

REGIMENT

NAME

*Bird George Wesley*REGT. NO. *225890*UNIT *7R CTR*

H. Q. FILE NO.

## CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

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TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

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PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)



## PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 225890		
2. Rank. Private		
3. Name. Bird, George Wesley,		
4. Unit. 6th Canadian Reserve Bn.		
5. Date of Discharge		Place
6. Reason for Discharge Demobilisation.		
7. Authority.		
8. Proposed Residence after Discharge 48 Fullerton Ave. Hamilton, Ont.		
9. CERTIFICATE TO BE SIGNED BY SOLDIER.		
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate		
M. F. W.?		
Signature of Soldier.		
10. CONFIRMATION.		
The discharge of the above named man is hereby confirmed.		
Place		
Date		
Signature		
(O. C. Discharging Unit.)		



## LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23)  
Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) /  
(Enclosed in special envelope (260M) ),
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q, M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group..... *a*

Checked by No. *25*

Date..... *11/6/19*



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

# Casualty Form—Active Service.

M. F. W. 54.  
15/10/16  
H.Q. 2772-39-023

Unit, Regiment or Corps DEPOT REGIMENT, CANADIAN MOUNTED RIFLES, C. E. F.

Regimental No. 225890 Rank Tpr. Name Bird, George Wesley.

Enlisted (a) 11/8/16 Terms of Service (a) 10 1/2 Years Service reckons from (a) 11/8/16

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) Blacksmith.

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		25-10-16	"Mauretania"
	Debarked	ENGLAND		31-10-16	"Mauretania"
2.11.16	Taken on strength of F.C.H. R.R.	Shorncliffe		1-11-16	FGHRR.R.O. Pt. 2. No. 144. d/2-11-16.
3-11-16.	O.C. Regt Transferred to 4th Canadian Training Bde.	Shorncliffe		3-11-16.	FGHRR.R.O. Pt. 2. No. 145. d/3-11-16.
					Adjutant. Fort Garry Horse Res. Regiment.
3-11-16	O.C. 11th	Taken on strength 11th Battalion.	Shorncliffe	3-11-16	Pt. II. Bn. O. 263.
15-3-17	O.C. 11th	Trans to C.M.G./ Depot	Crowdborough	15-3-17	Pt II Bn. O. 61

(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.]



225890

Bird

G. W.

Date	Report		Place	Date	Remarks taken from Army Form B. 213 Army Form A. 36, or other official documents.
	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as re- ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.			
18-3-17	Com. C.M.G.D.	Taken on Strength, C.M.G.D.	Crowborough	18-3-17	Auth. Depot Order Pt. II No. 44
16/6/17	Com. C.M.G.D.	Transferred to <u>W. G. Pool</u>	CROWBORO	16/6/17	Depot Order Pt. II No. 167 Adjutant, C.M.G. Depot.
17-6-17	OC Pool	Arrived France + 1/10/17 C.M.G. R. Pool	Canm	17/6/17	R+A 188 A.P. 0452-25-6-17
24-7-17	OC Pool	S/O/S to 9th M.G. Coy.	Field	23/7/17	R+A 126 P.T. 053-30-6-17
25-6-17	M.G.C.B.D.	T.O.S. 9th M.G. Coy.	Field	24-6-17	N.R. 126 Pt. II No. 35 8/29-6-17
1-7-17	ob unit	Joined unit for outy	✓	24-6-17	B. 213 A.P. 175 8/9-7-17
13-10-17	do	Left unit for M.G.C.B.D.	—	10-10-17	B. 213
10-10-17	M.G.C.B.D.	Arrives Bn. report from unit	M.G.C.B.D.	10-10-17	N.R. 116
30-10-17	do	Left for B.G.B. report	—	27-10-17	N.R. 132
27-10-17	B.G.B.D.	T.O.S. from M.G.C.B.D. 9th	Etupes	26-10-17	N.R. 247
6-11-17	A.A.G.	S.O.S. 9th M.G. Coy. on transfer to 21st Bn. Inf. Bn.	✓	6-11-17	N.S. O. L. 115/General No. 1103 (29-6-15) 6/16-17 P. file 17239 P. II O. 17239 8/1-8-11-17
	Do	3.O.S. 21st Battalion on transfer from 9th M.G. Co.	Field	7-11-17	K.E. 17239 P.T. II O. 98 2/13-11-17
	2 C.O.B.D.	T.O.S. from C.G.B.D. - "A"	2 C.O.B.D.	13-11-17	N.R.
	C.G.B.D.	S.O.S. "A" to	2 C.O.B.D.	12-11-17	N.R.
	2 C.O.B.D.	Left for	Can. Corps Rein. Camp	24-11-17	N.R.
	Can. Corps Rein. Camp.	Arrived	Can. Corps Rein. Camp	24-11-17	N.R.
	Do	Left for unit	Field	2-12-17	N.R.
8.12.17	Unit	Joined Unit	Field	2.12.17	N.R.
17/8	Do	Granted 14 days Leave	Field	14-8-18	Part II Ord. 6-6 4/4-9-18
7/9	Do	Rejoined from Leave	Do	31-8-18	B-213.



Nothing to be written in this margin.

W1889-PP1150 1M 5/18 G.W.P.Co.(3490)

## SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1.  
Part I.

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname (5) Christian Names (6) Army Form, number of, Attestation Form or Record of Service paper (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	No. 6. Dft. Dep. Rgt. C.M.R.	225890

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) of conditions of service	

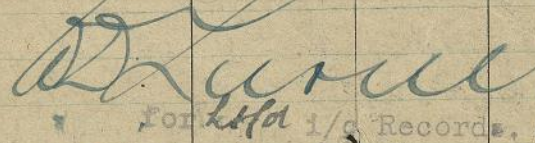

Initials and Rank of  
an Officer.

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

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

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] It to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.



(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Arrived in England. per S.S. Mauritania		31.10.16	
2.11.16	F.G.H.R.R.	T.O.S.		S'cliffe	1.11.16	-144
3.11.16	"	S.O.S. on trans. to 11 <sup>th</sup> Btu.		"	3.11.16	-145
3.11.16	11 <sup>th</sup> Btu.	T.O.S.		"	3.11.16	-263
15.3.17	"	S.O.S. to Can. M. G. Depot		"	15.3.17	-61
18.3.17	C.M.G.D.	T.O.S.		Crowboro	"	-77
16.6.17	"	Posted C.M.G. Pool overseas		"	15.6.17	-167
25.6.17	C.M.G. Pool	T.O.S. from C.M.G.D.		Field		-52
29.6.17	3 Btu. M.G. Coy.	Posted to 9 <sup>th</sup> M.G. Coy.		"	24.6.17	-95
30.6.17	M.G. Pool	T.O.S. from 3 M.G. Coy.		"	"	-53
8.11.17	3 Btu. M.G. Coy.	S.O.S. on trans. to 21 <sup>st</sup> Btu.		"	6.11.17	-171
13.11.17	21 <sup>st</sup> Btu.	T.O.S. from 3 <sup>rd</sup> Btu. M.G. Coy.		"	"	-92
16.1.19	E.O.R.D.	Posted from 21 <sup>st</sup> Btu. O.Sear.		Witley	14.1.19	-13
23.1.19	21 <sup>st</sup> Btu.	S.O.S. to E.O.R.D.		Field		-4
20.2.19	6 <sup>th</sup> Res.	Posted from E.O.R.D.		Seaford	19.2.19	-40
<p style="text-align: center;">             For Lt Col 1/c Records, OM 96            14/6/19            23/6/19         </p>						
14/6/19	226th	B.O. 134	SOS, on transfer to Seaford	14/6/19		
23/6/19	Res	141	CE 7, in Canada. S.S. Aquitania	23/6/19		
<p style="text-align: center;">             Lt Col.            1/c Records,            6th Can. Res. Bn.         </p>						

Nothing to be written in this margin.



# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.  
Part I.

