

30-4-18

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

Attestation Papers..... 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 34

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

DISCHARGE DOCUMENTS

Name BAKER Ernest Edward

Regt. No. 769404 Rank L/Cpl

Corps #2 Gas Unit (late 124th Bn)

R. O. No.....

H. Q. No.....

9-18
26-18
28-18
2

AO-16-368

M. F. W. - 67-1
R-149-

This space to be for numbers.



Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 769404	
Rank Lance-Corporal,	
Name BAKER, Ernest Edward, <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) #2 Casualty Unit, (late 124th Bn.)	
Date of Discharge April 15th., 1918.	
Place of Discharge Toronto, Ont.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....40.....years.....9.....months. Height.....5.....feet.....3 ³ / ₄inches. Complexion Fresh, Eyes Brown, Hair Light, Trade Cook, Intended place of residence } 66 Ossington Ave., (To be given as fully as } Toronto, Ont. practicable.)	Descriptive Marks Tattoo of I.L.N.C. Love. N.C. on left arm.
2. The above-named man is discharged in consequence of PHYSICAL UNFITNESS	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc. Very good <i>[Signature]</i>
	<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) Cook

M. F. B. 218.

100m.—6-16.
H. Q. 1772-30-113

W. S. G. Comp
23/1/19 J.B.

K.C. 12/1/20
K.C. 12/1/20

(OVER)

5. He is in possession of the following number of G. C. Badges:

N I L

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

N I L

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....Toronto, Ont......

(Date).....April 15th., 1918......

Commanding

For O. C. Casualties, C. E. F., M. D. No. 2

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place).....Toronto, Ont...... E. E. Baker (Signature of Soldier.)

(Date).....April 15th., 1918...... H. S. Beemer (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....2..years108days.

Total 2..years108days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place).....Toronto, Ont......

(Signature)

For O. C. Casualties, C. E. F., M. D. No. 2

(Date).....April 15th., 1918......

Lieut.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron } Battery } Company }	Conduct Sheet, " B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>	
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Cer- tificate,	" D. 877.		
*Only if discharged "Medically unfit."			

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Auth. Letter H.Q. File - 16-4-21

CHANGE OF ADDRESS

709404

No. _____ Rank *1st Lt* Surname *Baker* Christian Names *Ernest E*

Address _____
_____ *772 Richmond St* _____
_____ *West Toronto* _____
_____ *Ont* _____

Right
21/4/21

D-19.
LHP.

+

16
Section *awards*

Does not
22/4/21

ORIGINAL

ORIGINAL

124th ✓✓

ATTESTATION PAPER.

No. 769404

GOVERNOR GENERAL'S

Folio.

BODY GUARD

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

6

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Baker
- 1a. What are your Christian names?..... Ernest Edward
- 1b. What is your present address?..... 375 King St., W., Toronto, Ont.
2. In what Town, Township or Parish, and in what Country were you born?..... London, England.
3. What is the name of your next-of kin?..... Violet Baker,
4. What is the address of your next-of kin?..... 375 King St., W., Toronto, Ont.
- 4a. What is the relationship of your next-of kin?..... Wife
5. What is the date of your birth?..... June 26, 1877
6. What is your Trade or Calling?..... Cook
7. Are you married?..... Yes.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?..... Yes. 48th High. 3 1/2 Yrs. 12 E.S. Imp.
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... Yes.
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Ernest Edward Baker, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date 30th December 1915. Ernest E Baker (Signature of Recruit)
A. Malone (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Ernest Edward Baker, 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.

Date 30th December 1915. Ernest E Baker (Signature of Recruit)
A. Malone (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 Toronto this 30th day of December 1915.

James May (Signature of Justice)

Description of Ernest Edward Baker, on Enlistment.

Apparent Age.....36.....years.....6.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height.....5.....ft.....3 $\frac{3}{4}$ins.

Tattoo of I.L.N.C. LOVE.

Chest measurement. { Girth when fully expanded.....35 $\frac{1}{2}$ins.
Range of expansion.....3 $\frac{1}{2}$ins.

N.C. on left arm.

Complexion.....Fresh.....

Eyes.....Brown.....

Hair.....Bight.....

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

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.....30th December.....1915.....

Place.....Toronto, Ont.....

Sam H. Havel
Capt
Medical Officer.

Toronto Recruiting Depot.

*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.

.....Ernest Edward Baker,.....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.

Charles H. L. L.
(Signature of Officer)

Date.....1 JAN 8 - 1916.....191.....

Q. C. 124th OVERSEAS BN. C. E. F.

SURNAME.

Baker

CARD NO.

I Ar

CHRISTIAN NAMES

Ernest Edward

S.O.S. Dis 15/4/18.2
and Pt II 102 of 12/1/18
Dep Impl. Cas.

REGL. NO.

769404

RANK

Pte

UNIT

124th

FORMER CORPS

48th Regt. (Highlanders) 3 1/2 yrs 12th E.S.

Batt

NEXT OF KIN.

CHANGE OF ADDRESS

Imperial

NAMES IN FULL

Baker Mrs Violet

RELATIONSHIP TO SOLDIER

wife

ADDRESS

135 Wolseley St, Toronto, Ont.

54-21-82-1

22-6-17.

C.C.



COUNTRY OF BIRTH

England London

DATE

PLACE OF ATTESTATION

Toronto

DATE

Sailed from Halifax per S.S. Cameronia

L. L. 6945

M. & D. 6994

1/8/16 505
4

M. F. W. 27.

100M. - 816

H. Q. 1772-39-399

1/8/16 505
#2

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Number 769404

Rank L. Col.

Surname BAKER.

Christian name Ernest Edward

Units ~~4th~~ Can. Lab. Bn. Theatre of War France.

Date of Service 14-3-17.

Remarks 237 LIPPINCOTT ST.

Latest Address ~~472 Richmond St.~~
W. Toronto.

Roll No. ~~B Page 19802~~ cont.

(This form to be filled in by all ranks on voyage to Canada.)

.....

R

RANK

SURNAME

INITIALS

UNIT

.....

al address.....

(Street)

(City or Town)

(Province)

one person to be notified of arrival.....

Station in Military District to which a furlough warrant is required.....

Railway.....

d, is your wife on board.....

Number of children on board.....

estination.....

(Sgd.).....

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....1244 Bn C.E.F.....

(2) Regimental Number.....769404.....

(3) Full Name of Soldier.....Ernest Edward Baker.....

(4) Place of Birth.....Lambeth England.....

(5) Are you married, or not?.....married.....

(6) If married, state,
(a) Full name of your wife.....Joice Annie Baker.....

(b) Present Postal Address.....83 Robinson St Toronto.....

(7) Are you a widower?.....no.....

(8) Have you any children?.....yes.....

If so, give number of boys and girls.....2 boys 1 girl.....

Also their names and ages.....

Teddy Baker age 7

William " 9

Margaret " 4

(9) Is your Father alive?.....No.....

If so, state name and address.....-.....

(10) Is your Mother alive?.....No.....

If so, state name and address.....-.....

(11) If your Mother is a widow.....-.....

Are you her sole support, or not?.....-.....

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

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

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?.....No.....

If so, in what Company?.....-.....

Have you made arrangements for payment of your Insurance premium.....-.....

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

Date.....July 30 1916.....




Officer Commanding.



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

Casualty Form—Active Service.

