date of your birth? — Sept 9/1894
6. What is your Trade or Calling? — Bookkeeper
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? — ~~No~~ Yes 82nd Regiment P.E. Island.
10. Have you ever served in any Military Force? If so, state particulars of former Service. — ~~82 Regiment~~ No
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? — Yes

Lorry B Reilly (Signature of Man).

L B Reilly (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Lorry B. Reilly, 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.

L B Reilly (Signature of Recruit)

Date Sept. 23rd 1914. L B Reilly (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Lorry B. Reilly, 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.

L B Reilly (Signature of Recruit)

Date Sept 23rd 1914. J Anderson Capt (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 Valcartier P.Q. this 23rd day of Sept. 1914.

J Anderson Capt (Signature of Justice)

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

J Anderson Capt (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

Batt 11
Co/ H

Description of L B. Kielly F on Enlistment. G Co 7

Apparent Age 20 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 10½ ins.

Chest measurement.
- Girth when fully expanded 37½ ins.
- Range of expansion 2 ins.

Complexion Med

Eyes G Blue

Hair Auburn

Religious denominations.
- Church of England
- 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).

1 vac l
Small scar 1/8" long lit finger
l dorsum
Scar opp st groin

COPIED Archives COPIES

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 Sept 8/10 1914.

Place Val Cartier

A E MacDermot Capt
C 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 B Kielly 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 of Officer)

Date 8/9 Sept 1914.

Lt. Col
O.C. 11th Batt

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

(S)

Attestation Papers........ 2+1

Declaration of change of name.........

Authority for special enlistments.........

Documents of re-enlisted men.........

Regimental Conduct Sheet.........

Compulsory Stoppages.........

Casualty Forms 1

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 1

Proceedings of Regt. Court Martial.........

Copies of Convictions by Civil Power.........

Company Conduct Sheet.........

Clothing Transfer Certificate.........

Inventory of Kit.........

Last Pay Certificate.........

a.f.B. 178. — 1

Cas card — 1

misc — 1

1 ... card

M. F. W. 62.
50m.—9-16.
H. Q. 1772—39 955.

MX
26.2.30
AC

~~DISCHARGE~~ DOCUMENTS

H. Q. No.........

Name KIELLY ~~LORREY~~ LEROY. Bell.

Regt. No. 21718 Rank pte.

Corps 11th. Batt. C.E.F.

(M)

Died of Wounds 10-9-16.

Medals 2-6-8

07837

10P128

Box 5141

~~AO 200~~ 5141

3
10-22
25-22
27-22
3

(H)

21718 | KIELLY | LEROY BELL

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

D.O.W. 10-9-16

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 5141

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

(649-H-1252)

CARD NO. D

FOLL.

SURNAME. Kielly

CHRISTIAN NAMES Le Roy Bell.

REGL. No. 21718. RANK Pte.

UNIT 11th Bn.

FORMER CORPS 82nd Regt. P.E.I.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Kielly, Mrs. C. H.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS Stanley Bridge, P.E.I.

COUNTRY OF BIRTH Canada. P.E.I. DATE Sept. 9th 1894

PLACE OF ATTESTATION Valcartier, P.Q. DATE Sept. 23rd 1914

O/S 3.4/10/14 H/19.

L. L. 10137. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

Sailed from Quebec per S.S. Royal Edward Oct. 7th

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Brok-Keeper. RELIGION Presbyterian.

DESCRIPTION.

APPARENT AGE 20 YEARS —MONTHS

HEIGHT 5 FEET 10 1/2 INCHES

CHEST MEASUREMENT 37 1/2 INCHES EXPANSION 2 INCHES

COMPLEXION Medium EYES Greyish Blue HAIR Auburn.

DISTINGUISHING MARKS 1 vacc. L. arm. small scar 1/8"
Long lt. finger L. dorsum. Scar 5 p.p.
rt groin.

MEDICAL EXAMINATION. PLACE Valcartier P.Q. DATE Sept. 10th 1914

Present address not stated.