(1)*Substantive rank *Acting rank *To be entered in pencil to facilitate alteration.	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname <b>BIRD</b>	<b>6<sup>th</sup> Dist Dep Regt</b> <b>C.M.R.</b>	<b>225890</b>
(5) Christian Names <b>George Wesley</b>		
(6) Army Form, number of, Attestation Form or Record of Service paper }		
(7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (a)		

- (10) Enlistment (b) (11) Engagement (c)
- (12) Service reckons from (date) (13) Special conditions (if any) of enlistment (d)
- (14) Any subsequent variations (if any) of conditions of service }

Initials and Rank of an Officer.

(Authority)

(date)

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

- (17) Next of Kin
- (18) Demobilizer (j) (Place)
- (19) Pivotal-man (f) (Date)
- (20) Qualifications (g) or (21) Corps trade and rate

(Signature of Posting Officer

- (22) Extended { (23) Re-engaged {

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoemaking, &c.

W1889—PP 1150 1M 5/18 G.W.P.Co (3490)

Nothing to be written in this margin.

Army Form B. 103 (II.) to be filled in here if required.



(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

			<i>Over England SS Mauritania</i>		<i>31 10 18</i>	
<i>2 11 16</i>	<i>OT ARK</i>	<i>144</i>	<i>Taken on strength</i>	<i>Shediff</i>	<i>1 11 16</i>	
<i>3 11 16</i>	<i>"</i>	<i>145</i>	<i>SOS on board</i>	<i>11<sup>th</sup> Bu</i>	<i>3 11 16</i>	
<i>3 11 16</i>	<i>11<sup>th</sup> Bu</i>	<i>263</i>	<i>Taken on strength</i>		<i>3 11 16</i>	
<i>15 3 17</i>	<i>"</i>	<i>61</i>	<i>SOS &amp; Cam M G depot</i>		<i>15 3 17</i>	
<i>18 3 17</i>	<i>CMGD</i>	<i>77</i>	<i>I. O. S.</i>	<i>Cavboro</i>	<i>15 3 17</i>	
<i>16 6 17</i>	<i>do</i>	<i>167</i>	<i>Post &amp; CMG pool open</i>	<i>do</i>	<i>16 6 17</i>	
<i>29 6 17</i>	<i>3<sup>rd</sup> Div M G Coy</i>	<i>95</i>	<i>Post &amp; 9<sup>th</sup> M G Coy</i>	<i>Field</i>	<i>24 6 17</i>	
<i>8 11 17</i>	<i>do</i>	<i>171</i>	<i>SOS on board</i>	<i>21<sup>st</sup> Bu pto</i>	<i>do</i>	<i>6 11 17</i>
<i>16 1 19</i>	<i>EOB</i>	<i>13</i>	<i>Posted from 21<sup>st</sup> Bu</i>	<i>op as pto</i>	<i>Withy</i>	<i>14 1 19</i>
<i>20 2 19</i>	<i>6 Res</i>	<i>40</i>	<i>Posted from EOB</i>	<i>Seaford</i>		<i>19 2 19</i>

*R Turner*  
for 1/0 Records

Nothing to be written in this margin.



## Casualty Form—Active Service.

Regiment or Corps 21st CANADIAN BATTALION.

Rank Pte Surname BIRD Christian Name George Wesley  
 Religion ..... Age on Enlistment ..... years ..... months  
 Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
 Occupation ..... Signature of Officer .....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
	4 C.F.A.	N.Y.D. VEN SORE - Adm & Trans	C.C.S.	26/10/18	M. 329.
	1 Staty	V.D. G. Adm	1 Staty.	29-10-18	M. 922
	22 C.C.S.	Admitted	22 C.C.S.	26/10/18	M. 2972
	Do.	Trans. to	A.T. 6.	28-10-18	
9/11.	1 Staty.	Forfeit's Rd. also & 50¢ per day 29-10-18 to 8-11-18. (11 days)	1 Staty.	8-11-18	D. 1643
	C.D.B.D.	Arrived "A"	C.D.B.D.	12-11-18	NR 506
	1 Staty.	Discharged to	Camp adjt.	8-11-18	M. 3926.
	C.I.B.D.	Left for C.C. Rein. C.	Field	16-11-18	D. 1468.
	C.C. Rein. C.	Arrived.	Can. Corps Rein. Camp.	16-11-18	A. 1820.
9-1-19	C.G.B.D.	Trans to England and posted to		11-1-19	

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

(b) Signaller, Shoeing-Smith, &amp;c

(17591.) W. 1487-P. 1124. 1,000,000. 6/18. D &amp; S. Form B/103. (E. 1256.)

[P.T.O.]



Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
					Thos B Chapell Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
16-1-19	E.O.R.D.	T.O.S. on posting from 2nd Bn attached to Depot Coy	Seaford	14-1-19	Pt II D.O. 13.
27-3-19	E.O.R.D.	Leaves in Depot Coy & is S.O.S. on posting to 6th Res Bn	Seaford	19-2-19	Pt II S/O 72.
					M. J. O'Connell Lieut. i/c Records, East Ont. Regtl. Depot.
20-2-19	O.C. 6th Res.	T.O.S. on posting from E.O.R.D.	Seaford	19-2-19	Pt II B.O. 40
19-6-19	O.C. 6th Res.	On admission to Ravenscroft to S.O.S. on posting to No. 3 Reg. Depot Group, Witley	Seaford.	17-6-19	Pt II B.O. 138.
					Lieut. Officer i/c Records, 6th Canadian Bn.



ORIGINAL  
MEDICAL HISTORY SHEET. ORIGINAL

Surname BIRD Christian Name GEORGE WESLEY

Examined { on 11th day of August 1916  
at Hamilton Ont.

Approved by

H.W. Martin

Birthplace { City or Town Madoc  
County Ont.

Rank capt M.O.

Apparent age 26

Trade or occupation Blacksmith

Height 5 Feet 11 $\frac{1}{2}$  Inches.

Weight 175 Lbs.

Chest measurement { Minimum 34 inches.  
Maximum expansion 4 $\frac{1}{2}$  inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm. Right. Left. 1  
Number 1

When Vaccinated last July 1914

(a) Marks indicating congenital peculiarities or previous disease Nil

Scar back of head

(b) Slight defects but not sufficient to cause rejection

Nil

Enlisted on 11th day of August 1916 at Hamilton Ont.

Joined on enlistment

CORPS.

REG'TL NUMBER.

HABITS.

DATE.

C.M.R.

225890

Good

11/8/16

Transferred to

11TH BATTALION  
(CANADIANS)

3 - NOV 1916

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Scaford</u>	<u>2-6-17</u>	<u>V.D.S. capt.</u>	<u>DR J. G. M. capt.</u>

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

M. F. B. 313.

400M.—1-16.  
H. Q. 1772-39-139.

505 6 R 72/27 3119

J M O



Christian Name George Wesley

No. 14 CANADIAN  
GENERAL HOSPITAL  
WARR, EASTBOURNE, SUSSEX



A.F. B.178

Regimental No. 225890

Surname.....Dord

Region.....  
Christian Names..... G. W.

TABLE I.—General Table

Birthplace { Parish *Madoc*  
County *Ontario*

Examined { on *11<sup>th</sup>* day of *August* 191*6*  
at *Hamilton Ont.*

Declared Age *26* years ..... days.

Trade or Occupation *Blacksmith*

Height *5* feet *11 1/2* inches. Weight *175* lbs.

Colour of Hair ..... Complexion .....

„ Eyes .....

Chest { Girth when fully expanded } *38 1/2* inches.  
Measurement { Range of expansion } *4 1/2* inches.

Physical Development *Good*

Vaccination Marks { (Arm, RIGHT | LEFT  
(Number ..... | *1*

When Vaccinated *July 1914*

Vision { R.E.—V = ..... With Glasses { R.....  
{ L.E.—V = ..... { L.....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

Identification Marks, such as Tattoo, Moles, Scars, etc:—

Defects or Ailments:—

Examined and found—

**Fit for Grade** { I.  
II.  
III.  
IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at.....

On.....day of.....191.....

Enlisted { at.....  
on..... day of..... 191.....

Joined on enlistment	Corps	Regtl. No.

Transferred  
to

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.

[illegible]

Special Remarks: state if a discharged Soldier

TABLE IV.—Service Table.

[illegible]

Became non-effective by .....

on..... day of ..... 191.....