M. F. W. 54.

150 M. 10-15.
H.Q. 1772-39-520.

Unit, Regiment or Corps 124th OVERSEAS BATTALION C.E.F.

Regimental No. 769404 Rank Pte. Name Baker Ernest Edward
C. E. F.

Enlisted (a) 30/12/15 Terms of Service (a) 1 year during the War Service reckons from (a) 1/1/14 30/12/13

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) Book (b) (b) (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				

Embarked Canada Halifax Aug 7/16

Arrived England Liverpool Aug 18/16

22/8/16 CCAE To be Actg. Lce Corp. Bramshott Aug 18/16 Part II Orders 160 d/22/8/16

To be Actg. Lce Corp. Bramshott Aug 18/16 Amendment Part II Orders 180 d/14/9/16

Attached. 51 Batten. 30-10-16. C.C.A.B. Part II P.O. 445, 10-11-16

MAJOR ADJUTANT,

124th BATTALION C.E.F.

4/11/16 Revert to permanent grade. (Auth: Do. 4. 4/11/17.)

The Garrison Duty Battalion, Canadians. (Bramshott, Hants.)

Re-attached to 4th Lbr Btr (Cath. HQ.)

6. J. 12 13/2/17 Ref. No. BN 25-12-7 CAP. 13217.

The Garrison Duty Battalion, Canadians. (Bramshott, Hants.)

(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.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 33, 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				
18 FEB 1917	10th L. Bn	J. O. S. 4 th Lab. Bn	Seaford.	17.2.17	Part 2 A. O. 5
14 MAR 1917	"	Proceeded A/Seas	"	14 MAR 1917	Part 2 A. O. 5 Seaford P.O. 1201 P.O. #29.
16/7/16	10th L. Bn	J.O.S. to CCAC + attached to 4th Bn for B.D.R. st.	Witley	27/10/16	P.O. #242 LIEUT: FOR LT: COL: W/ RECORDS. C.O.M.F.
15-3-17	M.L.O.	DISEMBARKED FRANCE	HAVRE	15-3-17	N OM. ROLL.
1-4-17.	O.C. 4th Lab.	App'd: Lance Corpl.	Field.	1-4-17.	Pt. 11.D.O. No 82. (B.213.)
25.11.17.	do	Scabia Evac	"	17.11.17.	B213.
18.11.17.	2 Angae Corps C/S.	do adm 2 a 6. 65. } 20 3. 66 S }	"	17.11.17.	a36/2734.
23-11-17.	O.C.H/S. "Stad Antwerpen"	Invalided SICK and Posted to 1st Quebec Reg. Dep. Bramshott.		23-11-17.	W.3083/4413. Pt. 11.D.O. No 104.
					Captain. for Lt. Col., A.A.G. CANADIAN SECTION.
1. 12. 17	10th L. Bn		Bshott	23.11.17	Do #236 Lieut. for Colonel i/c Records, Comd.
17.1.18.	1st. Qrs. Regt'l. Depot.	ON COMMAND TO H.Q. for Duty at Quarantine Unit			ADJUTANT 1ST. QUEBEC REG'T'L. DEPT.

CERTIFIED CORRECT.
26 APR. 1917
RECORDS, LONDON.

COPYED
Active
COPYED

Bark, age 36-5714-WT 725
Entered Dec 30/1915
Dashed April 15-1918.
Wm. H. Hance

A.G.R.

Rank

12/cpl

Name

BAKER, Ernest Edward ✓

Reg'l No. 769404 ✓

Unit

124th Bn.

If in perm. Corps, }
What Unit? }

Toronto,

Married or Single

Married ✓

Place and Date of Enlistment

30th Decr., 1915. ✓

Place of Birth

London, England. ✓

Name and Address, Next-of-Kin

MRS Violet A Baker, ✓

135 Wolseley St.

375 King St., W. Toronto, Ont. (Authy: R 29 dated 9.6.17)

Relationship

Wife. ✓

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

N/E. R.B. No. 79

File R.L.

Category OR. Can.

Relationship

Relationship

Discharge, Date and Place

Reason

Character

LPR 1320/135

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received				
C. Arrived in England S.S. Cameronia 13.3.16					
22.8.16	oc. 124th Bn. App'd a/c-cpl	S.O.S. on offer to C.C.A.C. Loc. Cas. r	Bramshott	18.8.16	Pl II DO 130.
16.11.16.	"	Att'd to 5th Bn. for B.D. R.P. 2.6.17	Witley	27.10.16	" 242.
10-11-16	6666. Tos + m Com 12 Bn La PBD		Sharnham	20-10-16	— 495
The 5th Bn. will be now known as the Garrison Duty Bn. Bramshott R 785. 13 7/16.					
8.11.16	For Duty Bn Att to 51st Bn. for BDDROGP		Bramshott	30.10.16	P II DO 250.
4.11.16	"	Reverts to 1st Gde. A.W.L. from 10.30pm. 1.11.17. to 10.30pm. 3.1.17.	"	4.1.17	P II DO 4.
19.2.17	"	Reverts to 4th Bn. att 46th Bn.	"	17.2.17	— 43.
7.3.17	6666 & S.O.S. to 4th Bn.	Reverts to be att. to 51st Bn.	"	17.2.17	— 112.
18.2.17	4th C.L.B. Taken on strength.		Seaford	17.2.17	— 5



2nd
1st

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.				
14.3.17	4th Lab.	Embarked for France	Seaford	14-3-17	Pt/2 O. 29
14.9.17	--	Apptd Lance Corporal	Lt Field	1.4.17	Attd 82.
24.4.17	1st Que R	Adm 3 ban bas bly Str.	Lt --	17.11.17	bl 41. Scabies
29.11.17	--	Adm C of Mds War Hosp.	" St Albans.	23.11.17	bl B 75. Politis
5.12.17	--	Trans Mil Convalesc Hosp	" Epsom	1.12.17	bl B 80. --
1.12.17	1st Q.R.D.	I.O.S. from 4 Lab Bn	Lt Bramshott.	23.11.17	Attd 236.
6.12.17	4 C.L.B. (sick)	posts to 1 Q.R.D.	Lt Fla.	25.11.17	Do 104
29.1.18	20 Res	Attached	" Becht	29.1.18	Do # 25 0/29.1.18 1 Q.R.D.
11.2.18	--	beas. to be Attached	" "	11.2.18	29 Do # 35 0/12.2.18 1 Q.R.D.
12.2.18	23 Res	Attached	Lt " "	11.2.18	43
20.2.18	1 Q.R.D.	S.O.S. to Gen Depot. & on Comd. C.D. pending embarkation to Canada	" "	19.2.18	45. General Depot. Rt 2 47/25.2.18
19.2.18	1st Q.R.D.	on command C.D. Buxton	" Buxton	19.2.18	43
19.2.18	23rd Res.	beas. to be attached	" "	18.2.18	50
11.3.18	General Depot	and SOS to Canada	" Seiffa	26.2.18	59.

A.F.B. 103 CHECKED
2 APR 1917

WSH

COPIED
Archives
COPIED

Ernest Edward BAKER

769404

Canadian Expeditionary Force

26 June 1877

London, England

30 December 1915

Toronto, Ont.

Canada, Britain and France

15 April 1918

Toronto, Ont.