Number 21718 Rank L/Cpl

Surname KELLY

Christian Names Le Roy Bell

Unit 4th Bn. Can. Mil. Theatre of War France

Dates of Service D

Remarks

Latest Address Mrs. Lucy M. Kelly "mother"

197 Kent Street

Roll No. Page 991 Charlottetown, P.E.I.

Lee Roy

NAME Kielly, ~~Leroy~~ Bell

RANK AND CORPS Pte. 4th Battalion (1st Can. Div.) (7 com 11th Co.

H. Q. FILE No. 649-

REGT'L. No. 21718

NO. 502

× FOLL.

CABLE No.	CABLE DATE	NATURE OF CASUALTY
0736	13-9-16.	Died of wounds No 3 Cas Clear Stat Sept. 10th 1916. ✓
A2B2096a	Rouen, 18-9-16.	" " " "

L. L. Job 83225—M. & D. 5812.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
182(1)	No. 3 Can. Fld. Amb. - To No. 2 C. F. A.	2-10-15.	Neuralgia
A456	O.C. No 3 Can. Clear Stat reports	10-9-16	Died of wounds (Gleds)

Name Kielly,L.B. *Rank* ~~Pte.~~ 4Cpl *Reg. No* 21718

Unit 4th Batt (A2)

Next of Kin Canada

25-K-434
From th (Pt II. 39- 9-9-16)

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-10-15	3 C.F.A. - To 2 C.F.A.		Neuralgia	182		
24-10	Rejoined Unit		-do-	204		
10-9-16	No. 3 Cas. Clg. Stn. DIED OF WOUNDS.		GSWDS. A/456 14-9		0-736 13-9	P 14-9-16
War Office Wire P25921		13-9-16				

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

Name Kielly, L.B. *Rank* Pte. *Reg. No* 21718

Unit 4th Batt

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-10-15	3 C.F.A. - To 2 C.F.A.		Neuralgia	182		
24-10-15	Rejoined Unit		"	204		

DISCHARGED FROM HOSPITAL.

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

Kielly, Pte Lee Roy Bell 21718 H.a.g. 649-K-1272

Lt Cpl.

Elig. for 1914-1915 Star. Pte - 4th Bn. 4th Bn. 512

medals & clasp.

Mother Mrs. Lucy M. Kielly
197 Kent St
Charlottetown
P. E. I.

P. of D. Mother as above

(Serial no. 787605.)

C. of D. Mother as above

not married

Desp MAY 15 1920 6 7463 1921 Reg. No 2-25610

OCT 13 1921

Plague Desp. Reg. No. D115-93

D.M.S. 1500.

Surname	Christian Name or Names		Reg. No.
Kielly	L.	B	21718
Rank	Unit	Co.	Troop / Batty.
Pte	4 Batt		
Hospital			Date of Admission

Transferred P 3 C F Amb. Hosp.

P 2 do do Hosp. 2-10-15

3 Cas Clg Station Hosp. 10.9.16

Hosp.

Diagnosis

(1) Later Diagnosis (if changed) Pneumonia

(2) G.S. Wds

(3)

Additional Diagnoses: If more than one state present

Died of Wounds 10.9.16

DISPOSITION Date

REMARKS

C.F. 11.10.15 182

" 14.9.16. A456

EPITOME OF HOSPITAL TREATMENT.

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

D.M.S. 1300.

Surname	Christian Name or Names		Reg. No.
Keilly.	L.	B.	21718.

Rank	Unit	Co.	Troop	Batty.
Pte.	4th. Battn.			

Hospital: #1 Gen. Bulford 2nd. Can. Fld. Amb.

Date of Admission: 14.1.15

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Diagnosis: Syphilis. Neuralgia.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: if more than one state present

DISPOSITION: Rejoined unit:- To Duty 3.4.15

Date: 24-10-15.

A.D. Bk. 1 5H

C.L. 5-11-15. 204.

REMARKS

EPITOME OF HOSPITAL TREATMENT.

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

Place of burial, please

21718 LeRoy Bill KIELLY

died of wounds 10 Sept 1918.