(Signature) .....

(Rank) .....







## MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname.	Christian Name.
5326	225890	Pt.	Bird	Ell
Year	Unit	Age	Service.	
	6 <sup>th</sup> Res. Bn.	29	34/12	
Station and Date.	Disease	Sore - Inguinal Diphtheria and pneumonia Taken sick - 11-6-19. Reported sick 11-6-19. Complaint. Soreness of mouth jaws throat. Loss of appetite, headache. Past Illnesses negative. Family History negative. Present Illness Taken sick on 11-6-19, with above symptoms. Mouth and throat were swabbed out. Was treated for few days in medical hut but was getting worse and came to Hosp. Exam Eyes Ears nose neg. Throat greyish membrane adhering to right tonsil. Left clear. Complaining of considerable pain in throat. <del>Report</del> Pulse good. 17-6-19. Report on Swab: Overgrown with spore bearing Orgs. No Diph <sup>W. B. D. found</sup> 17-6-19. Clinical symptoms look like Diphtheria Given 10000 antivenom 18-6-19. Given 14000 antivenom - Not much change Heart neg. Lungs clear other systems apparently negative.		

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



Station  
and Date.

- 20-6-19. Tells about the same. 1102.5.  
P 90, slight cough, Membrane  
spreading to Uvula, and Pileus  
of Fauces from 14000 antitoxin.  
Lab report. Sept Pileus Present.
- 21-6-19. Had a sleepless night Condition  
about the same. Pulse 88 good volume  
regular. Given 20,000 antitoxin
- 22-6-19. Given 20,000 antitoxin. Not much  
change Pulse not so good lungs  
clear except few rales in upper  
Thorax. Heat Whisky 31 94 H.
- 23-6-19. Stopped for 1/30 96 H. Compresses  
to throat. Tangle every hour &  
Vincent's Sol.
- 23-6-19. Membrane loosening in throat.  
Pain Considerable. Kept about 4 hours  
Large Numerous rales throughout  
both lungs. Breathing a little  
improved. Rales more marked  
on right side of chest.

M Beaton Capt. Cand.



Ravenscroft Military Hospital, Seaford., 23/6/19.

Nominal Roll of Transfers to Eastbourne Isolation Hpl., Eastbourne, Sus.sex.---

225890 Pte. Bird G.W. 6th. Can. Res. Bn. Tonsillitis-add-Diphtheria-add-  
pneumonia.

RH A&D 5326

*Wentley*

*Presbyterian*



No. 225890    Rank. *Rt*    Name. *Bird S.W.*    Unit. *6 Car Bn.*  
Disease. *Typhoid*    *Avoncroft Military Hospital, Bedford.*  
Officer i/c Laboratory.    Ward. *Raven Croft*

Please carry out an examination of the accompanying specimen  
of *Throat Swab.* with special regard to *Verruca Angina*  
Date *7-6-19* 1919.    *M. Weston Capt*  
Officer i/c Ward.

LABORATORY REPORT.

*Overgrown by spore bearing organism  
no diptheria found. Please  
repeat.*



*91*  
Date of Exam. *June 18.* 1919.

*W. C. Jackson Capt.*  
Officer i/c Laboratory.



Raven's Croft,  
Military Hpl.  
Seaford, Suss.

# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps *Reserve*

No. *225890*

Rank and Name *Private*

Age *27*

Military Hospital *24/12*

Service

Disease *Septic Infection*

Date of admission *17.6.19*

Date of discharge

Result

Dates of Observation

Days of Disease

Temperature Fahrenheit

107°

106°

105°

104°

103°

102°

101°

100°

99°

98°

97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours

Signature

In charge of case.







No. 225890 Rank. Plt Name. Bird G.V. Unit. 6<sup>th</sup> Can Res Bn  
Disease. Tonsillitis Revenscroft Military Hospital, Seaford.  
Officer i/c Laboratory. Ward. 33

Please carry out an examination of the accompanying specimen  
of Throat Swab with special regard to. Diphtheria Bacillus  
Date. 21-6-19 1919. M. Beaton i/c  
.....  
Officer i/c Ward.

LABORATORY REPORTS.

Diphtheria Bacilli present.

Date of Exam.

June. 22. 1919.

Officer i/c Laboratory.

*[Signature]*  
.....  
M. Beaton Capt.  
.....  
CANADIAN GENERAL





THIS FORM WILL BE USED FOR ALL RANKS  
**MEDICAL HISTORY OF AN INVALID**

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Seaford DATE 2.6.19

1. 1 (a) Unit 10 Rps (b) Regimental No. 225890 (c) Rank Rt.

(d) Surname BIRD (e) Christian name George Wesley

(f) Home address 15 Fitz Ave. Hamilton Ont.

(g) Next of Kin Miss V. Bird (h) Relationship Sister

(i) Address of Next of Kin 51 Hazelton Ave. Montreal

2. Age last birthday 29 Date of birth 19.7.1889

3. Enlistment, or Appointment (if an Officer) (a) Place Hamilton (b) Date 11.8.1916

4. Personal description:

(a) Height 5-11 1/2 (b) Weight 51.175 (c) Complexion Fair

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. —

5. Former trade or occupation Blacksmith

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years		Days	
	Years	Days	Years	Days
	2		293	

	PERIODS	
	From	To
Canada	11-8-16	25-10-16
England	31-10-16	17-6-17
France or other theatres of War	11-1-17	2-6-17

7. Original disease, or injury U.D.S.

(a) Date of origin Aug. 1918 (b) Place of origin Boulogne, Eng.

(c) Cause Infection



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

*Nil*

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

*Special report - 31/1/19.*

*Wassermann NEGATIVE - 26-5-19*

*Sgt. O. F. Eastman Cap. C. O. C. C.*

*No active lesions present*

*R. R. joints very weak. Left arm normal*

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

Nervous System *No* Cardio-Vascular System *No* Genito-Urinary System *No*  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)  
Special Senses *No* Respiratory System *No* Integumentary System *No*  
Disturbances of Mentality *No* Digestive System *No* Muscular System *No*  
Osseous and Joint Systems *No* Any other general condition *No*

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

*- Exposure in Aug. 1918. - Had soft sore (?) in 3 weeks. Admitted to hospital 26/10/18. - Had no blood test at the time. Was discharged on 11 days. - as now venereal (statement) - Re-admitted on 27-1-19 for numerous small blisters becoming purulent - At this time Dark Field & Wassermann were positive*







## OPINION OF THE MEDICAL BOARD

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

ge

19. Is the invalid fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service (Canada only),
- (d) Temporarily unfit.
- (e) Unfit for service in Categories A, B

(Category A)	(Yes or No.)
( " B)	( <del>Yes or No.</del> )
( " C)	( <del>Yes or No.</del> )
( " D)	( <del>Yes or No.</del> )
( " E)	( <del>Yes or No.</del> )

yes A

20. It is certified that the invalid

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

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

21. It is recommended that the ~~invalid~~ <sup>deaf</sup> be discharged. (When not for discharge add special recommendation.)

Banded for return to Canada

Auth. A. B. Pl. 9083 - 11-11-68

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

PLACE.

Seaford

DATE..

2-6-19

5073 years cap

*President.*

N. A. Danholm Capt

## Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness.....

Signed \_\_\_\_\_

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

PLACE

DATE..

APPROVED BY

APPROVED BY

Assistant Director of Medical Services.