Honourable

Lance Corporal

British War Medal and Victory Medal

Nil

8 February 1984

FEB 9 1984

lom

This space to be left blank
for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	<u>769404</u>	Army Rank	<u>L/Corporal</u>
Name	<u>Baker, Ernest Edward.</u> (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)		
Corps	<u>1. Que. R. S.</u>		
Battalion, Battery, Company, Depot, &c.	<u>124. 98th.</u>		
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge			
Place of discharge			
1.	Description at the time of discharge.		
Age	<u>48</u> years		months
Height	<u>5</u> feet	<u>6</u>	inches
Chest measurement	{ girth when fully expanded		ins.
	{ range of expansion		ins.
Complexion			
Eyes			
Hair			
Trade	<u>Labourer.</u>		
Intended place of residence (To be given as fully as practicable)	<u>Toronto.</u>		
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
		Descriptive marks. <u>Tattoo arms.</u>	

Returned to Canada - Authority - Medical Board of Officers,
held at Bramhall Date 12/1/18 1918.
Category B111

To be filled in on the soldier quitting the Colours.

4. Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

South Africa 1900 - 01.

France 10. Honours

Certificate of education

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

(Place)

(Date) Commanding Battn. Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) (Signature of Soldier.)

(Date) (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. *Statement of service.*

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

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

Total " ..

11. *Confirmation of discharge.*

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

(Place)

Signature

(Date)

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to reserve (if any).
(Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any).
Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any).
Army Form B. 221.)
8. Court of Inquiry on an injury (if any).
(Army Form A 2.)
9. Regimental conduct sheet.
(Army Form B. 120).
10. Company conduct sheet.
(Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet.
(Army Form B. 178).
13. Medical report on invalid (if any).
(Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required.
See section 11 on second page.
19. Active service casualty form.
(Army Form B. 103).
20. Employment sheet.
(Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation.
(On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any).
(Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

Next of Kin Wife, Mrs. Violet A. Baker,
66 Ossington Ave., Toronto, Ont.

Exam. by Capt.
Hyland, Dec. 30,
1915, Toronto.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

Man's Add. Same.

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Ravina Bks. Toronto. DATE Apr. 6th 1918.

1. (a) Unit #2 Ca s. (b) Regimental No. 769404 (c) Rank Op1.

(d) Surname BAKER (e) Christian name EARNEST EDWARD.

2. Age last birthday 48 Date of birth June 26th, 1876

3. Enlisted at Toronto, Ont. on Dec. 30th 1915.

4. Personal description:—

(a) Height 5' 3 1/2" (b) Weight 126 (c) Complexion Fresh

(stripped)

(d) Colour of hair Brown (e) Colour of eyes Brown (f) Identification marks Vacc.

4 on left arm.

5. Address after discharge (for the use of the Board of Pension Commissioners.)

66 Ossington Ave. Toronto.

6. Former trade or occupation Cook.

7. (a) Service

Years

Days

2

98

PERIODS

From

To

124 Battn.

4 Lab. Battn.

#2 Ca s.

Dec. 3 1915

Feb 13 1917

Mar. 19 1918

Feb 13, 1917

Mar. 19, 1918

To Date.

(b) Has he been Overseas? Yes. France.

8. Present disease or disability (use authorized nomenclature if possible). General Debility

Overage

(a) Date of origin 1. Nov. 1917. 2. June 1917. (b) Place of origin 1. and 2. France.

(c) Cause 3. Prior to enlistment. 1. Following Dysentery. 2. Barr June 26th 1876 3. Hypermetropia

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Subjective. (1) Has soreness in chest and Cough (constant). Large

amount of phlegm, poor sleeper. Feels generally weak. Did have

pain in back and legs but none since February. Loosing weight.

Occasionally loss of appetite. Bowels free. Feet swell occasionally.

Objective. (1) General condition poor, muscle tone poor. No swelling of

feet at present. Some arterio-sclerosis. B.P. 158-100. Heart

normal. R. 18. P. 72 at rest after touching toes rapidly 6 times.

R. 23. P. 110 slight dyspnoea. In 2 min. R. 16. P. 76. Chest measures

33-36". Expansion 3" and equal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Tattoo marks both forearms.

Small scar on right shoulder.

Four vacc. scars on left arm.

Teeth in poor condition.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

12. Did the disability arise on or off duty? 1. 2. On duty. 3. Prior to enlistment.

13. Was a Court of Inquiry held? 1. 2. 3. Not Applicable.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes. 1. 2. Not applicable. 3. No.
(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? 1. 2. 3. No.

(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1. 2. 3. Permanent.

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

St. Albans 23-11-17---30-11-17.

Epsom 30-11-17---31-12-17.

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

1. 2. 3. No.

19. Can the former trade or occupation be resumed? No.

20. Recommendations That he be placed in Category E.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

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

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

We Concur.

22. Is the soldier fit for

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

23. It is certified that the soldier

- (a) ~~Does require treatment.~~
 (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).

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

That he be placed in Category "E" and discharged as Physically Unfit
and Overage.

W. J. McLean Major President.
W. J. Clapp Capt. }
E. J. Robinson Members.

STATION Ravina Barracks, West Toronto, Ont.

DATE April 6th, 1918.

APPROVED BY

DATE 11/4/18

APPROVED BY

DATE

J. J. Lusk Capt.
 Assistant Director of Medical Services.

Director-General of Medical Services.

Breath sounds harsh over chest. No rales. Slight dulness in both bases posteriorly. Has irritating dry cough. Still has a little diarrhoea. Goes to Latrine 4 or 5 times a day.

2. Subjective. States he was born June 26 1876.

Objective. Looks age stated. Urine normal.

3 Subjective. Cannot see with artificial light, without glasses. Sees alright during day.

Objective. Reads L. D. 60. R.D. 40 without glasses. Reaction pupil normal. Specialists report attached. Other systems apparently normal.

Incapacity due to general Debility, overage and Defective Vision.

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier'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 soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that 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 and Sons.

OPINION OF THE MEDICAL BOARD

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

We Concur.

22. Is the soldier fit for

- | | | |
|---|---------------------------|------------|
| (a) General service, | (Category A) (Yes or No). | <u>No</u> |
| (b) Service abroad, not general service, | (" B) (Yes or No). | <u>No</u> |
| (c) Home service, (Canada only), | (" C) (Yes or No). | <u>No</u> |
| (d) Temporarily unfit, | (" D) (Yes or No). | <u>No</u> |
| (e) Unfit for service in Categories A, B and C, | (" E) (Yes or No). | <u>Yes</u> |

23. It is certified that the soldier

- (a) ~~Does require treatment.~~
 (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).

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

That he be placed in Category "E" and discharged as Physically Unfit
and Overage.

W. J. McLean Major President.
W. J. McLean Capt. }
E. H. Robinson Members.

STATION Ravens Barracks, West Toronto, Ont.

DATE April 6th, 1918.

APPROVED BY

DATE 11/4/18

APPROVED BY

DATE

J. A. Hunter Capt.
 f. Assistant Director of Medical Services.

Director-General of Medical Services.

Temporary

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. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Baker Christian Name Ernest

TABLE I.—General Table.