Pucheviller's British Cemetery

Thank you France.

Plot 4 Row B Grave 29

(8915)—Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

Certified Correct
K.O. 101/INF/4/11.

Casualty Form—Active Service.

Regiment or Corps 11th Batt C.E.F.

Regimental No. 21718 Rank Pte Name Le Roy Bell Kielly

Enlisted (a) Sept 23 Terms of Service (a) One Year Service reckons from (a) _____

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.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
23-5-15	OC 4th Bn	Taken on Strength	4th Battn	2-5-15	Pt 2 Orders No 12.
3-10-15	do	Evacuated Sick.	To Hospital	2-10-15	B213.
2-10-15	OC 3 C.F.A.	Neuralgia Adm. 2-10-15	To 2 C.F.A.	2-10-15	A36
3-10-15	OC 2 C.F.A.	Abmla Abscess Adm. 2-10-15	Remaining	2-10-15	A36.
24-10-15	OC 4th Bn	Rejoined Unit	4th Batt'n	22-10-15	B213.
20-2-16	do	Granted 5 Days Leave	To England	15-2-16	B213.
27-2-16	do	Rejoined Unit from leave	4th Battn	25-2-16	B213
15-6-16	OC 4th Bn	Sentenced to 28 Days F.P. No 1, 10-6-16 for:- Throwing down his arms in face of the enemy.	Field	10-6-16	B2069. Part II Orders No 26 d/- 30/6/16
27-8-16	O.C. 4th Bn	Appointed L/Cpl. 12-7-16 vice 19151 L/Cpl. R.W. Thompson. (Promoted)	Field	12-7-16	B.213 Pt 2 O. No.39 d/-
9-9-16	O.C.C.C.S	Died of Wounds	No 3 C.C.S.	10-9-16	Casualty Report d/- 9-9-16. 9-9-16.
9-9-16	do	G.S.W. IV 4 VI 2 adm	do	6-9-16	Pt II O No 42 d/- 15/9/16 A36 D C R 367

J. W. Hogan Captain,
For Lt-Col.
A.A.G. Can. Section

(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		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				

8 2 Kielly R

MEDICAL CASE SHEET

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name
Year 1915	01715	Pte	Kielly	LeRoy
	Unit	Age	Service	
	11 Bn	20	6/12	

Station and Date.

15/1/15

Disease. Chancroid

Address:- 139 ~~Hillsborough~~ St. Charlottown P.E.I.

Complaint:- Sore on penis

~~History~~:- Exposed a month noticed sore three days ago.

Examination:- Chancres on glans penis

16/1 ✓ ✓ ✓ ✓

17 " " "

18 " Improving

19 "

20/1/15 "

21 "

22 "

23 "

24/1/15 "

25 " sick in bed

26 "

27 "

28 "

29 "

Feb. 1/15 "

" 2 "

3/2/15 "

4/2/15
5/2/15
6/2/15
7/2/15
8/2/15
9/2/15
10/2/15
11/2/15
12/2/15
13/2/15
14/2/15
15/2/15
16/2/15
17/2/15
18/2/15
606
+?
20/2/15
21/2/15
22/2/15
24/2/15
25/2/15
26/2/15
27/2/15
28/2/15
1/3/15
2/3/15

606 patient

To be discharged
G M Davis
Capt Camp

Had three Salvarsan & one grey oil

Second Grey Oil March 6th/15
Third Grey oil March 13/15
Fourth " " " 20/15
Fifth " " " 27/15

Register No. DK 414

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. ~~01247-Z-14~~ 10037-2-5

Regt'l No. 21718 Name Le Roi Bell Kielly (Christian Name) (Surname)

Unit 4th Bn Rank L/Cpl Date of enlistment

Date of casualty 10-9-1916 B.P.C. File No. 93042

Was service performed overseas ? Yes

DEPENDENT

Name Mrs Lucy Mysie Kielly Relationship W Mother

Address 197 Kent St
Charlottetown
P.E.I.