*Director-General of Medical Services.*

DATE \_\_\_\_\_

DATE \_\_\_\_\_





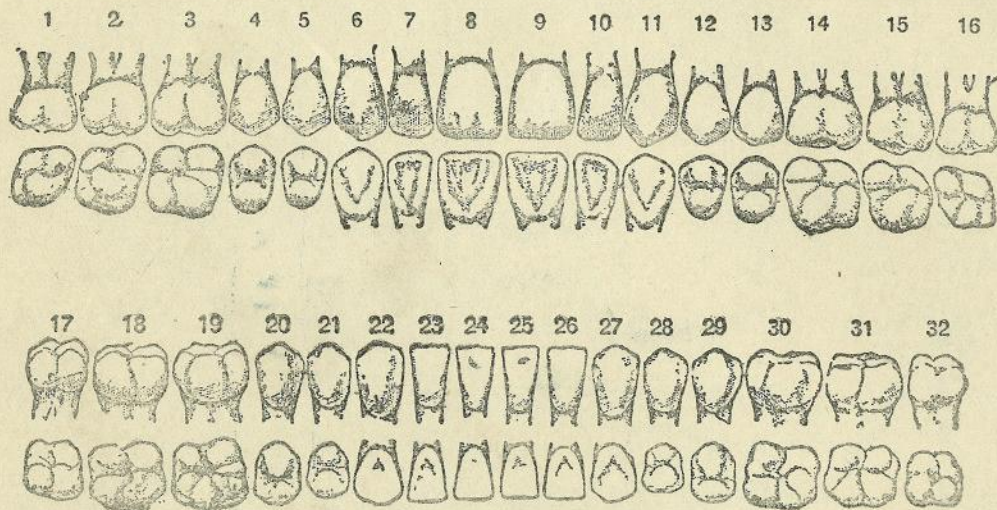
CANADIAN ARMY DENTAL CORPS, O.M.F.C.  
**DENTAL CERTIFICATE FOR DEMOBILIZATION**

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BIRD C. W.  
 REGIMENT 6th. RES RANK PTE No. 225890  
 Date of Examination in England 12/5 19 Date of Examination in France \_\_\_\_\_

**DIRECTIONS TO  
DENTAL OFFICERS**

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



**PRESENT DENTAL REQUIREMENTS**

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

(a) In Canada

(b) In England YES

(c) In France

Signature of Dental Officer

*F. H. H. H.*

*Capt.*



5458a-19.

Army Form I. 1239.

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

Corps	Company	Regimental No.	Rank and Name	* Date on which case originally came under treatment
Gen Depot.	Wentley	225890	Pte Bird G. W.	
20. 2. 19	HC			
27. 2. 19	HC			
6. 3. 19	HC			
13. 3. 19				
20. 3. 19				
27. 3. 19				
3. 4. 19	HC			
10. 4. 19	HC			
17. 4. 19				
24. 4. 19				
1. 5. 19				
5. 5. 19	was			
8. 5. 19	ob			
				27. 1. 19.
				REMARKS

To O.C.Station and date 16/4/19*R. M. Sipp*

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, musketry course, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

\* When cases are transferred Medical Officers will be careful to insert the date on which the case was first placed on a syphilis register, irrespective of the number of registers the case may have passed through.



5458a-19

Army Form I. 1239.

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

Corps	Company	Regimental No.	Rank and Name	* Date on which case originally came under treatment
Gen Depot	Wiley	225890.	Plt Bird G. W.	
20. 2. 19. N. H. G.				
27. 2. 19. H. G. only				
6. 3. 19. N. H. G.				
13. 3. 19. "				
20. 3. 19. "				
27. 3. 19. "				
3. 4. 19. H. G.				
10. 4. 19. N. H. G.				
17. 4. 19. "				
24. 4. 19. "				
1. 5. 19. "				
5. 5. 19. N. H. G.				
5. 5. 19. O. B. S.				
				27. 1. 19.
				REMARKS

To M. O.Station and date 16/2/19Per Supp Cap

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, musketry courses, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

\* When cases are transferred Medical Officers will be careful to insert the date on which the case was first placed on a syphilis register, irrespective of the number of registers the case may have passed through.



## DEPARTMENT OF MILITIA AND DEFENCE.

## WAR SERVICE GRATUITY.

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

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

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

1. Christian names *George Wesley* 2. Surname *Bird*
3. Rank *Pte.* 4. Original Unit *C.M.R. Depot  
E. Hamilton* 5. Reg. No. *225890*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*Bank of Hamilton,  
Hamilton, Ont.*
7. Date of enlistment in the C.E.F. *15-8-1916*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Not applicable*
9. Relationship of such dependent *Not applicable*
10. Address, in full, of such dependent *Not applicable*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—  
.....  
.....
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *Subdr.*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service. *Subdr.*  
.....  
.....
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. *From 15-8-1916 until discharge  
Transferred to M.G. Depot, Crowboro'. Went to France with  
9th Brigade M. Gun Corps, Transferred, Nov. 1917 to 21st Bn.  
Returned as casualty to 6th Res. Bn.*
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. *No*
20. Have you been issued with a War Service Badge? If so what class? *A. 3. 2r*
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? *Not applicable*
24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge  
(b) Reason for discharge.
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.
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit. *A. 3. 2r*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?  
(b) If so, are you in receipt of full pay and allowances from that Department?

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:

Place of Residence:

Declared before me at:

This

*14<sup>th</sup>*

day of

*April*

19*19*

Signature of Barrister of the  
Supreme Court Stipendiary Magis-  
trate, Notary Public, Justice of the  
Peace, or Commissioner for the  
Administration of Oaths under  
P.C. 2767, dated 11th Nov., 1918.

*J. F. Wolfram*

*Mugor*

*68 Rm. Bn.*

#### POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.



**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<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.**

## MEDICAL HISTORY OF

*Surname*

Christian Name

**TABLE I.—General Table.**

Birthplace { Parish *Mados out*  
County *Cassida*

Examined { on... 11 day of... August 1916  
at... Harleton Ave

Declared Age 28 years.....days.

Trade or Occupation.....Blacksmith

Height.....5.....feet.....11  $\frac{1}{2}$ .....inches

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded } ..... 38  $\frac{1}{2}$  ..... inches  
 { Range of Expansion } ..... 4  $\frac{1}{2}$  ..... inches

Physical Development .....

		RIGHT	LEFT
Vaccination Marks	Arm.....	_____	_____
	Number .....	_____	_____

When Vaccinated .....

Vision { R E. - V = .....  
L E. - V = .....

(a) Marks indicating congenital peculiarities or previous disease—

Scars back of head

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

Approved by St. W. Martin

Rank ..... Capt

Medical Officer.

Enlisted { at Hanulston  
on 11 day of August 1911

Joined on enlistment	Corps	Regtl. No.

Transferred to

Became non-effective by .....

on..... day of .....191..

(Signature).....

(Rank) .....

**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

TEMPORARY AVAILABLE  
FOR ORIGINAL

TABLE IV.—Service Table.

Station or Troopship

Date of arrival  
or embarkationDate of departure  
or disembarkation







137.  
Reg VI

SYPHILIS CASE-SHEET.

Regtl. No. 225890 Rank and Name *Plt. Bird, G.W.* Corps *6<sup>th</sup> Res.*

Placed on Syphilis Register at *Wiley.* on *27-1-19.* No. in Register

Disease contracted at . Primary sore appeared on (date) *1-1-19.*

CONDITION WHEN PLACED ON REGISTER.  
*sores appeared about 1-1-19 occurred on little*  
Primary sore—character and site *Blister, which have been present before, not-*  
*had n.d. no history of secondaries.*  
Lymphatic glands

Skin (nature and distribution of rash *numerous per infect. ulcers of roll of*  
*prepuce. Indurated ulcers of scrotum. General infect. Reactions*  
*marked general adenitis. Skin negative.*  
Mucous membranes *negative.*

Other symptoms *Such Good. no urethritis*

Examination of exudate from sore—Spirochaeta Pallida (<sup>*present.*</sup> ~~present~~ or absent) *Present.*

Examination of blood serum—(Method employed (original or modification)  
Wassermann reaction (Result (positive or negative) *Positive + + +.*

Station Date Signature of M.O.