Birthplace	{ Parish.....	
	{ County.....	
Examined	{ on.....day of.....191	
	{ at.....	
Declared Ageyears.....days.	
Trade or Occupation	
Heightfeet.....inches	
Weightlbs.	
Chest Measurement	{ Girth when fully Expanded.....inches	
	{ Range of Expansion.....inches	
Physical Development	
Vaccination Marks	{ Arm.....RIGHT LEFT	
	{ Number.....	
When Vaccinated	
Vision	{ R.E.—V=.....	
	{ L.E.—V=.....	
(a) Marks indicating congenital peculiarities or previous disease—	
(b) Slight defects but not sufficient to cause rejection—	

Approved by
Rank
Medical Officer.

TABLE III.—Boards; Courts of Enquiry, 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
<i>Epsom</i>	<i>General Debility</i>
<i>18/12/17</i>	<i>B. III</i>
<i>Bramshott.</i>	<i>as per ...</i>
<i>12.2.18</i>	<i>Debility Brit 92B 179</i>

TABLE IV.—Service Table.

Enlisted	{ at.....	
	{ on.....day of.....191	
Joined on enlistment	Corps	Regtl. No.
	<i>Hth Can. Tab. Coy.</i>	<i>169404</i>
Transferred to		
Became non-effective by	
on.....day of.....191		
(Signature).....		
(Rank).....		

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
County of Middlesex War Hospital, near St. Albans	23	11	17	30	11	17	Scabies Debility.	8	Returned. Discharged to Epsom Hospital.	L. Munnell Major Ramm
M.C.H. Epsom	30	11	17	31	12	17	do.	32	On admission. General weakness patient is white & run down says he is just recovering from dysentery. Scabies cured light duties since admitted 10/12/17. Feels fair. Category B III Discharge for Employment	J. A. Carpenter Capt. Camus

V.D

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>T.F.C. 1866</i> Year	Regimental No. <i>769404</i>	Rank. <i>L/c</i>	Surname. <i>Baker.</i>	Christian Name. <i>E</i>
	Reg. <i>88</i>	Unit. <i>4 Can. Lab. Coy.</i>	Age. <i>48.</i>	Service.
Station and Date.	Disease <i>Scabies. Delirium.</i>			
	<i>18 Nov. Onset with diarrhoea. Quickly improved.</i>			
	<i>On admission 23 Nov. He is weak & has scabies. Sulphur baths.</i>			
	<i>L. Munnell</i>			
<i>27th</i>	<i>here.</i>			
<i>3571.17</i>	<i>Com. Com. L. Munnell</i>			
	<i>Com. Com. Hopt Epsom</i>			

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

Station
and Date.

BAKER, Ernest Edward L/Cpl. 769404 4th.Can.Lab.Bn.

649-B-26208

Medals despd.

Cross Widow; -Mrs. Violet Baker
166 $\frac{1}{2}$ Christie St.,
Toronto Ont.



DESP. MAR 19 41
REGN. NO. 187

No. 769404.

RANK

Pvt.

NAME

Baker, E. L.

T. O. S. 1-1-16

UNIT

124th Battalion C. E. F.

D.O. 2 of 4-1-16.

M. D. 2.

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
Jan. 1.	Jan. 31.	✓	Prom. 1/bpl. 12-1-16.	D.O. 13 of 16. -1-16.
Feb.		✓		
Mar.		✓		
Apr.		✓		
May.		✓		
June.		✓		
July.		✓		
Aug.		n.	Proh/bpl 7.8.16	D.O. 160

DUPLICATE MEDICAL HISTORY SHEET.

Surname Baker

Christian Name Ernest Edward

Examined { on 30th day of December 1915
at Toronto, Ont.

Birthplace { City or Town London
County England

Apparent age 36 years 6 mos.

Trade or occupation Cook

Height 5 Feet 3 3/4 Inches.

Weight 123 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 35 1/2 inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm Right Left 5
Number 6

When Vaccinated last 1899

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection

Tattoo of I.L.N.C. love NC

Nil
on left arm.

Approved by [Signature]

Rank Capt

M.O.

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

Date	Result	VACCINATIONS.
<u>2/8/16</u>		<u>Snacpharm Capt</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1/31/16</u>		M.O.
<u>2/4/16</u>		<u>Snacpharm Capt</u> M.O.
<u>2/9/16</u>		M.O.

Enlisted on 30th day of December 1915 at Toronto Can.

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>124th Bn</u>	<u>769494</u>		
Transferred to.....	GOVERNOR GENERAL'S BODY GUARD			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
Bramshott Camp, Hants	27-10-16	Over age	P.B.D. C.E. Cooper-Cole, Maj.
Approved P.D. Stewart, Maj.			
Bramshott Camp, Hants	26-12-16	" "	B i H.B. Pope, Capt.
Approved. C.H. Young, Maj.			
Bramshott	2-12-16	" "	Class ciii. C.E. Cooper-Cole, Maj.
Approved. D.H. Young, Maj.			

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.

ne Crested Ibis

Date of Arrival
at the
Station.

DATES OF

Admission
into Hospital.

Discharge
from Hospital.

Day

Month

Year

Day

Mon

h	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.

BASE HOSPITAL, M.D. No. 2

From *Officer of Eye Clinic* Toronto, *3/14* 191*8*

To *O.C. Casualties Unit #2*
Reunion Bhs.

Special Report on Eyes of

No. *769404* Rank *Lt. Col.*

Name *Baker R.E.*

In or Out Patient

Unit *124 Bn.*

Right Vision, without glasses, near *D. 5* distant *6/18* with glasses, near distant *6/6*

Left Vision, without glasses, near *D. 5* distant *6/18* with glasses, near distant *6/6*

He is Fit for Category *Fit* Glasses have *not* been ordered

Condition was present before enlistment and is *not* due to Service

Recommend patient for

Disability from Eyes *Int.*

Diagnosis *Hypermetropia + Presbyopia.*

Remarks

Prescribed glasses old.

H. D. Smith
for Lt.-Col. O.C. Base Hospital, M.D. No. 2



Medical Report on an Invalid.

Station Bramshott Camp

Date 10-12-1916

- | | | | |
|-------------------|----------------------------|-------------------------------|-------------------------|
| 1. Unit. | <u>Garr. Duty Batten.</u> | 5. Age last birthday | <u>48 years</u> |
| 2. Regimental No. | <u>769404</u> | 6. Enlisted | <u>on Dec 30th 1915</u> |
| 3. Rank | <u>Lance Corporal</u> | | <u>at Toronto</u> |
| 4. Name | <u>Baker Ernest Edward</u> | 7. Former Trade or Occupation | <u>Labourer.</u> |

8. Disability.

Over age

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

When enlisted

10. Place of origin of disability.

Canada

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Over age p. b. d. 27.10.16
Medical Board. Oct 27th

12. (a) Give your opinion as to the causation of the disability.

over age

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

Not applicable

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Heart, Lungs, Digestive system
Normal

14. If the disability is an injury, was caused

Not applicable

(a) In action?

(b) On field service?

(c) On duty?

(d) Off duty?

15. Was a Court of Inquiry held on the injury?

Not applicable

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what?

Not applicable

17. If not, was an operation advised and declined?

Not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

Not applicable

19. Do you recommend

(a) Fit for duty?

(b) Fit for light duty?

(c) Invalided to Canada?

(d) Discharge as permanently unfit?

fit for permanent-base
duty.

H. E. Wallace Capt. R. C. M. C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station

Bramshott

P. D. Stewart Maj.

Officer in charge of Hospital.