Amount of Special Pension Bonus $ Nil Abstracted by D Maher

Eligible for Gratuity Not Eligible $ -

Less amount of Special Pension Bonus paid $

Less Debit Balance of S. A. or A.P. $

Total deductions $ -

Balance due $ - A.D.P.

Cheque No. Date issued

REMARKS : No S.A. paid

Clerk A.T. Mowat

Audited by

Date

M.F.W. 2652
25M—6-20.
H.Q. 1772—39-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

	Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
		Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
30GM-1-19
1712-39-1140

L. L. JOB. 85506 M. & D. 5997.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39 819.

143

E and D.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. C Kielly

Address 139 Hillsborough St
Charlottetown
P.E.I.

Rate 15-50 per m Sept 1st/15 -

By Whom Assigned Kielly D.B.

Regtl. No. 21718

Rank Pte F. Co. 11th.

Corps 4th Batt'n Transf. to 4th Battn.
2 Da - 16/11/15 -

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Casualties
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				Died of wounds Sept. 10/16. C.L. 13/9/16. J.H.S.
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		G 15856	45 .	
Dec.		91802.	15 .	
Jan.	1916	91883	15 .	
Feb.		17791	15 .	
March		17156	15 .	

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

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Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Mrs C. Kielly

PAYMENTS. # 21718

Name of Soldier Kielly D. B.
Pte 11th Bttn

Month.	Year.	Cheque No.	Amt.	Remarks.
			15.00	
April	1916	~~A 3001~~	15	
May		~~E 2136~~	~~15~~	E 2136 - Cancelled
June		X 8984	15	
July		K 13189	15	
Aug.		H 14179	15	Account closed. Cag.
Sept.		~~K 17453~~	~~15~~	Cancelled
Oct.				A/20 2 M. Sept 19 Th. L.
Nov.				180 00 E B X 99 12/6/17
Dec.				
Jan.	1917			Casualties
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

NAME KIELLY, Leroy Bell

Regimental No. 21718 Lte

Unit 11th Battalion

Date of enlistment Sept. 23rd, 1914

Place of birth Stanley Bridge, P.E.I., Can.

Married (yes or no) No

Amount of pay assigned monthly $ 15.00 Sept. 1st

To whom payable Mrs. C. Kielly
139 Hillsborough St. Charlottown P.E.I Canada

Name and address of next-of-kin
Mrs. C.W. Kielly (Mother)
Stanley Bridge, Prince Edward Island
Canada

Date and place discharged 10-9-16

Reason for discharge D of fwds

Character on discharge C.L.a. 456
14-9-16

PAY OFFICE C.E. BRANCH
OCT 1 1916
CANADIAN CONTINGENT

Statement of
MAR 10 1917
Account rendered

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	Remarks, Casualties, etc.
1914																
9-22	10-31	40	1	40 00	40	.10	4 00		44 00 ✓			25 00 ✓			25 00 ✓	
11-1	11-30	30	1	30 00	30	10	3 00	19 00 ✓	52 00 ✓			50 55 ✓			50 55 ✓	
Dec 1	Dec 31	31	1	31 00	31	10	3 10	1 45 ✓	35 55 ✓			33 55 ✓			33 55 ✓	
1915 Jan 1	Jan 31	31	1	31 00	31	10	3 10	2 00 ✓	36 10 ✓			55 ✓		1 65	2 20 ✓	Doc on Rep.
Feb 1	Feb 28	28	1	28	28	10	2 80	33 90 ✓	64 70 ✓							
1/3/15	31/3/15	31	1	31	31	10	3 10	64 70 ✓	98 80 ✓			15 ✓			15	
1/4/15	30/4/15	30	1	30	30	10	3	83 80 ✓	116 80 ✓			25 ✓			25	Transf: 4th Battn 30/4/15.
1.5	31.5	31	1	31	31	.10	3 10	91 80	125 90			3			3	
1.6	30.6	30	1	30	30	.10	3	122 90	155 90			5			5	
1.7	31.7	31	1	31	31	.10	3 10	115 ~~150~~ 90	150 -			~~7 65~~		11 25 12 18	30 43	12.18 Clothing charge 11.25 Vimy Medal
								11 95 7				16 45				Settled.
		Adjustment of exchange						4 39 ✓								
1.8	31.8	31	1	31	31	10	3 10	123 96 35	193 06			5 66			5 66	$35 error in cable brought from June to July.
1.9	30.9	30	1	30	30	10	3	187 40	220 40			8 10			8 10	
1.10	31.10	31	1	31	31	10	3 10	212 30	246 40			5 24	15		35 24	
1.11	30.11	30	1	30	30	10	3	211 16	244 16			2 68	15		17 68	
1.12	31.12	31	1	31	31	10	3 10	226 48	260 58			11 60	15		26 60	
1/1/16	31/1/16	31		31	31		3 10	233 98 2	268 08			10 47	15		25 47	
1.2	29.2	29		29	29		2 90	242 61	274 51			124 27	15		139 27	£25 Cdn 21/6
		526		526			526 0	135 24 4 39	582.99			332 67	90	25 08	447 75	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
				526			52.60	439.	582.99.			33267.	90.	25.08	447 75	
Mar 1	31	31	1	31	31	10	3 10	135 24	169 34			10779	15.		122 79	
								X4655								
																Checked M
				557.			55.70	439	61709			44046	105	25 08	57054	