Struck off Syphilis Register at *V.D.S. Clinic* on *31-5-19.*

Cause of being struck off Register { (a) Recovered  
(b) Transferred to Army Reserve } *Recovered.*  
(c) Discharged from Army

Station *Seaford* Date *31-5-19.* Signature of M.O. *Henderson*  
*Capt.*



The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine		Wassermann Reaction		Treatment				Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
				Normal (N.) Albumen (Alb.)	Method { Original (O.) Modification (M.)	Result { Positive (+) Negative (-)	Arsenical		Mercurial		Other Methods	
							Intravenous Injection. Dose in grammes	Intramuscular injection. Dose of Metallic Mercury in grains	Inunctions or Oral (Preparation and dose)			
Willsey	6-2-19	Had 2 inj 'Coke' & 2 inj Hg Amount not stated.										
Seaford	24-2-19	Well.					.6					J.F. Eastman
"	27-2-19	Well						+				J.F.
"	3-3-19	Well					.6					J.F.
"	6-3-19	Well						-				J.F.
	10-3-19	Well	N				.75	-				J.F.
	13-3-19	Well						-				J.F.
	17-3-19	Well	N				.75	-				J.F.
	20-3-19	Well						-				J.F.
	24-3-19	Well	N				.75	-				J.F.
	27-3-19							-				J.F.
	31-3-19	B.T.										J.F.
	14-4-19	B.T.										J.F.
	17-4-19	- N.T. - No further out/c on mouth										J.F.
	21-4-19	Well. - Recurrent Course - (4)					.6					H
	24-4-19							-				H



28-4-14

1-5-19

5-5-19

8-5-14

12-5-79

15519

19-5-6

21-5 19

26/5/19

2/10/19  
51/5

Wren.

N.T. ~~Quinn~~ boggy

me

Free B.T.

mass B-T

class as received.

N

2

 $\frac{1}{2}$ 

75

 $\pi$ 

\_\_\_\_\_



•  $\lambda$

к

к

H. B. Lucas

99

80

७३

95

79

01  
80

09



[illegible]



5458a-19

Copy

# VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

Can Special Witley Hospital.

67 Ward.

Age

Service

Religion

Disease

2927/12.Presby.V.D.S.

Regiment

Coy.

Reg. No.

Rank

Name

Gen Depot225890.Pte.Brard G.W.

Date of Admission

Disposal

Date of Discharge

27.1.19.

This space not to be written upon by M. O. i/c case.

## SUMMARY

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form L 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse

Dates and  
Places of Three  
last Exposures

No P.T.Oct 1918 Rouen

Main points in history Sores appeared about 1-1-19 occurred as little blisters which have been present before. Not had V.D. No history of secondaries

Condition on admission Numerous pus infected ulcers of roth of prepuce Indurated ulcers of sutius. general infected Balanitis Marked general adenitis. Skin + M.M. Negative Tenth good No urethritis

[P.T.O.]



Date	Treatment <i>Given</i>		Progress	Complications and their Treatment
	Local	General		
6.2.19	N. H G	Treatment to be given.	25.1.19	Dark Field: Negative
13.2.19	-		29.1.19	Wasserman: - Positive +++
20.2.19	N. H G		31.1.19	Dark Field: - Positive.
27.2.19	H G			
6.3.19	N. H G			
13.3.19	.			
20.3.19	.			
27.3.19	.			
3.4.19	H G only.			
10.4.19	N. H G			
17.4.19	.			
24.4.19	.			
1.5.19	.			
5.5.19	Wass			
8.5.19	O.T.S.			



No. 225890 RANK *1st Lt.*

NAME *Bird. Geo. Wesley*

T. O. S. *11-8-16* UNIT *Can. Mounted Rifles Depot*  
*100193. 12-8-16*

M. D. *2.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Aug. 11.</i> <i>Sept.</i> <i>Oct. 1.</i>	<i>1916.</i> <i>Aug. 31</i> <i>Sept.</i> <i>Oct. 19.</i>	<i>L</i> <i>L</i> <i>L</i>	<i>6<sup>th</sup> ops. Draft.</i>	



649-13-23923

CARD NO.

X

SURNAME

CHRISTIAN NAMES

REGL. NO.

RANK

UNIT

FORMER CORPS

FOLL.

NEXT OF KIN

CHANGE OF ADDRESS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDR

COUNTRY OF BIRTH

PLACE OF ATTESTATION

DATE

DATE

L. L. 6945. M. &amp; D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

George Wesley.

225890.

Trooper.

C. M. R. (Depot Regt.) (6th. R. W.)

nil.

Wilson, John.

Friend.

48 Hazelton Ave.  
Hamilton, Ont.

S.A.A.P. 23-5-18

Canada

Hamilton, Ont.

July 19th, 1890.

Aug. 11th, 1916.

Violet K. Bird  
(sister) 51  
Hazelton Ave  
Toronto  
Ont.

12-7-19



MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Blacksmith

RELIGION

Church of England.

DESCRIPTION.

APPARENT AGE

26.

YEARS

Not stated

MONTHS

HEIGHT

5.

FEET

11 1/2.

INCHES

CHEST MEASUREMENT

38 1/2.

INCHES

EXPANSION

4 1/2.

INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

Brown.

DISTINGUISHING MARKS

Scar back of head.

MEDICAL EXAMINATION.

PLACE

Hamilton, Ont.

DATE

Aug. 11th 1916.

Present Address. 5 Rowanwood Ave  
Hamilton, Ont.



Name **Bird** Rank **George Wesley** Reg. No. **225890**  
 Unit **1st Bn. 6th Res EORD**  
 Next of Kin **Miss Bird, Ellisonville, P.T.O.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918	ad					
26-10	22. C.C.S.	Hyd. General Store		13/2	35852	
29-10	1. S. H. Rouen		<del>20</del> 20	23/2	5294-12	
5-11	Discharged		50 2372		5577-2	
28-1-19	65 H. Witley	Hyd. General Store	2435	23/2	5746	
19-2	Discharged		2390		756	
Ref 24-15	1419 Rhta Hyd. General Store	736	2418		4085	
24-6-19	16 C. G. H. Eastbourne	Tonillit's	C540 H	996	9533	
	Dang. Ill	Diphtheria & pneumonia				
1-7-19	16. C. G. H. Orpington	N.D. Q	C549		11448	

PTO

**P.T.O.**



Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-7-19	<del>1600 2112</del> No 1st B G N. Eastbourne	<del>Ref +</del> Eastbourne	<del>Diphtheria</del> Pneumonia			9401 H1012
	Died (at Eastbourne)			H 1013	550	
	Born July 19th 1890.					
	Religion C.E.					



*copy only*  
BIRD, Pte. G.W., No. 225890, ~~M.C.~~ Corps 649 B 23923 *E.O. R.D.*

*not eligible for 14/15 Star.*  
MEDALS & DECORATIONS,

Sister, Miss V.L. Bird,  
51 Hazelton Ave.,  
Toronto, Ont.

PLAQUE & SCROLL,

Brother, J.E. Bird Esq.,  
Allisonville,  
Ont.

MEMORIAL CROSS,

NIL.



649-B-23923

Number

225890

Rank

Surname

BIRD

Christian Name

George Wesley

Units

~~C.M.C. Bde.~~

Theatre of War

France

Date of Service

17-6-17.

Remarks

Sister - Min V.L. Bird 51 Hazelton Ave.

Latest Address

~~48 Hazelton Ave.~~

Roll No.

200m.-6-21.

Page 18984



Rev. pet. d. 124 1/27

DESP. JAN 10 1927

REGN. NO. 28399



To Eastbourne Hospital 23/6/19

NO. 14 CANADIAN  
GENERAL HOSPITAL  
U.K.

A. & D. CARD

AT.....

A. &amp; D. No. 9096 PL. OF ACTION.....

RANK. Pte REG. No. 225890 UNIT 6 Can Res. SICK OR WOUNDED

NAME Bird G.W. AGE 29 RELIGION Pres.

PLACE IN HOSPITAL R/F Hol

DIAGNOSIS Suspect / Tonsillitis add diphtheria, add pneumonia

ADMITTED 17-6-19 7 FROM.....

DISCHARGED..... TO.....

TRANSFERRED 16.6.19 R/F Exington 30.6.19

SERVICE AT HOME 34/a IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

[P.T.O.]



REMARKS.



NAME

Bird. George Wesley.

REGT. NO.

225890.

RANK AND UNIT

Pte. (2/22. Bn.) 6<sup>th</sup> Res Bn. Home C.M.K.  
Dpto. Rgt.

NEXT OF KIN

Mrs. John H. Wilson (friend) 48 Fullerton Ave.  
Hamilton, Ont

CABLE

NATURE OF CASUALTY

Hamilton, Ont

No.