Date

10-12-16

Caule

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

1. *no*
2. *no*

(b) If due to one of these causes, to what specific condition do the Board attribute it?

not applicable.

21. Has the disability been aggravated by

(a) Intemperance? *no*

(b) Misconduct? *no*

22. Is the disability permanent? *yes*

23. If not permanent, what is its probable minimum duration?

not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

none, as compared with capacity on enlistment

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable.

26. Do the Board recommend

(a) Fit for duty?

(b) Fit for light duty?

(c) Invalided to Canada?

(d) Discharge as permanently unfit?

B.T.

not classified

Signatures:—
Bramshott.

Station *Bramshott.*

Date *26 DEC 1916*

W. B. Lofie Capt.
J. P. Graham Capt.

President.

Members.

Approved.

Station *Bramshott.*

Date *27 DEC 1916*

[Signature]
For G.O.C. & Administrative Medical Officer.

Canadian Troops, Bramshott Camp

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at
Folkestone, Kent, England, on the _____ day of _____ 191 _____

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TOPP, C.A.M.C.
LIEUT.-COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER,
Legal Adviser.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

VACAUER & S
WESTMIN

_____ Lt.-Col.	<i>President.</i>	_____ Major.
_____ Lt.-Col.		_____ Major.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at EPSOM 18-12- 1917.

No. 769404 Rank CORPORAL Name BAKER E.E.

Local Unit..... Overseas Unit 4TH CAN. LABOUR B. Age 48

Examination held at M.C.H. EPSOM.

DISABILITY.
Overseas—Local
(scratch one out).

GENERAL DEBILITY.

PRESENT CONDITION.

No improving in health. Eyesight defective.
Has glasses.

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Dutyweeks.
4. Fit for Permanent Base Duty B711 likely to be raised
5. Discharge in Category within six months

Signatures:—

Members {

W. J. Smith President.

APPROVED

Dated Dec 18th 1917.

For A.D.M.S. W. J. Smith

Reserved for M.H.C.

Regt. No. 769404 Rank Lt Col Surname BAKER Christian Name ERNEST EDWARD
 Unit or Corps—(a) Overseas from United Kingdom 4th Can. Bn. P.A.C. (b) In United Kingdom 1st Q.R.D.
 Born at—Town London County or Province Surrey Country England
 Date of Birth—Day 26 Month June Year 1872 Age 48 yrs. 7 months.
 Joined at Toronto Ont Canada Date 30/12/13
 Former Trade or Occupation Labourer

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

Scars vaccination marks betweenHeight—feet 5 inches 3 Colour of eyes BlueSignature of Soldier (for identification purposes) E. BakerMedical 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)

EYESIGHT DEFECTIVE

Disabilities Group (b)

DEBILITY

Disabilities Group (c)

Nil

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.	<u>Unknown</u>		
(ii.) As to Group (b) above.	<u>Exposure to cold and wet</u>	<u>France</u>	<u>17/11/17</u>
(iii.) As to Group (c) above.			

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?

YES

If yes, has Active Service aggravated it?

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

NO

If yes, has Active Service aggravated it?

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

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?

NO

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

YES

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

(i.) While on duty?

While off duty?

(iii.) Was a Court of Inquiry held?

(iv.) Where:

(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).

a) Eyesight was defective before initiation.
A report on condition of the eyes was made
on the 1-2-18.

6) Was admitted to hospital for dysentery on the 23-11-17 and discharged on the 27-12-17. Complaints of frequent attacks of diarrhoea

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

General condition ~~is~~ ^{is} ~~below~~ ^{below} fm.
Signs of chronic bronchitis.
Complains of frequent attacks of diarrhoea
and pain and stiffness
Lost about five pounds in ~~weight~~ ^{weight}
Arteries slightly ~~enlarged~~ ^{enlarged} (S)

8. OPERATION. (i.) Was one performed?

(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?

(ii.) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty? *N*

(b) Fit for base duty? *YES. B III not taking 11 months of leave in 6 months*

(c) Invalid to Canada? *no*

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

Date of Report.....11-2-1918

Signed.....

Station... Braunschweig

Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except that specialists report of 2/1/18 says he is fit as regards sight. M. Mac Donagh

Dated at Wramshott Station, on Feb 12 1918

* Delete if inapplicable.

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%.)

Not applicable

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.)

Not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).

(i.) Is it permanent?

Not applicable

(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?

Not applicable

18. Remarks.

Has had recurrent diarrhoea for past 3 yrs. Diarrhoea lasts from 3 to 4 days. Should improve with change. Pulse rate normal in force & rhythm.

19. Recommendation:—(a) Fit for duty?

No

(b) Fit for base duty?

Yes - But not likely to be raised.

(c) Invalid to Canada?

No

(d) Discharge from service as permanently unfit?

No

Classification for the Military Hospitals Commission.

Date of Board

12 FEB 1918

Station

Bramshott.

Signatures of the Board.

W. R. Slackhouse Capt
W. T. L. Bailie Capt

Approved

D. A. D. M. S. for A. D. M. S., Major

For G.O.C. &

A.D.M.S.

Dated at Canadian Troops, Bramshott Camp

Station

12 FEB 1918

191

Proceedings of a Medical 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:—

Is the cause of the disability fully indicated in Part I (2)?

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

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 unskilled labour?

THE PENSIONABLE DISABILITY.—see Part I (2). Information 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 of none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%)

16. Permanency of the Pensionable Disability estimated next above in (14). (a) Is it permanent? (b) 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? Not applicable

18. Remarks. Has had recurrent attacks of... should improve with change... movement in force...

19. Recommendation.—(a) Fit for duty? (b) Fit for base duty? (c) Invalid to Canada? (d) Discharge from service as permanently unfit? No

Dated at this day of 191

Signatures of the Board. Station. President. Approved. Dated at Canadian Troops, Brampton, Ontario.

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

No. 769404 ^{O/Corp-} Rank PL Name Barker E.B. ²⁻¹¹⁻ 1916.
 Local Unit 51st Bn Overseas Unit _____ Age 48

Examination held at Bramshott, Hants.

DISABILITY.

overage

Overseas—Local.
 (scratch one out)

PRESENT CONDITION.

Otherwise good

Board recommends:

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty. yes class C (III)
5. Discharge.

Signatures:

Members

C. E. Coppell ^{Major} Pres.
E. A. Dickson ^{Major}

Approved.

Bramshott 2. 12 1916.

Officer Major
 for A.D.M.S. E. O. C.
 Canadian Troops, Bramshott.



EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

October 27th 1916.

No. 769404 Rank Pte Name Baker, E.E.

Local Unit 124th Overseas Unit _____ Age 48

Examination held at Bramshott, Hants.

DISABILITY.

~~Overseas~~—Local.
(scratch one out)

Over Age

PRESENT CONDITION.

Specialist Report O.D. 6/18 O.S. 6/18. Glasses will correct.

Board recommends:

1. ~~Fit for Duty.~~
2. ~~Fit for duty after _____ weeks physical training.~~
3. ~~Fit for Base duty _____ weeks.~~
4. Fit for Permanent Base Duty. — yes
5. ~~Discharge.~~

Signatures:

Members { C.E. Cooper ^{Major} Pres.
H. Marchant ^{Capt}
H. [unclear] ^{Capt}

Approved.

Bramshott 24-10- 1916.