Sch No 192
Cash found in effects 1.89

Carried forward to Large Ledger sheet

MARRIED OR SINGLE S.

PLACE OF BIRTH Stanley Bridge P.E.I.

NAME AND ADDRESS OF NEXT OF KIN Mrs C. W. Kelly
Stanley Bridge P.E.I.

RELATIONSHIP OF NEXT OF KIN mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

ADJUSTMENT OF A.P. FROM OTTAWA
Authority 649-K 12 72
Amount 15.00 Reason Credit
Sept 16 not Paid
Statement 6024

CASUALTIES. PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Appt. L Corp.	3.7.16.	B.O. 39.
Died of Wounds.	10.9.16.	C.R. 9/456 14/9/16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO 21718. RANK Pte. NAME Killy Leroy Bell.

IF IN PERMT. CORPS WHAT UNIT UNIT 4th Bde. TRANSFERRED TO N/C B. DATE 11.9.16 AUTHORITY C.R. 9/456 14/9/16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 23.14 TRANSFERRED TO DATE AUTHORITY

PAY OFFICE N. L. BRANCH OCT 21 1916 CANADIAN CONTINGENTS

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Mrs C. Kelly 139 Hillsboro St. Charlottown P.E.I. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 16-9-16. EFFECTIVE 1-10-16 REASON Died of Wounds. 10-9-16 C.R. 14.9.16 A456

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 11-9-16

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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
															617 09												90 105		570 54	46 55				
April 30	30	1	30		30	10	3								33	882	6/4/16	895	24/4/16					261	261			15.		20 22	59 33				
May 31	31	"	31		31	"	3 10								34 10.	930	9/5/16	959	23/5/16					255	255			15.		20 10	79 33				
June 30	30	"	30		30	"	3								33													15.	3080	45 80	6053				28 Days to 17 P.B.O. 26 30/6/16
July 31	31	"	31		31	"	3 10								34 10.			1048	23/7/16						262			15.		17 62.	77 01				
Aug 1	31	"	31		31	"	3 10								34 10.	1107	25/7/16	1147	8/8/16					262	262			15.		20 24.	90 87				
Sept 1	10	"	10		10	"	1 -							2 -	11 3 -	1191	15/9/16							349				15.		18 49.	86 38				app't Cpl B.7.16 B.O. 39 6 days C.S.
Checked W Turner Oct	-	-	-		-	-	-		-	-	-				-																86 38				Trans to N.S.B. C.R. 9/456
																								Pat Trans N.E. Branch							86 38			
N.E.B. Feb/17.														1.89	1.89																88 27				C.R. 1 & 2 G.S. Sch. 592. 1/1/16.
" " " Apr/17																								88 27						88 27	Ø				88 27 L.O. Ottawa for Sett 10/4/17
1917 Sept													15 00		15 00										15 00					15 00					C.R. 15.00 Sept/16 a/Pay Recd Stat. 24. 15.00 to Ottawa for settlement Voucher 106

Sch. No 59
Cash found in effects 1.89

Statement of
MAR 10 1917
Account rendered

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4				Credit	Debit			

DUPLICATE.