DATE

1-5 H 996.	26-6-19	Dangill Can. Port H. Eastbourne
H 2540	24-6-19	24 <sup>th</sup> June 19 Diphtheria Pneumonia
H 1012	8-7-19	Rept. by Ont. Mil. H. Orpington D. at Eastbourne July 5 <sup>th</sup> 19
H 1013 1-2	9-7-19.	Ref. my cable. July 6/19. at Eastbourne Hosp shored head. - Can. Mil. "



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 362-1.	22 C. C. S.	26-10-18	Veneral sores N.Y.H.
a 364-1.	1/Stat. Rouen.	29-10-18.	20.
a 372-1.	" " " Mio.	8-11-18	20.
C 435.	lean. Spec: Witley	28-1-19.	<del>N.Y.H. Q.</del> <sup>per C 448</sup> 736 as
C <sup>440</sup> 340.	Disc	19-2-19	" " " "
b 549-	16 C. G. Orpington.	1-7-19	N.Y.H. Q.
b 550.	Kied. 14 <sup>th</sup> C. G. Elbourne.	5-7-19	Lepteria & Pneumonia



Surname

Christian Name or Names

Reg. No.

Brid.

Gw.

225890.

Rank

Unit

Pte.

Co 21.

(Depot) 6R.

Cas. List.

4. 11. 18 20624

22 C. C. Sten

26. 10. 18.

6. 11. 18 23640

General Sero. 26. 10. 18. 29. 10. 18.

H. A. Y. Co.

15. 11. 18 2372

Dis

8. 11. 18

14. 2. 19 6435

Can Inc Witley

28-1. 19

N. Y. 10 (S)

24. 2. 19 6390

Disc.

19. 2. 19

1. 3. 19 448

Report N.Y. D changed to

V.D.S.C. 6

24. 6. 19. C540

14 C. G. H. Eastbourne 24. 6. 19

Dangerously Ill.

Diphtheria, Tonsillitis &amp; Pneum. R

14. 7. 19 6549

16 C. G. H. Eastbourne 1. 7. 19

M. N. D. O.

8. 7. 19 6550

14 C. G. H. Eastbourne 5. 7. 19

**DIED** - Diphtheria & Pneumonia

5. 7. 19 R

A.M.D. 2 DEPT

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



# Cas. List.



## CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 245890 (Rank) Private  
Name (in full) Bird, George Everley enlisted in  
the Depot Regt C.M.R.  
CANADIAN EXPEDITIONARY FORCE at Hamilton on the eleventh  
day of August 1916  
HE served in France, 21st Battalion  
Demobilization.  
and is now discharged from the service by reason of  
Medical Unfitness.

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

Age 29 years

Marks or Scars

Height 5 - 11 1/2

Complexion Fair

Eyes Blue

Hair Brown

Nil

Signature of Soldier.

Date of Discharge

Issuing Officer.

Rank

Date 19

N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.



FH

Rank

Name

BIRD, George Wesley

Reg'l No. 225890

Unit No. 6. Dft. Dep. Rgt. CMR.

If in perm. Corps,

What Unit?

Married or Single Single.

Place and Date of Enlistment Hamilton, 11. Aug. 1916.

Place of Birth Madoc, Ont.

Name and Address, Next-of-Kin Elliott Bird,

Ellisonville, P.E.I.,

Relationship Brother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

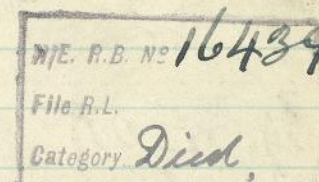
Payable to

Relationship

Discharge, Date and Place

Reason

Character



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.				
		<i>Arrived in England</i>			
2. 11. 16	29th MRR	Taken on strength	S'chiffe	1. 11. 16	144
3. 11. 16	"	S.O.S. on trans to 11th Bn	"	3. 11. 16	145
3-11-16	11th Bn	Taken on strength.	"	3-11-16	263
15. 3. 17	"	S.O.S. on trans to 11th Bn	"	15. 3. 17	61.
18. 3. 17	CMR & W.	Taken on strength	Crowbar	18. 3. 17	77
16. 6. 17	do	Posted to m & Pool Overseas	do	15. 6. 17	174 20167 m & Pool 52 d/25-6-17.
29. 6. 17.	my boy	Posted to 9th m & Pool	Field	24. 6. 17.	✓ 95. 8 m & Pool 53-30 7/8.
8-11-17	do	Gas on transfer to 21st Bn	Pt do	6-11-17	174 20167 m & Pool 53-30 7/8.
16-1-19	G.O.R.D.	Posted from 21st Bn. of trans	Witley	14-1-19.	13 d 21 - 204 d/23/19

A.F.B. 103 CHECKED  
 27 JUN 1917



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.				
20-2-19	6 <sup>th</sup> Ho.	posted from E.O.R.D.	Pho. Sford	14-2-19	E.O.R.D. No 12.
19-6-19	"	Sosth No 3 R.D. Imp on	" "	17-6-19	407 8/24-3-19 } 138 E.O.R.D. No 146 27-23-6-19
8-7-19	EOR	admission to Hosp Died 5 <sup>7</sup> / <sub>9</sub> at Can Gen Hosp Eastbourne.	" Records London	5-7-19	CLC. 550.
10-7-19	E.O.R.D.	Having died. Cease to be shown as patient in hospital	" Witley	5-7-19	— 163



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.....  
*Depot Regiment, Canadian Mounted Rifles.*
- (2) Regimental Number.....  
*225890*
- (3) Full Name of Soldier.....  
*BIRD*  
*George Wesley*
- (4) Place of Birth.....  
*Madoc,*  
*Ontario*
- (5) Are you married, or not?.....  
*No*
- (6) If married, state,  
(a) Full name of your wife.....  
.....  
(b) Present Postal Address.....  
.....
- (7) Are you a widower? .....
- (8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

.....  
.....  
.....  
.....



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

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

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

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

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

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

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

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

.....Elliott Bird.....(Brother).....

.....Allisonville, P.O. ~~P.O.~~ P.E. Cy Or.....

(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.....29/9/16.....

*R. J. Hall* *Sept 29/16*  
for O. C. Depot *W. C. M.* Commanding.



135283

# FORM OF WILL.

Name in full.

I George Bird

Regimental Number 225890

serving in Inf. Corps

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

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

I DEVISE and BEQUEATH all my real estate unto

Full

absolutely, and my personal estate I bequeath to

Name & Address of persons or person to receive personal estate (see Note 1.)

Laura Bird (Sister)

Inadoc

Ontario

Canada

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this Sixth

day of June

A.D. 191 7.

George Bird  
(Signature) ✓

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

Name of Witness J. J. Beattie cpl

Address of Witness No 5 Coy Cmbd

Occupation of Witness Pte W. Robinson

Name of Witness

Address of Witness 5 Coy. C M G D

Occupation of Witness

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.



ORIGINAL

**ATTESTATION PAPER.**  
*Depot Regiment, Canadian Mounted Rifles.*  
**CANADIAN OVER-SEAS EXPEDITIONARY FORCE.**

No. 225890

Folio.

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**

(ANSWERS.)

- |   |                                |
|---|--------------------------------|
| 1. What is your surname?  | BIRD                           |
| 1a. What are your Christian names?  | George Wesley.                 |
| 1b. What is your present address?   | 5 Rowanwood Ave. Hamilton Ont. |
| 2. In what Town, Township or Parish, and in what Country were you born?                           | Madoc, Ont.                    |
| 3. What is the name of your next-of-kin?  | Mrs. John Wilson Elliott Bird  |
| 4. What is the address of your next-of-kin?   | 5 Rowanwood Ave. Hamilton Ont. |
| 4a. What is the relationship of your next-of-kin?   | Friend. Brother                |
| 5. What is the date of your birth?  | July 19th 1890                 |
| 6. What is your Trade or Calling?   | Blacksmith                     |
| 7. Are you married?   | No                             |
| 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?<br>If so, state particulars of former Service.    | No                             |
| 11. Do you understand the nature and terms of your engagement?                                    | Yes                            |
| 12. Are you willing to be attested to serve in the }<br>CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } | Yes                            |

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

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

George W. Bird (Signature of Recruit)

Date August 11th 1916 W. MacKenzie (Signature of Witness)

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, George Wesley Bird, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

George W. Bird (Signature of Recruit)

Date August 11th 1916 W. MacKenzie (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 Hamilton Ont. this 11th day of August 191 6

W. L. Brooks (Signature of Justice)



Description of George Wesley Bird on Enlistment.Apparent Age 26 years ..... months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height ..... 5 ft. 11½ ins.Chest measurement. { Girth when fully expanded ..... 38½ ins.  
Range of expansion ..... 4½ ins.Complexion ..... FairEyes ..... BlueHair ..... BrownScar back of head.Religious denominations. { Church of England ..... Yes  
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 August 11th 191 6.Place Hamilton Ont.H. W. Marton  
capt  
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.