[Signature]
for A.D.M.S.
Canadian Troops, Bramshott.

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

BAKER

E.E.

769404.

RANK

UNIT

Co.

TROOP

BATTY

L/C.

1Q. 4Lab.

HOSPITAL

DATE OF ADMISSION

C. of Middlesex Napsbury St. Albans. 23-11-17.

1.

3. Lau. C. C. S.

HOSP. 17. 11. 17.

2.

~~C. of Napsbury St. Albans~~

HOSP.

3.

Mil. Cond. Epsom.

HOSP. 1. 12. 17

4.

HOSP.

DIAGNOSIS

Colitis. b

1.

Scabies. No.

2.

3.

DISPOSITION

DATE

CL. 29-11-17 A75-2.

REMARKS

24. 11. 17 A 61. (3) This entry should precede former (one)

5. 12. 17 B 80 (3)

7. 1. 18 B 106-2

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

B940-4 Lab. Im. an. 20 Res. Bn. Pl. 25-28/118

Original
769404

MEDICAL HISTORY SHEET.

Surname Baker Christian Name Ernest Edward

Examined { on 30th day of December 1915
at Toronto, Ont.

Birthplace { City or Town London,
County England.

Apparent age 36 Yrs. 6 Mos.

Trade or occupation Cook

Height 5 Feet 3 $\frac{3}{4}$ Inches.

Weight 123 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 35 $\frac{1}{2}$ inches.

Physical development Good

Small-Pox Marks NIL

Vaccination Marks { Arm Right Left 5
Number 5

When Vaccinated last 1899

(a) Marks indicating congenital peculiarities or previous disease NIL

(b) Slight defects but not sufficient to cause rejection NIL

Tattoo of I.L.N.C. Love
N.C. on left arm.

Approved by T. H. H. H. H.

Rank Capt M.O.
Toronto Recruiting Depot.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>St Albans</u> 28 NOV 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
2/8/16	8rd	<u>Macpherson Capt</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
1/31/16	8rd	<u>T.A.B. 8.9.18</u> M.O.
2/4/16		<u>Macpherson Capt</u> M.O.
2/9/16		M.O.

Enlisted on 30th day of December 1915 at Toronto, Ont.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>124th Battn.</u>			
Transferred to..	<u>G.G. B. G.</u> <u>GOVERNOR GENERAL'S</u> <u>BODY GUARD</u> <u>6646</u> <u>4th Lab Bn</u>	<u>769404</u>		<u>30.10.16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Ravina Barracks, Toronto, Ont. STATION.

27 OCT. 1916

APPROVED.

Apr. 6. 1918.

1. General Debility

2. Over age

3. Defective vision "E"

Major

W. J. H. H.

PRESIDENT, MEDICAL BOARD, BRAMSHOTT.

Bramshott Camp, Hants. 27-10-16.

27 DEC. 1916

APPROVED.

26-12-16

Over age

B. T.

PRESIDENT, MEDICAL BOARD, BRAMSHOTT.

Bramshott. 12. 2. 18

Debility

B. T.

PRESIDENT, MEDICAL BOARD, BRAMSHOTT.

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.

Baker

Christian Name.

The Unit known as the 51st Battalion will be designated "The Garrison Duty Battalion" (Authority: Bramshott Divisional Order No. 785, dated 1-11-16.)

Captain, & Adj
for Lieut. Co
Commanding, "The Garrison Duty Battalion."
(Bramshott, Hants.)

269404.

ORIGINAL

MEDICAL HISTORY SHEET.

ne Baker Christian Name E. E.

on _____ day of _____ 191____		Approved by _____		
at _____		Rank _____ M.O.		
City or Town _____	County _____	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
age _____				28 NOV 1917 M.O.
Occupation _____				M.O.
Feet _____ Inches _____				M.O.
Lbs. _____				M.O.
Measurement {	Minimum _____ inches			M.O.
	Maximum expansion _____ inches			M.O.
Development _____				M.O.
Pox Marks _____				M.O.
ation Marks {	Arm _____ Right _____ Left _____	Date	Result	VACCINATIONS.
	Number _____			
Vaccinated last _____				M.O.
Marks indicating congenital peculiarities or previous _____				M.O.
				M.O.
		Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
Slight defects but not sufficient to cause rejection _____				M.O.
				M.O.
				M.O.

ted on _____ day of _____ 191____ at _____	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
d on enlistment _____	4th Lab Bn	269404		
sferred to.				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
tt Camp, Hants. DEC 1916 PROVED. Bramshott.	2. 12. 16 Major, D.A.D.M.S. for A.D.M.S., Canadian Troops, Bramshott Camp	over age Debility	Class 6 PRESIDENT MEDICAL BOARD, BRAMSHOTT PRESIDENT MEDICAL BOARD, BRAMSHOTT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical vice, on the man becoming non-effective; the date and cause being stated on next page.

Surname

Christian Name

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
County of Middlesex Visiting Hospital Nasebury, near St. Albans		23	11	17	30	11	17	Debrity	8	Durlof & Scabies 72 Sulfh	W. H. for es
CANADIAN DIVISION, CONVALESCENT HOSPITAL, WOODGATE PARK, EPSOM		30	11	17	31	12	17	do	32	General weakness. Just recovering from dysentery bearded B III	A. Skates. CAPT. C.A.M.C.

769404

DENTAL CERTIFICATE.

W. L. Baker. E. L.

The following Certificates will
be attached to the Medical History Sheets of all

1st Line

Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommen- dation.
<i>19-2-18</i>	<i>Pentapya</i>			<i>at Public expense</i> <i>W. L. Baker</i> <i>base 6.00</i>

Mr. O. 124 Ball C.E.F.

Lt. Baker 769404
O.D. $\frac{9}{8}$ O.S. $\frac{6}{18}$

Rx. O.P. +1.50 Sp. +1.75 Cyl ax $15^{\circ} = \frac{9}{9}$
O.S. +1.50 Sp. +1.75 Cyl ax $165^{\circ} = \frac{9}{9}$

Refracted Oct. 13 - 1916. by
Capt. Sutherland. Canine

Prescription sent to A.D. C. Canine
Oct 13 - 1916. H.F.D.

Specialists

rept.

Leif Baker

769404

124 Bn.

11/2
79.0000
11/2

Convalescent Hospital

Woodcote Park, Epsom. HOSPITAL.

A. & D.
CARD

IV

AT

A. & D. No. 1 26234 PL. OF ACTIONRANK Cpl. 769404 UNIT 4th Can Tabor Bn SICK OR WOUNDEDNAME Baker. E.E. AGE 48. RELIGION CofE.

PLACE IN HOSPITAL

DIAGNOSIS

DebilityADMITTED 30-11-17.

FROM

NapshuryDISCHARGED By 31-12-17 TO 12. R. D. Bramshott.

TRANSFERRED

SERVICE AT HOME

2 yrs.

IN FIELD

1 yr.

RESULTS

REMARKS.

1-12-17 General weakness, no white
run down, just recovering from dysentery
Scabies cured. W. L. D.

3-12-17 Continue

10-12-17 Feels fair - emp. bd.

L. A. Carpenter
capt

NAME

Baker E.

RANK AND CORPS

*LC.**#. Lab-*

REGT'L No.