21718.

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname KIELLY *Christian Name* Leroy,

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Stanleybridge, County P.E.I.

Examined ... ... on 21st day of Sept. 1915,
at Valcartier.

Declared Age ... ... 20 years days.

Trade or Occupation ... Book-keeper.

Height ... ... 5 feet 9 inches.

Weight ... ... 165 lbs.

Chest Measurement — Girth when fully Expanded 37 inches.

Chest Measurement — Range of Expansion 3 inches.

Physical Development ... Good.

Vaccination Marks — Arm ... Right / Left

Vaccination Marks — Number 1

When Vaccinated ... ...

Vision ... ... R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ...
(*a*) Small scar ⅛" long, back l.little finger.
Opened scar rt. groin.

(*b*) Slight defects but not sufficient to cause rejection ... ...
(*b*)

Approved by (*Signature*) G. H. Jardine,
(*Rank*) Capt. C.A.M.C.
Medical Officer.

Enlisted ... ... at
on 14th day of January 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
Transferred to	4th Bn.	21718.

Became non-effective by ...

on day of 191

(*Signature*)

(*Rank*)

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

W.R.WARD,
Colonel in Charge of Records,
Canadian Contingents.

(4887.) W. 9597/1588. 500M. 9/15. C. P., LTD.

Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick L

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			
No.1. Gen.Hosp. Bulford.	10	1	15	3	4	15	Chancre.	84	

List in the case of Warrant Officers treated in quarters.

bearing on the cause, nature, or treatment of the case, likely to be of interest or of future e. In cases of syphilis, admissions and re-admissions to hospital will be shown. The bsequent progress, including particulars of treatment out of hospital, transfers, &c., will given in the special syphilis case sheet.	Signature of Medical Officer
Treatment given:- 3 doses Salvassan, 5 grey oil. March 31. 1915.	G.M. Davis, Capt. C.A.M.C.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
October, 1914.	Vaccination.

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of the C.A.M.C. for the Officer in Charge of Records Canadian Contingents.

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

41573 C

Rank and Name	KIELLY, Leroy Bell
Regimental No.	21718
Unit	11th. Battn.
Date of enlistment	Sept 23rd. 1914.
Place of birth	P.E.I.
Married (Yes or No)	No
If in Permanent Force	
Promotions or appointments	

Name and Address of Next-of-kin
Mrs. C. W. Kielly, (Mother)
Stanley Bridge,
Prince Edward Island. Can.

Date and place of discharge

Reason for discharge

Character on discharge

KIA Bg
Died of wounds 10/9/16

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	DCM. BR REMARKS Taken from Official Documents 43
27.4.15	OC 11th Bn	Transferred to 4th Bn	Shorncliffe	26.4.15	Pt II. O. Orders.
23.5.15.	O.C. 4th	Joined the 4th Bde.	France	2.5.15.	Part II orders #12.
10.10.15	CO. 182 4th	Neuralgia.	3 Can. Field Amb.	2.10.15	To #2 C.F.H.
5.11.15	C.O. 204 4th	(— " —)	Rejoined Unit	France.	24.10.15
29.2.16	4th Bn	Granted 7 days leave	Field	15.2.16	Pt II DO 10
30.6.16	" "	28 Days F.P. No 1 for throwing down his Arms in face of the enemy	Field	10.6.16	Pt II-26
9.9.16	" "	App. L/Cpl.	"	12.7.16	Pt II-39
14.9.16	OC. 3 Can Cly. Stn.	Died of wounds.	3 Ca. Cly. Station	10.9.16	G.R.O. 456 - (Gunshot wds)
18.9.16	"	— " —	—	10.9.16	Pt II-42

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				