George Wesley Bird ..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.W. L. Burrows Lt. Colo. (Signature of Officer)  
O. C. Depot Regt., C. M. R.Date August 11th 191 6.



Rev. 285/20.  
Q.



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.

50m.—6-16.

H. Q. 1772-39-819.

To Whom

Address

*Mrs Jno. H. Wilson*  
~~*5 Robvanwood Ave.*~~  
*Hamilton*

*405 Ferguson Ave.*

*Ont.*

Rate *15 x 2*

NOV 1 1916

By Whom Assigned

*Bird George Wesley*  
 Regtl. No. *225890*

Rank

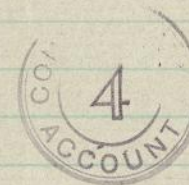
*Lt. Col.*

Corps

*Depot Regt. Can. Mtd*  
*Rifles*

## 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				





## ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mrs J. H. Wilson*  
(Assignee)

PAYMENTS.

Name of Soldier

I. L. Job 5470—Req. 6888.

1225890

*Bird Geo. Wesley*  
*Tpr. Depot Regt. Can. Inf.*

Remarks

NOV 1 1916 *Reflex*

Month.

Year.

Cheque No.

Amt.

15xx

April

1916

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb.

March

April

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

Feb.

March

April

May

June

July

K 30016 15

I 34682 15

1917 H 37133 15

N 43355 15

048621 15

0368 15

N 6481 15

N 13053 15

P 20127 15

R 27045 15

Q 33726 15

F 47239 15

15 R

15 R

15 CA

15 CA

15 CA

S

OB

OB

165 B.

180v



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.	1918					
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

B

7082

Nov 1/16

## RATE OF SEPARATION ALLOWANCE

--	--	--	--

## RATE OF ASSIGNMENT

15			
----	--	--	--

## PARTICULARS OF SEPARATION ALLOWANCE

No. 225890

Rank *Private* • Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

*George Wesley Bird*  
*Depot Regt. Can. Mtd. Rifles*

## PARTICULARS OF ASSIGNMENT

Name *Mrs Jno. H. Wilson*Address *5 R. Cranwood Ave. Hamilton. Ont.*

Change of Address

- 405 Ferguson Ave. Hamilton, Ont.*
- 79 Simcoe St. Hamilton Ont 1917*
- 48 Fullerton Ave 21-5-18. MROIB Bank*
- 

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
31/10/17			180	180	
Nov	D 55389		15	15	
Dec	F 59063		15	15	
Jan	B 64649		15	15	
Feb	C 90592		15	15	
Mar	A 97892		15	15	
Apr	E 1789		15	15	
May	38477		15	15	
June	D 16609		15	15	
July	X 30929		15	15	
SEP	648343		15	15	
	B 41077		15	15	
OCT	B 46052		15	15	
NOV	B 49660		15	15	
DEC	C 63879		15	15	
JAN	S 73394		15	15	
FEB	D 81267		15	15	
MAR	F 82121		15	15	
Apr	E 3171		15	15	
May	B 7920		15	15	
JUN	B 10681		15	15	
July	TB 11804		15	15	
			495	495	

KILLED IN ACTION  
 DIED OF WOUNDS DATE 5-7-19  
 C. L. No. 527 DATE 9-7-19  
 M. R. O. 96875 TO DESTROY RENDERED 14-7-19  
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE  
 01524-9-11  
 Caulfield DATE 14-7-19

AUDITED.





Date of Assignment

## OVERSEAS CONTINGENTS

### RATE OF ASSIGNMENT

--	--	--	--

## PARTICULARS OF ASSIGNMENT

4

M. F. W. 128  
430M.—6-17—1772-39—141  
L. L. 22320—M. & D. 1993.



\* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/11/16		EFFECTIVE DATE:-	
AMOUNT:- 15 <sup>00</sup>		AMOUNT:-	

NAME:- *BIRD George Wesley*

NUMBER:- *225890*

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
<i>Mrs J. H. Wilson</i> <i>5 Rowanwood Avenue</i> <i>Hamilton, Ontario</i> <i>Stop Eff 1-4-19</i> <i>Stopped 1-7-19</i>	

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Pte</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:- *C.M.R. Draft*

DATE ACCOUNT FIRST OPENED:- *1/11/16*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
			<i>21st Bn.</i>

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>17/3</i>		<i>Scaford</i>	<i>7.38</i>	<i>26/5/19</i>	<i>1707</i>	<i>Scaford</i>	<i>9.73</i>
<i>20/3</i>	<i>9758</i>	<i>✓</i>	<i>9.72</i>	<i>26/5/19</i>	<i>1987</i>	<i>✓</i>	<i>9.73</i>
<i>31/3</i>	<i>10059</i>	<i>✓</i>	<i>17.03</i>				<i>19.46</i>
<i>19/4</i>		<i>Bk. Assn</i>					

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
			<i>- 10</i>	

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>											
<i>Mar</i>	<i>Prot Forward.</i>								<i>77.52</i>		
<i>Apr</i>	<i>P.S.</i>	<i>33-</i>		<i>Can A.P.</i>				<i>15-</i>			
		<i>33-</i>		<i>AR 9/4/18 21Bn</i>	<i>44.46</i>			<i>15</i>	<i>91.06</i>		
<i>May</i>	<i>P.S.</i>	<i>34.10</i>		<i>Can A.P.</i>				<i>15-</i>			
				<i>AR 76 3/5/18 21Bn</i>	<i>8.03</i>						
				<i>✓ 144.19.518 ✓</i>	<i>3.57</i>						
		<i>34.10</i>			<i>11.60</i>			<i>15</i>	<i>98.56</i>		
<i>June</i>	<i>✓ ✓</i>	<i>33-</i>		<i>Can A.P.</i>				<i>15-</i>			
				<i>AR 209 8/6 21Bn</i>	<i>44.46</i>						
				<i>✓ 272 23/6 - -</i>	<i>3.57</i>				<i>108.53</i>		
		<i>33-</i>			<i>8.03</i>			<i>15</i>			
<i>July</i>	<i>P.S.</i>	<i>34.10</i>						<i>15</i>			
				<i>AR 34 8/7 21Bn</i>	<i>44.46</i>						
		<i>34.10</i>		<i>✓ 617 2/7 - -</i>	<i>3.57</i>			<i>15</i>	<i>119.60</i>		
<i>Aug</i>	<i>✓</i>	<i>34.10</i>		<i>A.P.</i>	<i>8.03</i>			<i>15</i>			
				<i>C.P. 23442 15/8/18</i>	<i>48.67</i>						
				<i>AR 561 12/8 21Bn</i>	<i>48.67</i>						
				<i>C.P. 24574 17/8</i>	<i>24.33</i>						
				<i>AR 732 24/8 21Bn</i>	<i>3.57</i>						

COMPILED BY.....  
CHECKED BY.....



Hamilton, Ontario  
~~Stop Off 1-4-19~~  
~~Stopped 1-7-19~~

580  
1/10  
2

UNIT AND TRANSFERS

ORIGINAL UNIT - C.M.R. Draft

DATE ACCOUNT FIRST OPENED - 1/11/16

AUTHORITY

DATE EFFECTIVE

DATE LEDGER SHEET T'S'D

UNIT TRANSFERRED TO

21st Bn.