769404

H. Q. FILE NO. 649.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.

FOLLOWS

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A71-3#3 Can Cas. Ch. Str 17-11-17

B75 B. of ~~don~~ Middlesex 23-11-17

Wdr. Hopedary St Alban 23-11-17

B80 mit bonu Epsoom 1-12-17

B106 Discharged 31-12-17

Scabies

Colitis

"

Name **BAKER**

Rank

2 Spl

Reg. No.

469404

Unit

4th Sabour bn.

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
14-11	<i>to 3 bn 8 82</i>	<i>Scabias</i>	<i>41</i>			
23-11	<i>8 of 36-852</i>	<i>Scabias</i>	<i>45</i>			
1-12	<i>to 115-8081</i>	<i>do</i>	<i>80</i>			
31-12	<i>Discharged</i>	<i>Killed</i>	<i>do</i>	<i>106</i>		<i>2254</i>

[illegible]

FOR DOCUMENTS

CANADIAN ARMY DENTAL CORPS, MILITARY DISTRICT NO.

DENTAL CERTIFICATE ON DISCHARGE.

M.F.B.484.

100m-2-18.

1772-39-1219.

To Officer i-c Dental Services at

E. Camp

Name

Baker E.E.

Regimental Number

769404

has been given Dental examination previous to discharge and is entitled

to Dental treatment to the extent of:-

partial upper denture

This certificate to be presented within two months of the date
on discharge papers.

A. A. Sample
Officer i-c Dental Examination on Discharge.

Examined at

Banville

Date

APR 6 1918

1556

13 940 478

CHARGE:

Army Form B. 252.
(See King's Regulations.)

Lt. Col. Baker E.E.

I. O. R. D. { **BATTERY
SQUADRON
TROOP or
COMPANY**

CHARGE against No. *769404*

Place *Hammer*

Date of Offence *21-1-18*

OFFENCE *A. M. R. until
observed by the
C. M. P. at 3.45 P.M.*

Please return when completed to
the Assistant Provost Marshal,
Canadian *Bramshott.*

Names of Witnesses:—

R/c Thomas C.M.P.
R/c Headley C.M.P.

Punishment } *admonished*
Awarded }

By whom } *my*
Awarded }

W Law Lieut

Commanding Battery, Squadron, Troop or Company,

Six.

While on duty at Hammer about 3.45 p.m Jan 2nd 1918.

I observed the accused - I requested his Pass - He failed to produce one.

I took his name and particulars from his Pay Book - and ordered him to Camp.

Bramshott

21-1-18.

A.G. Lomas L/c. C.M.P.

Six.

I was present and corroborate the above Statement

Bramshott.

21-1-18.

L Hedley L/c C.M.P.

M.D. 2

No 23

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 769404 Rank L/Cpl. Name E. K. BakerCorps #2 Casualty Unit. who was* Discharged.On Apr. 15th, 1918, to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb. 19th 1918 to Apr. 15th, 1918 the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....	23	80	Bal. Cr. from prev. month.....		
Advances } No.....			Reg'tl Pay <u>56</u> days at \$ <u>1.05</u>	58	80
by } No.....			Field Allow. <u>56</u> days at \$ <u>.10</u>	5	60
Cheques } No.....			Separation Allowances* (Monthly) <u>Apr.</u>	12	50
Assigned Pay and Sep'n Allee. No. <u>19809</u>	12	50	Other Allowances* <u>Subs.</u>	12	00
Other charges.....			Other Credits* <u>Clothing.</u>	8	00
Payment on transfer or discharge No. <u>19810</u>	120	10	Bal. Dr. (to be deducted by new unit).....	59	50
Balance Cr. (to be paid by the new unit).....					
Total.....	156	40	Total.....	156	40

* Give particulars.

A monthly stoppage of \$ 20.00 (†) has..... (†) been paid on account of Assigned
 { Pay for the month of March, 1918
 { and Sep'n Allee. for month of Apr. 1918 } (to) Assignee Mrs. Violet A. Baker
 (Address) 66 Ossington, Avenue, Toronto.

(†) 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

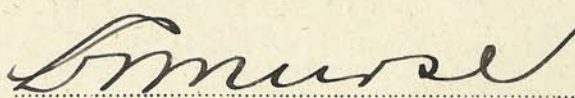
Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

- State (1) date of enlistment.....
 (2) if married and if a Separation Allowance Card has been submitted..... Yes.
 (3) cause of discharge..... authority D. O. 102.
 (4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 12/4/18.Place Toronto.

Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

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

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names *Ernest Edward* 2. Surname *Baker*
3. Rank *Lance Corporal* 4. Original Unit *1.24th Batt.* 5. Reg. No. *769404*
6. Address, in full, to which future payments of gratuity are to be forwarded
562 Lansdowne Ave. Toronto
7. Date of enlistment in the C.E.F. *December 30th 1915*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Violet Annie Baker*
9. Relationship of such dependent *Wife*
10. Address, in full, of such dependent *562 Lansdowne Ave. Toronto*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
1.24th Batt. C.E.F. from Dec 30th 1915 till Dec 30th 1916
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *No*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *1.24th Batt. from Dec 30th 1915 till Dec 30th 1916 also transferred with the 4th Can. Lab. Batt. till April 15th 1918*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid *\$183*
M.D. #2
20. Have you been issued with a War Service Badge? If so, what class? *A. class B*
21. Have you, during the present war, served in the Imperial Forces? *no*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled *no*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*
(b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F.? *no* If not, give:—(a) Date of discharge *April 15th 1918*
(b) Reason for discharge *Physical Unfitness*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit *no*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit *4th Can. Lark Batt*
March 15th 1917 to April 17th 1917
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *no*
(b) If so, are you in receipt of full pay and allowances from that Department? *no*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Ernest Edward Baker*

Place of Residence: *882 Lansdowne Ave*

Declared before me at: *Toronto*

This *7th* day of *Jan* 19*18*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.
Donald [Signature]

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent
<i>15-4-18</i>	<i>9.50</i>	
<i>15-6-18</i>	<i>60.65</i>	
<i>15-7-18</i>	<i>179.65</i>	

War Service Gratuity	Less O.D.O.	Net amount due
<i>\$500</i>	<i>149.65</i>	<i>\$320.35</i>
<i>Pay soldier 3 months at 40.00</i>		<i>140.00</i>
<i>" " 1 " 30.35</i>		<i>30.35</i>
<i>" dependent 5 " 30.00</i>		<i>150.00</i>
		<i>\$320.35</i>

Certified Correct.

District Paymaster.

J. B. Forbes, Lt. Col., C. A. P. O.
Paymaster, Military District No. 2

Eph

FORM OF WILL.

I, Ernest Edward Baker (Name in full)

Regimental Number 769404 serving in 124th Bn C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Voilet Annie Baker
83 Robinson St Toronto

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Voilet Annie Baker
83 Robinson St. Toronto

Name and Address
of person or
persons to receive
personal estate*
(See note).

IMPORTANT
NOTE

This must be Signed
and Dated by
THE SOLDIER
HIMSELF.

this 30th day of July A. D. 1916

Ernest Edward Baker Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness

Address of Witness

Occupation of Witness

Signature of Second Witness

Address of Witness

Occupation of Witness

THE TWO
WITNESSES
MUST
SIGN HERE

Name and address of next-of-kin

124 Bn

Date of enlistment

Place of

Married (yes or no)

Yes

Date and place discharged *Sept allce from Apr 1*

Amount of pay assigned monthly \$ 20.00

Reason for discharge

To whom payable Mrs Violet A Baker
 8PC 66 Ossington ave. Toronto.