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
17/3		Seaford	7 36	26/5/19	1707	Seaford	9 73
29/3	9758	✓	9 73	26/5/19	1987	✓	9 73
31/3	10059	✓	17 03				19 46
19/4		Bk. Am					

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBS'CE ALL'CE

- 10

2.13.

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918											
Mar	Brot Toward.								77 52		
Apr	P.C.	33 -		Can A.R.				15 -			
		33 -		AR 914/8 21 Bn	446						
					446			15	9106		
May	P.C.	34 10		Can A.R.				15 -			
				AR 76 3/5/8 21 Bn	803						
				✓ 144 19.5-18 ✓	357						
		34 10			1160			15	9856		
June	✓ ✓	33 -		Can A.R.				15 -			
				AR 209 8/6 21 Bn	446						
				✓ 272 23/6 - -	357				10853		
		33 -			803			15			
July	P.C.	34 10						15 -			
				AR 34 8/7 21 Bn	446						
		34 10		✓ 617 2/7 - -	357			15	11960		
Aug	✓	34 10		A.R.	803			15			
				C.P. 23442 15/8/18	4867						
				AR 561 12/8 21 Bn	4867						
				C.P. 24574 17/8	24133						
				AR 737 2/8 21 Bn	357						
				✓ 832 12/8 - -	714						
				C.P. 26048 23/8	243				389		
		34 10			13481			15			
Sept	✓	33		C.A.P.				15			
				AR 1092 21 Bn 3/9/18	357						
				" 1231 " 24/9	357				11475		
Oct		33		(See overleaf.)	14			15			
		34 10		C.A.P.				15			

COMPILED BY

CHECKED BY

COMPILED BY

CHECKED BY



NUMBER 225890

RANK

NAME

BIRD

G. W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Brought forward.					14 75		
Oct.	Panda	34 10		C.A.P.				15 -			
				A.R. 1337 15/10/18 19 Bn	3 73						
				✓ 1555 24/10/18 "	3 73				26 39		
		34 10			7 46			15			
Nov	P.A.	23		AP				15	127 59		
				H/S "V" 24/10/18 to 8/11/18. = 11d @ 60p		6 60			76 78		
				DO. 95. 4-14/11/18. 24 Bn							
				A.R. 9/11/18 6 H.A. 3 Bn.	3 73						
				✓ 4608 12/11/18 6 Bn	13 99						
				✓ 3748 10/12 266 Rn	3 73						
Dec	✓	34 10		✓ 4392 17/12	3 73						
				AP	18 18			15			
Jan	✓	34 10		✓				15	50 81		
		101 20			75 18	6 60		45			
Feb.	✓	30 80		✓				15			
				A.R. 16818 18/1/19 Cyndy	14 60						
				E.P. 10177. 19/1/19.	9 73						
				A.R. 16193 16/1/19 ✓	14 60						
				✓ 2037 1/1/19 Cyndy	4 66						
				✓ 5112 4/1/19 2 Bn Rn	7 46						
				✓ 5904 3/2/19 14 Bn Rn	2 43						
				H/S "V" 27/1/19 to 19/2/19 = 24d. DO. 42. 24/19 6 Bn	53 48	14 40					
Mar.	✓	34 10		Gap				15			
				A.R. 8958 26/2/19 6 Bn	2 43						
				✓ 9206 12/3/19 ✓	7 30						
				✓ 9708. 20/3/19 ✓	9 73						
				✓ 7116 19/2/19 CSAP midday	2 44						
		64 90			73 18	14 40		30			
Apr	P.A. Apr + May	67 10		A.R. 10059 31/3/19 6 Bn.	17 03						
				554 17/4 ✓	4 87						
				A.R. Apr + May				30			
				1042 1/5. Seaford (Kew) (10)	4 87						
				1341 12/5 ✓ 14 (11)	4 87				3 59		
June	P.A.	67 10		B.A.	31 64			30			
		33 -		1987 3/6/19 6 Bn. (1)	9 73			15			
				1707 25/5/19 ✓ (2)	9 73						
				3589 17/6/19 ✓ (Emb) (3)	9 73				7 60		
					29 19						
Aug	P.A. July	33 -		AP July				15	11 50		
July		34 10						15			
				D. note 13135. X H2.	11 50						
				Or balance transferred to Ottawa.							

Statement of G.W. - to T.F. 31/7/19  
 Or Bal 11 50

33.00

15.00

19.46

19.46



P. 559  
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE  
DATE

AUTH

ADMISSIONS TO HOSPITAL, &c.

DATE  
ADMITTED

DATE  
DISCHARGED

V.  
OR  
A.

NAME OF HOSPITAL

Checked *W.P. Hill*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3	
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE
1916														25 33	25 33						
Nov '10	10	100	10	-	10	10	1	-							11	-					
11-30	20		20		20		2								36	33					
Dec															22						
1-31	31	-	31	-	31	-	3	10							34 10	2508 39/11	2598 1/11	2612 9/11			
1917																					
Jan																					
1-31	31	110	34	10											34 10	2977 23/12	3011 9/1				
Feb																					
1-28	28	110	30	80											30 80	3164 29/1	3034 15/1				
Mar																					
	31		34	10											13 20	3390 28/1					
			166	10											34 10	3298 15/1	3489 11/2				
															38 53	204 63					
Apr '10	10		11	00																	
" 7/30	20		22												11 00						
															25 63						
															22						
May																					
	31		34	10											34 10	20	15/4	126 30/4			
June																					
	30		33												33	259	18/5	419 3/6			
July																					
	31		34	10											34 10						



[illegible]NAME OF HOSPITAL \_\_\_\_\_

REG'L NO. 225890	RANK 1st Lt.	NAME Bird, George Wesley
IF IN PERMT. CORPS WHAT UNIT	UNIT C. M. R. Draft	TRANSFERRED TO C. C. D.
PERMANENT FORCE ALLOWANCES	TRANSFERRED TO 11th Bn.	DATE 11-11-16.
PLACE OF ATTESTATION Hamilton.	TRANSFERRED TO Can. M. G. D.	DATE 11/4/17
DATE OF ATTESTATION Aug 11th 1916.	TRANSFERRED TO Can. M. G. D.	DATE 11/4/17
	21st Bn.	1-1-1918
ASSIGNED PAY MONTHLY \$ 15.00	DATE EFFECTIVE 11/1/16	
PAYABLE TO Mrs. J. H. Wilson, 5 Rowanwood Ave, Hamilton, Ont.	RELATIONSHIP	
ASSIGNED PAY MONTHLY \$	DATE EFFECTIVE	
PAYABLE TO	RELATIONSHIP	
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)	EFFECTIVE	REASON
DISCHARGE DATE AND PLACE	REASON AND AUTHORITY	
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)		
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)		

ACQUITTANCE ROLLS						CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2		3		4		1	2	3	4				CREDIT	DEBIT			
No.	DATE	No.	DATE	No.	DATE												
									C			25 33					L.P.C. Canada.
									15 -		15 -	21 33					To 11 <sup>d</sup> Bln. 11-11-16.R.O. 145.3-11-10
												H3 33					
612 7/11						14 60	4 78	14 60		15	3 30 1 17	58 40	19 03				B.O. 286 30/16 day #v Q4005 507 20/16
011 9/1						4 87	19 47			15	1 17	40 51	12 62				Q4005 No 58 10/1/17
034 15/1						9 73	4 87			15	61	30 21	13 21				Q4005 No 126 16/1/17
						9 73						144 12					Q4005. 159. 21/2/17
489 1/2						9 73	12 17			15	1 10	47 73	12 78 ✓				Underpaid 12 days Oct 1916. Horn / 15 Cms. G.D. 16/17 Bo 61
						58 39				75							
										15		15	8 78				Johann Mfuer Depot 2049
								7 30				7 30	23 48				G
26 3/4						9 73	7 30			15		32.03	25.55				
419 3/6						12 17	7 30			15	56	35 03	23 52				Q4005-1035 2 5
											62						Q4005-1395 7 17 62d
										15	36	15 98	41 64				" 1580 8 6/7 36d
						80 29	65 71	7 30			8 89						







H PAYMENTS

S	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	BL.4	BALANCE
								DEBIT - CREDIT TOTAL ADJ. PAY ENG.