Character on discharge

APR 13 1918

[illegible]

Name and address of next-of-kin

Date of enlistment

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

[illegible]

Name and address of Beneficiary { Mrs Violet A. Baker (wife).
66 Ossington Ave Toronto Ont.

Pay claimed on English L.P.C. to 18-2-18. to be paid by new Unit from 19-2-18.

Name of new Unit No. 2 Casualty Unit Date L.P.C. forwarded to new Unit

A.P. charged on Eng. L.P.C. to 28-2-18.

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out A.P. At Cl. Depot &c.				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS	
\$	c.	\$	c.	\$	c.	On Boat		\$	c.	\$	c.	\$	c.	\$	c.	\$	c.		
25	93			25	93			9	73										Q. R. 1.
								5	00										Q. R. 1.
								15	00										Q. R. 12.
Debit Balance				23	80			- 20 00 -											March 1918.
				49	73							49	73			23	80		

Name.....

Regt'l No. Rank File Numbers {

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field.....Date of arrival in M.D.....

Separation Allowance. Date paid to..... Rate..... If continued by Chief Paymaster, England

Assigned Pay. Date paid to.....Rate..... If continued by Chief Paymaster, England

Name and address of Beneficiary {

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

[illegible]

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

97/20
1958-E-5

Name Baker, Ernest Edward
Surname Christian Name

Regimental Number 769404

Rank

L/Cpl.

Address (in full) 66 Ossington Ave.,

Unit 124th Bn.

Toronto, Ont.

Original Unit

District where paid M.D.2.

Date of Discharge 15-4-18.

P. D. P. Filing Number 4-478-2.

Violet Annie Baker

Rates:—Regimental pay \$ 1.06 per diem: Field Allowance \$.10 per diem. Separation Allowance \$ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over- payments 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		
179 65	7906	15-5-18	59 50	7627	15-6-18	60 65				59 50	120 15
1 st	81147	4/2/19	70 00								
1 st	81148	4/2/19	30 00								
A/166 2 nd	923683	4-3-19	70 00								
" "	923684	4-3-19	30 00								

Remarks: Advance payment by Casualty Unit # 2.

M. F. W. 127.
60M-617.
1172 39-1140.

/20

Dec'n No 971 W. S. G. File No 753-E-5

Award ... days at \$ 100.00 per day \$ 500.00

S. A. months at \$ per mo. \$ \$

Less P, D. P. Credited \$ 179.65

Less further debit balance \$

Net due paid as below 320.35 ✓

TO SOLDIER			TO DEPENDENT			
0	Ag. No	Ch. No	Amount	Ag. No	Ch. No	Amount
1	84	1147	70.00	84	1148	30.00
2	166A	23683	70.00	166A	23684	30.00
3	43	421673	30.35	43B	421674	30.00
4				70C	444997	30.00
5				487352		30.00
6						
Total				Total		

4-2-19
4-3-19
17/3/19

4-2-19
4-3-19
23-4-19

562 Lansdowne Ave,
Toronto

(a) Ont.
Mrs Violet A. Baker
540 066 Ossington Ave
Toronto Ont

6/6/19 R.H.



MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name

Address

Relation to Soldier

wife, child or mother

Name of Soldier

Regtl. No.

Rank

Corps

To what Corps belonging

when called out

PAYMENTS

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



£33 7/6

20

20

SEPARATION ALLOWANCE

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

Baker, E.E.L-6/pl

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	K 176	20 -	20
May		L 4894	20	20
June		D 2209	20	20
July		K 10019	20	20
Aug.		B 11320	20	20
Sept.		K 15014	20	20
Oct.		J 16985	20	20
Nov.		J 20354	20	20
Dec.		J 24361	20	20
Jan.	1917	J 27589	20	20
Feb.		J 30825	20	20
March		J 34036	20	20
April		K 223	20	20
May		K 3554	20	20
June		L 6628	20	20
July		K 10071	20	20
Aug.	B 15530	M 13559	20	20
Sept.		A 9822	40	40
Oct.		F 23494	20	20
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$385.00 WSP

20/10071 Cancelled for address 12-8-17 PH.
 E. 13559 Cancelled.
 40 Riddell Mailed 5/9/17
 B 15530 Mailed to 135 Woodbury St
 Portland 12/6/17

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—6-16.
 H. Q. 1772-39-819.

To Whom

 19/11/16
 Address

Wife
Mrs Violet A Baker
#135 Woolsley St.
83 Robinson St
Toronto Ont.

By Whom Assigned

Baker Ernest Ed

Regtl. No. *769404*Rank *Plt*Corps *124th Batt*Rate *20.*

AUG 1 1915 PAYMENTS

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



MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.

50m.-4-10.

1772-39-319.

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Violet A Baker *wife*

PAYMENTS.

Name of Soldier

Baker Ernest Ed

L. L. Job 310.-Req. 6574.

769404, P6. 124" Batt.

20.

Remarks. *AUG 1 1916*

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		<i>914957</i>	<i>20</i>
Sept.		<i>L 1570.4</i>	<i>20</i>
Oct.		<i>L 19715</i>	<i>20</i>
Nov.		<i>L 24381</i>	<i>20</i>
Dec.		<i>D 32423</i>	<i>20</i>
Jan.	1917	<i>U 36291</i>	<i>20</i>
Feb.		<i>V 38054</i>	<i>20</i>
March		<i>W 44863</i>	<i>20</i>
April		<i>K 353</i>	<i>20</i>
May		<i>U 6233</i>	<i>20</i>
June		<i>D 13120</i>	<i>20</i>
July		<i>V 19880</i>	<i>20</i>
Aug.		<i>W 28888</i>	<i>20</i>
Sept.		<i>V 32948</i>	<i>20</i>
Oct.		<i>F 46833</i>	<i>20</i>
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

L-24381 - Remailed 15/19

135 Woolsley St. Toronto Ont.

20

20 h

20.00

20.00

5

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03 28

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

1-3-16

Aug 1/16

RATE OF SEPARATION ALLOWANCE

20	25 ¹² / ₁₀₀		
----	-----------------------------------	--	--

p.c. 3257

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 769 404.

Rank Pte. Promoted

Reverted

Discharge

Soldier's Name Ernest Ed. Baker.

Battalion 124. Battr.

Beneficiary Mrs Violet A. Baker

Relationship Wife

Address 83 Robson St Toronto

PARTICULARS OF ASSIGNMENT

Name

Mrs. Violet A. Baker.

Address

~~135 Woodley St. Toronto~~

Change of Address

14 1/2, Ont.

1

66 Ossington Ave. Toronto Ont

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Sept		380	280	660	
Oct	F 23494	20	20	40	
Nov	C 53744	20	20	40	
Dec	D 57252	20	20	40	m
Jan	A 55829	20	20	50	m
Feb	B 95677	25	20	45	
Mar	A 92014	25	20	45	
		520	400	920	

A/c Closed 31-3-18

Ret'd per

Canada

Date

21-3-18 EX 26-3-18

Clerk

Whitcher

MRO 2^B rendered

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

M. F. W. 128
400M-617-1772-39-1141
L. L. 22320-M. & D. 7003.